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Assess the impact of awareness program on knowledge regarding eye flu among peoples at selected urban area of Indore district year 2023

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Abstract
The present study has been undertaken to assess knowledge score regarding eye flu among peoples by awareness program in Selected urban area of Indore. The research design adopted for the study was pre- experimental in nature. The tool for the study was self-structured knowledge questionnaire which consists of two parts-PART- I consisted questions related to Socio-demographic data; PART-II consisted of self -structured knowledge questionnaire to assess the knowledge score regarding eye flu among peoples. The data was analyzed by using descriptive and inferential statistical methods. The most significant finding was it is observed that most of the peoples 19(63.3%) were GOOD (13-18) knowledge and other peoples have 11(36.7%) category which are AVERAGE (07-12) posttest knowledge score in the present study.

Keywords: Effect, awareness program, knowledge and eye flu

Introduction
It is quite common for people to experience redness, itching, or irritation in their eyes. If you are also experiencing similar symptoms, you may be suffering from eye flu. Eye flu is a common condition that affects millions of people every year. It's also known as viral conjunctivitis and is caused due to various viruses. The symptoms of the condition may be mild or severe and may even result in vision loss. Eye flu is an infection that affects the eyes and is usually caused by viruses that can spread easily from person to person. The most common type of virus that causes eye flu is adenovirus. Symptoms of conjunctivitis can include: pink or red color in the white of the eyes, swelling of the conjunctiva, Increased tear production, feeling like a foreign body is in the eye or an urge to rub the eye, Itching, irritation, and/or burning, Discharge, crusting of eyelids or lashes, especially in the morning, contact lenses that feel uncomfortable and/or do not stay in place on the eye. According to doctors, antibiotic eye drops, eye ointments, topical decongestants, lubricants, and some oral anti-allergic can help in the treatment of conjunctivitis. If you are infected with Eye Flu, wash hands with soap and water to decrease the spread of infection.

Objective of the study
1. To assess the pre-test and post-test Knowledge score regarding eye flu among peoples.
2. To assess the effectiveness of awareness program on knowledge regarding eye flu among peoples.
3. To find out the association between the pre-test knowledge score regarding eye flu among peoples with their selected demographic variables.

Hypotheses
RH_0: There will be no significant difference between pretest and post-test knowledge score on eye flu among peoples.

RH_1: There will be significant difference between pretest and post-test knowledge score on eye flu among peoples.

RH_2: There will be significant association between the pre-test score on eye flu among peoples with their selected demographic variables.

Assumption
1. Peoples may have deficit knowledge regarding eye flu.
2. Awareness program will improve knowledge of peoples regarding eye flu.

Methodology
An evaluative approach was used and research design pre-experimental one group pre-test post-test research design was used for the study. The samples consisted of 30 peoples selected by Non probability purposive sampling technique. The setting for the study was Selected urban area in Indore. Data was collected with the help of demographic variables and administering a self-structured knowledge questionnaire by the investigator before and after awareness program. Post-test was conducted after 7 days of pretest. Data were analysis using descriptive & inferential statistics.

Analysis and interpretation
Section-I

Table 1: Frequency and percentage distribution of samples according to their demographic variables. n = 30

S. No	Demographic Variables	Frequency	Percentage
1	**Age in Years**		
a.	21-25	6	20.0
b.	26-30	11	36.7
c.	31-35	5	16.7

d.	>35	8	26.7
2.	**Gender**		
a.	Male	19	63.7
b.	Female	11	36.7
3	**Educational status**		
a.	Primary	0	0.0
b.	Secondary	3	10.0
c.	Higher secondary	9	30.0
d.	Graduate	14	46.7
e.	No Formal education	4	13.3
4	**Previous knowledge**		
a.	News paper	3	10.0
b.	T.V.	13	43.3
c.	Health personnels	11	36.7
d.	Others	3	10.0

Section-II

Table 2: Frequency and percentage distribution of Pre-test scores of studied subjects

Category and test Score	Frequency (N=30)	Frequency Percentage (%)
Poor (01-06)	22	73.3
Average (7-12)	8	26.7
Good (13-18)	0	0.0
Total	30	100.0

The present table 2 concerned with the existing knowledge regarding eye flu among peoples was shown by pre-test score and it is observed that most of the peoples 22 (73.3%) were poor (01-06) knowledge and some peoples have 8(26.7%) average category (7-12).

Table 3: Mean ($\overline{X}$) and standard Deviation (s) of knowledge scores

Knowledge Pre –test	Mean ($\overline{X}$)	Std Dev (S)
Pre-test score	1.27	0.31

The information regarding mean, percentage of mean and standard deviation of test scores in shown in table 3 knowledge in mean pre-test score was 1.27±0.31 while in knowledge regarding eye flu among peoples in Selected urban area in Indore.

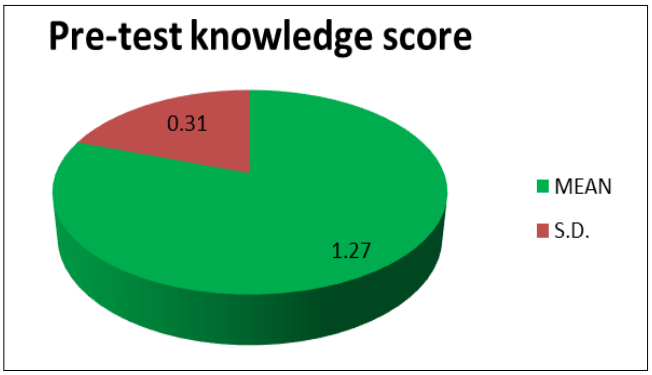

Fig 1: Mean ($\overline{X}$) and standard Deviation (s) of knowledge scores

Table 4: Frequency and percentage distribution of Post test scores of studied subjects

Category and post test Score	Frequency (N=30)	Frequency Percentage (%)
Poor (01-06)	0	0.0
Average (7-12)	11	36.7
Good (13-18)	19	63.3
Total	30	100.0

The present table 4 concerned with the existing knowledge regarding eye flu among peoples was shown by post test score and it is observed that most of the peoples 19(63.3%) were GOOD (13-18) knowledge and other peoples have 11(36.7%) category which are AVERAGE (07-12) posttest knowledge score in the present study.

Table 5: Mean ($\overline{X}$) and standard Deviation (s) of knowledge scores

Knowledge Test	Mean ($\overline{X}$)	Std Dev (S)
Post-test score	2.76	0.41

The information regarding mean, percentage of mean and standard deviation of post test scores in shown in table 5 knowledge in mean post test score was 2.76±0.41 while in knowledge regarding eye flu among peoples in Selected urban area in Indore.

Hence, it is confirmed from the tables of section-II that there is a significant difference in mean of test scores which partially fulfill the first second objective of the present study.

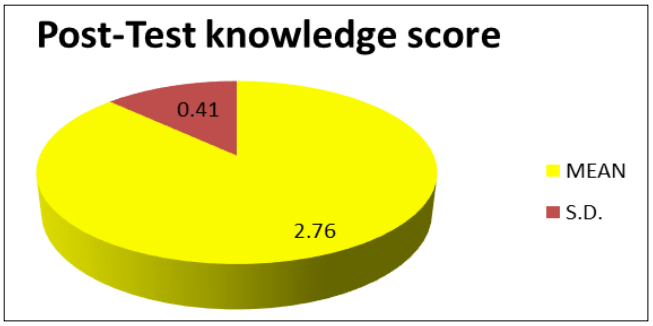

Fig 2: Mean ($\overline{X}$) and standard Deviation (s) of knowledge scores

Table 6: Effectiveness of awareness program by calculating Mean, SD, Mean Difference and't' Value of Pre-test and Post-test knowledge

Knowledge Score of Peoples	Mean ($\overline{X}$)	S. D. (s)	Std. Error of Mean	D. F.	t-value	Significance
Pre-test	1.27	0.31	0.09	29	-16.79	P<0.0001*
Post-test	2.76	0.41				

When the mean and SD of pre-test and post-test were compared and't' test was applied. It can be clearly seen that the 't' value was -16.79 and p value was 0.0001 which clearly show that awareness program was very effective in increasing the knowledge of peoples.

Section-III

Table 7: Association of pre-test knowledge scores between test and selected demographic variables

S. No	Demographic variable of peoples	Chi square value	DF	Association with knowledge
1	Age in Years	3.97	3	Non-significant
2	Gender	3.13	1	Non-significant
3	Educational status	1.75	3	Non-significant
4	Previous knowledge	2.82	3	Non-significant

Results

The result of this study indicates that there was a significant increase in the post-test knowledge scores compared to pre-test scores of eye flu. The mean percentage knowledge score was observed 1.27±0.31 in the pre-test and after implementation of awareness program post-test mean percentage was observed with 2.76±0.41.

Conclusion

Thus, after the analysis and interpretation of data we can conclude that the hypothesis RH1 that, there will be significance difference between the pre-test knowledge score with post-test knowledge score at the (P<0.05) is being accepted.

Furthermore, awareness program regarding eye flu among peoples may consider as an effective tool when there is a need in lacking, bridging and modifying the knowledge.

Limitations

1. The study was limited to Selected urban area in Indore.
2. The study was limited to 30 peoples.

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