



A study to assess the effectiveness of structured teaching program on knowledge regarding adverse effect of substance abuse on health of adolescent from selected pre university colleges at Mangaluru

David Rakesh Dsouza¹, Yogitha¹, Dr. Marie Elezabeth Pinto²

¹ Associate Professor, New Mangala College of Nursing, Managluru, Karnataka, India

² Principal, New Mangala College of Nursing, Managluru, Karnataka, India

Abstract

The present study has accepted the effectiveness of structured teaching program on knowledge regarding the adverse effect of substance abuse on health of adolescents. The evaluative approach was used for the study and implemented one group pre test and post test design. Where the 60 samples has selected by using non probability convenient technique. The data collected from the selected sample with the help of demographic proforma and knowledge is assessed by structured knowledge questionnaire. The data was analyzed by using descriptive & inferential statistical methods. The significant finding of the study states that the adolescents has enhanced their knowledge after implementation of structured teaching program.

Keywords: assess, knowledge, effectiveness, adolescents, substance abuse

Introduction

Substance abuse trend is a rapidly increasing trend among the young adults. It's really fascinating the young tender minds. Whereas there is definition that the individual depends on the certain substance or they make miss use of certain substances. As per certain books and websites it clear information that young adults are easily fall in the web of substance abuse. These products are illegally available in the market for the reasonable prices and access it easily. They had brought lot transform in life style. It now becomes a regular part of life among the young adults. Even in India in can see that massive raise in consumption of substances in these years. Various factors influence food culture, food market and consumption pattern. Today adolescents prefer to substance for pleasure but they are completely unaware of the consequences. They have numerous health hazards or no real value for their life. Increase in consumption of substances is also leads to numerous adverse effects on the health of youngsters. Such as obesity, cardiovascular diseases, type 2 diabetic, hormonal imbalances, suicide, depression, hallucination, mental illness and so on.

In 2011, there were roughly 11.5 million grown-ups progressed 18 and over in the United States who had a serious internal illness (SMI), which is roughly 5 of grown-ups (Matejkowski & Osterman, 2015). Substance abuse is a high threat when it comes to persons suffering from severe internal ails similar as schizophrenia and bipolar complaint with about 50 of those diagnosed meeting the criteria for a substance abuse problem (Sharma & Bennett, 2015). The use of amphetamines, cocaine, and cannabis is over-represented in cases with internal ails similar as schizophrenia and bipolar complaint (Ringin *et al.*, 2008). Also, individualities with schizophrenia are two to five times more likely to witness 5 substance abuse compared to the public (Cruce *et al.*, 2011). Not to mention, this problem doesn't just affect grown-ups, it also affects adolescents. College scholars with a severe internal illness were at a lesser threat of developing substance abuse issues than scholars without a severe internal illness (Lo *et al.*, 2013). Co-occurring internal illness and substance abuse doesn't

distinguish against anyone and the presence of this co-occurrence complaint can beget numerous problems for these individualities. Ned for study

According to a study conducted on the costs of mental health and substance abuse services among individuals with Medicaid insurance, it is very costly to treat these disorders and they are uncertain if treatment of substance abuse will reduce the annual costs of psychiatric care (Dickey & Azeni, 1996). In 1991, substance abuse accounted for 5.3 million days of care for individuals with Medicaid and they spent \$4 billion dollars on substance abuse-related hospital care (Fox *et al.*, 1995). However, in 1991, Medicaid did not include specifically substance abuse treatment in a list of their covered services.

Objective of the study

1. To determine the level of knowledge among adolescents regarding adverse effect of substance abuse
2. To evaluate the effectiveness of structured teaching programme on adverse effect of substance abuse
3. To find out the association between the pre-test knowledge scores with selected demographic variables

Hypothesis

H₁: The mean post-test knowledge score will be significantly higher than the mean pre-test knowledge scores.

H₂: There will be significant association between pre-test knowledge scores and selected demographic variables.

Assumption

1. The adolescents will have some knowledge regarding adverse effect of substance abuse
2. Knowledge can be assessed using a structured knowledge questionnaire
3. Structured teaching programmed will enhance knowledge of adolescents regarding adverse effect of substance abuse.

Methodology

An evaluative approach was used and research design experimental one group pre-test post-test research design was used for the study. The samples consisted of 60 adolescents selected by Non probability purposive sampling technique. The setting for the study was selected pre university colleges. Data was gathered with help of demographic variables & administering a self-structured knowledge questionnaire. Data were analysis using descriptive & inferential statistics.

Analysis and interpretation

Table 1: Socio demographic variables

Sl. No	age in years	Frequency	Percentage (%)
1	15years	49	81.7
2	16 years	9	15.0
3	Above 17 years	2	3.3
Gender			
1.	Male	37	61.7
2.	Female	23	38.3
Religion			
1	Hindu	14	23.3
2	Christian	14	23.3
3	Muslim	30	50.0
4	Others	2	3.3
Marital status			
1	married	4	6.7
2	single	56	93.3
Type of family			
1	Nuclear family	45	75.0
2	Joint family	12	20.0
3	Extended family	3	5.0
Income			
1	Below Rs.5000	-	-
2	5001 – 10000	23	38.3
3	Above Rs. 10001	37	61.7
Place of residence			
1	Urban	40	66.7
2	Rural	20	33.3
Type of diet			
1	Vegetarian	15	25
2	Non vegetarian	45	75
Previous information of substance abuse			
1	Yes	23	38.3
	No	37	61.7
IF YES, FROM WHERE			
1	Mass media	3	5.0
2	Friends	11	18.3
3	Resource person	16	26.7
4	Relatives	22	36.7
5	Health personals	8	13.3

Table 2: frequency and percentage distribution of subjects according to level of knowledge in pre test

Level of Knowledge	Frequency (f)	Percentage (%)
Good	-	-
Average	60	100
Poor	-	-

The given table illustrates the result of pre-test which explains that the entire respondent had average knowledge of substance abuse.

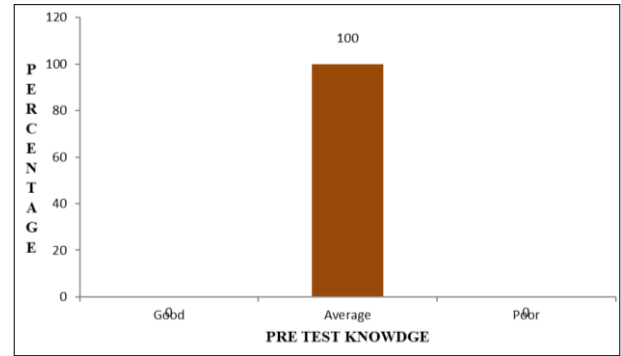


Fig 1

Table 3: Frequency and Percentage Distribution of subjects according to level of knowledge in Post test

Level of Knowledge	Frequency (f)	Percentage (%)
Good	47	78.3
Average	13	21.7
Poor	-	-

The given table explains the result of posttest, where it illustrate that the maximum 78.3% of responded had good knowledge and 21.7% had average knowledge.

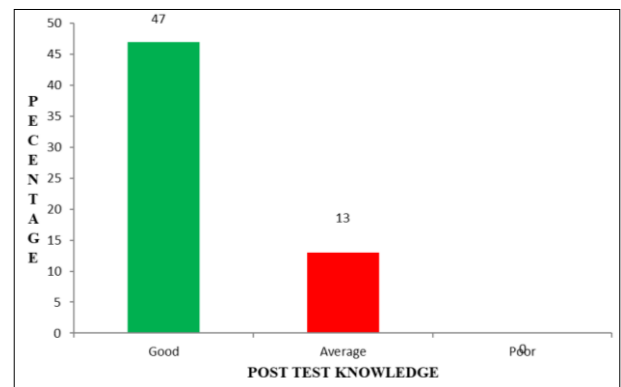


Fig 2

Table 4: General comparison between pre-test and post test

Period of observation	Mean	SD (±)	Mean percentage
Pre test	16.08	1.57	53.61
Post test	22.45	2.76	74.83

This section deals with the effect of planned teaching program, where it increase the knowledge score among adolescents regarding substance abuse.

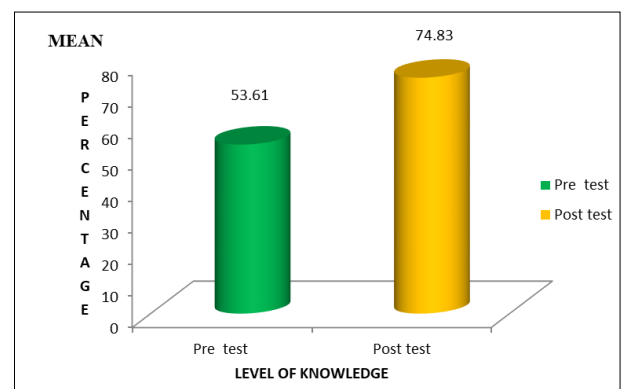


Fig 3

Table 5: Comparison of pretest and posttest knowledge scores to determine the effectiveness of structured teaching program me

n= 60					
Sl. no.	Area wise analysis		Mean	SD	't' value
1	General information on SA	Pre	1.73	0.61	8.76
		Post	2.43	0.56	
2	Definition and incidence, prevalence on SA	Pre	1.00	0.55	6.71
		Post	1.52	0.60	
3	Types and etiology of SA	Pre	0.83	0.59	7.46
		Post	1.35	0.52	
4	Identification and early diagnosis	Pre	2.57	0.67	12.09
		Post	3.68	0.68	
5	Clinical features and signs ana symptoms	Pre	2.13	0.72	7.79
		Post	2.83	0.67	
6	Treatment and Management of SA	Pre	9.54	1.00	12.55
		Post	6.67	1.00	
7	Prevention of SA	Pre	2.87	0.68	10.17
		Post	3.97	0.84	
8	Over all knowledge score	Pre	16.08	1.57	19.04
		post	22.45	2.76	

Data presented in the table illustrates that there was a significant gain in knowledge level after intervention in the available variables. Regarding general information on mental retardation the mean score prior intervention was 1.73 and it was increased to 2.43; definition and incidence, prevalence in the mean score prior intervention was only 1.00 and it was picked up to 1.52; in types and causes,

etiology from 0.83 to 1.35; In identification, diagnosis it raised from 2.57 to 3.68; In clinical features, signs and symptoms it was shoot up from 2.13 to 2.83; in treatment and management it hiked from 4.95 to 6.67; in prevention it increased from 2.87 to 3.97 and at last, the overall knowledge score was increased after the intervention of structured teaching program from 16.08 to 22.45

Table 6: Chi square value showing the association between the pretest knowledge score and demographic variables

Sl. No.	Demographic variables	Pretest median knowledge score (16)		χ ² Calculated values	df	Inference	
1	Age in years	≤median	≥median	1.25	2	NS	
		15 years	10				14
		16 years	3				6
	Above 17 years	0	2				
2	Gender			0.14	1	NS	
		Male	13				24
		Female	7				16
4	Religion			2.70	1	NS	
		Muslim	13				17
		Christian	4				10
		Hindu	2				12
	Others	1	1				
5	Marital status			0.00	1	NS	
		married	2				2
		single	16				31
6	Types of family			0.90	1	NS	
		Nuclear family	17				28
		Joint family	2				10
		Extended family	1				2
7	Family income per month			1.72	1	NS	
		>Rs. 5000	-				-
		5001 to 10000	10				13
		<Rs. 10001	10				27
8	Place of residence			0.93	1	NS	
		Urban	15				25
		Rural	5				15
9	Type of diet			0.00	1	NS	
		Vegetarian	5				10
		Non vegetarian	15				30
10	Information regarding SA			1.72	1	NS	
		Yes	10				13
		No	10				27

Note: Nothing significant, S*: Significant difference, df: Degree of freedom, p<0.05 At df= 1: The discription in

given table reveals that there is no association between the pretest level of knowledge score and demographic variables

of adolescents hence the null hypothesis is accepted and research hypothesis was rejected. Hence there is no significant association between the pretest knowledge score and demographic variables at 0.05 level significance.

Limitations

The present study has the following limitations

1. The study was limited to only 60 samples.
2. The study does not have a control group.
3. The study was limited to only pre university colleges only
4. Sampling technique used was non-Probability convenient sampling technique hence representativeness is limited.

Conclusion

Overall the study states that the adolescents who were studying in selected pre university colleges had an inadequate knowledge regarding the adverse effect of the substance abuse. Where the structured teaching program which implemented to the students has enhanced the knowledge of adolescents regarding the adverse effect of substance abuse on the health and it also helped to develop an positive view towards the good healthy life style. Whereas researchers has also taken an effort to express his personal experience regarding effect of these substances on health. Throughout the study there was a constant support from experts and faculty and friends

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