Effectiveness of a Child-to-Child Programme on Substance Abuse among Selected Adolescents in the School at Kaliyal, K.K. District

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ABSTRACT

Introduction
Substance abuse is more common among school going children. School going children starts to abuse it on an experimental basis and gradually addict towards it without knowing the harmful effects of the substance. It is very essential to give teaching in appropriate stage which will prevent them exposing from substance abuse. Children are more receptive while education given through their peers. So programme is effective among school children to avoid the substance abuse among school children.

Objectives
The overall aim of the research was to assess the effectiveness of child to child programme on substance abuse by selected group I adolescents to their group II adolescents at St. Mary’s Higher Secondary School, Kaliyal.

Methodology
The study was a Quasi experimental study. Research design used was one group Pre Test - Post Test Design with total of 60 samples, randomly selected by adopting lottery method. A pilot study was conducted with 6 samples.

Result
The data was analyzed using descriptive and inferential statistics at 95% significant level. The analysis revealed that there was significant improvement in the mean knowledge score 15.2±1.8 after providing child-to-child programme on substance abuse. The mean difference of pre-test and post-test knowledge was 4.6±1.2. The mean increase was statistically significant with ‘t’test (t=29.398) at the level of significance p<0.001. So child-to-child programme is effective in increasing knowledge of adolescents regarding adolescence.

Summary
Inadequate knowledge regarding ill effect of substance abuse, lead the adolescence to the practice of unhealthy habits and substance abuse. Educational strategies like child-to-child programme are effective in disseminating knowledge in terms of preventing the health hazards in younger generation.

KEYWORDS
Child To Child Programme, Substance Abuse, Adolescents, School Going

INTRODUCTION
Substance abuse by children and adolescence is a major health problem. The use of illicit Substance frequently starts among school children. Concern with the use of harmful habit forming substance among students appears to be very natural reactions, as they constitute a vital part of the society. During adolescence stage they were exposed to new environment and may render them to extremely vulnerable for substance abuse.

NEED FOR THE STUDY
Adolescence is the stage of transition from the child hood to an adult. Just before adulthood, teenagers can become
perplexing creatures for their parents. It seems that there is no right way to understand them, responding them or even approach them.

According to Dr. Marlow (2007) the use of alcohol, tobacco and other drugs is increasing among Adolescents. This may be a result of attempting to cope up with many changes that occur in their transition period that is from childhood to adulthood—especially physically and psychologically. In addition, peer pressure may be so great that adolescents find it difficult to say no. It is important for parents, schoolpersonnel and health care providers to make information available concerning the risk, in using these addictive substances.

Child-to-child promote the better health and education to younger children. The benefits to child to child approach are clearly evident in the children families and community, but it needs in-depth training and strategies focus on children’s empowerment as active partners in the challenging process. The child to child approach is a relevant and low cost and effective educational method in developing countries to spread health messages among children.

Education about health is a part of health care that is concerned with promoting healthy behavior. Education of school children regarding health can be carried out in different ways and setting, through formal and informal teaching in schools. Child-to-Child programme is an innovative approach to educate about health and student gain interest, support, involvement and commitment in their own health.

Educating the school children about substance abuse by their own student through child-to-child programme is the best method to prevent the children from the abuse habit. Because initiation of substance abuse among children started in their early adolescent’s period, that is during their school life, so approaching the children in appropriate time will prevent such behavior and bring healthy and abuse free adolescence. Child-to-child programme on substance abuse is a powerful weapon to spread the message among students and is a cheap and best method to elimination of substance abuse among school going children.

**STATEMENT OF THE PROBLEM**

“A study to assess the effectiveness of child to child programme on substance abuse among the selected adolescents in the school at Kaliyal, Kanyakumari District”.

**OBJECTIVES**

1. To assess the knowledge of selected group I adolescents regarding
substance abuse after a structured teaching programme done by the investigator.

2. To assess the knowledge of group II adolescents regarding substance abuse

3. To reassess the knowledge of group II adolescents after a child-to-child teaching given by the selected group I adolescents regarding substance abuse.

4. To evaluate the effectiveness of child to child programme on substance abuse by comparing the pre-test and post-test knowledge of the group II adolescents regarding substance abuse.

5. To identify the association between the pre-test knowledge of group II adolescents and with selected demographic variable such as, age, sex, education of mother, education of father, occupation of mother occupation of father, area of residence, any substance abusers in the family.

HYPOTHESES

H1: There will be significant improvement in the level of knowledge after child to child teaching programme on substance abuse among the selected group II adolescents.

H2: There will be a significant association of pre-test knowledge of group II adolescents regarding substance abuse with their selected demographic variables such as sex, age, education of mother, education of father, occupation of mother, area of residence, any substance abusers in the family.

CONCEPTUAL FRAME WORK

Conceptual framework is a global idea about a concept in relation to specific discipline. It is a visual diagram by which the research explains the specific area of interest.

The frame Work for this study was derived from general system theory. Von Bertlanfy defined “a system as a whole with interrelated part in which the parts have its own function”. All the living systems are opened system in which there is a continuous exchange of matter, energy and information provide input for the system. The system transforms the input in process known as through put. The energy of information is given off into environment as output. When output is returned into system as input the system known as feedback. All the living system are open in that there is a continuous exchange of matter, energy and information with environment from which system receive input in the form of matter, energy and information.

INPUT

Input is the assessment of knowledge of group II adolescents regarding substance abuse by the investigator before child to child programme.
THROUGH PUT
Through put is the process of disseminating information regarding substance abuse through child to child programme by selected group I adolescence to group II adolescence.

OUTPUT
The information are continuously processed through the system are released as output is an altered state. Output usually focused open improvement in the level of knowledge among group II adolescence regarding substance abuse after child to child programme by selected group I.

RESEARCH METHODOLOGY

RESEARCH APPROACH
Quantitative approach is more suitable for this study.

RESEARCH DESIGN
It is a quasi experimental study. Research design with one group pre-test post test design.

POPULATION OF THE STUDY
The population for the study was adolescence in the 8th standard with the age group of 12 to 13 years.

SAMPLE SIZE
Sample consisted of 60 selected adolescents with the age group of 12 to 13 years belonging to 8th standard studying in St. Mary’s Higher Secondary School, at Kaliyal in Kanyakumari District.

SAMPLING TECHNIQUE
Samples were randomly selected based on lottery method.

SAMPLE SELECTION CRITERIA
The study was conducted based on the following criteria regarding selection of the samples.

a) Inclusion criteria
- Both male and female adolescents studying in 8th standard in St. Mary’s Higher Secondary School at Kaliyal.
- Students who know English And Malayalam
- Students who are willing to participate.

b) Exclusion criteria
- Children who were absent on the day of data collection
- Mentally retarded and abnormal children
- Students who do not read and understand Malayalam or English

DEVELOPMENT AND DESCRIPTION OF TOOL
Section A: Demographic variables of group II adolescence
Section B: Self administered questionnaire regarding substance abuse

SCORING AND INTERPRETATION
Below 50% - Poor
50%-70% - Average
70%-90% - Good
Above 90% - Very Good

PLAN FOR DATA ANALYSIS
The data were organized and analysed based on the objectives and hypotheses and by using descriptive and inferential statistical method.

**DESCRIPTIVE STATISTICS**
Frequency and percentage distribution were used to demographic variables of the group II study subjects and find out the mean and standard deviation of selected group I adolescents and group II adolescents before and after child to child programme.

**INFERENTIAL STATISTICS**
The ‘t’ test was used to determine the effectiveness of child-to-child programme in improving the knowledge on substance abuse among group II adolescents. ‘chisquare’ test was used to find out the association of pre-test knowledge of group II adolescents and its demographic variables.

**RESULTS**
The present study assessed the effectiveness of child to child programme on substance abuse among adolescence. During the pre-test 16 students (26.7%) of them scored poor level of knowledge, but post test none of them scored poor level of knowledge. 40 students (66.6%) scored average and 4 students (6.6%) scored good. And in posttest 9 students (15%) got average, 46 students (76.7%) gained good knowledge and 5 students (8.3%) of them got very good knowledge in the post test. But none of them got very good knowledge in the pre-test. This shows improvement in the level of knowledge after child-to-child programme. The mean and standard deviation of post test were 10.6±1.8 and 15.2±1.8 and mean difference was 4.6 the mean and SD of post test was significantly increased after the child-to-child programme on substance abuse.

The above considerable mean difference was statistically proven by 't’ test with the 't’ value of t=29.398 df=59. The difference of knowledge was statistically highly significant at the level of P<0.001. From the above result and discussion the research hypothesis (H₁) accepted.

**CONCLUSION**
The study assessed the effectiveness of child to child programme on substance abuse among the adolescence. The study reveals that the child to child programme has significant improvement in the knowledge regarding substance abuse among adolescence. Child to child programme induces the knowledge and helps to develop positive attitude and healthy practices among children eventually helps to reduce disease and its complication, not only among the
adolescence but also among their family members and community as a whole.

**RECOMMENDATION**

- Community health worker also adopt this method to spread the health message in community set up through child to child programme.
- Nurse working in the pediatric ward can use this method as a routine to give health education.
- In service education can be given to community health nurses regarding the child to child programme on various aspects.
- Child to child programme is one of the best interventions with less cost and more benefited for hospitalized child and family.

**LIMITATIONS**

1. Study is limited to Adolescence
2. Small scale study
3. Only one school.
REFERENCE
2. Dr.MKC Nair, Dr.S.S.Kammath Module for Adolescence Care, K.M Printers, Thiruvananthapuram.