A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge regarding Tobacco Chewing Hazards and its Prevention among Adolescents in Selected Rural Areas at Hassan

Komala .H .K

Assistant Professor, BGS International Foundation for Health Sciences, Mysore, Karnataka, India

Abstract: *There is a rapid spread of tobacco use by young peoples who may be unaware of their harmful effects. So there is a need to protect present and future generation from the consequences of tobacco consumption by providing a frame work for tobacco control measures. Objectives: To assess the pre test knowledge on tobacco chewing hazards and its prevention among experimental and control group, To assess the post test knowledge on tobacco chewing hazards and its prevention after intervention in experimental group and control group, To compare the pre-test and post test knowledge on tobacco chewing hazards and its prevention between experimental group and control group and To associate the level of gain in knowledge with demographic variables in experimental group and control group. Methodology: The research design used for this study was quasi experimental design and the 60 samples [30experimental and 30control group] were selected by using non probability convenient sampling technique and the data were collected by using knowledge questionnaire regarding tobacco chewing hazards and its prevention and were analysed by using descriptive and inferential statistics. Result: The study findings revealed that the% of pre-test knowledge in experimental group is 37.7% and in control group is 36.9% where as post-test knowledge in experimental group is 82.2% and in control group is 42.2%. The difference between pre-test and post-test is large and is statistically significant [t=36.86 P=0.001]. Statistical significance was calculated by using independent t- test and also shows that there is an association between demographic variables (Age p=0.01, Monthly income p= 0.04 and Marital status p=0.04) with gain in knowledge score of experimental group. Conclusion: The findings of the study has lead the conclusion that the structured teaching programme was effective in increasing the knowledge of adolescents.*

Keywords: tobacco chewing, prevention, consequences and control measures

1. Introduction

"It is easier to try to prevent a person from ever using tobacco than to get them to quit once they have begun"

In addition to the traditional burden of communicable diseases developing countries today are faced with a huge increase in non communicable diseases, mental illness and violence and injuries. Tobacco is a major contributor to these diseases which now account for more than half the disease burden in those countries. Tobacco is cultivated in many regions around the world and can be legally purchased in all countries.

Together with HIV/AIDS tobacco use is the fastest growing cause of deaths in the world and is set to become the leading cause of premature deaths in the 2020.Tobacco chewing is the second major cause of death in the world. It is currently responsible for the death of 1 in 10 adults. Currently an estimated 4.9 million death are caused by tobacco.[1&2]
The result from the Global Youth tobacco survey a joint WHO (world health organisation) and Centre for Disease Control and Prevention showed that in many countries the prevalence of use of tobacco chewing (11.2%) among adults is higher than that of cigarette use. (8.9%).Tobacco chewing users who use to chew 8-10 times a day could exposed to the same amount on nicotine as people who smoke 30-40 cigarette / day.[3&4]

A recent study from 2 schools in Delhi showed almost 42% of tobacco users started before the age of 12 years. The adolescents' tobacco consumption has been found to be a major contributor of adult habit of tobacco consumption. For preventing tobacco consumption, intervention in adolescent period is required, when children are more amenable to modifications in behaviour and adoption of good habits.[5]

2. Statement of the Problem

A Study To Assess The Effectiveness Of Structured Teaching Programme On Knowledge Of Tobacco Chewing Hazards And Its Prevention Among Adolescents In Selected Rural Areas At Hassan.

Objectives: To assess the pre test knowledge on tobacco chewing hazards and its prevention among experimental and control group, To assess the post test knowledge on tobacco chewing hazards and its prevention after intervention in experimental group and control group, To compare the pre-test and post test knowledge on tobacco chewing hazards and its prevention between experimental group and control group and To associate the level of gain in knowledge with demographic variables in experimental group and control group.

3. Methods and Materials

Hypothesis

The adolescents who receives structured teaching programme will have more knowledge than the adolescents who have not received structured teaching programme.

Research approach : An evaluative approach was adopted to accomplish the objectives of the study.

Research design

Population: All the adolescents in the Shanthigrama and Kenchanahlli village.

Sample: Sample selected for this study is all the adolescents.

Sample size: A total of 60 sample divided equally into 2 groups, as experimental group with 30 adolescents and control group with 30 adolescents.

Sampling technique: In this study the non-probability convenient sampling was used.

Independent variables: Structured teaching programme

Dependent variables: Knowledge of peoples on tobacco chewing hazards and its prevention.

Method of data collection

The data collection was scheduled from august 15th to September 15th prior permission was obtained from concerned authority. The investigator established good rapport with adolescents in Kenchattahalli auol Shanthigramma areas. Oral consent from each participant was obtained after collecting background data and pre-test was conducted on knowledge on tobacco chewing hazards and its prevention. The structured teaching programme was given soon after the pretest. The post test was done on 5th day of structured teaching programme to the adolescents.

Tool used for the study:- The investigation developed the tool as follows

Section I

It consists of demographic variable of the adolescents such as age, sex, education, occupation, religion, marital status, type of family, income, place of living, health information.

Section II

The data were collected by using semi structured questionnaire to seek information from the adolescents and the tool consists of 20 multiple choice questions. All questions had only one correct answer. Each correct response was awarded single score according to the predetermined key and according to the wrong response and omission. Total possible maximum scores for all the answers are 20.

Plan for data analysis

Data were collected from adolescents were conveniently summarized and tabulated by applying descriptive statistics such as mean, percentage, and standard deviation and inferential statistics such as Chi-square test and t-test.

4. Results

The data presented in the table 1 shows computed paired 't' test value between the pre-test and post- test is higher than the table value(t=36.86). The data is statistically significant in all the areas. Hence it is inferred that the STP was effective in increasing the knowledge of subjects .

Table 1: Comparison of distribution of samples according to the demographic variables

		Group			
		Experiment group		Control group	
		N	%	N	%
Age	15-20	3	10	8	26.7
	21-25	12	40	12	40
	26-30	7	23.3	5	16.7
	31-35	8	26.7	5	16.7
Sex	Male	17	56.7	19	63.3
	Female	13	43.3	11	36.7
Education	Illiterate	1	3.3	3	10
	Middle	8	26.7	3	10
	High school	8	26.7	7	23.3
	PUC & above	13	43.3	17	56.7
Occupation	Cooly	14	46.7	8	26.7
	Agriculture	14	46.7	16	53.3
	Private employee	1	3.3	3	10
	Govt. employee	1	3.3	3	10
Religion	Hindu	28	93.3	27	
	Christian	2	6.7	3	10
Type of family	Nuclear family	18	60	12	40
	Joint family	12	40	18	60
Family Income	< Rs.1000	16	53.3	22	73.3
	Rs.1000-2000	13	43.3	6	20
	Rs.2001-3000	1	3.3	2	6.7
Source of information	TV	10	33.3	6	20
	Radio	12	40	14	46.7
	News paper	4	13.3	2	6.7
	Health persons	4	13.3	8	26.7
Marital status	Married	11	36.7	10	33.3
	Unmarried	19	63.3	20	66.7

Table 1: Comparison of pre test and post test mean knowledge score

Groups	N	Pre-test		Post-test		Student paired t-test
		Mean	SD	Mean	SD	
Experimental group	30	7.53	1.46	16.43	0.77	t=36.86 **
Control group	30	7.37	1.87	8.43	1.59	t=1.88 NS

p<0.0001, p< 0.07, ** - Significant, NS- Not significant

5. Discussion

The findings of this study reveal that structured teaching programme will increase the knowledge of adolescents. This result indicates that the age, gender and type of family influence the knowledge. Hence The health personnel should conduct the educational programme on tobacco chewing hazards and its prevention in the community areas. The nurses should update their knowledge constantly in order to give education.

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