

A True Experimental Study to Evaluate the Effectiveness of Structured Teaching Programme on Knowledge Regarding Ill – Effects of Alcohol Consumption among Adolescents in Selected Senior Secondary School at Panipat Haryana

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Abstract

One of the major public health issues worldwide among senior secondary school childrens is alcohol consumption. However, the extent of consumption among senior secondary school students and their understanding of its ill effects on health remain relatively unknown in many cities of Haryana. This study aim to evaluate the effectiveness of structured teaching programme on knowledge regarding ill effects of alcohol consumption, among adolescents in senior secondary schools at Panipat, Haryana. This study was based on quantative approach, the researcher used true – experimental design. The sampling method adopted was Simple random method and total sample size was 60 (30-experimental group, 30- control group) . Data collection method was self reporting questionnaire. The result of the study shows, in experimental group the pre-test mean score was 12.47 and the post-test mean score was 22.90, the standard deviation score in pre test and post test of experimental group was 2.34 and 2.28 respectively, the paired ‘t’ test value was 16.855 at which was higher than Table Value (2.05). Hence, null hypothesis was rejected and concluded in experimental group. There was significant increase in knowledge after STP on ill effects of alcohol consumption. The study result suggested that educating adolescents on ill effects of alcohol consumption will be effective in increasing their knowledge on the same.

Keywords: Effectiveness, Structured teaching programme, ill effects of alcohol consumption, senior secondary school students.

Introduction

Background of the study: Drinking alcohol has drained more blood, hung more crepe, sold more house, plunged more people bankruptcy, armed more civilians, slain more children, snapped more wedding rings, defiled more innocence, blind more eyes, twisted more limbs, dethroned more reason, wrecked more manhood,

dishonoured more womanhood, broken more hearts, blasted more lives driven more to suicide, and dug more graves than only other poisoned scourge that ever swept its death dealing waves across the world². Alcohol abuse is a major health problem in the country and at large in the world. For the past thirty to forty years, alcohol consumption has increased tremendously¹.

Alcoholism is a chronic dependence characterized by compulsive drinking of alcohol to such a degree that produces mental disturbances and interferes with social and economic functioning. According to “**Johnson**” alcoholism is a condition in which an individual loses control over his alcohol intake. He is constantly unable to refrain from drinking once he begins⁴.

According to current concepts, alcoholism is considered a disease and alcohol a “disease agent” which causes acute and chronic intoxication, cirrhosis of liver,

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toxic psychosis, gastritis, pancreatitis, cardiomyopathy, peripheral neuropathy and gastro intestinal cancers. In addition to that it's a leading cause of suicide, automobile accidents, injuries and deaths due to violence.³ The health problems for which alcohol is responsible are only part of the total social damage which includes family disorganization, Crime and loss of productivity⁵.

Adolescents are the citizens of tomorrow on whom the future of the nation stands. It is a challenge to meet their health needs. 18 to 20 % of Indian population constitutes the age group of between 10 - 20 years.⁶

Adolescent is a challenging period of both children and their parents. 3 stages of adolescence – early (12-14 years), middle (15-17 years) and late (18-21 years) are experienced by most teens. But the age at which each stage is reached varies greatly from child to child. These different rates of maturation are connected to physical development and hormones balance, neither of which the child can control. For this reason, adolescence should be treated as individuals and any guidelines should be adapted to the particular child.⁷

Today almost every part of the city has increasing number of addicts who belong to different sections of the society in every walk of life. Alcohol and drug dependence are spreading like a contagious disease in the world and India cannot escape from its clutches.⁸ The drug situation in India has acquired a serious dimension. India is no longer merely a country for the transit of illicit drugs from the “Golden triangle” or “Golden Crescent”, but it is fast becoming a potential market for its consumption. There are no definite figures available to assess the actual extent in the country.⁷

Globally, the world Health organization (2012) has reported alcohol as one of the leading risk factors for morbidity and mortality world-wide, with approximately 3.3 million deaths in India were attributed to alcohol consumption, and representing a considerable economic problem for many communities around the world. In 2014, the world health organization released its global status report on alcohol and health. According to the report, about 38.3% of the world's population is reported to consume alcohol regularly. On an average an individual consumption amounts to 6.2 liters of alcohol each year.⁹ The report only considers individuals over 15 years of age. The reports say that about 30% of India's population, just less than a third of the country's populace – consumed alcohol regularly. In Haryana, 63.3% teenagers were found to be consuming alcohol.

More than 30% of all deaths from injuries can be directly linked to alcohol. Substance use also is associated with a wide range of non-lethal but serious health problems, including school failure, Studies show that 46% of adolescents have tried alcohol by eighth grade, and by senior year in high school 77% of adolescents have begun to drink. Moreover, 20% of eighth graders and 58% of seniors have been drunk. Early age of first use of alcohol and drugs can increase the risk of developing a substance use disorder during later life. Therefore, prevention programs that target youth either before youth or during junior high school may help prevent alcohol, tobacco and other drug use during high school¹⁰.

In India, prevalence rates of use of alcoholic beverages ranges from 23 % to 74 % among males and 80% among the adolescent group. Statistics from a recent survey by the social development foundation of the Associated Chambers of Commerce and Industry of India (Assocham) reveals that nearly 45 percent of 12th graders in metropolitan cities drink excessively at least five to six times a month. Globally,¹² the extent of world-wide psychoactive substance abuse is estimated as 2 billion alcohol users, 1.3 billion smokers, 129 million cannabis users and 185 million drug users. About 76.3 million are diagnosed with alcohol related disorders and 3.2 % of overall human deaths are caused by alcohol consumption.¹¹

From the above studies the researcher found that alcohol prevalence in the country is growing in alarming rate, which accounts one of the major cause of mortality and morbidity and also a noticed a significant lowering of age at initiation of drinking . So it is high time to carry out effective intervention to create awareness among the adolescents about alcoholism and its ill effects. Thus adolescents can be prevented from alcohol consumption with timely and proper motivation. Planned teaching programme is one of such effective intervention which can be carried out to bring the awareness among adolescents students in a school set up.

Stataement of Problem

A True experimental study to evaluate the effectiveness of Structured Teaching Programme on knowledge regarding, ill effects of Alcohol consumption, among Adolescents in Selected Senior Secondary School at Panipat.

Objectives

1. To assess the pre test and post test knowledge regarding ill effects of alcohol consumption in experimental group.
2. To assess the pre test and post test knowledge regarding ill effects of alcohol consumption in control group.
3. To evaluate the effectiveness of structured teaching programme regarding ill effects of alcohol consumption in experimental and control group.
4. To find out the association between pre test knowledge regarding ill effects of alcohol consumption with their selected socio demographic variables of adolescents in experimental and control group.

Hypothesis

All the hypotheses will be tested at 0.05 level of significance

H1: The mean post test knowledge scores regarding ill effects of alcohol consumption will be significantly higher than mean pre test knowledge score in experimental group.

H2: The mean post test knowledge scores regarding ill effects of alcohol consumption will be significantly higher than mean pre test knowledge score in control group.

H3: There is a significant difference in mean post test knowledge scores regarding ill effects of alcohol consumption in experimental and control group.

H4: There is a significant association between the mean pre test knowledge scores with their selected demographic variables in experimental and control group.

Conceptual Framework

The conceptual framework of the study is based on modified Imogene King goal attainment theory. Imogene King explains the concept of the nurse and the patient mutually communicating information, establishing goals and taking action to attain goals.

Research Methodology

Research Approach: Quantitative research approach

Research Design: True Experimental Research Design

Setting of the Study: Senior Secondary School, Panipat (Haryana)

Sample Technique and Sample Size

Sampling technique: Simple random sampling technique

Sample size: 60 Senior Secondary School Students (30- Experimental Group and 30- Control Group)

Tools for Data Collection

Researcher used self structured knowledge questionnaire to measure knowledge on ill effects of alcohol consumption.

Procedure for Data Collection

Self reporting questionnaire

STP given to sample in experimental group on day 1 following pre-test. On 7 day post-test was done among samples in both groups.

Data Analysis

Descriptive and inferential statistics (SPSS-version-20)

Data Analysis and Interpretation

Table – I: Frequency and Percentage Distribution of Samples According to Pre – Test Level of Knowledge in Experimental and Control Group

(N = 60)

S. No.	Pre – Test Level of Knowledge	Experimental Group		Control Group	
		f	%	f	%
1.	Adequate	0	0.00	0	0.00
2.	Moderately Adequate	24	80.00	25	83.30
3.	Inadequate	6	20.00	5	16.70

The above table shows the following: With regard to pre – test level of knowledge among samples in experimental group. An overwhelming majority of the samples 24 (80.00%) had moderately adequate knowledge, similarly in control group 25 (83.30%) of the samples were with moderately adequate knowledge. Very few samples in experimental group 6 (20.00%)

and 5 (16.70%) in control group were with inadequate knowledge. None of the samples were with adequate knowledge in both the groups,

Table – II: Frequency and Percentage Distribution of Samples According To Post – Test Level of Knowledge In Experimental And Control Group

(N = 60)

S. No.	Post – Test Level of Knowledge	Experimental Group		Control Group	
		f	%	f	%
1.	Adequate	25	83.30	3	10.00
2.	Moderately Adequate	5	16.70	26	86.70
3.	Inadequate	0	0.00	1	3.30

Table – II: Shows the post – test knowledge level among samples in experimental and control group. In experimental group an overwhelming majority 25 (83.30%) had adequate knowledge and less number of samples 5 (16.70) had moderate knowledge. None of the samples in experimental group were with inadequate knowledge.

In control group majority of the samples 26 (86.70%) were with moderately adequate knowledge and very less 3 (10.00%) were with adequate knowledge and only one sample were with inadequate knowledge.

Table - III: Effectiveness of structured teaching programme regarding ill effects of alcohol consumption in experimental and control group.

(N = 60)

S. No.	Groups	Mean Post - Test	Post – Test Mean Difference	Post – Test Standard Deviation	Independent ‘t’ test Value	‘P’ Value
1.	Experimental group	22.90	9.17	2.28	12.571*	0.0001
2.	Control group	13.73		3.28		

(*) Significant at ‘P’ value < than 0.05

From the above table we interpret the mean post-test score in experimental group was 22.90 where as in control group it was 13.73. The standard deviation value was 2.28 in experimental group and 3.28 in control group. Independent ‘t’ test value was 12.571 for df 58, which was statistically significant at ‘P’ value < than 0.05. This shows the effectiveness of structured teaching programme.

Chi square test was used to find the level of association between pre test knowledge selected socio demographic variables. It was found none of the socio demographic variables have been associated with the pre-test knowledge among samples in both the groups.

Discussion

Current study findings were discussed according to the objectives. The findings of the present study were supported by the following studies.

In pre – test, an overwhelming majority of the samples in experimental group 24 (80.00%) had moderately adequate knowledge, similarly in control group 25 (83.30%) of the samples were with moderately adequate knowledge. Very few samples in experimental

group 6 (20.00%) and 5 (16.70%) in control group were with inadequate knowledge. These findings were similar to the result of the study done by Kiran. N H and Veereskumar N (2016). The study findings showed that there is increase in post-test knowledge scores regarding ill effects of alcoholism compared to pre-test knowledge scores.¹³

In the present study the mean post-test score in experimental group was 22.90 where as in control group it was 13.73. The standard deviation value was 2.28 in experimental group and 3.28 in control group. Independent ‘t’ test value was 12.571 for df 58, which was statistically significant at ‘P’ value < than 0.05. This shows the effectiveness of structured teaching programme. The results obtained are supported by the study conducted by Kumar et al. (2013) where statistically significant improvement was observed in knowledge regarding the harmful effects of alcohol and tobacco use ($t = 27.61, p = 0.001$).¹¹

Conclusion

There is a need for educating the adolescents regarding ill – effects of alcoholism. Without education the adolescents may be unaware of the ill – effects

of alcoholism and they may not develop knowledge and health awareness regarding the same. Hence it is recommended to every nursing professional to develop a education plan to sensitize adolescents towards the ill effects of alcoholism.

Conflict of Interest: No

Source of Funding: Self

Ethical Clearance: Obtained from the ethical committee of Ved Nursing College. Panipat

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