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## Original Article

### Knowledge Regarding Use of Tobacco and Its Ill Effects Among Care Givers

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#### ABSTRACT

**INTRODUCTION:** Tobacco use kills nearly six million people worldwide each year.<sup>1</sup> India's tobacco problem is very complex, with a large use of a variety of smoking and smokeless tobacco products.<sup>2</sup>

**OBJECTIVE:** The objective of the study was to evaluate the effectiveness of planned health education programme on knowledge regarding use of tobacco and its ill effects among care givers of patient admitted at RLJH&RC, Kolar.

**METHODS:** For the study pre experimental one group pre-test and post-test design was used. Through purposive sampling technique 100 tobacco users were selected. Then subjects were assessed for their knowledge regarding use of tobacco and its ill effects through interview schedule, followed by a planned health education programme was administered. After 7 days, a post test was conducted using the same tool.

**RESULTS:** The results revealed that, the mean pre-test knowledge score was 7.56 with a SD of 2.82 and the mean post-test knowledge score was 13.46 with a SD of 3.54. The paired 't' value was 18.8 indicating that health education programme was effective in improving the knowledge score among care givers of patients on use of tobacco and its ill effects.

**CONCLUSION:** The study concluded that, there is an urgent need to educate the general public on use of tobacco and its ill effects.

**KEY WORDS:** Tobacco, ill effects of tobacco, Health education programme, Knowledge, Care givers.

#### INTRODUCTION

Tobacco chewing is the second major cause of death in the world and it is responsible for the death of 1 in 10 adults.<sup>3</sup> It is estimated that, tobacco has killed 100 million people in the 20th century and continues to kill 5.4 million people every year and this figure is expected to rise 8 million per year by 2030 and

80% of which will be occurred in India. The use of tobacco can interfere with people's quality of life and daily functioning. The National Tobacco Control programme was launched by Government of India in 2007-08 with an objective to bring greater awareness about harmful effects of tobacco use and tobacco control laws.<sup>4</sup> A descriptive study



conducted on knowledge, attitude and practices of tobacco consumption at rural health centers of Tamil Nadu revealed that, 51% of the subjects had poor knowledge and attitude on use of tobacco and its ill effects. Hence the study concluded that, there is a need to conduct educational program to improve the knowledge, attitude and to decrease the tobacco use among the general public.<sup>5</sup> After thorough review literature, it was found that there were only limited studies on awareness regarding ill effects of tobacco use, if we want to implement effective tobacco control programme in India, there is an urgent need to conduct more studies in this area. So the present study was undertaken with an objective to evaluate the effectiveness of planned health education programme on use of tobacco and its ill effects among care givers of patients, so that ill effects of tobacco use can be prevented.

## MATERIALS AND METHODS

An evaluative approach and pre experimental one group pretest posttest design was used for the study. Based on objectives of the study, a structured knowledge questionnaire and health education programme was prepared in English to assess the knowledge on use of tobacco and its ill effects and to administer health education programme. The tool and educational programme were then translated to Kannada since the study participants communication and understanding were only in Kannada. The prepared content and tool was validated by 6 subject and research experts for an adequacy and appropriateness. The inclusion criteria for the study were, care givers between the age group of 21 to 60 years, having the habit of using tobacco chewing and taking care of relatives who were admitted at RLJH &RC and able to understand Kannada language. Care givers excluded from the study were, care givers of patients admitted in ICU and posted for surgery on the day of data collection. Prior to data collection, ethical clearance was obtained from the Institutional ethical committee and a written permission was obtained from the Medical Superintendent of RLJH&RC, Tamaka,

Kolar. Informed consent was taken from the care givers. Around 100 care givers were selected through purposive sampling technique. The care givers were assessed through interview schedule individually for their knowledge on use of tobacco and its ill effects using structured knowledge questionnaire. A planned health education programme was conducted individually as well as in group's. After 7 days of health education programme, post test was conducted using same questionnaire. The data collected was analyzed using descriptive and inferential statistics

## RESULTS

### I. Description of socio-demographic variables of care givers

Majority (35%) of the care givers were in age group of 35 to 44 years, most (36%) of them were having primary education and 22% of them were illiterate. 45% of care givers occupation were coolie workers. 52% were from nuclear family, 47% were having the habit of tobacco chewing for more than 5 years. Out of 100 care givers, 17 % had dental caries and frequent mouth ulcers, most (66%) of the care givers were from rural area, majority (57%) of them were having Rs.11, 000/- to 20,000/- of family income per month.

### II. Pre-test knowledge on use of tobacco and its ill effects among care givers

The overall knowledge score obtained by the care givers of patients were grouped under adequate knowledge (above 75%), moderately adequate knowledge (who scored 50-75%) and inadequate knowledge (who scored <50%). Figure 1 shows that, 89% of care givers had inadequate knowledge, 11% of them had moderately adequate knowledge and none of them had adequate knowledge.

### III. Effectiveness of planned health education programme

The mean pre-test knowledge score of care givers was 7.56 with SD of 2.82 and the mean post-test knowledge score was 13.46 with SD of 3.54. The paired 't' value was 18.84 which was greater than

the table value, indicating there was a difference between pre-test and post-test knowledge scores which was statistically significant at 0.05 level. This indicates that planned health education programme was effective in improving the knowledge score among care givers (Table 1)

### IV. Association of knowledge score with socio-demographic variables

Association between level of knowledge among care givers of patients with selected socio-demographic variables revealed that there was an association between age ( $\chi^2=8.21$ ), education ( $\chi^2=10.63$ ) and duration of tobacco chewing

( $\chi^2=11.79$ ) which was significant at 0.05 level. Variables such as occupation ( $\chi^2=1.58$ ), type of family ( $\chi^2=0.64$ ), experience of health problem ( $\chi^2=0.54$ ), place of residence ( $\chi^2=0.79$ ) and income of the family ( $\chi^2=0.54$ ) were not found to have any association with knowledge scores.

## DISCUSSION

The government of India launched National Tobacco control programme in 2007-08 in 42 districts of 21 states / Union territories of the country but till date the awareness on this programme has not been reached to the general public. The present study could be considered

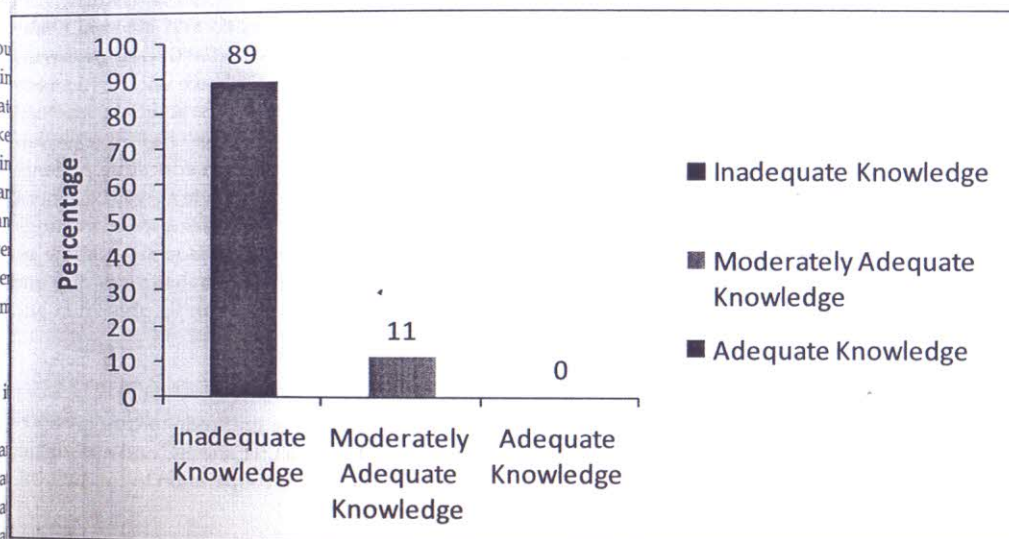


Fig 1: Overall pretest knowledge level of care givers of patients.a

Table-1: Effectiveness of planned teaching programme on ill effects of tobacco use n=100

Test	Mean	SD	Paired "t" value	p value
Pre test	7.56	2.82		
Post test	13.46	3.54	18.84	.0101*

\* Significant at 0.05 level



an initiative towards the implementation of the program. The literature reviewed for the present study showed that there were only few studies conducted in this area, hence lot of research need to be focused related to tobacco use and its control.

The present study was undertaken among patients care givers at a medical college attached hospital, Kolar. In this study, the findings related to socio demographic variables of care givers had a similarity with respect to age, education and place of residence of patients care givers in various other similar studies<sup>(6-7)</sup>. It is interesting to note that, most of the care givers (35%) were in age group of 35 to 44 years. This indicates that middle aged people are taking care patients admitted at hospital and also are having the habit of using tobacco. With regard to education status, majority (36%) of care givers of patients were having primary education and 22% of them were illiterates. This indicates that low educational status or illiterate people are more vulnerable to use the tobacco because they are unable to read and understand the tobacco control programme related advertisements.

With regard to occupation, majority (45%) of care givers were coolie workers and it may be one of the reason that people between their work, they spend time by chewing tobacco with their co-workers. With regard to type of family, majority (52%) of care givers were from nuclear family and this also may be another reason feeling lonely met have cultivated the habit of tobacco chewing.

With regard to duration of habituated tobacco chewing, majority (47%) of care givers used tobacco for more than 5 years and 17 % of them had experienced the health problems related to tobacco use. With regard to place of residence, majority (66%) of patient care givers were from rural area indicating that the rural area people are more prone to use tobacco than in urban area. With regard to family income, most (57%) of them were with lower socio economic group.

However the mean post-test value (13.46) was higher than the pre-test (7.56) value indicating there was a significant difference between pre and post test knowledge scores, hence the planned health education programme was effective in improving the knowledge scores of care givers. This finding was supported by the study conducted by Rosamma Thomas at Madurai.<sup>8</sup>

### LIMITATION

This study was limited only to the care givers of patients admitted at selected Hospital and having the habit of using oral tobacco.

### CONCLUSION

The present study concluded that planned health education programme was effective in improving the knowledge on use of tobacco and its ill effects among care givers of patients admitted at RLJH and RC. The nurse educators should motivate nursing students to involve in educating patients, their family members in bed side as well as general public in community area during their posting. The study further recommends similar follow up studies to conduct in future so that morbidity and mortality on use of tobacco can be prevented and controlled to the great extent.

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**CONFLICT OF INTEREST:** None

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