Effectiveness of Structured Teaching Programme (STP) on Knowledge Regarding Cigarette Smoking and Its Selected Comorbid Psychiatric Disorders among College Students

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Abstract:

Tobacco is an agricultural product derived from the leaves of several species of Nicotina Plants. When combined with nicotina tartrate, tobacco becomes one of the most commonly abused recreational drugs. Nicotine, a naturally occurring stimulant in tobacco, can be poisonous if taken in sufficiently high doses, which is not the amount of nicotine absorbed by tobacco use. Nicotine is an addictive substance that makes the use feel alert at first, then relaxed with continued use. Harmful health effects of smoking cigarettes are numerous. Dangers of smoking are well-known and can have serious detrimental effect on the quality of your life besides diseases. Teenagers are attracted by the smoke and the smoking style, which tempts them to smoke. Friends and colleagues also encourage non-smokers, to smoke just once. Among young people, the short-term health consequences of smoking include respiratory and non-respiratory effects. The results showed that the overall knowledge score before and after structured teaching programme it gives the clear picture of the pretest and posttest mean and standard deviation. It shows that Pre test mean is 18.20 and standard deviation is 17.49 whereas Post test mean is 33.28 and standard deviation is 16.40 at 0.05 levels of significance. Result shows the value of paired t- test which is 36.12 at 0.05 levels of Significance. This indicates that the structured teaching programme was effective in increasing the knowledge on cigarette smoking and its selected comorbid psychiatric disorders among college students.

Keywords: structured teaching programme (STP), knowledge, cigarette smoking and its selected comorbid psychiatric disorders, college students.

INTRODUCTION

Cigarette Smoking which contains tobacco or cannabis, is the most common substance dependence seen in the population today. Smoking is a hard habit to break because tobacco contains nicotine, which is highly addictive. Cigarettes contain more than 4000 chemical compounds and at least 400 toxic substances. When you inhale, a cigarette burns at 700°C at the tip and around 60°C in the core. This heat breaks down the tobacco to produce various toxins. Research has shown that smoking reduces life expectancy by seven to eight years. Like heroin or other addictive drugs, the body and mind quickly become so used to the nicotine in cigarettes that a person needs to have it just to feel normal. People start

smoking for a variety of different reasons. Some think it looks cool. Others start because their family members or friends smoke. Statistics show that about 9 out of 10 tobacco user's start before they're 18 years old. In adults, cigarette smoking causes heart disease and stroke. Studies have shown that early signs of these diseases can be found in adolescents who smoke. The resting heart rates of young adult smokers are two to three beats per minute faster than non-smokers. Smoking generally has negative health effects, because smoke inhalation inherently poses challenges to various physiologic processes such as respiration. Smoking is one of the most common forms of recreational drug use. Tobacco smoking is the most popular form, being practiced by over one billion people globally, of who the majority are in the developing countries. Less common drugs for smoking include cannabis and opium. Some of the substances are classified as hard narcotics, like heroin, but the use of these is very limited as they are usually not commercially available. Other smoking includes pipes, cigars, bides, hookahs, and bongs.

OBJECTIVES:

1. To assess the pre test and post test knowledge of college students on cigarette smoking and comorbid psychiatric disorders.
2. To develop structured teaching programme (STP) regarding cigarette smoking and comorbid psychiatric disorders.
3. To evaluate the effectiveness of SIM on cigarette smoking and comorbid psychiatric disorders among college students.
4. To identify the association between pre test knowledge scores of college students with their selected socio demographic variables.

HYPOTHESIS:

H_1: There is a significant difference between pre-test and post-test knowledge scores of students regarding cigarette smoking and comorbid psychiatric disorders after intervention.

H_2: There is a significant association between pre test knowledge levels of college students with their selected socio-demographic variables.

METHODOLOGY: A pre-experimental (one group pre-test post-test design) study was conducted in selected nursing college in Bhopal MP among B.Sc. Nursing students; Sample size was 50 nursing students participated and non-probability purposive sampling technique was used. Pre test was conducted by using structured knowledge questionnaire. Data was collected by using socio-demographic, pre test -post test and data was analyzed through descriptive and inferential statistics (chi-square).The questionnaire was used after confirming the validity and reliability.

RESULT: The results showed that pre test and post-test level of knowledge on human rights of mentally ill among 3rd year B.Sc. nursing students. Before the administration of Self Instructional module, 87.50% of students had inadequate knowledge, 12.5.0% of them had moderate knowledge and none of them had adequate knowledge. After the administration of Self Instructional module on first human rights of mentally ill, none of them had inadequate knowledge, 32.5% of them had moderate knowledge and 67.5% of them had adequate knowledge.

FINDINGS RELATED TO SOCIO DEMOGRAPHIC VARIABLES OF NURSING STUDENTS

➢ Data indicates the distribution of respondents by age and gender. 15(30%) of participants belong to the age group of 16 -18 years, 35(70%) belong to age group of 19-21. It also indicates respondents on the basis of gender of the college students in which, 26 (52%) were male, 24 (48%) were female.

➢ Finding shows the percentage distribution of respondents on the basis of residence status and religion status. 27(54%) live in urban, 4(8%) live in sub urban and 19(38%) live in rural area. It also indicates that 48(96%) were Hindu, 1(2%) Muslim and 1(2%) were Christians.

➢ Data shows the percentage distribution of respondents on the basis of type of family and fathers occupation. It shows that 25(50%) of them live in joint family where as 24(48%) live in nuclear family and 1(2%) live in extended family. It also shows that 13(26%) of respondents fathers work as private employee, second 13(26%) respondents fathers work on daily wages and third 13(26%) are self employed. On the other hand 11(22%) of respondents fathers are government employee.

➢ Data shows the percentage distribution of respondents on the basis of mother's occupation and respondent's habit of smoking. Highest of them 36(72%) of respondents mothers are house wives whereas 6(12%) are government employee, 4(8%) work as private employee, 3(6%) are self employed and 1(2%) work on daily wages. Table also tells that 45(90%) of respondents have other habits whereas 4(8%) have habit of smoking and 1(2%) have habit of drinking alcohol.

➢ Finding shows the percentage distribution of respondent's friend's history of smoking habit and family history of smoking habit. Results shows that 34(68%) of respondents friends don't have habit of smoking, whereas 16(32%) of respondents friends have the habit of smoking. Table also shows 39(78%) of respondents don't have the family history of smoking habit, on the other hand 11(22%) of respondents has the family history of smoking.

➢ Data shows the percentage distribution of respondents on the basis of family income per month. It shows 26(52%) of respondents has family income above Rs. 50,000. On the other hand 19(38%) had family income between Rs. 30,000 to 50,001 and 5(10%) of respondents family income falls between Rs. 10,000 to 30,000.

EFFECTIVENESS OF SELF-INSTRUCTIONAL MODULE IN TERMS OF GAIN IN KNOWLEDGE SCORES:

	No. of students	Mean ± SD	Student's paired t-test
Pre test	50	10.20±4.86	t=24.61 P>0.05***
post test	50	21.28±2.03	significant

The findings revealed that third-year B.Sc. nursing students' pre- and post-test levels of Knowledge on cigarette smoking and comorbid psychiatric disorders. Before the STP was administered, 89% of students possessed insufficient knowledge, 11% possessed intermediate knowledge, and none possessed adequate knowledge. After receiving the structured teaching programme on the cigarette smoking and comorbid psychiatric disorders, none of them had knowledge gaps, 35% had moderate knowledge, and 60% had good knowledge on cigarette smoking and comorbid psychiatric disorders. The comparison of the overall knowledge score between the pretest and posttest shows the results. Pre-test average was 10.20 with a standard deviation of 4.86; post-test average was 21.28 with an SD of 2.03. There is large difference between pre test and post test knowledge score and it is statistically significant. Differences between pre test and post test score was analyzed using paired t-test and it was 24.61 which were found highly significant at 0.05 level.

ASSOCIATION BETWEEN PRE-TEST KNOWLEDGE SCORE WITH SELECTED DEMOGRAPHIC VARIABLES:

The finding showed that the association of level of pre-test knowledge with selected demographic variables. It is evident from the data that there is no significant association with the variable like age, gender ,religious status, type of family, fathers occupation, mothers occupation, family income and there is significant association with the residence status. Hence H2 - There will be no significant association between pre test knowledge scores of college students with selected demographic variables was proved.

CONCLUSION

Substance use disorders are comorbid with psychiatric disorders among adolescents and adults. The association between psychiatric and substance use disorders could result from three processes: psychiatric disorder causes substance use disorder; substance use disorder leads to psychiatric disorder; both are affected by common underlying factors. These hypotheses remain to be tested with regards to nicotine dependence (ND) in adolescence. Reciprocal influences between psychiatric disorders and ND in adolescence and early adulthood have rarely been investigated. Most studies have examined unidirectional influences from psychiatric disorder to ND. Because dependent smokers are most often compared with a combined group of non-dependent smokers and non-smokers, the role of psychiatric disorders in progression to ND among smokers is confounded with the role of disorders in smoking initiation. Furthermore, given comorbidity among psychiatric disorders, control for other disorders is essential for determining the unique impact of a psychiatric disorder and ND on each other.

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