



Effectiveness of planned teaching programme on knowledge regarding oral cancer among the adolescents in selected areas of Bhandara city

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Abstract

Background of the study: Cancer is a non-communicable disease that affects people without regard to race, gender, socio economic status or culture. It can occur at any site, tissue of the body and involves any type of cells. The reason for cancer is smoking and tobacco chewing hence they need education in order to prevent oral cancer

Approach: The research approach adopted for this study is an evaluative approach.

Design: The research design selected for this present study was pre-experimental

Setting: The study was conducted at selected areas of Bhandara city.

Participants: 50 adolescents were assessed by purposive sampling technique, as a non-probability sampling method.

Pre-assessment: The tool was developed by preparation of structured knowledge questionnaires content validity of the tool was established by giving to professional experts.

Intervention: Personal data was assessed by using a demographic questionnaire Structured knowledge questionnaire was administered on day one to 50 adolescents. Planned teaching programme was administered on the same day to them.

Post assessment: Structured knowledge questionnaire was administered after 7 days of administration of planned teaching programme to assess its effectiveness.

Results: The prior-test and after-test prevalence & rate of knowledge scores of subjects about the oral cancer & uses in regarding knowledge and attitude in adolescents revealed that pre-test (20%) subjects had less level knowledge, (62%) had medium level knowledge and (18%) had high level knowledge scores, where post-test (0%) subjects had low level knowledge, (0%) had medium level knowledge and (100%) had high level knowledge scores. Outcome of PTP was assessed with paired 't' test and it was showed that there was significant increase in knowledge at 0.05 level of significance. In post-test knowledge score ranged from 21-27, whereas the pre-test knowledge scores ranged from 09-14. The mean post-test knowledge scores ($\chi^2 = 25.94$) was apparently higher than the mean pre-test knowledge score ($\chi^2 = 9.54$). The median of post-test knowledge score ($M_2 = 25$) was higher than the median of pre-test knowledge score ($M_1 = 9$). Calculated 't' value ($t = 47.34$, $p < 0.001$) is greater than table value, which represents the significant gain in knowledge, through the Planned Teaching Programme. Hence the hypothesis H_1 was accepted. Thus it suggests that the PTP has been effective in increasing the knowledge of adolescents about oral cancer and its prevention. The association of the knowledge scores of oral cancer with their selected socio-demographic variables shows that, there is a no statistical significant relationship between gain in knowledge and personal characteristics like age, marital status, Professional Education, experience, area of work. Hence the hypothesis (H_2) rejected.

Interpretation and Conclusion: The study concluded that the PTP on skin ulcer and its prevention was an effective method for providing moderate to adequate knowledge and help adolescents to enhance their knowledge to provide information to have best healthy health habits.

Implications for clinical practices: On the basis of findings, it is recommended that a similar study may be replicated issuing a large number of respondents. It is also recommended that the other methods of teaching with frequent reinforcement be implemented for improving the knowledge of oral cancer and its prevention.

Keywords: Knowledge, evaluate, effectiveness, oral cancer, friction, immobility, incontinence, hygiene, planned teaching programme

Introduction

A sound skin makes you feel good and look good" Healthy skin is often an indicator of our holistic wellness. Maintenance of a glowing, healthy skin needs good personal hygiene, unpolluted environment, avoiding contact with chemicals, good eating habits and proper rest and sleep and peace and happiness^[1].

Carcinoma, also referred as cancer, cancer is abnormal growth of cells Men to women ratio men are more affected. The reason s in men to get affected more is because of using of tobacco and its products. By chewing tobacco it affects

oral cavity. Cancer is most dangerous and it's also called as silent killer disease. All over the world. Around 14,10,0000 new. Cancer cases and 8.200000. Deaths occurred in 2012.2 1 Skin ulcers and Pressure sores are health problems which has impact on health of Nation. In UK the treatment of pressure sore imposes a large financial and manpower burden^[1].

About 30% cancer cases are caused due to use of tobacco and its products and remaining 70 % are because of environmental factors, hereditary etc. In globe over 3 lakhs newly found mouth cancer patients. Whereas the majority

are male are young adults.3% to 10% of mortality is because of cancer is worldwide [2].

In a present day every school going child also uses some tobacco products so the cancer have become very wide spread disease as compared to other disorders like coronary heart disease and DM, HTN and so on. Chewing tobacco affects whole oral cavity including throat and lymph nodes, pharynx, voice box. But among all' oral cancer is most common and many people are very familiar with it. Even though it is life threatening condition people still prefers to use the products. cancer has its treatment like radiation & chemo therapies they are expensive and has their own side effects like oral mucositis burning sensation loosening of teeth's and etc [2].

To protect the young generation from this disease the government of India have made many attempt to resolve this big burden from the country. Like tobacco and products are banned and smoking in public places are against the law and government also punished people for breaking the rules of the government but still over peoples are not worried about the effects of tobacco on their own health as well as public health [5].

Hence to make aware of people about this dangerous disease many private and non-governmental organizations are working hard to resolve forth coming disaster in the country along with Many hospitals and medical and nursing college students are also contributed in this fight against the cancer by conducting health education programs and awareness about the cancer and its causes, effects on their personal life and familial life [5].

About 20% of deaths due to oral cancer in developed countries and 10% in still developing countries. It is assumed that by 2020, around 15.Million new cancer cases and. 10million deaths. Yearly in India (2010 - 2020) the total. Number of cancer cases are from. 979, 786 in 2010 and 1,148,757.Cases in the year 2020.Among these cases 190,244 are results due to chewing of tobacco. The total 2, 53, 223oral cancer patients found in the Karnataka according to 2020 census [3].

Many governmental and non-governmental organization are working toward this but still our people are not bothered of their health and health issues. To create awareness about this deadly disease many research studies have been done by which the nurses are creating awareness and changing the attitude and knowledge. This is possible only by the people who spend a lot of their time with patients in a hospital. The responsibility of registered nurses starts from the time when the patient enters the hospital. Oral cancer occurs to be increasing in incidence, and mortality has improved over the past 25 years [4].

Being a researcher believes that despite of the several advertisements and printing the caution messages on tobacco products, still there is no awareness regarding the tobacco chewing and its complication. Therefore the investigator felt that it would be beneficial to assess the knowledge regarding oral cancer related to tobacco chewing and to prepare the PTP to bring awareness among Students. This would in turn, enhance their awareness and motivate them to prevent such practice and improve their health. Hence it is found as the need to conduct a study of this sort.

Objectives

1. To assess the knowledge regarding oral cancer among adolescents in selected areas of Bhandara city.
2. To evaluate the effectiveness of Planned Teaching

Programme regarding oral cancer among adolescents among adolescents in selected areas of Bhandara city.

3. To find the association between the knowledge regarding oral cancer among adolescents in selected areas of Bhandara city with selected socio demographic variables.

Hypothesis

H₁: There will be significant difference between pretest and posttest knowledge scores of subjects exposed to planned teaching programme on oral cancer.

H₂: There will be significant association between posttest knowledge scores regarding oral cancer and selected demographic variables.

Methodology

Research Approach: Evaluative approach

Research Design: Pre experimental design

Sampling technique: Non-Probability; Purposive Sampling Technique

Sample size: 50

Setting of study: Selected areas of Bhandara city

Tool used for data collection: Following tools used for the data collection

Section A: Frequency and percentage distribution of the sample according to the demographic attributes.

Section B: Classification of knowledge levels regarding oral cancer among adolescents

Section C: Mean and standard deviation responses regarding oral cancer among adolescents

Section D: Relationship amongst demographic & post, test. Scores regarding oral cancer among adolescents.

Procedure of data collection

Data was collected after obtaining administrative permission from selected areas of Bhandara city. The investigator personally explained the participants the need and assured them of the confidentiality of their responses. Data was collected through structured knowledge *questionnaire*. The test was conducted based on their availability and convenience. Soon after the test, the learning intervention was administered.

Results

The findings related to socio-demographic variables of participants

Section A: Samples description as per demographic variable. N=50

1. The Majority of the students 28(56%) were between age group 18-20 years and only 11(22%) were in age group of 15-18years.
2. While majority of the students 25(50%) were males and 25(50%) were females.
3. The Majority of the students were 38(76%) were Hindu and 12(24%) were Muslim.
4. The Majority of the participants were 25(50%) belongs to more than 30000 Rs income, 16(30%) were belongs to less than 20000 Rs income.

The majority of the students 43 (86 %) from nuclear family and 7(14%) were from to joint family, the majority of students 31 (62%) got information through mass media, 9 (18%) from friends and 10(20%) from others sources.

Section B: Classification of knowledge levels regarding oral cancer among adolescents.

Table1: describes that pretest knowledge shows that 9(18%) had low level knowledge N=50

Pre Test				Post Test	
Sl No.	Level of knowledge	Pre-test	Percentage	Post-test	Percentage
1	Low level	9	18.00	0	0.00
2	Medium level	31	62.00	0	0.00
3	High level	10	20.00	50	100.00
Total		50	100	50	100

The data presented in the Table-1 describes that pretest knowledge shows that 9(18%) had low level knowledge, 31(62%) had medium level knowledge, and 10(20%) had

Table 3: Mean, difference of mean, Standard Deviation and ‘t’ value of pre and post-test knowledge scores of staff nurses. N = 50

Group	Mean		Difference of mean	Standard deviation		‘t’ value paired	P value
	Pre-test	Post-test		Pre-test	Post- test		
Adolescents	9.54	25.94	16.40	2.12	1.87	47.34	0.0001

Table-3 reveals shows that computed ‘t’ value (‘t’= 47.34, p< 0.001) is greater than table value which represents the significant gain in knowledge, through the Planned Teaching Programme. Hence the hypothesis H₁ was accepted.

high level knowledge compared with posttest knowledge i.e.0 (0%) had low level knowledge, 0(0%) had medium level knowledge 50(100%) had high level knowledge scores

Section C: Finding difference of pre-posts score awareness among students

Table 2: Comparison of before & after Test Knowledge levels in the study. N = 50

Test	Range	Mean	Median	Standard deviation
Pre-test	9-14	9.54	09	2.12
Post-test	21-29	25.94	25	1.87

Table-2 reveals that the Data represents that the post-test knowledge score ranged from 21-29, whereas the pre-test knowledge scores ranged from 09-14. The mean post-test knowledge scores (25.94) was apparently higher than the mean pre-test knowledge score (9.54).

The median of post-test knowledge score (M₂ = 25.00) was higher than the median of pre-test knowledge score (M₁ = 09).

Thus it suggests that the PTP has been effective in increasing the knowledge of adolescents about oral cancer and its prevention.

Section D

Table 4: Relationship between post-test knowledge level and demographic variable on oral cancer and its prevention.

Sl. No	Personal characteristics	Below median score	Above median score	Chi-square	Level of Significance
1.	Age groups				NS
	15- 18 years	03	04	0.29	
	18-20 years	13	15	d.f.=1	
	More than 20 years	06	05	p = 0.86	
2.	Gender			0.089	NS
	Male	16	09	d.f.=1	
	Female	17	08	p=0.87	
3.	Religion			0.0007	NS
	Hindu	22	16	d.f.=1	
	Muslim	07	05	p=0.97	
4.	Family income			0.33	NS
	< 20,000Rs	09	07	d.f.=1	
	20,001Rs-30,000Rs	06	03	p=0.84	
	> 30,001Rs	14	11		
5.	Family type			0.086	NS
	Nuclear	04	03	d.f.=1	
	Joint	22	21	p=0.76	
6.	Source of information				NS
	Friends	5	4	0.03	
	Mass Media	6	4	d.f.=2	
	Health personal	18	13	p=0.98	

df: Degrees of Freedom NS: Not Significant

Table-4 reveals that the association of the knowledge scores of staff nurses with their selected socio-demographic variables shows that, there is a no statistical significant relationship between gain in knowledge and personal characteristics like age, marital status, Professional

Education, experience, area of work. Hence the hypothesis (H₂) rejected.

Conclusion

On the basis of the findings of the study, the following

conclusions are drawn:

- The findings showed that none of the subjects had adequate knowledge in the pre-test whereas all the subjects had adequate knowledge.
- The 't' test, which was computed between pre-test and post-test knowledge scores, indicated a true gain in the knowledge. Hence it was concluded that PTP was effective as a method to improve knowledge among adolescents.
- The association of the knowledge scores of adolescents with their selected socio-demographic variables shows that, there is a no statistical significant relationship between gain in knowledge and personal characteristics like age, gender, religion, family type and source of information hence the hypothesis (H₂) rejected.

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