

## A STUDY TO ASSESS THE EFFECTIVENESS OF PLANNED TEACHING PROGRAMME ON KNOWLEDGE REGARDING ORAL HEALTH HAZARDS OF TOBACCO AMONG BASIC B. Sc NURSING 1<sup>st</sup> YEAR STUDENTS OF GOVERNMENT COLLEGE OF NURSING, PATIALA

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### *Abstract*

*The present study was conducted to assess the effectiveness of planned teaching programme on knowledge regarding oral health hazards of tobacco among Basic B.S.c Nursing 1st year students of Government College of Nursing, Patiala. Quantitative approach and pre experimental one group pre-test and post-test design was adopted for this study. Data was collected from 50 students to assess the level of knowledge by using self-structured questionnaire before and after the implementation of planned teaching programme. There is no significant association between knowledge level of students with their selected demographic variables (age, gender, income, family history,) as calculated value of chi square is less than tabulated value. As a result the planned teaching program was beneficial to significantly improve the level of knowledge regarding oral health hazards of tobacco among college students.*

**Keywords:** *assess, planned teaching programme, health, tobacco, students*

### **INTRODUCTION**

Oral health is a key indicator of overall well-being and quality of life. Oral hygiene is the practice of keeping one's mouth clean and free of disease and other problems by regular brushing of teeth. It is important that oral hygiene be carried out on a regular basis to enable prevention of dental disease and bad breath. In low and middle-income countries where most of the world's 1.2 billion tobacco users live. Developing countries already account for half of all deaths attributable to tobacco (WHO, World Health Report, 2002). The prevalence of smoking was highest amongst final year dental students (39.6%). The majority of dental students smokers express a desire to stop smoking (66.7%) of 1st year dental student smokers and 76% of final year dental students smokers and 35.8% desired to stop smoking Komar K et. al; (2018). Dr. Rashmi Metgud et. al; (2018) in a study to assess the prevalence, knowledge and attitude of gutkha chewing among two thousand school children (10- 15 years) concluded that 28% children had the habit of gutkha chewing more among boys than girls (4:1). There is higher prevalence of gutkha chewing habit in those who are not aware of side effects. Current study was undertaken in the year 2020 at Govt. College of Nursing, Patiala.

### **OBJECTIVES OF THE STUDY**

- ❖ To assess pre-test knowledge of students.
- ❖ To assess the post-test knowledge of students.
- ❖ To evaluate the effectiveness of structured teaching programme on knowledge of students regarding oral health hazards of tobacco.
- ❖ To identify the association of knowledge of students regarding oral health hazards with the selected demographic variables.

## METHODOLOGY

A quasi experimental study was conducted by using one group pre-test post-test research design. The current study includes 50 students of B.Sc Nursing 1<sup>st</sup> year studying at Govt. College of Nursing, Patiala. Convenient sampling Technique was used to allocate samples. Self structured questionnaire were developed and utilized for data collection. Ethical permission granted from Institutional ethical committee. Data has been collected through google form within 15 days time period in month of February 2022.

## FINDINGS OF THE STUDY

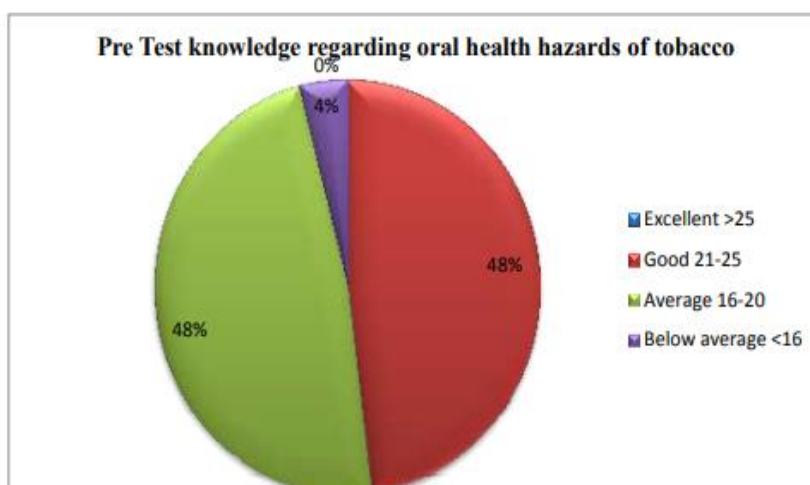
### Findings related to sample characteristics of B. Sc Nursing 1<sup>st</sup> year students

The baseline data According to the gender 80% were male and 20% were female. In context of type of family 26% were joint family, 72% nuclear family, 2% were extended family. According to area of residence, 52% were living in rural area, 32% were living in urban area, and 16% were living in semi-urban area. In context to monthly income of family, 14% were having income between 5,000-10,000, 10% were having income between 10,001-15,000, 14% were having income between 15,001-20,000 and 62% having income above 20,000. According to family history of smoking, 12% were having history of smoking and 88% were not having history of smoking. According to source of information, 14% of students have health personal as their source, 20% of students gained information from parents/ friends/ relatives, 56% students achieved knowledge from mass media, 10% of students gained knowledge from seminars/camps.

**Table 1 Frequency and percentage distribution of students in terms of level of knowledge in pre-test regarding oral health hazards of tobacco.**

N=50

Level of knowledge	Criterion measure	Frequency (f)	Percentage
Excellent	>25	0	0%
Good	21-25	24	48%
Average	16-20	24	48%
Below average	<16	2	4%



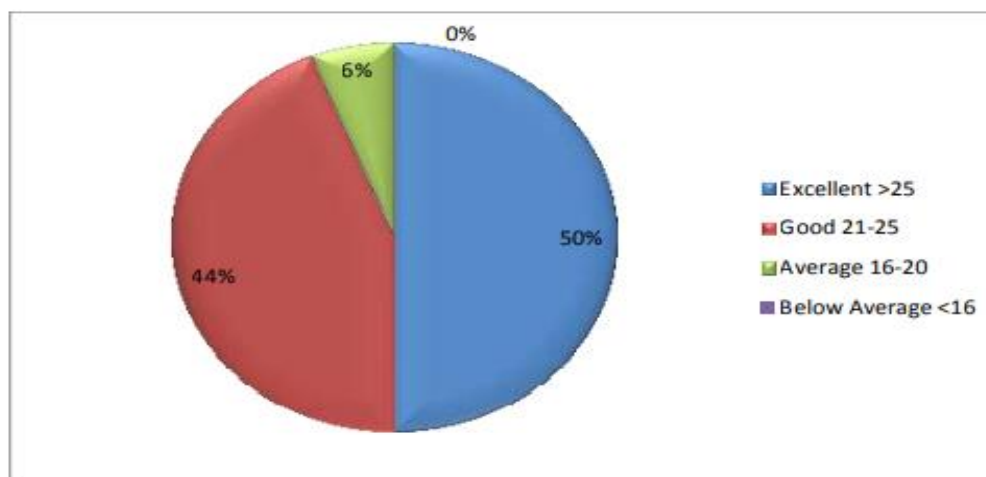
**Figure 1** showing frequency and percentage of pre-test knowledge of students of Basic B.Sc Nursing in

terms of level of knowledge.

**Table: 2 Frequency and percentage distribution of students in terms of post-test knowledge of students regarding oral health hazards of tobacco.**

N=50

Level of knowledge	Criterion measure	Frequency	Percentage
Excellent	>25	25	50%
Good	21-25	22	44%
Average	16-20	03	06%
Below Average	<16	00	00%



**Figure: 2** showing percentage of post-test knowledge regarding oral health hazards of tobacco.

**Table: 3 Comparison of pre-test and post-test knowledge of students.**

Level of knowledge	Frequency (Pre test)	Percentage (Pre test)	Frequency (Post test)	Percentage (Post test)
Excellent (>25)	00	00%	25	50%
Good (21-25)	24	48%	22	44%
Average(16-20)	24	48%	03	6%
Below average (<16)	02	02%	00	00%

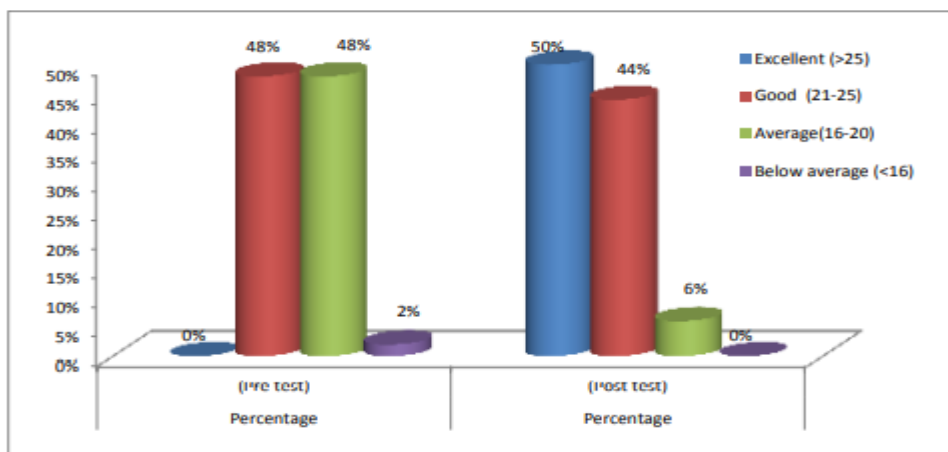


Figure 3 showing comparison of pre and post-test knowledge of students in terms of their percentage distribution.

Table 4 association of knowledge of pre-test among students of Basic B.Sc Nursing regarding oral health hazards of tobacco with selected demographic variables.

N=50

S. no.	Demographic variables	N	Below average	Average	Good	Excellent	df	$\chi^2$ (calculate d)	P value
1.	<b>Age (in years)</b>								
	➤ 17 to 18 years	13	1	4	8	0	9	10.122	0.3406
	➤ 19 to 20 years	34	0	18	16	0			
	➤ 21 to 22 years	3	1	2	0	0			
➤ More than 22	0	0	0	0	0				
2.	<b>Gender</b>								
	➤ Male	4	0	1	3	0	3	1.3075	0.727
➤ Female	46	2	23	21	0				
3.	<b>Type of family</b>								
	➤ Joint family	13	1	6	6	0	6	1.7095	0.9443
	➤ Nuclear family	36	1	17	18	0			
➤ Extended family	1	0	1	1	0				

4.	<b>Area of residence</b>								
	➤ Rural	25	1	13	11	0			
	➤ Urban	16	0	7	9	0	6	2.2985	0.890
	➤ Semi-urban	9	1	4	4	0			
5.	<b>Monthly income(in Rs)</b>								
	➤ 5,000-10,000	7	0	3	4	0			
	➤ 10,001-15,000	6	0	3	3	0	9	12.63	0.1800
	➤ 15,001-20,000	7	2	2	3	0			7
	➤ More than 20,000	30	0	16	14	0			
6.	<b>Family history of smoking</b>								
	➤ Yes	5	0	5	0	0	3	5.812	0.121
	➤ No	45	2	19	24	0			
7.	<b>Source of information</b>								
	➤ Health personnel	8	1	4	3	0			
	➤ Parents/friends	9	0	5	4	0	9	5.1148	0.824
	➤ Mass media	28	1	11	16	0			
	➤ Seminars/camps	5	0	4	1	0			

**Table 4** show that there is statistically no significant association of knowledge of students with oral health hazards of tobacco with the following variables at the level of 0.05 level of significance that are Age ( $X^2 = 10.122$ ), Gender ( $X^2 = 1.3075$ ), Type of family ( $X^2 = 1.7095$ ), Area of residence ( $X^2 = 2.2985$ ), Monthly income ( $X^2 = 12.63$ ), Source of information ( $X^2 = 5.1148$ ) as calculated value is less than tabulated value.

### Third objective was to evaluate the effectiveness of planned teaching programme on knowledge of students regarding oral hazards of tobacco.

In pre-test the mean score of student was 19.78 and in post-test the mean score of student was 25.34. There is significant increase in the knowledge of students regarding oral health hazards of tobacco after giving planned teaching programme.

### Association between the knowledge of students regarding oral health hazards of tobacco with selected demographics variables.

There is no association between the knowledge of students regarding oral health hazards of tobacco with selected demographic variables.

## DISCUSSION

There is no association between the knowledge of students regarding oral health hazards of tobacco with selected demographic variables (age, gender, type of family, area of residence, monthly income, family history and source of information). At level of significance 0.05 the calculated value of chi square is less than tabulated value of chi square ( $H_0$  null hypothesis is accepted).

Dr. Rashmi Metgud et. al. (2018) conducted a study to assess the prevalence, knowledge and attitude of gutkha chewing among two thousand school children (10- 15 years) There is higher prevalence of gutkha chewing habit in those who are not aware of side effects. Children themselves purchase the gutkha and betel nut sachets, hence the government should ban the sale and purchase by children

The present study aims to assess the effectiveness of planned teaching program on knowledge of nursing students regarding oral health hazards. Oral health is a key indicator of overall wellbeing and quality of life. Poor oral health causes millions of people to suffer from devastating pain and increase the burden. Oral diseases affect an individual's effectiveness in the college and work settings and can cause social and personal problem.

### LIMITATIONS OF STUDY

The study sample was confined only to the B.Ssc Nursing 1<sup>st</sup> year students of Govt. College of Nursing, Patiala. Self structured knowledge questionnaire was used to collect information regarding oral health hazards of tobacco. Only limited samples was studied as there was limited time available for data collection.

### CONCLUSION

After the detailed analysis this study leads to following conclusion:

In context of pre-test the mean score of students was 19.78 and in post test the mean score of student was 25.34. There is significant increase in the knowledge of students regarding oral health hazards of tobacco after giving structured teaching programme.

There is no association between the knowledge of students regarding oral health hazards of tobacco and selected demographic variables (age, gender, type of family, area of residence, Monthly income, family history and source of information). 0.05 is the calculated value of chi square which is less than tabulated value of chi square .So Our null hypothesis is accepted. Pilot study results and reliability of tools found it feasible to continue to conduct main study.

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