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A QUASI EXPERMENTAL STUDY TO EVALUTE THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE AND ATTITUDE REGARDING PREVENTION OF ORAL CANCER AMONG ADULTS IN VADIVELKARAI AND ARASAPATTI VILLAGES, MADURAI-2008

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ABSTRACT

Objectives to assess the knowledge and attitude regarding prevention of oral cancer among adults. Also to impart health education to adults on prevention of oral cancer. A quasi-experimental study with pretest – posttest control group design were used.100 samples were selected by using purposive sampling technique. In the experimental and control group all the adults had inadequate knowledge and most of the adults had negative attitude in pretest. In the experimental group majority of the adults had adequate knowledge and positive attitude in posttest. In the control group the results are same as pretest. The structured teaching programme were effectively increases the knowledge and attitude of adults regarding prevention of oral cancer.

INTRODUCTION

Oral health is an essential component of total health and well-being and it affects numerous aspects of a person's health status, from the ability to eat and speak, to quality of life including self-esteem, learning, employment and levels of usual activity [1].

The WHO's global oral health program has outlined the need for careful oral screening as an important public health measure for all clients of all ages in order to reduce common oral health problems, including dental carries and ensure early identification of serious oral health conditions such as oral cancer and HIV disease [2].

Cancer in all forms are causing about 12% of deaths throughout the world. In the developing world, cancer is the third leading cause of death and accounts for 9.5% (3.8 million) of all deaths. Oral cancer is one among the ten most common cancers in the world. 90% of oral cancers in South-East-Asia are linked to tobacco chewing and tobacco smoking.

The incidence of oral cancer in India caused by tobacco chewing is one of the world's highest at nearly third of all cancer cases. Indian Council of Medical Research says that nearly 1,60,000 people developed each year as a result of tobacco consumption. Oral cancer is the sixth most common cancer in men and the fourteenth most common cancer in women [3,4].

As per WHO (2003) one of the greatest concerns among adolescents today is "Tobacco Addiction". Nearly 20 million children are using tobacco. Global rate of consumption of tobacco will increase from 3 million to 10 million in 2010. Ten lakh Indians are dying prematurely due to tobacco related

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diseases about 1,60,000 to 2,00,000 people developed cancer every year due to tobacco use [5].

Objectives of the Study

1. To assess the knowledge and attitude of adults regarding prevention of oral cancer in the experimental and control group.
2. To determine the effectiveness of structured teaching programme on knowledge and attitude of adults regarding prevention of oral cancer in the experimental and control group.
3. To find the correlation between post test knowledge and attitude of adults regarding prevention of oral cancer in experimental group.
4. To find out association between post test knowledge and attitude with selected demographic variables such as age, sex, education, occupation, income, marital status, habits, age at which habits started, frequency of using tobacco, tobacco used by their family members, family history of oral lesions, family history of oral cancer and sources of information in experimental group.

METHODOLOGY

Research Design

Research design adopted for the study was quasi experimental design with pre test, post test control group design. The dependent variable for this study was knowledge and attitude of adults regarding prevention of oral cancer. Attribute variables for this study were age, sex, education, occupation, tobacco used by their family members, family history of oral lesions, family history of oral cancer and sources of information [7].

Sampling Technique

Purposive sampling technique was used to select the samples.

Sample and Sample Size

The study sample was the tobacco consuming adults in Vadivelkarai and Arasapatti villages and their age group should be 20-60 years. The sample size for this study was determined to be 100, comprising of 50 in experimental group and 50 in control group.

Description of the Tool

The structured interview schedule has 3 parts.

Section-1 consists of 13 questions about demographic variables such as age, sex, education, occupation, income, marital status, habits, age at which the habits started, frequency of using tobacco, tobacco used by their family members, presence of oral lesions to their family members, family history of oral cancer, and source of information related to the effects of using tobacco.

Section-2 consists of a questionnaire on knowledge related to oral cancer which consists of 27 multiple choice questions in the following areas. General aspects, incidence, causes, signs and symptoms, investigations, treatment and prevention.

Section-3 consists of 15 statements on attitude related to oral cancer.

Scoring Procedure

There are 27 questions regarding knowledge. A score of '1' will be given for each correct response and score of '0' for the wrong answer. The maximum score for questions on knowledge was 100.

The knowledge score will be interpreted as follows:

>75% - Adequate knowledge
51-75% - Moderate knowledge
0-50% - Inadequate knowledge

There are totally 15 statements, all are positive statements. The items will be measured on a 5 point scale from strongly agree to strongly disagree. The maximum score for measuring attitude was 75.

Attitude score will be interpreted as following:

>80% - Positive attitude
61-80% - Neutral attitude
0-60% - Negative attitude

Main Study

The main study was conducted in Vadivelkarai and Arasapatti villages, Madurai. 100 adults were selected through purposive sampling technique. The existing knowledge and attitude was assessed before teaching, through structured questionnaire by interview schedule. Structured teaching programme was administered. After 8 days data was collected for assessing the knowledge and attitude of adults. Data were edited, organized, analyzed, and interpreted. Both descriptive and inferential statistics were used for the data analysis. The knowledge and attitude of adults regarding prevention of oral cancer was analyzed by using descriptive measures (mean, SD) and inferential measures ('t' test values). Association between knowledge and attitude with selected demographic variables of adults was analyzed by using inferential measures (Chi-square). Coefficient of correlation test was used to determine the relationship between knowledge and attitude.

RESULTS

The level of knowledge among adults regarding prevention of oral cancer before the structured teaching programme in both experimental and control group were generally inadequate 50 (100%). After the structured teaching programme the level of knowledge had considerably increased to adequate level for 47 (94%) and moderately adequate level for 3 (6%) adults in the

experimental group. The level of attitude among adults regarding prevention of oral cancer before the structured teaching programme in both experimental and control group were generally negative attitude 48 (96%) and 47(94%) respectively. After the structured teaching programme the level of attitude had considerably increased to positive level for 47 (94%) and neutral level for 3 (6%) adults in the experimental group. Since there was no intervention of Structured Teaching Programme in the control group the post-tests were same as the pre-tests results.

Table 1a. Level of Knowledge

Level of Knowledge	Experimental group(50)				Control group (50)			
	Pre -test		Post-test		Pre-test		Post-test	
	No	%	No	%	No	%	No	%
Adequate (76-100%)	0	0	47	94	0	0	0	0
Moderately adequate (51-75%)	0	0	3	6	0	0	0	0
Inadequate (0-50%)	50	100	0	0	50	100	50	100

Table 1b. Level of Knowledge

Knowledge	Pre test		Post test		MD	't' value
	Mean	SD	Mean	SD		
Experimental Group	8.94	6.27	85.64	13.23	76.7	67.28
Control group	8.04	4.8	8.28	4.8	0.24	4.57

($P<0.05$)

Table 2. Level of Attitude

Level of Attitude	Experimental group(50)				Control group (50)			
	Pre -test		Post-test		Pre-test		Post-test	
	No	%	No	%	No	%	No	%
Positive(81-100%)	0	0	47	94	0	0	0	0
Neutral (61-80%)	2	4	3	6	3	6	3	6
Negative (0-60%)	48	96	0	0	47	94	47	94

Table 2b. Level of Attitude

Attitude	Pre test		Post test		MD	't' value
	Mean	SD	Mean	SD		
Experimental Group	40.62	2.93	64.5	4.01	23.08	31.45
Control group	37.34	2.84	37.76	2.80	0.04	3.23

($P<0.05$)

DISCUSSION

The results revealed the fact there was significant difference between pre test and post-test knowledge and attitude regarding oral cancer among adults. Therefore it is inferred that adults had significantly gained knowledge and attitude on oral cancer after the structured teaching programme, thus evaluated that structured teaching programme was effective.

CONCLUSION

The study concluded that effective teaching programme can improve both knowledge and attitude of adults regarding oral cancer.

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