WWW.IJRPR.COM

International Journal of Research Publication and Reviews

Journal homepage: www.ijrpr.com ISSN 2582-7421

"A STUDY TO ASSESS THE EFFECTIVENESS OF PUBLIC AWARNESS PROGRAMME ON KNOWLEDGE AND ATTITUDE REGARDING ILL EFFECTS OF TOBACCO AMONG ADOLESCENT BOYS AT SELECTED VILLAGE, MEHSANA DISTRICT"

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ABSTRACT:

Introduction: Tobacco is a type of American leaves which contains nicotine. Tobacco may be consumed either by smoking (in the form of cigarettes, beedies, cigars, cheroots, chuttas, dhumti, pipe, hooklis, chillum and hookah) or other smokeless as chewed (as gutka, khaini, pan masala, mawa,snus etc.) and inhaled as snuff. Tobacco is a complex mixture of chemicals such as nicotine, carbon monoxide, hydrogen cyanide, nitrogen oxides, formaldehyde, acroleine, benzene, phenol, poly aromatic hydrocarbons, N-nitrosamines, cadmium, ammonia, methanol, arsenic and acetic acid. **Objective**: To assess the prevalence of adolescent boys in the selected village. To identify the factors influencing tobacco use among adolescent boys. To assess the pre and posttest level of knowledge and attitude regarding the ill effects of tobacco among adolescent boys. To assess the effectiveness of public awareness program on knowledge and attitude regarding the ill effects of tobacco among adolescent boys. To correlate the mean differed knowledge score with attitude score regarding the ill effects of tobacco among adolescent boys. To associate the mean differed knowledge and attitude score with their selected demographic variables **Methodology**: Methodology is the systematic, theoretic analysis of the methods, applied to the field of study. It comprises the theoretical analysis of the body of methods and principles associated with a branch of knowledge. Typically, it encompasses concept such as paradigm, theoretical model, phases, qualitative and quantitative techniques. This chapter deals with the research approach, research design and the steps taken for the development of the tool, further the chapter describes the settings, samples, sampling techniques, sampling criteria, pilot study and the plan for the data analysis. **Conclusion**: The present study aimed to assess the effectiveness of public awareness programme on knowledge and attitude regarding the ill effects of tobacco among adolescent boys in selected village. Hence the investigator concluded that there was a significant improvement in knowledge and attitude of adolescent boys after the administration of public awareness programme. Thus the public awareness programme proved that it was an effective educational tool to improve the knowledge and attitude of adolescent boys regarding the ill effects of tobacco in the community.

Keywords*:* Public Awareness, Knowledge, Tobacco, Adolescent Boys

INTRODUCTION :

Tobacco is a type of American leaves which contains nicotine. Tobacco may be consumed either by smoking (in the form of cigarettes, beedies, cigars, cheroots, chuttas, dhumti, pipe, hooklis, chillum and hookah) or other smokeless as chewed (as gutka, khaini, pan masala, mawa,snus etc.) and inhaled as snuff.

Tobacco is a complex mixture of chemicals such as nicotine, carbon monoxide, hydrogen cyanide, nitrogen oxides, formaldehyde, acroleine, benzene, phenol, poly aromatic hydrocarbons, N-nitrosamines, cadmium, ammonia, methanol, arsenic and acetic acid.

Many organic and inorganic chemicals such as hydrocarbons, aldehydes, ketones, phenol, cyanide, acrolein and nitrogen oxide contribute to smoke's toxicity to respiratory system. The hydrogen cyanide may affect the respiratory system by its toxic effect on the cilia. At the same time, it may cross the placenta and have toxic effect on the growing fetus. In addition it may cause nerve damage in cigarette smokers with optic neuropathy. Inhalation of tobacco leads to absorption of nicotine into the blood stream. Approximately 15% of nicotine reaches the brain and it is absorbed within 7 seconds of inhalation. It stimulates catecholamines release, which in turn causes tachycardia, constricts peripheral vessels, raises the blood pressure and produces a feeling of euphoria. Carbon monoxide in the smoke will combine with the hemoglobin thereby reducing the oxygen carrying capacity of the blood.

First hand smoking means direct inhalation of tobacco smoke. Second hand smoking means environmental tobacco smoke that is inhaled involuntarily or passively by someone who is not smoking. Third-hand smoke means, the particles and gases that is left over after a cigarette is burned. First hand

smoke can cause all above mentioned health problems. Second hand smoking may lead to adverse health effects such as cancer, asthma and respiratory infections. There will be an increase in the risk of heart disease by 25-30% among non-smokers who are exposed to second hand smoke.

OBJECTIVES :

1. To assess the prevalence of adolescent boys in the selected village.
2. To identify the factors influencing tobacco use among adolescent boys.
3. To assess the pre and post test level of knowledge and attitude regarding the ill effects of tobacco among adolescent boys.
4. To assess the effectiveness of public awareness programme on knowledge and attitude regarding the ill effects of tobacco among adolescent boys.
5. To correlate the mean differed knowledge score with attitude score regarding the ill effects of tobacco among adolescent boys.
6. To associate the mean differed knowledge and attitude score with their selected demographic variables

HYPOTHESIS:

- **H_1:** There is no significant difference in pre and posttest level of knowledge and attitude regarding the ill effects of tobacco at $p<0.05$ level.
- **H2:** There is no significant relationship of the mean differed knowledge score with attitude score regarding the ill effects of tobacco at $p<0.05$ level.
- **H3:** There is no significant association between the mean differed knowledge and attitude scores and selected demographic variables at $p<0.05$ level

RESEARCH METHODOLOGY:

Research Design:

A pre experimental one group pretest and post test was used for this study.

VARIABLES UNDER STUDY:

- **Independent Variable:** The independent variable in this study was the knowledge and attitude regarding
- Ill effects of tobacco
- **Dependent Variable:** The dependent variable was the public awareness programme

SETTING OF THE STUDY:

The study was conducted at Vadnagar village which is having a total population of 2000. The population under study belongs to the Vadngar is situated at the distance of 06 kms away from Ratnaprabha college of nursing, Vadnagar.

Population and Sample:

The target population of this study were all the people those who are using tobacco in any forms. The sample consists of 60 adolescent boys at selected village, who fulfills the sample selection criteria.

Criteria for Selecting the Sample:

Inclusive criteria: Person those who are using tobacco of any forms. Person those who are understand Gujarati or English

Exclusive criteria: Person those who are not willing to participate, Person those who are not available during data collection period, Person those who are having sensory impairment, Person those who underwent any special tobacco cessation programme.

Development of the Tool:

Based on the review of literature and experts opinion and with the investigator's personal and professional experience, a structured questionnaire was developed to assess the knowledge a 5 point likert scale to assess the attitude and a checklist to assess the factors influencing the tobacco use.

Data Collection Procedure:

During data collection period, the first one-week, adolescent boys survey was conducted with the help of Research Assistants (B.Sc. Nursing students) to find out the total number of people using tobacco at Selected village. Total number of adolescent boys during the time of data collection was; among them the researcher selected 60 samples who satisfied the sample selection criteria using non probability convenient sampling method. A brief self-introduction and detailed explanation regarding the purpose of the study was given to the subjects. The researcher obtained informed consent from the subjects and they were reassured regarding confidentiality.

During the second week, the samples were gathered in small groups of 10-15 in a common place in the village where there was adequate ventilation and lighting and a structured questionnaire was administered which consisted of 25 multiple choice questions to assess the existing level of knowledge regarding the ill effects of tobacco, followed that a 5 point Likert scale to assess the level of attitude and a check list to assess the factors influencing tobacco use was done. Each participant took around 15-20 minutes to answer all the questions. Followed by the pretest, public awareness programme was given regarding general information about tobacco, ill effects of tobacco, prevention and treatment of tobacco use by using power point presentation, video show and pamphlets. After one week the posttest level of knowledge and attitude of the subjects were assessed using the same structured questionnaire and 5 point Likert scale, with that the study was concluded.

Data Analysis Plan:

Data analysis included descriptive statistics (mean, standard deviation) and inferential statistics (paired t-test, chi-square test) 4. 't 'test to compare the pre and post test level of knowledge and attitude regarding the ill effects of tobacco. Correlation coefficient to find out the relation between knowledge and attitude regarding the ill effects of tobacco. ANOVA to associate the mean differed knowledge score and attitude score with their selected demographic variables.

Ethical Considerations:

Ethical considerations included obtaining permissions, obtaining oral and written consent from participants, ensuring confidentiality, and voluntary participation.

Table: 1 Comparison of pretest and posttest level of knowledge and attitude score regarding the ill effects of tobacco.

N=60

pretest and posttest Knowledge & Attitude	PRE TEST		POST TEST		MD	't' value
	Mean	S.D	Mean	S.D		
Knowledge	8.07	1.96	10.19	2.34	4.12	0.0586
Attitude	19.07	3.52	29.81	3.91	8.74	0.0642

Table -1 shows the comparison of pre and post test level of knowledge and attitude score regarding the ill effects of tobacco.

When comparing the pre and post test level of knowledge regarding the ill effects of tobacco, the pre-test mean knowledge score was 8.07 with S.D 1.96. The posttest mean knowledge score was 10.19 with S.D 2.34. The mean difference was 4.12 and the calculated 't' value was 0.0586, which was statistically highly significant at $p < 0.001$ level. This finding was suggestive of effectiveness of public awareness programme.

When comparing the pre and posttest level of attitude regarding ill-effects of tobacco, the pre-test mean attitude score was 19.07 with S.D 3.52. The posttest mean attitude score was 29.81 with S.D 3.91. The mean difference was 8.74 and the calculated't' value was 0.0642, which was statistically highly significant at $P < 0.001$ level. This finding was suggestive of effectiveness of public awareness programme.

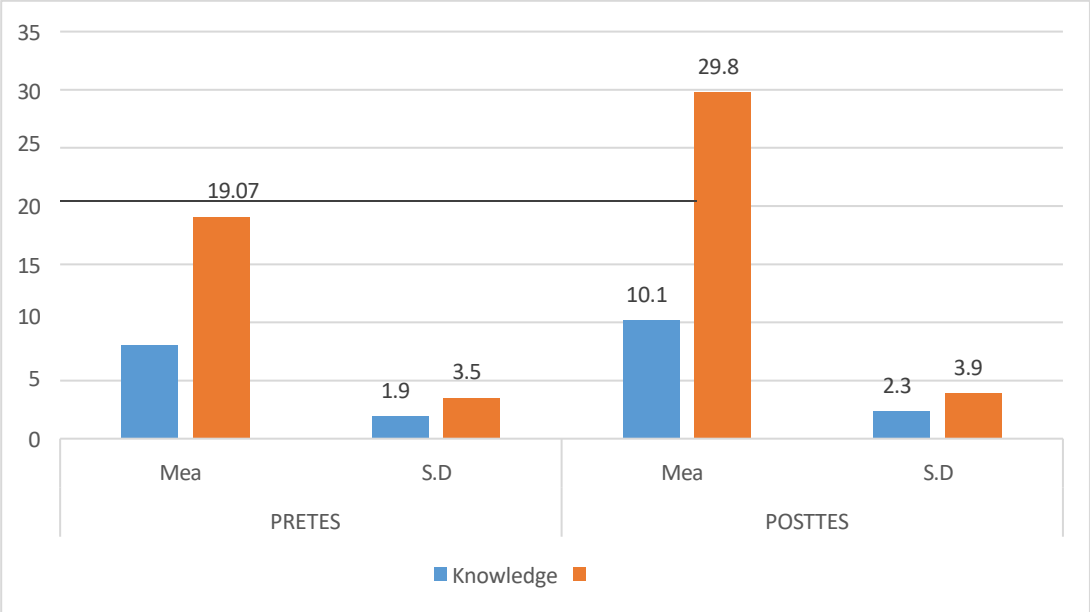

Figure-1 Comparison of pre and posttest level of knowledge and attitude score regarding the ill effects of tobacco.

SUMMARY:

Tobacco consumption is one of the leading preventable causes of disease and death globally. Tobacco kills around 6 million people each year globally, in which more than 600,000 people were exposed to second hand smoke. The causes of tobacco use among males include peer pressure, advertisement, stress relief, rebellious, family history, easy availability and curiosity and that of women include cultural, psychosocial and socio economic factors including body image and peer pressure. Tobacco use will leads to many problems such as physical problems, psychological problems, social problems, cognitive problems and ecological problems. Many of the people are unaware of the ill effects of tobacco.

The findings of the study revealed that the total number of adolescent boys were 350 out of the total population of 2000 at the time of survey in Vadnagar .The major factors influencing tobacco use were family history of tobacco use, lack of awareness regarding the ill effects of tobacco use, curiosity and peer pressure. While comparing the pre and post test level of knowledge and attitude score regarding ill-effects of tobacco, the calculated paired't' value was 0.0586 and 0.0642 respectively, which was statistically highly significant at $p < 0.001$ level. The calculated 'r' value was 0.126 which showed there was moderate positive correlation indicating that as knowledge improves there is an enhancement in favorable attitude also. Study concluded that the level of knowledge and attitude has improved after the administration of public awareness programme.

CONCLUSIONS :

The present study aimed to assess the effectiveness of public awareness programme on knowledge and attitude regarding the ill effects of tobacco among adolescent boys in selected village.

Hence the investigator concluded that there was a significant improvement in knowledge and attitude of adolescent boys after the administration of public awareness programme. Thus the public awareness programme proved that it was an effective educational tool to improve the knowledge and attitude of adolescent boys regarding the ill effects of tobacco in the community.

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