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Original Article

# A Study to Assess the Effectiveness of Self Instructional Module On Knowledge Regarding Substance Abuse and Its Consequences On General Health Among the Students in Selected Colleges of Jaipur

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**Introduction:** Substance abuse is associated with a variety of negative consequences, including school failure, and poor judgment which may put adolescents at risk for accidents, violence, unplanned and unsafe sex. These dangerous consequences of substance abuse on human life intensify the need for the prevention of this abuse.

**Materials & Methods:** A experimental study was conducted among the 60 students studying in Jagannath university, Jaipur and Chaitanya ITI college, Jaipur. The sample was selected through purposive sampling technique. The data were collected by structured knowledge questionnaire. The pilot study was conducted at Chaitanya ITI college, Jaipur and the main study was conducted at Jagannath university, Jaipur.

**Results:** The mean of pre test score is 10.5 whereas the mean of post test score is 25.5 with 15 mean differences. The median of pre test score is 10 and the mean of post test score is 26 with 16 median differences.

Conclusions: The researcher can conclude at 0.05 level of significance, which means that  $H_1$  is accepted. Therefore there is significant difference between the average values of pre and post-test related to substance abuse and its consequences on general health, which gives an interpretation, that there is a significant gain in the knowledge score of the samples in the post-test phase. This indicates that the SIM is effective in increasing the knowledge of the student's substance abuse and its consequences on general health.

**Keywords:** Effectiveness, Self Instructional module, substance abuse, consequences on general health

**Introduction:** Substance abuse, also known as drug abuse, is a patterned use of a substance (drug) in which the user consumes the substance in amounts or with methods neither approved nor supervised by medical professionals. Drug use and abuse is as old as mankind itself. Human beings have always had a desire to eat or drink substances that make them feel relaxed, stimulated or euphoric.<sup>1</sup>

Drugs most often associated with this include alcohol, tobacco, cannabis, barbiturates, benzodiazepines, cocaine, methaqualone, opioids and some substituted amphetamines. The exact cause of substance abuse is not clear, with theories including one of two: either a genetic disposition which is learned from others or a habit which if addiction develops; it manifests itself as a chronic debilitating disease.<sup>2</sup>

Drug addiction is a complex brain disease. It is characterized by compulsive, at times uncontrollable, drug craving, seeking and use that persist even in the face of extremely negative consequence. Drug seeking becomes compulsive in large part as a result

of the effects of prolonged drug use on brain functioning and on behaviour.<sup>3</sup>

Every type of drug of abuse has its own individual mechanism for changing how the brain functions. But regardless of which drug a person is addicted to, many of the effects it has on the brain are similar. They range from changes in molecules and cells that make up the brain to mood changes, to change in memory process and thinking and sometimes charges in motor skills such as walking and talking. And these changes have a huge influence on all aspects of person's behaviour. A drug can become the single most powerful motivate in a drug abusers existence. He or she will do almost anything for the drug. This comes about because drug use has changed the individual's brain, their behaviour, their social and other functioning in critical way.<sup>4</sup>

The problems of addiction were recognized gradually. Legal measures against drug abuse in the United States were first established in 1875, when opium dens were outlawed in San Francisco. The first national drug law was the Pure Food and Drug Act of 1906, which required accurate labeling of patent medicines containing opium and certain other drugs. In 1914 the Harrison Narcotic Act forbade sale of substantial doses of opiates or cocaine except by licensed doctors and pharmacies. Later, heroin was totally banned. Subsequent Supreme Court decisions made it illegal for doctors to prescribe any narcotic to addicts, many doctors who prescribed maintenance doses as part of an addiction treatment plan were jailed, and soon all attempts at treatment were abandoned. Use of narcotics and cocaine diminished by the 1920s.<sup>5</sup>

Substance abuse has a number of negative effects on a family, which include teaching the family apart, loss of employment, failure in school, increasing domestic violence, child abuse, and other crimes. It is a complex disorder that often has other significant physical, emotional and mental effects in the abuser and his family members.<sup>6</sup>

As per the National Survey on Extent, Pattern and Trends of Drug abuse in India conducted by the Centre in collaboration with United Nations Office on Drugs and Crime, the current prevalence rates within the age group of 12-18 years was Alcohol (21.4%), Cannabis (3%), Opiates (0.7%) and any illicit drug (3.6%).

It is estimated that there are about 6.25 crore alcoholics, 90 lakh Cannabis and 2.5 lakhs opiates and nearly 10 lakh illicit drug users in the country. The report says in the early 2000's the three most popular drugs of abuse were alcohol, tobacco, and Marijuana. In United States, beer tends to have an alcohol content

of 3 percent to 5 percent wines, 8 to 17 percent and distilled spirit 20 percent -95 percent. These concentrations often exceed the limit imposed by nature, as alcohol concentrations is in excess of 15 percent and toxic to the yeast that help produce alcohol during fermentation process. Higher concentrations are obtained through the process of distillation. In the United States alcohol is among the most widely of the substances of abuse.<sup>8</sup>

Materials & Methods: Research design: Selection of design is based on the purpose of the study to assessment the knowledge regarding substance abuse and its consequences on general health. An experimental study design is best suitable, as it is used to examine characters of a single sample.

**Setting:** This study was conducted in Jagannath university, Jaipur and Chaitanya ITI college, Jaipur.

**Population, Sample and Sampling Technique:** The target population in the present study includes students who are studying in Jagannath university, Jaipur and Chaitanya ITI college, Jaipur. For the present study 60 students were selected by purposive sampling technique.

**Data collection tool and technique:** After take permission to the principal of Chaitanya ITI College, Jaipur do the pilot study.

To test the reliability of the questionnaire split half method was selected. Karl Pearsons Product moment correlation co-efficient value 'r' was 0.93. The tool was found to be valid reliable and feasible.

**Data Collection Technique:** A structured knowledge questionnaire was selected as appropriate method of data collection for the study. A good deal of information could be obtained by giving questionnaire to the students.

The Structured questionnaire consists of two sections:

**Section I:** This section is the first section seeking information on demographic background of students i.e. age, gender, religion, educational status, area of residence, family income, habit of substances use, habit of substances abuse of family member, previous knowledge about ill effect of substances abuse, sources of knowledge.

**Section II:** This section is the second part of structured knowledge questionnaire, which consists of questions related to tobacco and its harmful effect on health, alcohol and its harmful effect on health and preventive measures to reduce substance abuse.

# **Results:**

Table no. 1: demographic characteristics of students

S. No.	Demographic Variable	Frequency	Percentage (%)				
1.	Age (In years)						
	17 – 19	20	33.33%				
	20 – 22	35	58.33%				
	Above 23	05	08.33%				
2.	Gender						
	Male	50	83.33%				
	Female	10	16.66%				
3.	Religion						
	Hindu	45	75%				
	Muslim	10	16.66%				
	Christian	03	5%				
	Sikh	02	3.33%				
4.	Educations						
	Pursuing diploma	30	50%				
	Pursuing graduation	30	50%				
5.	Area of residence						
	Own house	10	16.66%				
	Hostel	30	50%				
	Paying guest	15	25%				
	Other	05	08.33%				
6.	Income of family						
	30000 - 50000	05	08.33%				
	51000 - 70000	05	08.33%				
	71000 – 90000	10	16.66%				
	Above 91000	40	66.66%				
7.	Habit of substance use						
	Yes	20	33.33%				
	No	40	66.66%				
8.	Habit of substance use of family member						
	Yes	15	25%				
	No	45	75%				
9.	Previous knowledge						
	Yes	55	91.66%				
	No	05	08.33%				
10.	Sources of knowledge						
	Family member	10	16.66%				
	Teacher	05	08.33%				
	Mass media	40	66.66%				
	Other sources	05	08.33%				

Table No. 2: Mean, Median, SD, and Z test Value

Knowledge test	Mean	Mean	Median	Median	SD	Df	'Z' test
		difference		difference			
Pre test	10.5	15	10	16	±1.43	59	53.00
Post test	25.5		26		±1.60		

The calculated value of 'z' is 53.00 at the 0.05 level of significance and the tabulated value of 'z' is 2.94 at the 0.05 level of significance on 59 degree of freedom.

The calculated value is higher than the tabulated value so we can say that the self instructional module regarding substance abuse and its consequences on general health can enhance the knowledge of students, it means that the self instructional module regarding substance abuse and its consequences on general health is effective to improve the knowledge of students regarding substance abuse and its consequences on general health.

#### Discussion

The researcher can conclude at 0.05 level of significance, which means that  $H_1$  is accepted. Therefore there is significant difference between the average values of pre and post-test related to substance abuse and its consequences on general health, which gives an interpretation, that there is a significant gain in the knowledge score of the samples in the post-test phase. This indicates that the SIM is effective in increasing the knowledge of the students substance abuse and its consequences on general health.

## **Recommendations:**

Keeping in view the findings of the study, the following recommendations are made:

- A similar study can be done on a larger sample.
- A study can be conducted to assess the knowledge and practice regarding substances abuse and its consequences.
- A study may be conducted to assess the effectiveness of structured teaching programme versus other methods of health teaching on the similar problem.
- A study can be done on the association between various demographic variables, which were significant, on larger sample.
- Descriptive study can be conducted with structured learning programme on knowledge on substances abuse and its consequences.

**Conclusion:** The following conclusions were drawn on the basis of findings of the study:

- The pre-test findings showed that knowledge of students regarding substance abuse and its consequences was inadequate.
- The administration of self instructional module helped the students to understand more regarding substance abuse and its consequences on general health.
- Most of the students were having adequate level of knowledge after the administration of self instructional module.
- The self instructional module is proved to be very effective method of transforming information and enhance the knowledge among students.

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