

A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge Regarding Ill Effects Alcoholism Among Adolescents in Selected Schools of Ghaziabad

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ABSTRACT

Background: Alcoholism among adolescents is an escalating public health concern in India, significantly affecting their physical, psychological, and social well-being. Adolescents are more vulnerable to alcohol use due to developmental factors, peer pressure, and lack of awareness about its ill effects.

Objectives: To evaluate the effectiveness of structured teaching programme on knowledge regarding ill effects alcoholism among adolescents in selected schools of Ghaziabad

Methods: A pre-experimental one-group pre-test post-test design was adopted for the study. A total of 60 adolescents from Nagar Nigam Balika Inter College, Sihani, Ghaziabad were selected through purposive sampling. A structured knowledge questionnaire was used for data collection before and after the intervention. Data were analyzed using descriptive and inferential statistics, including paired t-tests and chi-square tests.

Results: The findings showed a statistically significant improvement in knowledge scores post-intervention. The Structured Teaching Programme was found to be effective in increasing awareness and understanding regarding the ill effects of alcoholism among adolescents.

Conclusion: Structured educational interventions such as STPs are effective tools in promoting adolescent awareness about alcoholism. The study highlights the need for incorporating such programs in school curricula to empower students with the knowledge required to resist peer pressure and make informed choices.

Keywords: Alcoholism, Adolescents, Knowledge, Ill Effects, Structured Teaching Programme, Awareness, Prevention

1. INTRODUCTION

Alcoholism, or alcohol use disorder (AUD), is a growing concern among adolescents, significantly impacting their physical, mental, and social well-being. Adolescence is a developmental phase characterized by experimentation and risk-taking behavior, making teenagers particularly vulnerable to alcohol consumption. Additionally, many adolescents lack the physiological tolerance for alcohol, leading to higher risks of intoxication, impaired decision-making, and risky behaviors such as unprotected sex and

drunk driving.

Adolescence is a critical developmental stage where individuals are more susceptible to alcohol addiction due to biological, psychological, and social factors. The adolescent brain is still developing, and exposure to alcohol during this period can cause long-term cognitive and behavioral issues. Schools play a crucial role in educating adolescents about the risks associated with alcohol consumption. Since most adolescents spend a significant portion of their day in school, it serves as an ideal environment for awareness programs aimed at preventing alcohol abuse. Studies indicate that school-based interventions that include interactive discussions, peer education, and curriculum based programs significantly reduce underage drinking rates. These initiatives not only provide students with factual knowledge about alcohol's harmful effects but also help in developing critical thinking skills to resist peer pressure and make informed choices.

1.1 OBJECTIVES

- To assess pretest knowledge regarding ill effects of alcoholism among adolescents in selected school.
- To find the effectiveness of planned teaching programme on regarding ill effects alcoholism among adolescents in terms of gain in knowledge scores.
- To find the association between pre-test knowledge and selected demographic variables of adolescence.

1.2. HYPOTHESES

All hypotheses will be tested at 0.05 level of significance

- H1 : There will be significant difference between the mean pre test and post test knowledge scores on ill effects of alcoholism among the adolescents.
- H2 : There will be significant association between the pretest knowledge score and the selected baseline characteristics (age, gender, academic scores, place of stay, part time job)

1.3. CONCEPTUAL FRAMWORK

The Von Bertalanffy System Model provides a comprehensive framework for examining the efficacy of a structured teaching program on alcoholism awareness among adolescents in selected schools in Ghaziabad, U.P. Through this model, inputs such as curriculum materials and demographic data are processed during implementation to deliver educational content, engage students, and facilitate discussions on alcohol's ill effects (throughput). The output stage involves assessing changes in adolescents' knowledge, attitudes, and behaviors regarding alcohol consumption, while ongoing feedback mechanisms inform program adjustments. By utilizing this systemic approach, researchers can gain insights into the interconnected components of the intervention, ultimately enhancing alcohol education initiatives for adolescents in the region

2. RESEARCH METHODOLOGY

The research design used for the present study was one group pretest post test design which a pre-experimental research design is used to measure the effectiveness of structured teaching programme on knowledge regarding Of alcoholism and its ill effects among the adolescents. The research design used in the study was pretest –post test design to determine the effectiveness of structured teaching programme on knowledge regarding Of alcoholism and its ill effects among the adolescents.

2.1. SAMPLE:

Sample Size : The sample size for this study was 60 Higher Secondary school student .

2.2 CRITERIA FOR SELECTION

- Age group between 13 to 18years. – Adolescents studying in IX, X, XI and XII standards. –

- Those who are willing to participate in the study. ▯

2.3 EXCLUSION CRITERIA

- Sample who having psychological problem
- Sample who were not willing to participate in study

2.4. RESEARCH DESIGN

A pre –experimental one group pre – test post –test design was employed.

2.5.SETTING AND POPULATION

The study was conducted among higher secondary school students (aged 13-18 years) in selected schools of Delhi NCR.

2.6 SAMPLE AND SAMPLING TECHNIQUE

Purposive sampling was used to select the sample {N = as per thesis}.

2.7.INCLUSION CRITERIA

Age group between 13 to 18years

- Adolescents studying in IX, X, XI and XII standards
- Those who are willing to participate in the study.

2.8 TOOLS : -Structured Knowledge Questionnaire on substance abuse

- Attitude Scale (Likert -based)

Both tools were validated and found reliable during pilot testing

2.9. INTERVENTION

A Structured Teaching Programme (STP) covering :

- The definition and stages of alcohol dependence
- Nutritional value and toxic effects of alcohol
- Organ-specific complications (liver, cardiovascular, nervous system, etc.)
- Psychiatric implications (e.g., Korsakoff's psychosis, hallucinations)
- Withdrawal symptoms
- Preventive measures and public health perspectives

2.10 .DATA COLLECTION PROCEDURE

- Pre –test determined
- STP delivered
- Post _ - test conducted after intervention

2.11. DATA ANALYSIS

SPSS was used for analysis

- Descriptive statistics : frequency , percentage , mean , SD
- Inferential statistics : paired t _test , chi –square , significance level : $p < 0.05$.

3. RESULTS

3.1. DEMOGRAPHIC CHARACTERSTICS

Students belonged to diverse age groups, family backgrounds , and socio –economic categories.

Frequency and percentage distribution of demographic variables among higher secondary

S.No	Variables	Categories	Frequency (f)	Percentage (%)
1	Age (in years)	15 years	11	18.33%
		16 years	13	21.67%
		17 years	18	30.00%
		18 years	18	30.00%
2	Gender	Male	29	48.33%
		Female	31	51.67%
3	Academic Year	9th Class	11	18.33%
		10th Class	17	28.33%
		11th Class	13	21.67%
		12th Class	19	31.67%
4	Area of Living	Urban	27	45.00%
		Rural	19	31.67%
		Semi-urban	11	18.33%
		Others	3	5.00%
5	Type of Family	Nuclear	33	55.00%
		Joint	15	25.00%
		Extended	8	13.33%
		Single Parent	4	6.67%
	Qualification	Primary	9	15.00%
		Secondary	18	30.00%
		Graduate and above	27	45.00%
7	Mother's Educational Qualification	Illiterate	7	11.67%
		Primary	11	18.33%
		Secondary	21	35.00%
		Graduate and above	21	35.00%
8	Father's Occupation	Government Job	13	21.67%
		Private Job	24	40.00%
		Self-employed	17	28.33%
		Unemployed	6	10.00%

3.2. KNOWLEDGE SCORES

Mean pre –test knowledge scores were significantly lower than post –test scores .

Pre – test : lower to moderate knowledge

Post –test : significant improvement

Comparison of Pre-Test and Post-Test Knowledge Levels Among Adolescents (N = 60)

Level of Knowledge	Pre-Test (f/%)	Post-Test (f/%)
Inadequate Knowledge	35 (58.33%)	3 (5.00%)
Moderately Adequate	19 (31.67%)	17 (28.33%)
Adequate Knowledge	6 (10.00%)	40 (66.67%)

Paired t –test indicated a statistically significantly difference ($p < 0.05$). indicating that STP was effective.

3.3. ASSOCIATION WITH DEMOGRAPHIC VARIABLES

The chi-square test was applied to identify the relationship between knowledge level and socio-demographic characteristics such as age, gender, academic year, area of living, type of family, and parental education and occupation.

These results indicate that :

- Respondents whose fathers had higher education or were employed in government jobs were more likely to have a favorable attitude toward resisting substance use.
- Additionally, exposure to family member influence regarding tobacco, alcohol, or drugs had a strong effect on shaping respondents attitudes , with those from such families showing more neutral or unfavorabl attitudes.

4. DISCUSSION

The findings of this study clearly demonstrate that adolescent students initially had inadequate knowledge regarding the ill effects of alcoholism. A significant percentage of students scored low on pre-test assessments, indicating major gaps in understanding related to physical, psychological, and social consequences of alcohol abuse. Following the implementation of the structured teaching programme, there was a substantial improvement in post-test knowledge scores. The mean knowledge score rose from 12.93 to 21.36, and the increase was statistically significant ($p < 0.001$). The number of students with adequate knowledge rose from just 10% to 66.67%, proving the effectiveness of the intervention’

5. CONCLUSION

The study also revealed that demographic factors such as academic year, father’s education, and father’s occupation were significantly associated with pre 88 test knowledge levels. This suggests that both academic exposure and socio economic background play a role in shaping awareness. The study highlights the importance of early, structured, and age-appropriate educational interventions to promote awareness and healthy decision-making among adolescents regarding alcohol use. These findings emphasize the need for integrating structured teaching programmes within school health education to reduce alcohol-related risks among youth.

6. IMPLICATIONS OF THE STUDY

6.1. Nursing Education

Nursing students should be trained in designing and delivering school based structured teaching programmes.

6.2. Nursing Practice

Community health nurses should actively conduct health awareness programs in schools focusing on substance abuse prevention.

6.3. Nursing Administration

Nursing administrators should establish school outreach units for regular adolescent health promotion.

6.4. Nursing Research

The study provides a foundation for longitudinal research on behavioral changes post-education.

7. Recommendations

1. The study can be replicated on a larger and more diverse sample across multiple districts and school types to enhance generalizability.
2. A true experimental design with control and intervention groups can be used for stronger comparison and validation.
3. Long-term follow-up studies can be conducted to evaluate the retention of knowledge and observe behavioral changes among adolescents.
4. The structured teaching programme can be integrated into the regular school health curriculum to reach a broader student population.
5. E-learning modules or mobile apps can be developed for adolescents to improve accessibility and interactive engagement.

8. LIMITATIONS

The study was limited to one geographical area (Ghaziabad), affecting generalizability. The sample size was small (n=60), which may reduce the statistical power of the findings.

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