

Effectiveness of VATP on Knowledge Regarding Good and Bad Touch among Mothers of Preschool Children attending Anganawadies

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Received: 06 Feb 2023 / Revised: 23 Apr 2023 / Accepted: 23 Jun 2023

ABSTRACT

Background: Touch is a fundamental need of human life. The incidence of child sexual abuse is rising day by day. Good and bad touch is a sensitive topic and theme to reduce sexual harassment among children. So, the teaching programme is an effective way to improve knowledge of good and bad touches.

Methods: 100 other preschool children are included as the sample. A convenient sampling method was used. A structured knowledge questionnaire was used to gather information. Chi-square analysis uncovered the relationship between knowledge about thyroid disorders and sociodemographic factors.

Results: The post-test score (17.09±4.71) contributes to 56.96% of the total score, and their pre-test knowledge score (9.86±4.08) represents 32.8%. The efficiency of VATP on good and bad touch was 7.23, with SD±0.63, accounting for 24.1% of the total score.

Conclusion: Finally, the study concluded that VATP was extensively helpful in civilizing the consciousness level of mothers of preschool children regarding Good and bad touches.

Key-words: Anganawadi, Bad touch, Effectiveness, Good touch, Mothers

INTRODUCTION

The gift of a child is from the creator. When the child is born, the family, society, and nation jointly experience great joy, happiness, and responsibility. Between birth and adulthood, childhood serves as a period of prosperity and model for an adult. Therefore, it must be well-cared for, with the emotional, psychological, and physical demands being met.

Children's rights, which include the right to life, the right to health care, and the right to be shielded from sexual and economic exploitation.^[1]

Good versus bad touch can be quite scary when brought up in society; currently, understanding it is crucial. From a young age, children are taught certain basic moral principles and the difference between a good touch and a bad touch. This topic is better for kids' safety because it is closely related to child abuse. Understanding the difference between a good and bad touch is essential and can be extremely beneficial in the modern world.^[2]

When an adult or older adolescent abuses a child for sexual arousal, it is called child sexual violence, also known as child molestation.^[3] Child abuse is a worldwide issue affecting kids of all ages, genders, races,

How to cite this article

Gundanapalle S, Kulkarni MP, Natekar DS. Effectiveness of VATP on Knowledge Regarding Good and Bad Touch among Mothers of Preschool Children attending Anganawadies. SSR Inst. Int. J. Life Sci., 2023; 9(4): 3235-3243.



Access this article online
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nationalities, and socioeconomic strata. It is also at the highest peak of the list of pervasive social problems. ^[4]

According to a worldwide study, it is believed that 1 in 10 boys and 1 in 20 girls were sexually abused as children. Children who have been sexually abused are more likely to suffer from depression, eating disorders, drug and alcohol abuse, suicidal thoughts, difficulty concentrating, and victimization in adulthood. ^[5]

The centres for disease control and prevention consider sexual abuse as any sexual activity with a minor, whether or not the child gives consent. ^[6] India has the most children in the world (375 million), accounting for 40% of its total population, and 69% of Indian children experience physical, emotional, or sexual abuse. The national capital, New Delhi, has a sexual abuse rate of more than 83%. Over 70% of incidents go unreported or are not disclosed to family members. ^[7]

Every other day, we hear about a child molested or sexually harassed. Also, children's victims of this are typically younger than six years old. Because of the offender is frequently someone they know or someone in their family, they are often too young and innocent to understand the line between right and wrong. ^[8]

The protections of children against sexual offence (POCSO) were registered in India under section 376 of the IPC and sections 4 and 6. Here are the top 10 sexual assaults nations in the world: Denmark and Finland, Zimbabwe, and Australia. South Africa, Canada, New Zealand, India, England, the United States, and Sweden. ^[9]

We must begin educating young children about "Good Touch, Bad Touch" to prevent additional harm. Targets are usually very young teens, between 6 and 7 years old. ^[10] Every parent desire the best for their child in every period. As parents cannot assure that their children will always be in the presence of good people, they must teach them how to react appropriately in such conditions. ^[8]

MATERIALS AND METHODS

A pre-experimental design with a group pre-test and a post-test without a control group was used to evaluate the impact of the video-based teaching program on knowledge of good and bad touch among mothers of preschool children in selected areas of Bagalkot. The data was collected using a knowledge-structured

questionnaire, and descriptive and inferential statistics were used to arrange and evaluate the results.

Study design- Pre-experiment alone-group pretest-posttest design with no control group. An experimental group of clients was randomly selected, and no control group was used. A pre-test was conducted among mothers of preschool children using a questionnaire on knowledge about good and bad touch. The intervention was given in video-assisted training sessions on knowledge regarding good and bad touch among mothers of preschool children.

Setting of the study- The environment in which data collection occurs is called the setting. The research was done at Ashraya colonies 1, 2 and 3 Shatru Anganawadies in Navanagar Bagalkot, India.

Participants- In this study, participants were mothers of preschool children. The sample consisted of 100 preschooler mothers by convenient sampling technique.

Description of data collection tool- The study used a structured, closed-form knowledge questionnaire. Information was collected using a structured, closed-form knowledge questionnaire that was self-completed. It included 30 items on knowledge about good and bad touches. These were multiple-choice, closed-ended questions. A one is awarded for each correct answer and a zero for each incorrect answer. 30 is the final score.

The structured questionnaire consisted of two parts.

Part I: Consists of questions on socio-demographic characteristics of mothers of preschool children such as age, religion, husband's education, educational status, husband's occupation, occupational status, family type, number of children, area of residence and source of health information.

Part II: Consists of 30 items designed to assess the knowledge of good and bad touch among mothers of preschool children. These items were multiple-choice questions. A score was given for each correct answer. The total score was 30.

Variables for the present study included

Independent Variables- Video Assisted Teaching Programme knowledge regarding good and bad touch among mothers of preschool-age children.

Dependent Variables- Knowledge of preschool mothers regarding good touch and bad touch.

Socio-demographic Variables- Socio-demographic variables of mothers of preschool children includes Age, Religion, Husband's education, educational status, Husband's occupation, Occupational status, Type of family, Number of children, Area of residence, and Source of information.

RESULTS

This shows that the mean percentage of knowledge scores of mothers of preschool children increased by 24.10%. The overall results show that the percentage of knowledge scores was higher after the test. This indicates that VATP effectively improved preschool children's mothers' knowledge of good and bad touches. Since the calculated t-value (29.33) was much higher

Statistical Analysis- The information was analyzed using SPSS 18. Data were entered into an MS Excel spreadsheet and then transferred into SPSS. Data were organized and explained using descriptive and inferential analyzes to determine the association between variables.

Ethical Consideration- Ethical approval was obtained from the B.V.V.S Sajjalashree Institute of Nursing Sciences ethics committee. Written informed consent was obtained from each participant.

than the t-value (1.96) at a degree of freedom of 99 and a significance level of 5%, the hypothesis is accepted (Table 1).

The results show that there is a significant difference between the pre-test and post-test results; thus, the video-based training programme was found to be effective.

Table 1: Distribution of mothers of preschool children according to their socio-demographic characteristics

| Socio-demographic variables | | Number of respondents | Percentage (%) |
|---------------------------------|---------------------|-----------------------|----------------|
| Age in years | | | |
| A | Under 20 years | 35 | 35 |
| B | 20-25 years | 41 | 41 |
| C | 26-30 years | 15 | 15 |
| D | Over 30 years | 9 | 9 |
| Religion | | | |
| A | Hindu | 88 | 88 |
| B | Muslim | 12 | 12 |
| C | Christian | 0 | 0 |
| D | Other | 0 | 0 |
| Education of the Husband | | | |
| A | no formal Education | 12 | 12 |
| B | Primary education | 16 | 16 |
| C | High secondary | 20 | 20 |
| D | Graduated | 52 | 52 |
| Educational status | | | |
| A | No formal education | 0 | 0 |
| B | Primary education | 23 | 23 |

| | | | |
|------------------------------|-------------------------|----|----|
| C | High secondary | 25 | 25 |
| D | Graduated | 52 | 52 |
| Husband's Profession | | | |
| A | Agriculture | 13 | 13 |
| B | Private service | 32 | 32 |
| C | Self Employed employees | 14 | 14 |
| D | Government Employees | 41 | 41 |
| Occupational status | | | |
| A | Housewife | 75 | 75 |
| B | Private service | 12 | 12 |
| C | Self Employed employees | 10 | 10 |
| D | Government Employees | 3 | 3 |
| Type of family | | | |
| A | Joint family | 10 | 10 |
| B | Nuclear family | 90 | 90 |
| Number of children | | | |
| A | One | 55 | 55 |
| B | Two | 34 | 34 |
| C | Three | 11 | 11 |
| D | Four and more | 0 | 0 |
| Residential area | | | |
| A | Rural | 10 | 10 |
| B | Urban | 90 | 90 |
| Source of information | | | |
| A | Media | 67 | 67 |
| B | Health personal | 0 | 0 |
| C | Friends/Parents | 0 | 0 |
| D | All of the above | 33 | 33 |

Percentage distribution of mothers of preschool children in the pre-test reveals that out of 100 mothers of preschool children highest percentage, 51% of mothers of preschool children had poor knowledge, followed by 37% of subjects with very poor knowledge, the lowest

percentage, 12% had average knowledge, and 0% had good and excellent knowledge of good and bad touches. It can be seen that most mothers of preschool children had poor knowledge of good and bad touches in the pre-test (Table 2).

Table 2: Percentage-wise distribution of study mothers of preschool children according to their level of knowledge in a pre-test

| Test | Level of knowledge | Number | Frequency (%) |
|----------|--------------------|--------|---------------|
| PRE-TEST | Excellent | 00 | 0 |
| | Good | 00 | 0 |
| | Average | 12 | 12 |
| | Poor | 51 | 51 |
| | Very poor | 37 | 37 |
| | Total | 100 | 100 |

The percentage distribution of mothers of preschoolers in the post-test shows that out of 100 mothers of preschoolers, the highest percentage of 49% of mothers of preschoolers had average knowledge, followed by 28% of mothers of preschoolers with good knowledge, 20% of mothers of preschoolers had excellent

knowledge, the lowest percentage of 3% had poor knowledge and 0% had very poor knowledge in terms of good and bad touch. This shows that most mothers of preschool children had average knowledge of good and bad touch in the post-test (Table 3).

Table 3: Percentage-wise distribution of study mothers of preschool children according to their level of knowledge in post-test

| Test | Level of knowledge | Number | Percentage (%) |
|-----------|--------------------|--------|----------------|
| Post Test | Excellent | 20 | 20 |
| | Good | 28 | 28 |
| | Average | 49 | 49 |
| | Poor | 03 | 03 |
| | Very poor | 00 | 00 |
| | TOTAL | 100 | 100 |

The pre-test showed that out of 100 mothers of preschoolers, the highest percentage (51%) of mothers of preschoolers had poor knowledge, followed by (37%) people with very poor knowledge and (0%) had good and excellent knowledge regarding good and bad touches.

However, after VATP administration (post-test), 49% of preschool mothers had average knowledge, followed by 28% of subjects with good knowledge, 20% of preschool mothers had excellent knowledge, the lowest percentage of 3% had poor knowledge, and 0% had very poor knowledge in terms of good and poor touches.

Table 4: Mean, S.D and Mean percentage of the knowledge scores in pre-test and post-test

| level of knowledge | Maximum scores | Pre-test | | Post-test | | Effectiveness (O ₂ -O ₁) | |
|--|----------------|-----------|----------|------------|----------|---|----------|
| | | Mean±SD | Mean (%) | Mean±SD | Mean (%) | Mean±SD | Mean (%) |
| Knowledge regarding good touch and bad touch | 30 | 9.86±4.08 | 32.80 | 17.09±4.71 | 56.9 | 7.23±0.63 | 24.10 |

Comparison of the mean and standard deviation of pretest and posttest knowledge scores shows that

mothers in the pretest and posttest show an increase in mean knowledge scores after VATP.

The overall findings revealed that the mothers of preschool children gain more knowledge in post-test score (17.09 ± 4.71), which was 56.96% of the total score, compared to the pre-test knowledge score (9.86 ± 4.08), which was 32.8% of the total score. The effectiveness of

VATP on good and bad touch was 7.23 with $SD \pm 0.63$, which was 24.1% of the total score. Hence, it indicates that the VATP effectively enhanced the knowledge of mothers of preschool children (Table 5).

Table 5: Significance difference between the pre-test and post-test knowledge scores of mothers of preschool children

| Test | Mean | Mean difference | Standard Difference | Paired t-test | Table value |
|---------------------|-------|-----------------|---------------------|---------------|-------------|
| Pre-test (O_1) | 9.86 | | | | |
| Post-test (O_2) | 17.09 | 7.23 | 0.63 | 29.33 | 1.96 |

H_1 : A significant difference exists between mothers' pre-test and post-test knowledge scores regarding good and bad touch.

Table 6 illustrates a significant association between pre-test knowledge scores of mothers of preschool children with their socio-demographic variables, age ($\chi^2=6.902$, $p=0.05$), and several children ($\chi^2=12.08$, $p=0.05$). There

was no significant association between knowledge scores and other socio-demographic variables. Hence, the H_2 state is accepted for only age and number of children and rejected for other socio-demographic variables.

Table 6: Percentage-wise Association between pre-test knowledge scores with their selected socio-demographic variables

| S.No | Socio-demographic variables | Df | Chi-square test | Table value | Level of significance |
|------|------------------------------|----|-----------------|-------------|-----------------------|
| 1 | Age | 1 | 6.902 | 3.84 | 0.05 |
| 2 | Religion | 1 | 0.98 | 3.84 | 0.05 |
| 3 | Husband's education | 1 | 0.08 | 3.84 | 0.05 |
| 4 | Educational status | 1 | 0.06 | 3.84 | 0.05 |
| 5 | Educational status | 1 | 0.59 | 3.84 | 0.05 |
| 6 | Educational status | 1 | 2.41 | 3.84 | 0.05 |
| 7 | Educational status | 1 | 0.8 | 3.84 | 0.05 |
| 8 | Number of children | 1 | 12.08 | 3.84 | 0.05 |
| 9 | Area of residence | 1 | 0.8 | 3.84 | 0.05 |
| 10 | Source of health information | 1 | 0.947 | 3.84 | 0.05 |

Not significant= NS

DISCUSSION

This study discusses the study's major findings and reviews them about findings from the results of other studies. The present study was conducted to assess the effectiveness of a Video-assisted teaching programme on knowledge regarding good and Bad touch among

Mothers of preschool children attending Anganawadies of a selected area of Bagalkot. To achieve the study's objectives, pre-experimental research design was adopted. A sample of 100 mothers of preschool children was selected using a non-Probability convenient sampling technique.

In the present study, the majority of mothers of preschool children, 41% were, belonging to 20-25 years of age; the majority of mothers of preschool children, 88%, belonged to Hindu; the majority of mothers of preschool children, 52% were, belonging to the graduated, majority of mother of preschool children 75% were belonging to the housewife, majority of mother of preschool children 90% belonged to the nuclear family, majority of 55% of the participants have one child, majority of 90% of the participants belonged to urban, majority of 67% of the participants were belongs to media.

The present study shows that the majority of mothers of preschool children, 41% were, belonging to the age group of 20-25 years, 35% belonged to the age group of below 20 years, 15% belonged to the age group of 26-30 years and 9% the mothers of preschool children belonged to the age group above 30 years.

The present study's finding is consistent and supported by a study conducted by Debyani Das in West Bengal. The result showed that most mothers (51%) were in the age group of >30 years.^[10] The present study shows that 90% of the participants were urban and 10% were rural.^[11] The study's finding is consistent and supported by a study conducted by Sumanpreet^[12], results showed that the knowledge score of parents residing in rural areas was 57.76, and 60% belonged to urban areas.

The present study shows that 90% of the participants were nuclear family and 10% were joint family. The present study's finding is consistent and supported by a study conducted by Jagraj and Baljinder^[13] results showed that the knowledge score of parents, 39(65%) belonged to nuclear family, and 21(35%) belonged to joint family.

The present study shows that 67% of the participants were media and 33% were all of the above. The present study's finding is consistent and supported by a study conducted by knowledge-wise comparison of preschool children's mothers in pre-test reveals the following result. In the pre-test, out of 100 mothers of preschool children, the highest percentage (51%) of mothers of preschool children with poor knowledge, followed by (37%) of subjects with very poor knowledge, and (0%) had good and excellent knowledge regarding good touch and bad touch.

The present study's finding is consistent and supported by Yadav *et al.*^[14]. The results showed that the majority

of parents, 60% had poor or fair knowledge, 39% had good knowledge, whereas only 1.6% had excellent knowledge. The study's findings concluded that the knowledge regarding child abuse among parents was inadequate.

However, after the administration of VATP (post-test) highest percentage 49% of mothers of preschool children had average knowledge, followed by 28% of subjects with good knowledge, 20% of mothers of preschool children had excellent knowledge, the lowest Percentage 3% of having poor knowledge and 0% had very poor knowledge regarding good touch and bad touch.

The study is consistent with the Jayamalar and Jamilah^[15] experimental study conducted in Malaysia to examine the effectiveness of video in promoting the prevention of child sexual abuse among primary school children. The results showed that the Experimental group's pre-test score was 1.94, the post-test score was 2.85, the Control group, pre-test score, was 1.93, and the post-test score was 1.96. This study supports for present study.

The research study is consistent with the quasi-experimental study by Bangera *et al.*^[16], which investigated the effectiveness of a structured educational programme using a visual module. Using an organized questionnaire, information was collected from 60 individuals. The results show that the mean pre-test knowledge level was 5.75 ± 2.37 and the mean post-test knowledge level was 14.67 ± 3.22 , with a mean difference of 8.92. This study supports the present research.

This is supported by a 2021 study conducted by Khan *et al.*^[17]. The study found that the difference between the pre-test mean score (16.09) and the post-test mean score (20.56) was statistically significant. The results of the study show how well a video-based learning programme improves children's understanding of appropriate and inappropriate touch.

H1: There is a significant difference between the knowledge level of mothers of preschool children attending Anganawadies in a selected area of Bagalkot between pre-test and post-test scores. The results show a significant difference between pre-test and post-test knowledge levels, thus VATP is found to be effective.

The study is consistent with and supports the study conducted by Neha Singh and Wimmy John (2020) in Lucknow. The results showed that the mean and SD of post-test knowledge scores were (19.97 ± 1.79) and pre-test knowledge scores were (13.57 ± 3.32) so there is a

significant difference between the pre-test and post-test knowledge levels, so VATP proved effective. ^[18]

The study is consistent with and supports the study conducted by Patel *et al.* ^[19]. The results showed that the knowledge of adolescent girls was 46(76.67%) after the test and 14(23.33) before the test, so there is a significant difference between the knowledge before and after the test and VATP was found to be effective.

The study is in line with the study conducted by Patel *et al.* ^[20]. The result showed that the experimental group had a pre-test score of 5.33 (SD=1.41) and a post-test score of 8.66 (SD=1.28); and the control group had a pre-test score of 5.61 (SD=1.38) and a post-test score of 6.61 (SD=1.42). The results showed the post-test difference between the experimental and control groups, indicating that the prevention program against child sexual abuse is effective.

CONCLUSIONS

The study is helpful to find the overall impact of video-aided training sessions on the knowledge of mothers of preschool children about good and bad touch. The study gave the researcher deeper insight into the effectiveness of good and bad touch.

After VATP was administered, significant variation was discovered between the knowledge score of preschooler mother on the pre-test and post-test. Thus, research demonstrated that VATP was needful in enhancing preschooler mothers.

CONTRIBUTION OF AUTHORS

Research concept- M. Prashant Kulkarni

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