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### Effectiveness of community based intervention program on knowledge and attitude regarding health effects of selected substance abuse among adolescents

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#### **Abstract**

In our throughout life adolescence is known as turbulent period. The making of transition from the world of childhood life to adult life, the charming adolescents face many opportunities and challenges, including the physiological and psychological change because of puberty, cognitive changes, identity role confusion, conflicting demands from the parents, teachers and peers, and negotiating first romantic relationships. The aim of the study was to assess the effectiveness of community based intervention program on knowledge and attitude regarding health effects of selected substance abuse among adolescents. A Pre experimental one group pretest and posttest design was used to conduct the study. The study was done on 30 samples selected by non-probability purposive sampling technique from selected construction areas at Kanchipuram District. The data was collected through structured questionnaire and likert scale. The data was analysed using descriptive and inferential statistics. The tool was organized in three parts (demographic variables, structured questionnaire and likert scale). After obtaining the permission from the concerned authorities, the data was collected. The findings of the study concluded that in knowledge posttest almost 22(73.3%) of them had adequate knowledge, 8(26.7%) of them had moderately adequate knowledge and none of them had inadequate knowledge regarding health effects of selected substance abuse. In attitude post test, 23(76.7%) adolescents having favorable attitude, 7(23.3%) having moderately favorable attitude and none of them having unfavorable attitude regarding health effects of selected substance abuse.

Keywords: Knowledge and attitude regarding health effects selected substance abuse, adolescents

#### Introduction

Adolescence is a vulnerable phase which is associated with a sensitive risk for the progress of depressive disorders. Risk- behaviours like alcohol or substance abuse, excessive exploit of media, poor education status and lack of sleep are also habitually occurring during this phase, it is often suggested that such behaviors may be allied with mental health problems. Approximately 90% of the adults who abuse for the foremost time are adolescents.

According to National Commission for Protection of Child Rights (2020), the common drug abuse among children and adolescents are tobacco and alcohol, followed by inhalants and cannabis. The mean age of commencement was lowest for tobacco (12.3 years), followed by onset of inhalants (12.4 years), cannabis (13.4 years), alcohol (13.6 years), proceeding then to the abuse of harder substances like opium, pharmaceutical opioids, heroin (14.3–14.9 years) and then substances through injecting route (15.1 years).

According to National Institute on Drug Abuse report, (2018) emphasis on community based prevention program for adolescents with poor school achievement and a potential for not completing their education. Participants may also show signs of multiple problem behaviours, such as substance abuse, depression, aggression, or suicidal behaviours. Students are screened for eligibility and then invited to participate in the program. The main aim of the program was to reduce drug use, Skills to manage mood and emotions. The program influences positive peer bonding, skills training.

#### **Statement of Problem**

A study to assess the effectiveness of community-based intervention program on knowledge and attitude regarding health effects of selected substance abuse among adolescents in selected area at Kanchipuram district.

#### **Objectives**

- To assess the pretest and posttest level of knowledge and attitude regarding health effects of selected substance abuse among adolescents.
- To find out the effectiveness of community-based intervention program on knowledge and attitude regarding health effects of selected substance abuse among adolescents.
- To associate the posttest level of knowledge and attitude regarding health effects of selected substance abuse among adolescents with the selected demographic variables.

#### **Hypothesis**

- H1: There is a significant difference in pre-test and post test level of knowledge and attitude on health effects of selected substance abuse after community-based intervention program
- H2: There is a significant association between the post test level of knowledge and attitude on health effects of selected substance abuse with their selected demographic variables.

#### Methodology

Quantitative research approach was adopted for the study. A Pre experimental one group pretest and posttest was used to conduct the study. The study was done on 30 samples selected by non-probability purposive sampling technique from selected construction areas at Kanchipuram District. The sampling criterion includes adolescents who were all working in the construction sites at selected areas of Kanchipuram District, willing to participate in the study and belonged to the age group of 14-19 years. The data was collected through structured questionnaire and likert scale. Before collecting the data formal permission was obtained from the concerned authority by explaining the purpose and objectives of the study. After the permission, verbal consent was obtained from individual sample. Each day about 10 adolescents with selected substance abuse were assessed on the level of knowledge and attitude regarding health effects of selected substance abuse. A pretest was conducted followed by community based intervention program. Followed by psycho drama performed by the adolescents with substance abuse, regarding social adjustment (how to Stay positive without tobacco, communicate productively and maintain healthy relationship, through psycho drama) to overcome the selected substance abuse. Daily follow up will be done by daily visits and also confirmed through telephonic conversation. A post test assessment was conducted after ten days in the form of structured questionnaire and Likert attitude scale after one month.

#### **Results and Discussion**

The data collected was analyzed using descriptive and inferential statistics. The demographic variables of adolescents with substance abuse showed 5(16.7%) were in the age group of 14-15 years, 10(33.3%) were in the age group of 16 - 17 years and 15(50.0%) were in the age group of 18 - 19 years. Related to their gender 22(73.3%) were Male, and 8(26.7%) were Female.

In accordance with marital status of adolescents with selected substance abuse 17(56.7%) were single, 10(33.3%) were married, none of them were widow and 3(10.0%) were separated. In regards to religion 21(70.0%) belongs to

Hindu, 4(13.3%) belongs to Muslim, 5(16.7%) belongs to Christian and none of them comes under others. With regard to education status of adolescents with selected substance abuse, 7(23.3%) had non formal education, 7(23.3%) had primary education, 12(40.0%) had secondary education, 4(13.37%) had higher secondary education.

Regarding occupation of the adolescents with selected substance abuse 14(46.7%) were construction workers, 4(13.3) were working as crane operator, 2(6.7%) were working as plumber, 2(6.7%) were working as carpenter, 3(10.0%) were working as painter and 5(16.7%) were working as electrician. Considering the income per month of adolescents with selected substance abuse, none of them were getting less than Rs. 3000, 13(43.3%) were getting Rs. 3001 – Rs. 5,000, 17(56.7%) were getting Rs. 5,000- Rs. 10000, and none of them getting above Rs.10,000.

Considering dietary pattern of adolescents with selected substance abuse, 5(16.7%) adolescents were having vegetarian food and 25(83.3%) adolescents were having non-vegetarian food. Regarding type of family in adolescents with selected substance abuse, 12(40.0%) were living as nuclear family, 13(43.3%) were living as joint family, 5(16.7%) were living as single parent family and none of them living as step family. Related to living status of adolescents with selected substance abuse, 20(66.7%) were residing with parents, 3(10.0%) adolescents were living with guardian, 5(16.7%) adolescents were living in orphanage and 2(6.7%) were living in destitute home.

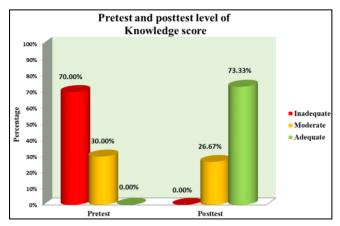
Regarding the duration of substance abuse among adolescents with selected substance abuse 11(36.7%) adolescents were abusing selected substances for less than one year, 12(40.0%) adolescents were abusing selected substances for 1-2 years and 7(23.3%) were abusing selected substances for more than two years. Regarding number of substance abuser in the family among adolescents with selected substance abuse 9(30.0%) were none substance abuser in the family, 14(46.7%) were one substance abuser in the family, 2(6.7%) were two substance abuser in the family and 3(16.7%) were more than two substance abusers in the family.

Considering friends with substance abuse among adolescents with selected substance abuse 20(66.7%) adolescents were having friend's with substance abuse and 10(33.3%) adolescents were not having friend's with substance abuse. Regarding number of friend's with substance abuse 6(30.0%) were having one friend with substance abuse, 6(30.0%) were having two friends with substance abuse and 8(40.0%) were having more than two friends with substance abuse. In accordance to good hobbies among adolescents with selected substance abuse 16(53.3%) adolescents having good hobbies and 14(46.7%) not having the good hobbies.

## The first objective was to assess the pre test level and posttest level of knowledge and attitude regarding health effects of selected substance abuse among adolescents.

In pretest 21(70%) had inadequate knowledge and 9(30%) of them had moderately adequate knowledge and none of them had adequate knowledge In pretest, 22(73.3%) adolescents having unfavorable attitude regarding health effects of selected substance abuse, 8(26.7%) having moderately favorable attitude regarding health effects of selected substance abuse and none of them having favorable attitude regarding health effects of selected substance abuse.

In pretest 21(70%) had inadequate knowledge and 9(30%) of them had moderately adequate knowledge and none of them had adequate knowledge In pretest, 22(73.3%) adolescents having unfavorable attitude regarding health effects of selected substance abuse, 8(26.7%) having moderately favorable attitude regarding health effects of selected substance abuse and none of them having favorable attitude regarding health effects of selected substance abuse. In posttest almost 22(73.3%) of them had adequate knowledge, 8(26.7%) of them had moderately adequate knowledge and none of them had inadequate knowledge. Where as in post test, 23(76.7%) adolescents having favorable attitude regarding health effects of selected substance abuse, 7(23.3%) having moderately favorable attitude regarding health effects of selected substance abuse and none of them having unfavorable attitude regarding health effects of selected substance abuse.



**Fig 1:** Frequency and percentage distribution of pre test and posttest level of knowledge among adolescents with selected substance abuse

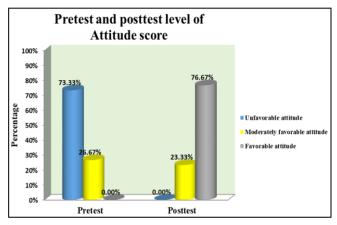


Fig 2: Frequency and percentage distribution of pre test and posttest level of attitude among adolescents with selected substance abuse

#### The second objective was to find out the effectiveness of community based intervention program on knowledge and attitude regarding health effects of selected substance abuse.

In the paired 't' test value of knowledge was 20.69 highly significant at the level of p<0.001. Thus it indicates the effectiveness of community based intervention program and level of knowledge regarding health effects of selected substance abuse. Analysis revealed that the paired 't' test value of attitude regarding health effects of selected substance abuse at 21.92 was very highly significant at p<0.001 level. It indicates the effectiveness of community based intervention program on improved in the attitude among adolescents with selected substance abuse.

#### The third objective was to associate the posttest level of knowledge and attitude regarding health effects of selected substance abuse among adolescents.

1. In the post test level of knowledge and attitude there was a significant association of the level of knowledge and attitude regarding health effects of selected substance abuse among adolescents with their demographic variables. With regard to the age chi square value of 8.87 was significantly associated with posttest level of knowledge at the interval of *p*<0.001. With regard to the sex chi square value of 7.16 was significantly associated with posttest level of knowledge at the interval of *p*<0.001. With regard to friend's with substance abuse chi square value of 4.17

- was significantly associated with posttest level of knowledge at the interval of p<0.05.
- 2. In the posttest level of attitude among adolescents with selected substance abuse with their demographic variables. With regard to the age chi square value of 6.33 was significantly associated with posttest level of attitude at the interval of p<0.05. With regard to the sex chi square value of 4.34 was significantly associated with posttest level of attitude at the interval of p<0.05. With regard to living status abuse chi square value of 6.62 was significantly associated with posttest level of attitude at the interval of p<0.05.

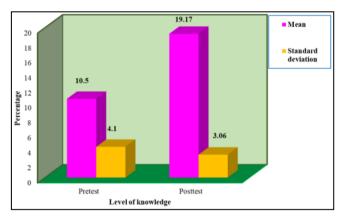
**Table 1:** Comparison of mean and standard deviation between pre test and posttest level of knowledge regarding health effects of selected substance abuse among adolescents.

Assessment	Mean	Standard deviation	Mean difference	Paired 't' test
Pretest	10.50	4.10		t=20.69
Posttest	19.17	3.06	8.67	p=0.001 *** DF=29, Significant

<sup>\*\*\*</sup>p \le 0.001 very high significant DF = Degrees of Freedom

Table 1 depicts the comparison of mean and standard deviation between pretest and posttest level of knowledge regarding health effects of selected substance abuse among adolescents. The mean score was increased from 10.50 to 19.17 which showed a marked difference of 8.67 and the standard deviation was decreased from 4.10 to 3.06

following the community based intervention program. The paired 't' test value of 20.69, was very highly significant at p<0.001 level. It indicates the effectiveness of community based intervention program on increasing the level of knowledge regarding health effects of selected substance abuse among adolescents.

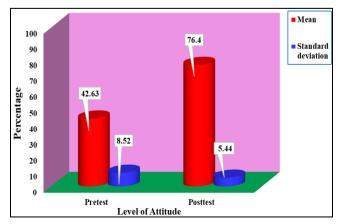


**Fig 3:** Comparison of mean and standard deviation between pre test and posttest level of knowledge regarding health effects of selected substance abuse among adolescents.

**Table 2:** Comparison of mean and standard deviation between pre test and posttest level of attitude regarding health effects of selected substance abuse among adolescents.

Assessment	Mean	Standard deviation	Mean difference	Paired 't' test
Pretest	42.63	8.52	33.77	t = 21.92
Posttest	76.40	5.44		p=0.001 *** DF=29, Significant

Table 2 depicts the comparison of mean and standard deviation between pretest and posttest level of attitude regarding health effects of selected substance abuse among adolescents. The mean score was increased from 42.63 to 76.40 which showed a marked difference of 33.77 and the standard deviation was decreased from 8.520 to 5.44 following the community based intervention program. The paired the test value of 21.92, was very highly significant at p<0.001 level. It indicates the effectiveness of community based intervention program on increasing the level of attitude regarding health effects of selected substance abuse among adolescents.



**Fig 4:** Comparison of mean and standard deviation between pre test and posttest level of attitude regarding health effects of selected substance abuse among adolescents.

#### Conclusion

The present study was conducted to assess the effectiveness of community based intervention program on knowledge and attitude regarding health effects of selected substance abuse among adolescents. The study findings showed that there was an increase in the level of knowledge and favorable attitude regarding health effects of selected substance abuse.

#### **Conflict of Interest**

Not available

#### **Financial Support**

Not available

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#### **How to Cite This Article**

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