Asian Pacific Journal of Nursing

APJN

A DESCRIPTIVE STUDY TO ASSESS THE KNOWLEDGE AND ATTITUDE REGARDING THE ILL EFFECTS OF SMOKING AMONG HIGHER SECONDARY SCHOOL STUDENTS AT SELECTED HIGHER SECONDARY SCHOOL IN JAMMU-2015

J.C.Frank[1*] and Deva Pon Pushpam.I[2]

[1]Assistant Professor, Bee Enn College of Nursing, Jammu, India.
[2]Nursing Tutor, Bee Enn College of Nursing, Jammu, India.

ABSTRACT

Smoking is one of the habit which is affecting the people commonly nowadays, that too it is common in adolescents. Like poverty, smoking also does not appear on death certificate. In an initial estimate of factors responsible for the global burden of disease, tobacco contributed to 6% of deaths worldwide. The global youth tobacco survey (GYTS) was developed by World Health Organization (WHO) to track tobacco use among young people. The GYTS survey conducted in the year 2003 in about 95 schools of India revealed that 1 in 10 (9.5 %) of students in India in the age group of 13-15 years have smoking cigarette practice. According to CDC (2003), currently over 3 million youth smoke and approximately 4400 youth try their first cigarette every day. This study investigated the knowledge and attitude of the higher secondary school students regarding ill effects of smoking. The research design selected for this study was descriptive design. Subject selection employed a purposive sampling technique. Subjects meeting the inclusion criteria were chosen. Data were analyzed and interpreted by using descriptive and inferential statistics. This study was conducted among 50 students at Govt. Boys higher secondary school, Seripanditan. The findings showed that the majority 29 (58%) of the students had inadequate level of knowledge and 21 (42%) students had moderate level of knowledge regarding ill effects of smoking. The attitude questionnaire revealed that 3 (6%) had positive attitude, 12 (24%) had neutral attitude and 35 (70%) had negative attitude. There was no association between demographic variables.

Key words: Knowledge, Attitude, ill effect, Smoking, Higher secondary students.

INTRODUCTION

India is home for one sixth of global population. Currently about one fifth of all worldwide death attributed to tobacco occur in India. More than 8 lakh people die and 12 million people become ill as a result of tobacco every year. The deaths attributable of tobacco in India are expected to rise from 1.4% of all deaths in 1990 to 13.5% in 2020. The global youth tobacco survey (GYTS) in 2003 reported that of the ever smokers in India, 48.6% initiated before 10 years of age. Nowadays adolescents are more prone to so many environments that influence them for smoking habit and also they are not aware of the risk taking behaviors. Estimated 12–20 million people smoke, in that 30 to 50 % of all high school students had made cigarette as one part of their life. Experience in developed country indicates that drug dependence reached a peak in their age group of 12 to 20 years and the problem is less among girls. In addition to all the medical evidence proving that one who smokes is slowly killing him. There is enough evidence proving that the smoke he/she exhales is harmful and potentially fatal to those inhaling it as second hand smoke [1-3].

REVIEW OF LITERATURE:

Dayana Angel (2011) conducted a descriptive study on knowledge, attitude and practice regarding smoking and alcoholism among school children in Madurai, Tamilnadu. 100 higher secondary school students were selected through purposive sampling technique. There was a significant association between knowledge and selected demographic variables like socio economic status and smoking practiced by their parents.

Utalbasha. N. Dhandargi, (2008) conducted a study to assess the effectiveness of street play in increasing the knowledge and attitude of adolescent boys regarding smoking. The research approach was pre experimental, one group pre test post test design. 50 young adults were selected by simple random sampling technique. The reliability of tool was established by split half method and the r value was found to be 0.89. It clearly demonstrates that the mean of overall knowledge score in pre test was 19.4 and post test was 28.6. No significant association was found between post test knowledge and demographic variables.

Selvaraj, (2007) conducted a study to assess the knowledge and attitude of smoking among school students. The research design was descriptive survey design. The sample size was 100 male students. The tool was prepared under three main areas namely physical problems, psychological problems and social problems. The study showed that the awareness of the students was moderate 68%. The students were moderately aware of physical problem (56%). 53% of them were adequately aware of psychological problems. Students had adequate awareness of social problem (66%). The study showed that 53% of the students got information about smoking through media. There was a significant association between the level of awareness and source of information (P<0.05).

OBJECTIVES:

1. To assess the level of knowledge and attitude of adolescents on ill effects of smoking.
2. To identify the relationship between the level of knowledge and the attitude on ill effects of smoking among adolescents.
3. To associate the level of knowledge and attitude of adolescents on ill effects of smoking with the selected demographic variables.

HYPOTHESIS

H1: There will be a significant correlation between the level of knowledge and attitude on ill effects of smoking among adolescents.
H2: There will be a significant association between the level of knowledge and attitude on ill effects of smoking with the selected demographic variables of the adolescents.

ASSUMPTIONS

1. Adolescent boys will have inadequate knowledge regarding ill effects of smoking.

2. The knowledge and attitude of adolescent boys regarding ill effects of smoking will vary according to the socio demographic factors [4-6].

MATERIALS AND METHODS:
Research approach:
Quantitative Approach was used for this study.
Research Design:
A Descriptive research design was adopted for this study.
Target population:
The target population for this study was the Higher Secondary school students.
Research setting:
The study was conducted at Government boys' Higher secondary school, Seri Panditan, Jammu.
Sampling technique:
The purposive sampling technique was used to select 50 students.

CRITERIA FOR SAMPLE SELECTION:
INCLUSION CRITERIA
Adolescent boys who were
- Within 14 – 20 years of age.
- Present during the data collection period
- Able to read Hindi or english.
EXCLUSION CRITERIA
- Not willing to participate in the study.
DESCRIPTION OF THE TOOL
The structured instrument has three parts.
Part – I
This includes demographic variables such as age, religion, education, occupation, monthly income, type of family, place of residence, source of information, substance abuser in the family, any habit of smoking, aspects of adolescents on education of smoking.
Part - II
Closed ended questionnaire to assess the knowledge on smoking among adolescents. It consists of 20 questions.

Part – III
It consists of Likert type attitude scale to assess the attitude regarding ill effects of smoking among school students. It consists of 10 statements with 3-point scale.

SCORING PROCEDURE:
Part II:
There were 20 items pertaining to the knowledge of adolescents on smoking. Each item had 4 responses with only one correct answer. The score for the correct response to each item is 'one' and for wrong response 'Zero'. The level of knowledge was categorized based on the percentage of score obtained. Maximum score was 20 [7-10].

The knowledge score interpreted in percentage is as follows,

Adequate knowledge: 76 – 100%
Moderate knowledge: 51- 75%
Inadequate knowledge: 0 – 50%

Part III:

It includes statements on attitude among adolescents regarding smoking. There are totally 10 statements. The items will be measured on a 3 point Likert scale from agree to disagree. The maximum score for measuring attitude of students was 20.

Attitude score was interpreted as

	Agree	Uncertain	Disagree
Positive statement	2	1	0
Negative statement	0	1	2

The attitude score was interpreted as
76 - 100% - Positive attitude
51 – 75% - Neutral attitude
0 – 50 % - Negative attitude

VARIABLES:
Demographic Variables

In the present study the demographic variables include Age, Residence, Religion, Father's and Mother's Education, Father's and Mother's Occupation, income, habits of smoking, family history of smoking, mass media used for warning effects of cigarette, type of family and family income per month.

Research Variables

The research variables of the present study are knowledge and attitude of ill effects of smoking among high school students.

PILOT STUDY

The pilot study was conducted at Govt.higher secondary school at Kot Bhalwal among 10 adolescent boys. Anonymity and confidentiality was maintained while collecting information. Structured Questionnaire was used to assess the knowledge and attitude on smoking. The method of organizing data, analysis method, statistical test to be employed and presentation of data were formulated. The feasibility with regards to the availability of sample, cooperation of respondents and accessibility of setting was established. The time taken to complete the questionnaire was found to be satisfactory in terms of simplicity and clarity. The pilot study helped the investigator to confirm the feasibility of carrying out the main study.

VALIDITY AND RELIABILITY OF THE TOOL

The content validity of the tool was obtained from experts. Reliability of the tool was elicited by Split Half method(r=0.82) which was positively correlated. Therefore, the instrument was found to be reliable.

DATA COLLECTION PROCEDURE

Data was collected for a period of six days. Data collection was done on separate days for the various classes. Purpose of the study was explained to the concerned authorities of the school. The headmaster of the school and the class teachers of the respective classes were approached by the investigator. An initial rapport was established with the adolescents and the purpose of the study was explained to them. A convenient time and date was fixed and informed to the participants to gather in the classroom. Questionnaire was distributed. A time limit of 30 minutes was given to complete the questionnaire.

PROTECTION OF HUMAN RIGHTS

Ethical considerations were taken in to account for the purpose of the study. Research proposal was approved by the dissertation committee prior to the pilot study and main study. Each individual student was informed about the purpose of the study and confidentiality was promised and ensured. The samples have the freedom to leave the study at his will without assigning any reason.

PLAN FOR DATA ANALYSIS

The data were analyzed in terms of the objectives of the study by using descriptive and inferential statistics. The plan of data analysis was as follows.
1. Organize the data in a master sheet.
2. Frequency and percentage distribution were used to analyze the demographic data of adolescents.
3. Frequency and percentage distribution were used to assess the level of knowledge and attitude on ill effects of smoking.
4. Mean and standard deviation were measured on the level of knowledge and attitude of ill effects of smoking.
5. Chi – square test was used to determine the association between the knowledge and attitude and the selected demographic variables.

RESULT:

Findings of the study revealed that, 29 (58%) of the adolescents had inadequate knowledge, 21 (42%) had moderate knowledge and none of the adolescents had adequate knowledge about ill effects of smoking and 3 (6%) of the adolescents had positive attitude, 12(24%) had neutral attitude and 35 (70%) of the adolescents had negative attitude about smoking. The obtained knowledge mean score was 9.42 with a standard deviation of 2.517 and obtained attitude mean score was 9.42 with standard deviation of 3.142. The "r" value was 0.03 which was positive and significant. It is inferred that there is a significant relationship between knowledge and attitude on ill effects of smoking among adolescents. There was no

significant association found between knowledge and attitude level with their demographic variables.

REFERENCES
1. Bharat Pareek, *A textbook of nursing research and statistics,* 4th edition, PV Publications, (48,218,336).
2. BT Basavanthappa, *A textbook of nursing research,* 7th edition, JP Publications, New Delhi, (54,466,496,443).
3. Calson et.al, *A textbook of mental health nursing,* 1st edition, (798).
4. Mary C. Townsend, *A textbook of mental health nursing,* 7th edition, JP Publications, (456-457).
5. Byrne, D.G (2003). "Adolescent stress and future smoking behaviour: A prospective investigation", *Journal of psychosomatic Research*, 54(4), 313 – 321.
6. Bawazeer, A., (1999). First cigarette smoking experience among secondary school students in Aden'. *Eastern Mediterranean Health Journal*. 5(3), 440-449.
7. Bener, A., (1999) . 'Cigarettes smoking habits among high school boys in the United Arab Emirates'. *International Quarterly of Community Health Education*. 18(2), 209-222.
8. Ardell B. Rell (2001). Passive Smoking. Retrived July, 2001 from http://www.elsevier.com.
9. Stephanie. (2011). Health effects of tobacco. Retrived August 17, 2011 from http://www.wikepedia.com
10. Syama. D. (2009). Health effects of exposure to second hand smoke. Retrived June, 2010 from http://www.nlm.nih.gov.