

## A QUASI EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING EFFECTS OF ALCOHOLISM AND DRUG ABUSE AMONG SCHOOL BOYS IN SELECTED SCHOOLS

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### ABSTRACT

Alcoholism and drug abuse are a biggest problem of nowadays not only to the families but also to the Societies. Alcoholism is a disease that can impact anyone regardless of age, gender, ethnicity, body type or personal beliefs. People with high stress, anxiety, depression and other mental health conditions are more vulnerable to alcoholism and drug abuse. A large concern has been brought to this problem regarding its occurrence in the young Generation. In Tamil Nadu Almost 74% of adults suffering from a substance use disorder in 2017 struggled with an alcohol use disorder. About 38% of adults in 2017 battled an illicit drug use disorder. That same year. 1 out of every 8 adults struggled with both alcohol and drug use disorders simultaneously. Alcohol and tobacco consumption was higher among males (15.8% alcohol and 13.1% tobacco) when compared to females (3.2% tobacco and 2.4% alcohol). **Methodology:** A quasi experimental one group pre-test post-test design was used. Population of the study was school boys in Tirunelveli Dt. Samples were 10<sup>th</sup> students from both Tamil & English medium. The sample size was 50. Pre-test and post test was conducted by using a structured questionnaire to assess knowledge about alcoholism and drug abuse. Data was analysed by using descriptive and inferential statistics. **Findings:** The findings showed that the pre-test level of Knowledge mean score was 11.98 which was lower than the post- test level of Knowledge mean score 22.94 with the mean difference of 10.96. The obtained t value 22.06 was statistically significant at  $P < 0.05$  level. Thus, the hypothesis was accepted. It implies that the Structured Teaching Programme had significant effect in improving the level of Knowledge on alcoholism and drug abuse among school students.

### INTRODUCTION:

#### BACKGROUND OF THE STUDY

In India it is estimated that 7.1 Crore people are affected by drugs. As per the National survey on Extent and pattern of substance use in India conducted by Ministry through NDDTC, AIIMS during 2018 the prevalence of alcoholism among 10-17 years age group was 30.00.000 and the number of various substance users were about 2,00,000-40,00,000. Drug addiction also called as a substance use disorder is a disease that affects a person's brain

and behaviour that leads to inability to control the use of legal or illegal drug or medicine. Alcoholism and drug abuse are a biggest problem of nowadays not only to the families but also to the Societies.

### **SIGNIFICANCE AND NEED FOR THE STUDY:**

Alcoholism is a disease that can impact anyone regardless of age, gender, ethnicity, body type or personal beliefs. People with high stress, anxiety, depression and other mental health conditions are more vulnerable to alcoholism and drug abuse. A large concern has been brought to this problem regarding its occurrence in the young Generation. In Tamil Nadu Almost 74% of adults suffering from a substance use disorder in 2017 struggled with an alcohol use disorder. About 38% of adults in 2017 battled an illicit drug use disorder. That same year. 1 out of every 8 adults struggled with both alcohol and drug use disorders simultaneously. Alcohol and tobacco consumption was higher among males (15.8% alcohol and 13.1% tobacco) when compared to females (3.2% tobacco and 2.4% alcohol).

### **PROBLEM STATEMENT**

A Quasi experimental study to assess the Effectiveness of Structured Teaching Programme on knowledge regarding effects of alcoholism and drug abuse among school boys in selected schools at Tirunelveli District.

### **OBJECTIVES**

1. To assess the pre-test level of knowledge regarding effects of alcoholism and drug abuse among school boys in selected schools in Tirunelveli district.
2. To assess post-test level of knowledge regarding effects of alcoholism and drug abuse among school boys in selected schools in Tirunelveli District.
3. To compare the pre-test and post-test level of knowledge regarding effects o alcoholism and drug abuse among school boys in selected schools in Tirunelveli district.
4. To find out the association between the pre-test level of knowledge and the selected demographic variables.

### **HYPHOTHESIS**

**H<sub>1</sub>:** There will be significant different between pre-test and post-test knowledge level on effects alcoholism and drug abuse among the school boys.

## **OPERATIONAL DEFINITION EFFECTIVENESS**

It refers to the extent to which the structured teaching programme has achieved the desired outcome as measured in terms of knowledge scores in school boys

## **STRUCTURED TEACHING PROGRAMME**

Structured teaching programme is creating a highly visually based structured environment that promotes and understanding of schedules activities and expectation, it also helps in understanding the effects of alcoholism and drug abuse

## **KNOWLEDGE**

It refers to the correct responses given by school boys regarding effects of alcoholism and drug abuse

## **SCHOOL STUDENTS**

School students refers 10th standard Boys in both Tamil and English medium

## **REVIEW OF LITERATURE**

**Nghitongo, Aina Ndapandula (2021)** conducted a study to Assess the knowledge, Attitudes and Practices of young adults on alcohol consumption and its effects on their health. The study applied a quantitative approach, using a cross-sectional, descriptive and exploratory design to obtain data from 383 participants aged 18 – 30 years. A cluster random sampling method was employed, data was compiled and analysed using SPSS (statistical package for the social sciences) version 25. Questionnaires were used to determine the knowledge, attitudes and practices relating to alcohol consumption. Descriptive quantitative statistics were used to present the results. The mean age of the respondents was 22.9,  $\pm 40.05SD$ . 134 of the respondents (male and female) were from the age of 21 -23 whereby females made up most of the respondents in the study from all age groups with 58.5%. This study found that most of the respondents 68.6 % had a good knowledge ,23.3 % had moderate knowledge and more than 68.6% and 8% of respondents had inadequate knowledge.

**Deva Pon Pushpam I (2022)** Conducted a quantitative approach study to assess the effectiveness of structured teaching programme on knowledge regarding alcohol abuse among adolescents and to find

the association between the levels of knowledge regarding alcohol abuse with their selected socio demographic variables. Research hypothesis was formulated to find the effectiveness of structured teaching programme. Pre experimental (one-group pretest posttest) design was used in the study. 50 samples were selected using random sampling technique. The data was collected by using a self-structured questionnaire. The responses were analyzed by using descriptive and inferential statistics. Out of 50 samples, 94% had below average, 6% had average and none of them had above average level of knowledge in pretest while in posttest 20% had below average, 76% had average and 4% had above average level of knowledge. The mean percentage score in pretest was 7.06 and standard deviation was 2.24 and the mean post test score was 11.58 and standard deviation was 2.03. The obtained 't' value was 13.36 which was highly significant at 0.05 level. There was no significant association found between the levels of knowledge regarding alcohol abuse with selected socio demographic variables.

## **RESEARCH METHODOLOGY**

### **RESEARCH APPROACH**

Research approach selected for this study is a quantitative research approach.

### **RESEARCH DESIGN**

The research design selected for the study is quasi experimental design one group pre-test and post-test design will be adapted.

### **SETTING OF THE STUDY**

This study was conducted at CCM School, Idaiyangudi, Tirunelveli district.

### **POPULATION**

In this study population refers to school boys.

### **SAMPLE**

School boys who were studying 10th standard.

### **SAMPLE SIZE**

The sample size selected for the study is 50

## SAMPLING TECHNIQUE

Convenience sampling technique was adopted in the study

## INCLUSION CRITERIA

- Boys who are willing to participate from 10th standard class.
- Boys who can speak and understand English and Tamil

## EXCLUSION CRITERIA

- Students of other classes except 10th standard classes
- The students who are not willing to participate in the study

## DEVELOPMENT OF TOOLS

This section consists of two sections.

**SECTION A** Demographic variable

**SECTION B:** Structured questionnaire which consists of 30 questions and each question carries '1' mark for correct answer. "0" mark for wrong answer.

## SCORING

SCORE	LEVEL OF KNOWLEDGE
21-30	Adequate Knowledge
11-20	Moderate Knowledge
BELOW 10	Inadequate Knowledge

## DATA COLLECTION PROCEDURE

- The need and purpose of the study was explained to the subjects.
- Informed consent was obtained.
- Pre-test was conducted by self-structured knowledge questionnaire.

- STP was provided
- Post-test assessment was done after a week.

## PLAN FOR DATA ANALYSIS

Data analysis was done by using both descriptive and inferential statistics .

## ETHICAL CONSIDERATION

- ❖ Prior permission was obtained from the Headmaster of selected schools in Tirunelveli district
- ❖ Written consent was obtained from the student before data collection.
- ❖ Tool was verified by experts before data collection
- ❖ Confidentiality and privacy were assured

## RESULTS AND FINDINGS OF THE STUDY

Distribution of sample according to the age of the respondents shows that 18% of respondents belongs to the age group between 12 to 14 years,82% of respondents belong to age group between 15 to 17 years, 0% of respondents belongs to the age group between 18 to 19 years and 0 % of respondents belongs to age group above19 years. Distribution of sample according to Religion shows that 48% of respondents belongs to the Hindu, 48% of respondents belongs to the Christian, 4% of respondents belongs to Muslim and 0% respondents to others. Distribution of sample according to Family type Shows that 76% of respondents belongs to the single-family type, 24% of respondents belongs to the join family type and 0% of respondents belongs to the extended family type. Distribution of sample according to Living Place shows that 20% of respondents belongs to the living place of urban, 78%of respondents belongs to the rural and 2% of respondents belongs to semi village. Distribution of sample according to Family monthly income shows that 56% of respondents belongs to family monthly incomebetween 5,000 to 10,000, 30% of respondents belongs to family monthly income between 11,000 to15,000, 4% of respondents belongs to family monthly income between 15,000 to 20,000 and 10% of respondents belongs to family monthly income above 20,000. Distribution of sample according to Father's occupation shows that 34% of respondents father's occupation is business,20% of respondents father's occupation is driver, 18% of respondents father's occupation is cooli and 28% of respondents father's occupation is other works. Distribution of sample according to Mother's occupation shows that 66% of respondents mother's occupation is Home maker, 6% of respondents mother's occupation is cooli, 4% of respondents mother's occupation is tailor and 24% of respondents mother's occupation is other works. Distribution of sample according to Previous knowledge shows that 84% of respondents

has previous knowledge and 16% of respondents does not have previous knowledge about effects of alcoholism and drug abuse. Distribution of sample according to source of knowledge shows that 36% of respondents source of knowledge is school, 8% of respondents source of knowledge is media, 40% of respondents source of knowledge is news and 16% of respondents has other source of knowledge.

### DISTRIBUTION OF SAMPLE ACCORDING TO LEVEL OF KNOWLEDGE OF PRE-TEST

Distribution of sample according to Level of knowledge of Pre-test shows that 44% of respondents has inadequate level of knowledge in pre-test, 56% of respondents has moderate pre-test level of knowledge in pre-test and 0% of respondents has adequate level of knowledge in pre-test.

Pre-test level of knowledge	No. of Respondents	Percentage
Inadequate	22	44 %
Moderate	28	56 %
Adequate	0	0%
Total	50	100%

### DISTRIBUTION OF SAMPLE ACCORDING TO LEVEL OF KNOWLEDGE OF POST-TEST

Post-test level of knowledge	No. of Respondents	Percentage
Inadequate	0	0 %
Moderate	16	32 %

<b>Adequate</b>	34	68%
<b>Total</b>	50	100%

Distribution of sample according to Level of knowledge of Post test that 0% of respondents has inadequate level of knowledge in post-test, 32% of respondents has moderate level of knowledge in post-test and 68% of respondents has adequate level of knowledge in post-test.

**COMPARISION OF PRE-TEST AND POST-TEST KNOWLEDGE**

Level of knowledge	Pre test		Post test	
	F	%	F	%
<b>Adequate knowledge</b>	0	0%	34	68 %
<b>Moderate knowledge</b>	28	56 %	16	32 %
<b>Inadequate knowledge</b>	22	44 %	0	0%

The above table shows that the comparison of pre-test and post-test knowledge about effects of alcoholism and drug abuse. On the aspect of pre-test knowledge regarding effects of alcoholism and drug abuse 0% of respondents had adequate knowledge, 56% of respondents had moderate knowledge level and 44% of respondents had Inadequate knowledge level. But in post-test 68 % of respondents had adequate knowledge, 32% of respondents had moderate knowledge level and 0% of respondents had Inadequate knowledge level.



**COMPARISION OF MEAN KNOWLEDGE REGARDING EFFECTS OF ALCOHOLISM AND DRUG ABUSE**

**Paired sample statistics**

	Mean	MD	Std.deviation	“t” value	Sig
Post test	22.94	10.96	3.25	22.06	P<0.005
Pre test	11.98		3.34		

The table shows that the comparison of pre-test and post-test knowledge level regarding effects of alcoholism and drug abuse. The mean score for pre-test and post-test was 11.94 and 22.94 respectively. There is significant improvement in mean knowledge of pre-test compared with post-test. The calculated “t” value 22.06 at the level of  $p < 0.005$ .

**ASSOCIATION BETWEEN THE KNOWLEDGE LEVEL REGARDING EFFECTS OF ALCOHOLISM AND DRUG ABUSE WITH THEIR SELECTED DEMOGRAPHIC VARIABLES**

There is no significant association between the selected demographic variable as Age, Religion, Family type, Living place, Family monthly income, Father’s occupation, Mother’s occupation, Previous knowledge, Source of knowledge.

**DISCUSSION**

**THE FIRST OBJECTIVE OF THIS STUDY WAS TO ASSESS THE PRE-TEST LEVEL OF KNOWLEDGE REGARDING EFFECTS OF ALCOHOLISM AND DRUG ABUSE AMONG SCHOOL BOYS IN SELECTED SCHOOLS AT TIRUNELVELI DISTRICT**

In the pre-test, 0% have adequate knowledge, 56% have moderately adequate knowledge, and 44% have inadequate knowledge before structured teaching programme.

The present study findings are supported by study of **Deva Pon Pushpam I (2022)**. The study report shows that 0% had adequate knowledge, 6% had moderately adequate knowledge, 94% had inadequate knowledge.

### **THE SECOND OBJECTIVE WAS TO ASSESS POST TEST LEVEL OF KNOWLEDGE REGARDING EFFECTS OF ALCOHOLISM AND DRUG ABUSE AMONG SCHOOL BOYS IN SELECTED SCHOOLS AT TIRUNELVELI DISTRICT**

After conducting structured teaching programme, in the post-test 34(68%) sample had adequate knowledge, 16(32%) sample had moderate knowledge and known has inadequate knowledge.

The present study findings are supported by study of **Mr. Vinoth Chandran. V (2017)**. In posttest 35(70%) had adequate knowledge, 15(30%) sample had moderate knowledge and known has inadequate knowledge.

### **THE THIRD OBJECTIVE WAS TO COMPARE THE PRE-TEST AND POST TEST LEVEL OF KNOWLEDGE REGARDING EFFECTS OF ALCOHOLISM AND DRUG ABUSE AMONG SCHOOL BOYS IN SELECTED SCHOOLS IN TIRUNELVELI DISTRICT**

The present study revealed that the pre-test knowledge level mean score is 11.98 is lower than the post-test knowledge level mean score 22.94. The obtained 't' values 22.06 is statistically significant  $p < 0.005$  level. So, hypothesis(H1) is accepted. It implies that the structured teaching programme had significant effect in improving the knowledge level of school student of 10<sup>th</sup> standard students regarding effects of alcoholism and drug abuse.

The present study findings are supported by study of **R. Snehalatha, M Bhagyalakshmi S Hemalatha (2017)**. The mean percentage of pretest was 15.40 and posttest is 24.08. The difference between the mean pretest and mean posttest knowledge score was found to be statistically significant table value  $t = 15.846$  which shows the structured teaching programme was effective in increasing the knowledge level of school student of 10 standard students regarding effects of alcoholism and drug abuse.

**THE FOURTH OBJECTIVE WAS TO FIND OUT THE ASSOCIATION BETWEEN THE PRE-TEST LEVEL OF KNOWLEDGE AND THE SELECTED DEMOGRAPHIC VARIABLES**

The results reveals that the paired 't' test value was 22.06. It shows that there is significant increasing the knowledge level after the structured teaching programme at the level of  $p < 0.005$ . The chi-square value shows that there is no significant association between the selected demographic variable as Age, Religion, Family type, Living place, Family monthly income, Father's occupation, Mother's occupation, Previous knowledge, Source of knowledge.

The present study is supported **Anju, Sathish Rjamani (2019)** The paired 't' test value is 12.571. It shows that there is significant increase in the knowledge after the planned teaching programme at the level of  $p < 0.05$ . The chi-square value test shows that there is no significant association between socio demographic variables and knowledge.

### **LIMITATION ;**

The study was limited only to C.C.M higher secondary school, Idaiyangudi

### **NURSING IMPLICATION**

### **NURSING EDUCATION**

Importance should be given to teach the students about the knowledge of effects of alcoholism and drug abuse. So that the students can improve their knowledge.

### **NURSING SERVICE**

The nurses have to conduct to health education programme in the school to create the knowledge about the effects of alcoholism and drug abuse.

### **NURSING RESEARCH**

The nurse researcher has to pay more attention in studies related to effects of alcoholism and drug abuse. The study was conducted in school involving a minimum sample of 50. Similar study can be done by using large sample and in community area also.

### **RECOMMENDATION**

- The similar study can be done by using large sample size.
- Other methods such as modules, video teaching programme can impart knowledge about effects of alcoholism and drug abuse.
- A comparative study can be carried out among school boys.
- This study can be conducted in village among men.

## CONCLUSION

The present study concluded that the pre-test knowledge level mean score is 11.98 is lower than the post-test knowledge level mean score 22.94. The obtained 't' values 22.06 is statistically significant  $p < 0.005$  level. So, hypothesis(H1) is accepted. It implies that the structured teaching programme had significant effect in improving the knowledge level of school student of 10<sup>th</sup> standard students regarding effects of alcoholism and drug abuse.

## BIBLIOGRAPHY

1. Anton RF, Moak DH, Latham PK, Waid LR, Myrick H, Voronin K. et al. (2005). Naltrexone combined with either cognitive behavioral or motivational enhancement therapy for alcohol dependence Journal of Clinical Psychopharmacology 25 4 349-357. [PubMed]
2. Anton RF, O'Malley SS, Ciraulo DA, Cisler RA, Couper D, Donovan DM. et al. (2006). Combined Pharmacotherapies and Behavioral Interventions for Alcohol Dependence: The Combine Study: A randomized clinical trial JAMA 295 17 2003-2017. [PubMed]
3. Anton RF, Oroszi G, O'Malley SS, Couper D, Swift R, Pettinati H. et al. (2008). An evaluation of  $\mu$ - opioid receptor (OPRM1) as a predictor of naltrexone response in the treatment of alcohol dependence: Results from the Combined Pharmacotherapies and Behavioral Interventions for Alcohol Dependence (Combine) study Archives of General Psychiatry 65 2 135-144. [PMC free article] [PubMed]
4. Babor, T. F., Higgins-Biddle, J. C., Saunders, J. B., & Monteiro, M. G. (2001). The Alcohol Use Disorders Identification Test: Guidelines for use in primary care (2nd ed.). Geneva, Switzerland: World Health Organization Department of Mental Health and Substance Abuse.
5. Balldin J, Berglund M, Borg S, Mansson M, Bendsten P, Franck J. et al. (2003). A 6- month controlled naltrexone study: Combined effect with cognitive behavioral therapy in outpatient



treatment of alcohol dependence Alcoholism: Clinical and Experimental Research 7 7 1142-1149.

[PubMed]

6. Bell H, Tallaksen CM, Try K, Haug E. (1994). Carbohydrate-deficient transferrin and other markers of high alcohol consumption: A study of 502 patients admitted consecutively to a medical department *Alcoholism: Clinical and Experimental Research* 18 5 1103-1108. [PubMed]
7. Besson J, Aeby F, Kasas A, Lehert P, Potgieter A. (1998). Combined efficacy of acamprosate and disulfiram in the treatment of alcoholism: A controlled study *Alcoholism: Clinical and Experimental Research* 22 3 573-579. [PubMed]
8. Bjornsson E, Nordlinder H, Olsson R. (2006). Clinical characteristics and prognostic markers in disulfiram-induced liver injury *Journal of Hepatology* 44 791-797. [PubMed]
9. Bohn MJ, Krahn DD, Staehler BA. (1995). Development and initial validation of a measure of drinking urges in abstinent alcoholics *Alcoholism: Clinical and Experimental Research* 19 3 600-606. [PubMed]
10. Bouza C, Magro A, Muñoz A, Amate JM. (2004). Efficacy and safety of naltrexone and acamprosate in the treatment of alcohol dependence: A systematic review *Addiction* 99 7 811-828. [PubMed]

## NET REFERENCES

1. <https://dx.doi.org/10>
2. <https://hdl.handle.net>
3. <http://www.lib.umn.edu/articles/proquest.phtml>

