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

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ABSTRACT

Substance dependence is also a type of psychiatric disorder, characterized by compulsive substance use and appearance of withdrawal symptoms when the substance is no longer used. Cigarette Smoking which contains tobacco or cannabis, is the most common substance dependence seen in the population today. There is neurobiological link between tobacco use and many psychiatric disorders. The finding revealed that the post test mean score was 33.28 with a standard deviation of 16.40 which was significantly higher than the mean pre test score 18.20 with a standard deviation of 17.49. The computed paired 't' value was 36.12 which was higher than table value 3.5004, which shows that the structured teaching programme on cigarette smoking and its selected comorbid psychiatric disorders was effective and statistically significant at P < 0.001 level. Chi square value shows significant ($P \le 0.05$) association with socio-demographic variables.

Keywords: Cigarette smoking; psychiatric disorders; knowledge; effectiveness.

INTRODUCTION

In face of the crosswinds of change ushered in by vast technological advancements, society at large is undergoing a tumultuous phase of restructuring. The effects of these changes are affecting every person in every walk of life. The felt need as expressed by various eminent social scientists, educationists, policy makers, politicians etc., is to bring about awareness on positive mental health and the methods and techniques that are required to be adopted to fulfill this need,1 and when these felt needs are not met it leads to unresolved internal and relational conflicts, have been posited as overall explanations of mental disorder.

The WHO in 2004 projected 58.8 million deaths to occur globally, from which 5.4 million are tobacco smoking-attributed, and 4.9 million as of 2007. As of 2002, 70% of the deaths are in developing countries. It is predicted that 1.5 to 1.9 billion people will be smokers in 2025.9 The World Health Organization (WHO) states that "many of the disease burden and premature mortality attributable to cigarette smoking, use disproportionately affect Of the 1.22 billion smokers, 1 billion of them live in developing or transitional economies. Rates of smoking have leveled off or declined in the developed



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world. In the developing world, tobacco consumption is rising by 3.4% per year as of 2002; however, this figure could just be as high as the population growth.

OBJECTIVES

- 1. To determine the level of pre-test knowledge of college students on cigarette smoking and comorbid psychiatric disorders.
- 2. To find the effectiveness of structured teaching programme on cigarette smoking and comorbid psychiatric disorders by comparing the pre- test and post-test scores.
- 3. To find out the association between knowledge score of college students with selected demographic variables.

METHODOLOGY

Pre-experimental one group pre and post test research design, active participated respondents were 50 students in selected college Bhopal. Data were collected using a structured teaching programme on cigarette smoking (2 sections) i.e. socio-demographic variables and structured knowledge questionnaire. Purposive sampling technique was used for subject selection. Descriptive and inferential statistics were adopted for the analysis and interpretation of the data.

FINDINGS AND DISCUSSION

Section-I: Description of demographic variables

- ❖ With respect to the age, 15(30%) of participants belong to the age group of 15 16 years, 35(70%) belong to age group of 17-18.
- ❖ With respect to gender, 26 (52%) were male, 24 (48%) were female.
- ❖ With respect to residence status, 27(54%) live in urban, 4(8%) live in sub urban and 19(38%) live in rural area.
- ❖ With respect to religion, 48(96%) were Hindu, 1(2%) Muslim and 1(2%) were Christians.
- ❖ With respect to type of family, 25(50%) of them live in joint family where as 24(48%) live in nuclear family and 1(2%) live in extended family.
- ❖ With respect to father's occupation, 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.
- ❖ With respect to mother's occupation, 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.
- ❖ With respect to respondents habit, 45(90%) of respondents have other habits whereas 4(8%) have habit of smoking and 1(2%) have habit of drinking alcohol.
- ❖ With respect to friends history of smoking, 34(68%) of respondents friends don't have habit of smoking, whereas 16(32%) of respondents friends have the habit of smoking.
- ❖ With respect to family history of smoking, 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.
- ❖ With respect to family income per month, 26(52%) of respondents has family income



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above Rs. 50,000. On the other hand 19(38%) had family income between Rs. 30,000 to 49,999 and 5(10%) of respondents family income falls between Rs. 10,000 to 29,999.

Section- II: Analysis of the effectiveness of structured teaching programme in terms of comparison of pre test and post test knowledge scores regarding cigarette smoking and its selected comorbid psychiatric disorders .by using "t" test.

	No. of students	Pre test Mean±SD	Post test Mean±SD	Student's paired t-test
Overall Knowledge Score	50	18.20	33.28	t=36.12 P=0.001
		± 17.49	±16.40	significant

^{***} p<0.05

The data in the table depicts that post test mean score was 33.28 with a standard deviation of 16.40 which was significantly higher than the mean pre-test score 18.20 with a standard deviation of 17.49. The computed paired 't' value was 36.12 which was higher than table value 3.5004, which shows that the structured teaching programme was effective at P < 0.001 level.

Section- III: Chi-square analysis to find out association between post test knowledge scores of college students regarding cigarette smoking and its selected comorbid psychiatric disorders with selected demographic variables.

The data shows the association of level of post-test knowledge with selected demographic variables. It is evident from the above table 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 significant association between post test knowledge scores of college students with selected demographic variables is proved.

CONCLUSION

Males and females with nicotine dependence had increased odds for alcohol and illicit drug disorders, major depression, and anxiety disorders, compared with nondependent smokers and nonsmokers combined. Major depression and any anxiety disorder were associated specifically with nicotine dependence. Mental illnesses are complex and their biological, social, and psychological etiologies vary; therefore, the reasons that mentally ill adult's smoke and the best approaches for cessation are accordingly multifaceted. In 2008, the US Public Health Service advised clinicians to overcome their reluctance to treat this population of smokers and suggested that recommended tobacco dependence treatments be used with broad populations of tobacco users, including those with psychiatric disorders and mental illness. Available research suggests that current smoking cessation management approaches be flexible and consider the unique needs of this population, and be implemented when psychiatric symptoms are not severe46 may be successful in promoting smoking abstinence.



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