

**EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON
KNOWLEDGE REGARDING SUBSTANCE ABUSE AND ITS
CONSEQUENCES AMONG HIGH SCHOOL STUDENTS AT
SELECTED SCHOOL IN KANNUR DISTRICT, KERALA.**



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DISSERTATION SUBMITTED IN PARTIAL FULFILLMENT OF

THE REQUIREMENTS FOR THE DEGREE OF

BACHELOR OF SCIENCE IN NURSING

KERALA UNIVERSITY OF THE HEALTH SCIENCES

2025

**EVALUATE THE EFFECTIVENESS OF STRUCTURED TEACHING
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ACKNOWLEDGEMENT

"A simple word of thanks can carry great meaning when spoken from the heart. It is more than just words—it is a heartfelt expression of appreciation from one soul to another."

Every human effort is ultimately guided and blessed by the grace of God. We offer my heartfelt gratitude to the Almighty for His constant presence, enduring grace, and for being my source of strength through all the challenges we faced.

True gratitude often goes beyond words, but it is through these words that we try to convey the feelings that arise from deep within. We sincerely thank all those who have supported and contributed to the successful completion of this endeavor.

We feel deeply honored to express heartfelt thanks to our Principal, **Dr.J.Sathya Shenbaga Priya**, College of Nursing, Kannur Medical College, for her valuable guidance, thoughtful suggestions, and constant encouragement, which have truly enriched this learning journey.

It gives us great joy to extend my warmest and heartfelt appreciation to our guide, **Mrs. Little Flower P**, Head of the Department of Community Health Nursing, for her unwavering support, insightful guidance, cooperation, tireless practice sessions, and continuous motivation that helped us to complete this study.

We also express our sincere thanks to Vice Principal, **Dr.Prof.Usha V** (Department of Child Health Nursing), and **Ms. Jeyachithra S.S** (Ms Head of the Department of Obstetrics and Gynecology Nursing), for their constant encouragement and valuable suggestions throughout this endeavor.

Grateful acknowledgement is extended to all the experts whom have contributed their valuable suggestions in validating the tool and teaching plan. We would like to express our gratitude to **Ms.Chaithanya** for her guidance with statistical analysis.

We are deeply thankful to all the staffs, teachers, and high school students of Anjarakandy Higher Secondary School and C.H.M. HSS Elayavoor for their genuine interest, cooperation, and wholehearted participation during the course of this study. We express my sincere appreciation to all the faculty members, office staff, and librarian of the College of Nursing, Kannur Medical College, for their unwavering support and assistance throughout.

We humbly acknowledge the Scientific Committee and the Ethical Committee members for their kind approval and continued support.

Last but not least, we extend our sincere gratitude to our dear friends and well-wishers, whose unwavering support, motivation, and help have made this journey more manageable and meaningful."

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ABSTRACT

This pre-experimental research evaluated the Effectiveness of a Structured Teaching Programme on Substance abuse Knowledge among 40 ninth-grade students (ages 13-15) in a selected school in Kannur district, Kerala, using a one-group pre-test post-test design. The demographic analysis revealed that most participants were male (57.5%) and Hindu (92.5%), primarily from joint families with parents educated to higher secondary levels; only 12.5% reported family substance use, and 47.5% had prior knowledge mainly from school and media. Pre-test findings indicated that 67.5% had moderate knowledge, which improved to 100% achieving adequate knowledge post-intervention. Statistical analysis showed a significant difference in knowledge scores ($t = 13.22, p < 0.05$), confirming the program's effectiveness, while Chi-square analysis identified relationships between knowledge levels and demographic variables such as religion and mother's education, but not with gender, income, birth order, or family substance use. Overall, the structured teaching program significantly enhanced students level of knowledge regarding substance abuse and its consequences.

Key words: Level of knowledge, Structured teaching programme, Substance abuse, Consequences, High school students

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CHAPTER 1

INTRODUCTION

“The war on drugs is a war on the future of our youth.”

— *Noam Chomsky*

1.1 INTRODUCTION

Today's children are tomorrow's citizen, it is necessary for us to prevent adolescents to become prone toward substance abuse. An adolescent is a period when lots of changes take place in body and mind. Adolescent students use harmful and illegal substance at younger age. Continuous use of such substance leads to physical and psychological harm and is difficult to stop. Substance abuse is growing at an explosive rate, and in just little over a decade, it has spread its malevolent tentacles to almost every part of the globe surmounting almost all barriers of race, caste, creed, religion, sex, educational status, economic strata, etc. Substance abuse is found in all age groups, but its prevalence is higher among adolescence and young adults, a large majority of whom are students. Use of tobacco, alcohol, and other substances is a worldwide problem and affects many children and adolescents. Early initiation of substance use is usually associated with a poor prognosis and a lifelong pattern of deceit and irresponsible behavior. According to 2012 Survey by the Ministry of Health and family Welfare, among boys aged between 15 and 19, 28.6% reported tobacco use and 15% were addicted to alcohol. Girls aged 15–19 years showed that 5.5% used tobacco while 4% were addicted to alcohol ^[1]

Adolescence is a period of crucial development when the individual is most vulnerable to such outside pressures as peer pressure, media influence, family circumstances, and social acceptance. Curiosity and experimentation drive adolescents in this vulnerable stage towards risky behaviors like drug abuse. Within the school setting, students can be introduced by their peers to substances like tobacco, alcohol, cannabis, or other narcotics as a way of alleviating stress, improving performance, or achieving social acceptance. Such early exposure is risky since the adolescent's developing brain is highly susceptible to chemical alteration by such drugs and suffers permanent cognitive, emotional, and behavioral effects. Some research has indicated that once established, it is hard to abandon the habit, tending to lead to academic failure, truancy, school dropout, and involvement in criminal activities like robbery and violence to feed the addiction.

The immediate and long-term outcomes of high school student substance abuse are numerous. Physically, they destroy essential organs like the brain, liver, heart, and lungs, destroying normal growth and body functioning. Psychologically, they are likely to develop mood disorders, anxiety, depression, aggression, and poor judgment, which have a great influence on learning and interpersonal relationships. Abuse of these substances over a long period can result in irreparable damage, such as cognitive impairment, decreased capacity for memory, and mental illness in the form of schizophrenia or chronic depression. Moreover, substance-abusing students are more prone to accidents, unsafe sexual practices, and criminal activities, placing a huge burden on the healthcare, education, and legal systems. Substance abuse also deeply affects families, causing emotional distress, financial strain, and broken relationships, and ultimately weakens the fabric of society by producing adults who may struggle to function productively in their personal and professional lives.

Considering the gravity of these problems, measures for prevention and correction are urgently needed. An effective method of tackling this problem in the school environment is the introduction of Structured Teaching Programs (STPs). These programs are meant to teach adolescents about the dangers, repercussions, and coping mechanisms regarding substance abuse. They give scientifically correct information, dispel myths and misconceptions, and empower students with skills to withstand peer pressure and make sound decisions. Studies have shown that STPs increase levels of knowledge markedly, decrease positive attitudes towards use, and enhance healthy behavioral intentions among youth. When implemented persistently by qualified professionals like teachers, nurses, and counsellors, these programs have the potential to empower students to avoid substance use and embrace healthy lifestyle habits. In addition, STPs aim not only at changing individual behavior but also at promoting positive school environments where anti-substance norms are perpetuated, ultimately contributing to the development of a healthier, safer, and more responsible future generation of citizens.

1.2 NEED FOR THE STUDY

Adolescence is a formative period in life marked by physical, emotional, and psychological changes. At around the age of 14, students are highly impressionable and vulnerable to experimenting with risky behaviours, including substance use. The World Health Organization (WHO) recognizes adolescence as a critical window for promoting health and preventing harmful behaviours. The rise in substance abuse among adolescents has emerged as a significant public health issue, impacting not only the immediate physical and psychological well-being of young individuals but also posing long-term consequences on their lives. There is an urgent necessity to develop comprehensive health education initiatives aimed at enhancing awareness about the extent and variety of substance abuse prevalent among students. This education should also address their knowledge and behaviours concerning substance abuse and its consequences. Globally, there is growing concern over the increasing exposure of adolescents to substances such as tobacco, alcohol, and drugs. Addressing this issue during the early teenage years through education is vital for shaping a healthier future generation.

Despite growing awareness, national surveys and studies show that many adolescents in India lack comprehensive knowledge about the harmful consequences of substance abuse. Peer pressure, curiosity, media influence, and lack of proper guidance often lead them toward experimentation. A study published in the Indian Journal of Public Health revealed that even though some adolescents were aware of the harmful effects of substances, they continued to engage in such behaviour due to insufficient preventive education. This reflects a significant gap between awareness and practice, which structured teaching programs can bridge by providing age-appropriate, accurate, and impactful information.

Structured teaching programs are proven educational tools that systematically deliver content using visual, verbal, and interactive methods to enhance learning and retention. They go beyond simple awareness campaigns by involving students in active learning through discussions, demonstrations, and assessments. International research supports their effectiveness; for example, studies in the United States and Nepal have shown that structured programs significantly improved students' knowledge, attitudes, and refusal skills related to substance use. In India, similar programs implemented in schools have resulted in measurable gains in students' understanding and reduced misconceptions about substance use.

Furthermore, teaching interventions at school create an inclusive and safe environment where students can openly discuss sensitive topics like substance abuse without fear or stigma. When delivered by trained educators or health professionals, these programs not only provide factual knowledge but also help develop life skills such as decision-making, self-esteem, and coping strategies. These skills are crucial for resisting peer pressure and making informed choices. Structured teaching also allows for the involvement of teachers, parents, and the community in a coordinated effort to prevent substance abuse [2]

1.3 BACKGROUND OF THE STUDY

Substance abuse among adolescents is a growing public health concern globally. Adolescence, a critical developmental period, is marked by increased vulnerability to peer influence, risk-taking behaviours and experimentation with substances such as tobacco, alcohol, and illicit drugs. The World Drug Report 2023 by the United Nations Office on Drugs and Crime (UNODC) estimated that over 296 million people worldwide used drugs in 2021, with a significant proportion initiating use during adolescence (UNODC, 2023).

In India, the magnitude of substance use among youth is equally alarming. According to the National Survey on Extent and Pattern of Substance Use in India (2019), conducted by the Ministry of Social Justice and Empowerment, about 14.6% of the population aged 10–75 years are current users of alcohol, while 2.06% use opioids. Alarmingly, the report also highlighted the early initiation of substance use, often beginning in adolescence.

Kerala, known for its high literacy rate and progressive social indicators, is not immune to this problem. The Kerala State Excise Department reported a notable rise in substance use among school-aged children, particularly in urban and semi-urban regions. Surveys conducted by the Kerala University of Health Sciences (KUHS) found that nearly one in ten school-going adolescents had experimented with some form of substance, including tobacco and alcohol.

The consequences of adolescent substance abuse are profound, affecting physical health, academic performance, mental well-being, and social functioning. Numerous studies have shown that early interventions and health education can play a pivotal role in preventing substance use among young people (Poudel & Gautam, 2017; Sharma et al., 2020). A structured teaching program designed to improve awareness and knowledge about the harmful effects of substance use may prove to be a crucial preventive strategy. Therefore, this study aims to evaluate the effectiveness of a structured teaching programme on knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala. By evaluating the change in awareness before and after the intervention, this research seeks to inform future educational policies and school-based prevention programs.

1.4 STATEMENT OF THE PROBLEM

A study to evaluate the effectiveness of Structured teaching programme on knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala.

1.5 OBJECTIVES

- 1) To assess the pre-test and post-test level of knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala.
- 2) To evaluate the effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala.
- 3) To find out the association between the pre-test level of knowledge regarding substance abuse and its consequences among high school students and their selected variables.

1.6 VARIABLES

1.6.1 Independent variable

In this study, it is the structured teaching programme on knowledge regarding substance abuse and its consequences among high school students.

1.6.2 Dependent variable

In this study it is the level of knowledge regarding substance abuse and its consequences among high school students.

1.7 HYPOTHESES

H_{0.1}: There is no significant difference between pre-test and post-test level of knowledge score regarding substance abuse and its consequences among high school students.

H_{0.2}: There is no significant association between the level of knowledge score regarding substance abuse and its consequences among high school students and their selected variables.

H₁: The mean post-test level of knowledge score is significantly higher than the mean pre-test level of knowledge score regarding substance abuse and its consequences among high school students.

H₂: There is a significant association between the level of knowledge score regarding substance abuse and its consequences among high school students and their selected variables.

1.8 ASSUMPTIONS

The study assume that

- The high school students have lack of knowledge regarding the substance abuse and its consequences.
- Knowledge refers to the facts, information, and skills acquired through experience or education, enhanced through a structured teaching program, which is a systematically developed instructional approach using appropriate teaching aids to improve understanding of substance abuse and its consequences among high school students.
- Substance abuse is the excessive or inappropriate use of drugs or alcohol that harms a person's health, behavior, or life.

1.9 DELIMITATIONS OF THE STUDY

- The study is limited to high school students studying in a selected school in Kannur district, Kerala. It excludes students from other schools and educational institutions in different geographical areas.
- Only 9th standard students those who are currently enrolled are included in the study. Students from lower or higher classes are not part of the sample.
- The data collection and analysis are confined to a short period of two weeks, which may limit the ability to observe sustained knowledge retention or delayed effects of the intervention.
- The study is limited to students who are present and willing to participate during the period of data collection. Absentees or those who opt out are not included.

1.10 OPERATIONAL DEFINITIONS

1.10.1 Effectiveness:

It refers to the desired outcome of structured teaching programme on knowledge regarding substance abuse and its consequences among high school students which is measured by a self structured questionnaire.

1.10.2 Structured teaching programme

A structured teaching programme was developed to enhance knowledge regarding substance abuse and its consequences among high school students using a well-planned lesson plan. The content of the lesson plan included the following: Definition of substance abuse, Causes, Types of substances abuse, Risk factors, Signs and Symptoms, Consequences, Management, Preventive measures, Summary, Recapitulation, Conclusion, and Bibliography, and was delivered through a 30 minute interactive session.

1.10.3 Knowledge

It refers to the level of understanding regarding substance abuse and its consequences among high school students by a self structured questionnaire.

1.10.4 Substance abuse

It is an addictive disorder that describes a pattern of substance use leading to significant problems or distress such as failure to attend occupational activities, substance use in dangerous situations, substance-related legal problems or continued substance use that interferes with friendships or family relationships.

1.10.5 Consequences

Consequences are the outcomes or results that follow from a particular action or decision. In this study “drug abuse consequences” among high school students refers to the negative outcomes such as impaired academic performance, health issues, behavioral problems, social dysfunction resulting from the use of harmful substances.

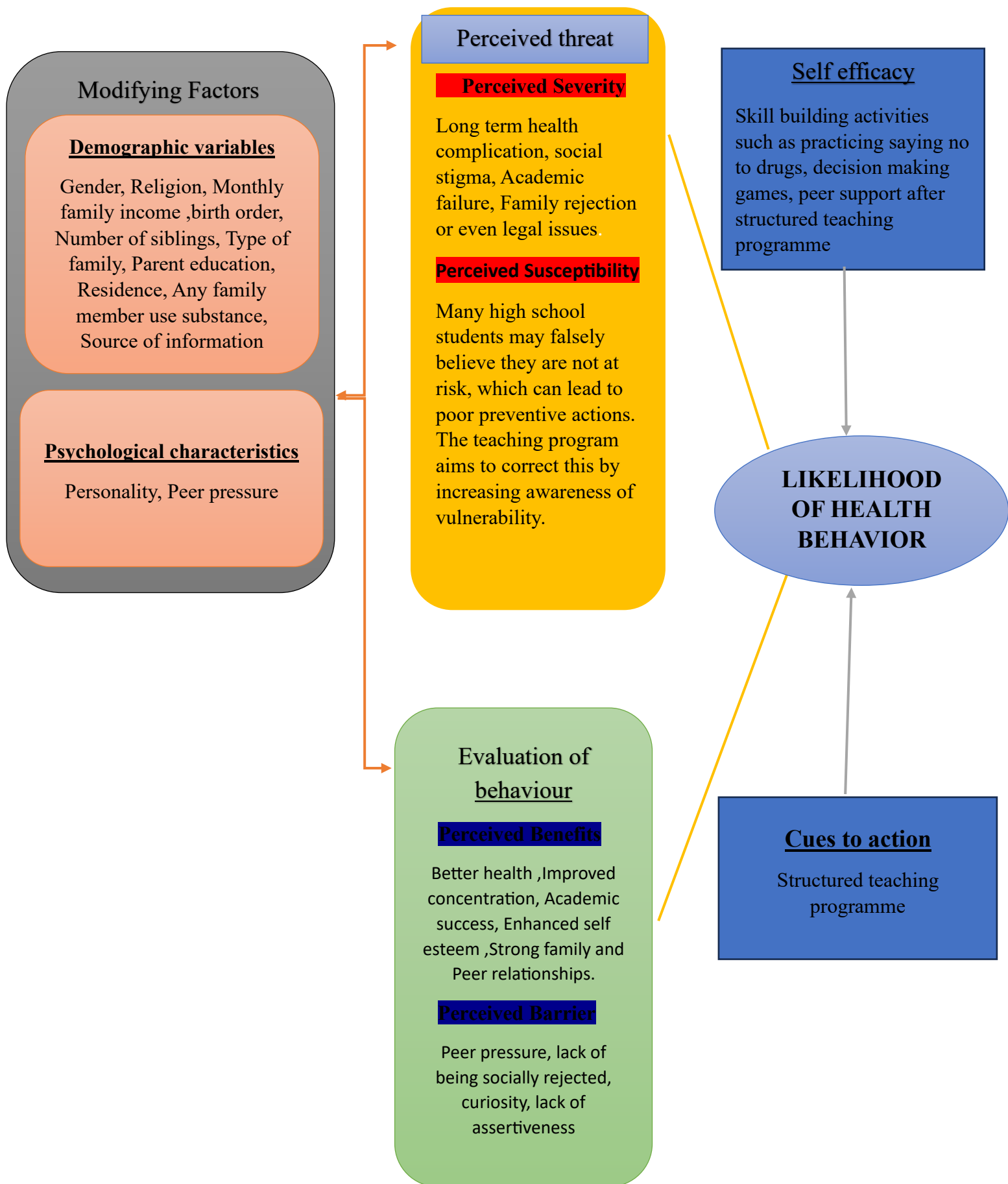
1.10.6 High school students

It refers to students between the age group of 13 to 15 years

1.11 CONCEPTUAL/THEORETICAL FRAME WORK

A conceptual frame work is an analytical tool with several variations and contents. It is used to make conceptual detention's and organize ideas. Strong conceptual frame work capture something real and do this in a way that is easy to remember and apply. The conceptual frame work particularly useful as organizing devises in empirical research and it used for the analysis of data.

The present study deal with assessing the effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequence high among adults to describe the concept of Health belief model (HBM), which is widely used in health education and behaviour change studies. It operates on the understanding that a person’s actions toward preventing or controlling illness are influenced by six major components: perceived susceptibility, perceived severity, perceived benefits, perceived barriers, cues to action, and self-efficacy.



1.11.1 Perceived Susceptibility

Perceived susceptibility refers to an individual's subjective perception of the risk of acquiring a disease or engaging in harmful behavior. In the context of this study, many high school students may believe that they are personally not at risk of substance abuse. They may associate drug use only with certain groups or believe that it cannot happen to them due to their upbringing, education, or awareness. This false sense of security can lead to ignorance and poor preventive action. The structured teaching program directly addresses this misconception by educating students that substance abuse can affect anyone, regardless of background, age, or intelligence. By presenting statistics, case studies, and relatable scenarios, the program aims to increase students' awareness of their vulnerability, helping them to identify risky environments, behaviors, and peer influences that might lead to experimentation or addiction.

1.11.2 Perceived Severity

Perceived severity is the belief about how serious the consequences of a disease or harmful behavior can be. This includes both the physical and emotional outcomes, such as long-term health complications, social stigma, academic failure, family rejection, or even legal issues. In the adolescent population, severity is often underestimated because of limited life experience or a sense of invincibility. The structured teaching program utilizes visual aids, real-life testimonies, documentaries, and interactive sessions to emphasize the short-term and long-term dangers of substance abuse, such as brain damage, addiction, respiratory diseases, imprisonment, or even death. By making these consequences tangible and emotionally impactful, the program helps students to understand the seriousness of drug use—not just in theory, but in real-world terms they can relate to.

1.11.3 Perceived Benefits

Perceived benefits involve an individual's belief in the positive outcomes of taking specific preventive action. In this case, students must understand how learning about substance abuse and adopting refusal strategies can help them make better choices and safeguard their future. The structured teaching program reinforces the idea that staying away from substances leads to better health, improved concentration, academic success, enhanced self-esteem, and strong family and peer relationships. It also introduces the concept that prevention is easier than cure—that making informed decisions now can prevent a lifetime of regret. This component motivates students by helping them visualize the positive life outcomes that come from staying drug-free and making smart, self-respecting choices.

1.11.4 Perceived Barriers

Perceived barriers are the perceived challenges or obstacles that prevent a person from taking action. For high school students, these may include peer pressure, fear of being socially rejected, curiosity, lack of assertiveness, or limited access to correct information. Some may

even feel that learning about drugs is boring or irrelevant. The structured teaching program is designed to overcome these barriers by making the sessions interactive, student-friendly, and confidence-building. Role-plays, discussions, group work, and problem-solving activities equip students with refusal skills and assertive communication techniques, making it easier to say no in real situations. Additionally, creating a supportive classroom atmosphere where students feel heard and respected reduces psychological barriers and empowers them to speak up and take control of their decisions.

1.11.5 Cues to Action

Cues to action are the external or internal stimuli that trigger the decision-making process toward a health behavior. In this study, the structured teaching program itself acts as a major external cue, providing the necessary information and motivation to think critically about substance use. Other cues may include seeing someone in the community suffer from drug addiction, a friend's experience, media coverage, or campaigns at school. Internal cues could be anxiety, curiosity, or a desire to be accepted. The teaching program enhances these cues by providing reminders, posters, slogans, and follow-up activities that keep the message alive even after the session is over. These cues act as reminders for students when they face real-life temptations or challenges, prompting them to recall what they learned and apply it.

1.11.6 Self-Efficacy

Self-efficacy is a person's belief in their ability to successfully perform a behavior or make a change. It plays a crucial role in turning awareness into action. Even if students believe drugs are dangerous, they may still lack the confidence to refuse when pressured or to seek help when needed. The structured teaching programme addresses this by including skill-building activities, such as practicing "saying no," decision-making games, confidence-boosting exercises, and peer support discussions. As students participate actively, they develop a sense of personal control and competence. The programme reinforces the belief that they are not helpless victims of peer influence or curiosity—they have the power and right to make safe choices. Building self-efficacy ensures that students feel mentally equipped to act in line with the knowledge they gain.

1.11.7 SUMMARY

This chapter provides an overview of the research by outlining the background and need for the study, clearly stating the problem, and listing specific objectives. It identifies the key variables, states the research hypotheses, and mentions the basic assumptions. The chapter also defines the scope through delimitations, clarifies key terms with operational definitions, and presents a conceptual framework to guide the overall study.

CHAPTER 2 REVIEW OF LITERATURE

“Without a review of the past, there is no path to the future”

-Confucious

2.1 INTRODUCTION

A review of literature stands as one of the most pivotal phases in the research journey. It serves as a comprehensive synthesis of existing knowledge on a specific phenomenon. According to the American Nurses Association (2000), a literature review represents a cohesive body of scholarly work aimed at critically evaluating and integrating the essential aspects of knowledge concerning a given research topic.

The primary objective of a literature review is to enlighten readers about the scope of existing research, providing insight into established theories, findings, and methodological approaches. It encapsulates the cumulative wisdom and scholarly contributions of previous investigations, thus offering a panoramic view of the phenomenon under scrutiny. Rather than merely listing studies, the review presents an organized, discursive narrative that seamlessly connects various strands of prior research.

Engaging in a literature review is a meticulous and intellectually demanding task, yet it is indispensable for the success of any research endeavor. Scholarly studies are invariably conducted against the backdrop of an existing body of knowledge; research cannot evolve in an intellectual vacuum. Prior to initiating any new investigation, it is imperative to thoroughly examine previous studies and documented experiences relevant to the proposed research problem. One of the most gratifying aspects of a literature review is its capacity to foster novel insights, fresh perspectives, and an enriched understanding of the subject matter. In the realm of nursing research, this process is not merely preparatory but continuous, as knowledge derived from prior studies serves as a foundational element upon which future inquiries are constructed.

The reviews related to literature was organized under the following headings.

- Studies related to effectiveness of structured teaching programme on substance abuse and its consequences
- Study related to assess the pre existing knowledge and awareness on substance abuse and its ill effects
- Study related to assess the prevalence and pattern of drug and substance abuse among adolescents
- Study related to assess the effectiveness of role play intervention on knowledge of adolescents regarding substance abuse

- Study related to effectiveness of awareness programme on substance abuse among adolescents
- Study related to assess the knowledge and practice of substance abuse among adolescents

2.2 STUDIES RELATED TO EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON SUBSTANCE ABUSE AND ITS CONSEQUENCES

A pre-experimental one-group pre-test post-test study was conducted at a school in Pulwama, District Budgam, Kashmir, to evaluate the effectiveness of a structured teaching program on substance abuse among 50 adolescents selected through simple random sampling. Using a self-structured questionnaire, the study revealed a marked improvement in knowledge: pre-test results showed 75% had inadequate knowledge and none had adequate knowledge, while post-test results showed 89% achieved adequate knowledge. The findings highlight the effectiveness of the teaching program.^[3]

A pre-experimental one-group pre-test post-test study was conducted to assess the effectiveness of a Structured Teaching Program (STP) on knowledge regarding substance abuse among 60 adolescent boys (aged 16–17) in a government higher secondary school in Srinagar, Jammu & Kashmir. Using purposive sampling, participants completed a self-structured knowledge questionnaire before the intervention and again on the 7th day post-intervention. Results showed a significant knowledge increase (mean difference = 11.317), with a notable association between knowledge gain and father's occupation ($P = 0.034$). The study highlights the STP's effectiveness in enhancing adolescents' knowledge of substance abuse.^[4]

A quasi-experimental study with a one group pre-test post-test to assess the effectiveness of a structured teaching program on knowledge regarding drug abuse among school students. Although the investigator's name was not specified, the study included a sample of 100 high school students with a mean age of 17.63 years, selected using a simple random sampling technique. Data were gathered using a knowledge questionnaire administered before and after the health education intervention. The pre-test results indicated that students had some existing knowledge about drug abuse, with a mean score of 28.92. After the structured teaching program, the post-test mean score increased significantly to 41.19, demonstrating a marked improvement in knowledge. These findings suggest that educational interventions are effective in increasing awareness and understanding of drug abuse among adolescents^[5].

A pre-experimental study using a one-group pre-test and post-test design to assess the effectiveness of a structured teaching program on awareness regarding drug abuse among high school students in a rural area. The study was carried out in a rural high school where students were selected using a purposive sampling technique, targeting adolescents considered at higher risk due to limited exposure to formal drug education. The teaching program covered various

aspects such as types of substances abused, their short- and long-term effects, social and psychological consequences, and strategies for prevention. Knowledge was assessed using a structured questionnaire before the intervention and one week after. The post-intervention analysis revealed a significant improvement in students' knowledge levels and heightened concern about the harmful effects of drug abuse. The results suggested that structured educational interventions are effective in enhancing adolescents' awareness and promoting preventive attitudes toward substance abuse.^[6]

A pre-experimental study was conducted to evaluate the effectiveness of a Structured Teaching Program (STP) on knowledge regarding substance abuse among 60 higher secondary students in selected schools of Etawah district. Using non-probability sampling and a structured questionnaire, the study assessed knowledge before and after the intervention. Pre-test results showed 16.66% had inadequate knowledge, 65% moderate, and 18.33% adequate. Post-test results improved significantly to 1.66% inadequate, 58.33% moderate, and 40% adequate knowledge. The mean score increased from 12.97 ± 2.67 to 14.80 ± 1.88 , with a paired t-test value of 6.95 ($p < 0.05$), confirming the STP's effectiveness in enhancing knowledge and awareness about substance abuse..^[7]

A pre-experimental one-group pre-test–post-test study assessed the impact of a Structured Teaching Program (STP) on knowledge regarding substance abuse among 60 adolescent boys (aged 16–17) in a government school in Soura, Srinagar, J&K. Participants completed a 41-item knowledge questionnaire before and after the intervention (on the 7th day). Findings showed a significant improvement in mean knowledge scores from 10.55 ± 5.10 (pre-test) to 21.87 ± 6.80 (post-test) with $t = 10.97$, $p < 0.001$. Before the STP, 66.7% had below-average knowledge, which reduced to 3.3% post-test. A significant association was noted between knowledge gains and fathers' occupation ($p = 0.034$). These results support that STP effectively increases adolescents' knowledge about substance abuse hazards..^[1]

A pre-experimental one-group pre-test post-test design was used to evaluate the effectiveness of a structured teaching programme on substance abuse knowledge among 120 adolescents (aged 12–17) from classes VII to IX, selected through proportionate stratified random sampling. A structured self-administered questionnaire measured pre-test knowledge, followed by the teaching programme and a post-test after seven days. In the pre-test, 78.3% had moderately adequate knowledge, 16.7% had inadequate, and 5% had adequate knowledge. Post-test results showed 94.2% had adequate knowledge and 5.8% had moderately adequate knowledge, with none remaining in the inadequate category. The mean post-test score (22.51) was significantly higher than the pre-test score (11.6), with a t-value of 31.054 ($df = 119$, $p < 0.05$), indicating the programme was effective..^[8]

A pre-experimental one-group pre-test post-test study was conducted to evaluate the effectiveness of a Structured Teaching Programme (STP) on knowledge regarding substance

abuse among 100 adolescents in a government school in Aherwan, Fatehabad (Haryana), selected through simple random sampling. The study aimed to assess knowledge gain after the intervention. Results showed a significant improvement in knowledge, with post-test mean scores (13.05 ± 3.43) higher than pre-test scores (9.67 ± 2.98), yielding a mean difference of 3.38. The calculated t-value ($t_{99} = 13.55$, $p < 0.05$) confirmed the effectiveness of the STP in enhancing adolescents' knowledge on substance abuse..^[9]

An evaluative study was conducted to assess the effectiveness of a Structured Teaching Program (STP) on knowledge regarding substance abuse among 60 students from selected schools in Bangalore, Karnataka, using purposive sampling. Ethical clearance and informed consent were obtained, and data were collected through a structured interview schedule with a reliability score of 0.90 (split-half method). The mean knowledge score increased from 16.8 (pre-test) to 22.6 (post-test), with the improvement being statistically significant at the 0.05 level (paired t-test). The study concluded that the STP was effective in significantly enhancing students' knowledge about substance abuse and its consequences..^[10]

A quasi-experimental study conducted in the United States evaluated the effectiveness of a structured teaching program on knowledge regarding substance abuse among 120 adolescents aged 14 to 18, selected through stratified random sampling from various secondary schools. Using a structured questionnaire, pre-test results showed low to moderate knowledge levels. After the intervention, post-test scores increased significantly, with an average rise of about 30%. A paired t-test confirmed this improvement was statistically significant ($p < 0.05$), indicating the program's effectiveness. The study concluded that structured educational interventions are effective in enhancing adolescents' knowledge and can help prevent early substance use..^[11]

2.3 STUDY RELATED TO ASSESS THE PRE EXISTING KNOWLEDGE AND AWARENESS ON SUBSTANCE ABUSE AND ITS ILL EFFECTS

A cross-sectional descriptive study was conducted to assess knowledge regarding substance abuse and its ill effects among P.U. students at Vaghdevi P.U. College, Bagalkot, using stratified random sampling. Data were collected via a self-administered questionnaire and analyzed using descriptive and inferential statistics. Results showed that 78% of students were aged 17, 68% were male, and 84% were Hindu. Most fathers (62%) held a degree or higher, while 32% of mothers had completed PUC. In terms of family background, 46% had incomes above Rs. 20,000, 76% lived in urban areas, and 88% had no family history of substance abuse. Knowledge levels revealed that 16% had poor, 82% good, and 2% excellent knowledge. A significant association was found only between knowledge and sex of the students, indicating gender-based differences in awareness..^[12]

2.4 STUDY RELATED TO ASSESS THE PREVALENCE AND PATTERN OF DRUG AND SUBSTANCE AMONG ADOLESCENTS

A descriptive survey study to assess the prevalence and pattern of drug and substance abuse among adolescents residing in slum areas. The study was carried out in an urban slum setting and included a sample of 110 adolescent boys aged between 12 to 16 years. Data was collected using a structured questionnaire focusing on substance abuse habits. The results revealed that 43.6% of the adolescents were addicted to substances such as gutkha, tobacco, smoking, alcohol, ganja, thinner, and marijuana. Additionally, 54.91% of the respondents admitted to having tried substances at least once, 23.53% reported rare use, 15.68% reported occasional use, and 5.88% confessed to having frequent cravings for drugs. Overall, 46.36% of the adolescents surveyed were found to be engaged in substance abuse. The study highlighted the serious health risks associated with substance use among adolescents, noting that mortality and morbidity due to alcohol and tobacco have increased significantly, with the crude mortality rate among injecting drug users rising to 4.25, thereby underscoring the urgent need for effective preventive measures in this vulnerable population. ^[13]

2.5 STUDY RELATED TO ASSESS THE EFFECTIVENESS OF ROLE PLAY INTERVENTION ON KNOWLEDGE OF ADOLESCENTS REGARDING SUBSTANCE ABUSE

A pre-experimental study was conducted to evaluate the effectiveness of a role-play intervention in improving adolescents' knowledge about substance abuse. The intervention used structured role-play activities to engage students and educate them on substance abuse, its consequences, and strategies to resist peer pressure. The mean pre-test score was 12.06 (40%), indicating low baseline knowledge, which significantly improved to 22.63 (75%) post-intervention—a 35% increase. This gain was statistically significant, confirming the effectiveness of role-play as a teaching strategy. The study also highlighted the role of school and family environments in influencing adolescents' vulnerability to substance abuse. ^[14]

2.6 STUDY RELATED TO EFFECTIVENESS OF AWARENESS PROGRAM ON SUBSTANCE ABUSE AMONG ADOLESCENTS

A pre-experimental study in a selected secondary school in Kerala with the aim of evaluating the effectiveness of an awareness program on substance abuse among adolescents. The study was designed to measure the level of knowledge and awareness regarding substance abuse both before and after the intervention, thereby determining the impact of structured teaching on students' understanding of this critical issue. The sample consisted of secondary school students, selected through non-probability sampling technique, although the exact sample size was not mentioned. A structured knowledge questionnaire was used as the tool for data collection, covering various aspects of substance abuse including types, causes, consequences, and prevention strategies. The findings of the study revealed a statistically significant

improvement in the post-test knowledge scores compared to the pre-test scores, indicating that the awareness program was effective in enhancing the knowledge and awareness levels of the students. The study highlights the crucial role of educational interventions in schools for addressing the problem of substance abuse and promoting healthy behaviors among adolescents. It also emphasized the necessity of continuous awareness campaigns and preventive education in the school curriculum to reduce the risk of substance abuse in this vulnerable age group. ^[15]

2.7 STUDY RELATED TO ASSESS THE KNOWLEDGE AND PRACTICE OF SUBSTANCE ABUSE AMONG ADOLESCENCE

A non-experimental descriptive study to assess the knowledge and practice of substance abuse among adolescence . Socio-demographic variables shows that majority of the participants were Hindus (71%), 81% were males. In knowledge regarding prevention and treatment of substance abuse shows that 5.39% agree with the prevention and treatment of substance abuse. As regards to physical and psychological aspects of substance abuse shows that 7% feels happy after consuming alcohol, 9% have physical comfort, 9% have good sleep and relax well , 10% avoids negative motions. Practice of substance abuse resulting that 56% of students take alcohol and other drugs. 5% of the students were started taking drugs and alcohol by watching their parents. In final statistical analysis it was found that association of knowledge score with socio-demographic variables like age, stream of adolescence and occupation of their parents were significantly associated 13.1, 4.03 and 6.35 respectively at a level p value 0.001. ^[16]

2.8 SUMMARY

The review highlights the serious impact of substance abuse on physical, psychological, and social well-being, including health issues, academic failure, and risky behavior. It stresses the broader effects on families, schools, and communities, and emphasizes the importance of structured educational programs to raise awareness and prevent substance use, especially in vulnerable adolescents.

CHAPTER 3

RESEARCH METHODOLOGY

“The value of research is not just in the findings ,but in the process of discovery.”

-W. Edwards Deming

3.1 INTRODUCTION

The research methodology is a systematic theoretical analysis of the methods applied to a field of study. It comprise the theoretical analysis of the body of methods and principles associated with branch of knowledge. Typically it encompasses concepts such as paradigm, theoretical model, phases and qualitative or quantitative technique. In it the researcher studies various steps that are generally adopted by the researcher in studying his research problem along with the logic behind them. ^[17]

The chapter deals with the methodology adopted for the present study which is conducted to evaluate the effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences among high school students at selected school in Kannur district, Kerala.

Research methodology is the specific procedures or technique used to identify, process, and analyse information about a topic. In a research paper, the methodology section allows the reader to critically evaluate a study’s overall validity and reliability.

3.2 RESEARCH APPROACH

A quantitative evaluative approach was adopted for this study as the investigation was aimed at evaluate the effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences among high school students at selected school in Kannur district, Kerala.

3.3 RESEARCH DESIGN

A research design is the arrangement of conditions for collection and analysis of data in a manner that aims to combine relevance to research purpose with economy in procedure.

Pre experimental one group pre-test post-test design was adopted for this study.

It can be adopted as following

Group	Pre-test	Treatment	Post-test
E	O1	X	O2

E: Experimental group

O1: Pre -test assessment level of knowledge

X: Structured teaching programme on knowledge regarding substance abuse and its consequences

O2: Post-test assessment level of knowledge

3.4 VARIABLES

3.4.1 Independent variable

In this study ,it is the structured teaching programme on knowledge regarding substance abuse and its consequences among high school students.

3.4.2 Dependent variable

In this study it is the level of knowledge regarding substance abuse and its consequences among high school students.

3.5 Schematic representation of the study

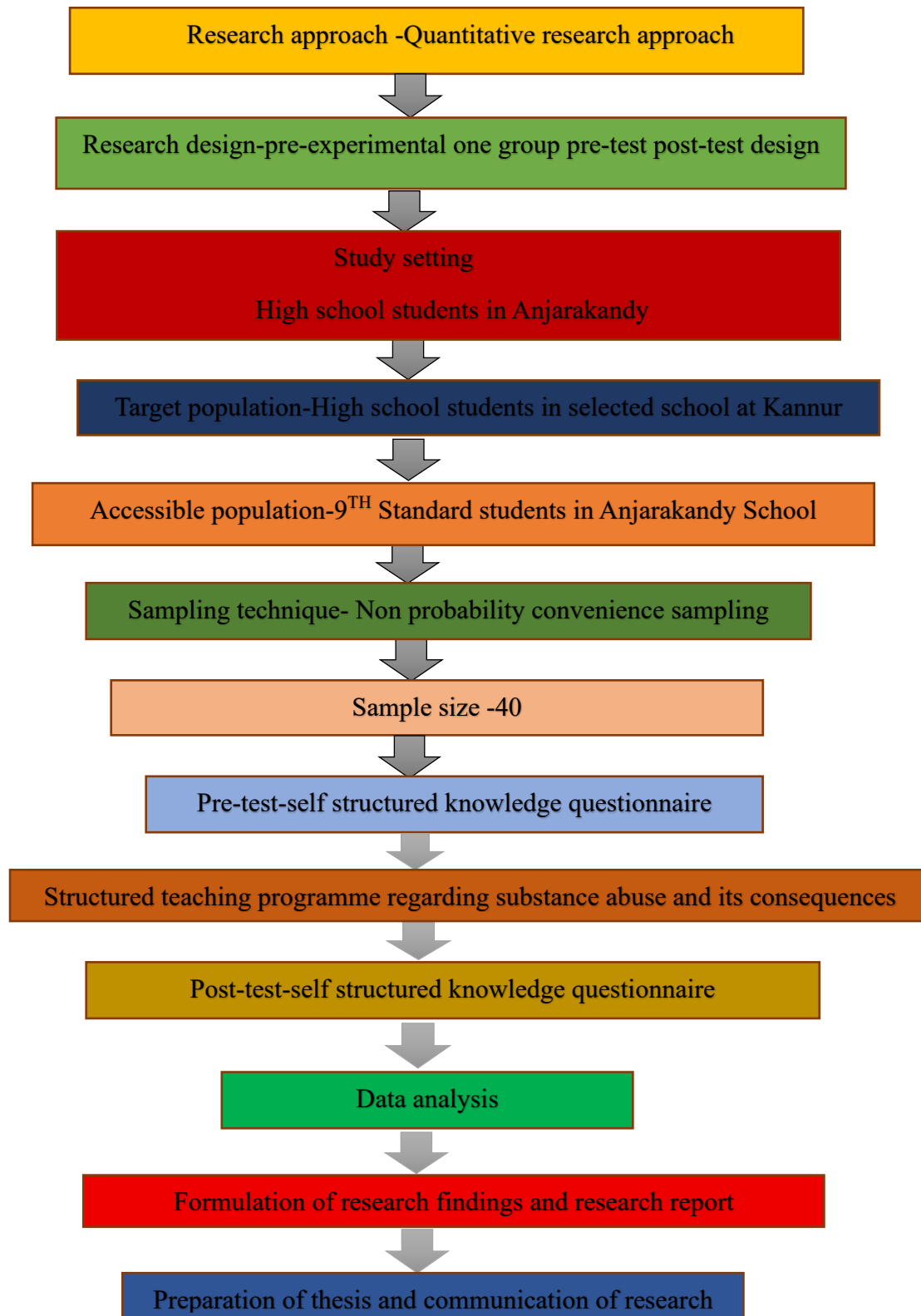


Fig2: schematic representation of the study

3.6 SETTING OF THE STUDY

Setting is a location for conducting research; can be natural, partially controlled or highly controlled. The main study and pilot study was conducted at Anjarakandy higher secondary school and C.H.M HSS Elayavoor respectively.

The main study was conducted at Anjarakandy higher secondary school which is 4kms away from college of nursing ,Kannur medical college, Anjarakandy.

3.7 POPULATION

3.7.1 Target population

The target population of the study involve high school students .

3.7.2 Accessible population

Accessible population comprise the 9th standard students in Anjarakandy school.

3.8 SAMPLE:

It refers to a smaller ,manageable version of a larger group. In the study sample comprises of 9th class students at selected school.

3.9 SAMPLE SIZE:

Sample size refers to number of students, events , behaviors or situations that are examined in a study. In this study, the sample size is 40.

3.10 SAMPLING TECHNIQUE:

sampling is defined as the process of selecting a group of people ,events, behavior or other elements which are needed to conduct a study. In this study sampling technique used is convenience.

Convenience sampling is a non-probability technique, students are selected due to their convenient accessibility and proximity to the researcher at selected school. It is a fast, inexpensive and easy sampling technique.

3.11 SAMPLING CRITERIA

3.11.1 Inclusion criteria:

- a) Those who are willing to participate in this study
- b) Those who are present at the time of study
- c) Those who are studying in 9th standard

3.11.2 Exclusion criteria:

- a) Students who are not willing to participate in this study
- b) Students who are absent during this study

3.12 DESCRIPTION OF THE TOOL

Data collection tools are the instruments that are the return devices that a researcher uses to collect data. For example, Questionnaire and observation schedule. In this study, the researcher uses self structured questionnaire to collect information regarding socio-demographic data, effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences.

- **TOOL 1:** Baseline data on selected variables
- **TOOL 2:** Self structured questionnaire on knowledge regarding substance abuse and its consequences

Score table

Total score	30
Adequate knowledge	>20
Moderate knowledge	10-20
Inadequate knowledge	<10

3.13 VALIDITY

It refers to the extent to which a measure represents. Content validity is concerned with the scope or range of items used to measure the variable. For examining the content and face validity of the questionnaire, it was given to 5 experts in the field. The validators have suggested some modifications in the content. The modifications and suggestions of experts were included in the final preparation of the questionnaire by the investigators.

3.14 RELIABILITY

Reliability in statistics refers to the over-all consistency of a measure. To establish the reliability of the tool split half method and spearman-brown formula was used. Correlation Coefficient was found $r = (0.88)$. Thus the tool was found to be reliable.

3.15 PILOT STUDY

Pilot experiment is a small scale preliminary study conducted to evaluate the feasibility, duration, cost, adverse effects and improve up on the study design prior to performance of a full scale research project. The fundamental purpose of conducting a pilot study to examine the feasibility of an approach that is intended to ultimately used in a larger scale . The pilot study started on 3/6/25-9/6/25 (2 pm) at C.H.M HSS Elayavoor.

The permission was obtained from concerned authority. The pilot study was conducted at C.H.M HSS Elayavoor , duration of the study was one week. A pre-test was conducted using structured knowledge questionnaire method and structured teaching programme on substance abuse and it's consequences among high school students was intervened. A post -test conducted on one week after the intervention by using same self structured questionnaire to assess the effectiveness of structured teaching programme. Structured teaching regarding the substance abuse and it's consequences was conducted with help of power point. The pilot study pre- test score was=4.406 and the post test score was=0.834.The paired "t" test value is 2.380.So that this was greater than the table value and the research hypothesis was accepted.

3.16 DATA COLLECTION PROCEDURE

Before data collection a formal return permission is obtained from the head of the school for conducting research study. The purpose of the study is explained to the high school students to ensure their cooperation and prompt response. Effect of the dependent Variable is seen before the treatment (pre- test). Later the manipulation is implemented and after manipulation observation of dependent Variable is made to examine the effect of the manipulation on the dependent variable.

The pre-test was conducted on 11th June 2025 at 2:00 PM using a self structured knowledge questionnaire. This pre-test assessed the baseline knowledge of the high school students regarding substance abuse and its consequences.

Following the pre-test, a structured teaching programme was implemented on the same day. The educational session lasted for 1 hour .

After a gap of six days, the post-test was conducted on 17th June 2025 at 2:00 PM using the same self structured knowledge questionnaire. This post-test aimed to evaluate the effectiveness of the structured teaching programme in improving the students knowled The responses from both pre-test and post-test were collected, scored, and used for further statistical analysis.

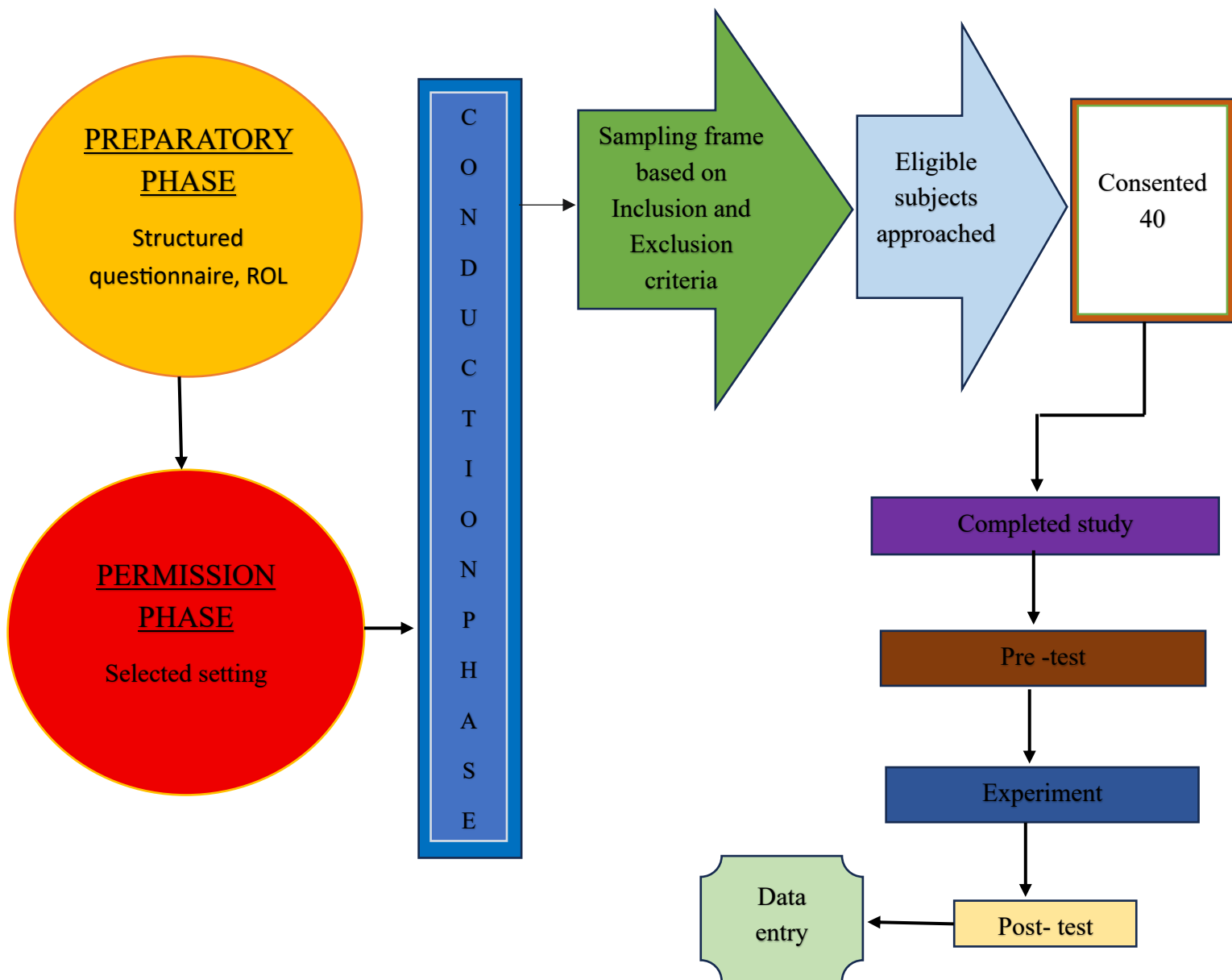


FIG 3 : Schematic representation of data collection procedure

a) Preparatory Phase :

The research was discussed with a number of experts including research guide, ethical clearance committee and statistician. Valuable inputs given by them were incorporated and changes were made accordingly. The investigator took ROL related to the study and prepared structured questionnaire. Procedure validation required was done.

b) Permission Phase :

Permission was taken from the college research committee for conduction of research. Then the ethical clearance was taken from the institutional review board. At last NOC was obtained from the selected school for conducting the research.

c) Conduction Phase:

- The investigator checked the available students based on the inclusion and exclusion criteria.
- After introduction, the investigator explained about the study and provided the subjects with the information. All the doubts were clarified and their confidentiality and anonymity in the study was assured. The investigator obtained written consent after establishing the subject's willingness to participate.
- Pre-assessment of all the available subjects was done and a sampling frame was prepared of the subjects. The investigator collected data for all the available samples.
- Intervention was given to selected samples according to the teaching materials prepared regarding substance abuse and its consequences.
- Post-test was done on the 7th day.
- The findings of the data were recorded. The investigator assured not to interfere with routine functioning of the class and thanked the participants and school management for their cooperation.

Data collection process is concluded by thanking each students for his /her participation and cooperation. The data collected is then compiled for data analysis.

3.17 PLAN FOR DATA ANALYSIS

Data analysis is a process of inspecting, cleansing, transforming and modelling data with useful information, informing conclusion and supporting decision making .Data was planned to be analysed on the basis of objectives and hypothesis using descriptive and inferential statistics.

Statistical analysis of data :

- Entry data in master sheet
- Analysis of data by calculating the frequencies and percentage to be used for analysis of demographic variables, pre-test and post-test level of knowledge among students.
- Evaluate the effectiveness of structured teaching programme regarding substance abuse and its consequences would be analysed by (paired “t”) test.
- Association between the pre-test level of knowledge regarding substance abuse and its consequences among high school students and their selected variables by applying chi-square test.

3.18 SUMMARY

The research methodology meticulously adopted in this study established a comprehensive, structured, and rigorous framework for addressing the research objectives. The carefully designed approach, inclusive of precise data collection strategies and sophisticated analytical techniques, fortified the reliability and validity of the findings. By upholding gold-standard research protocols and thoughtfully mitigating inherent limitations, this methodological paradigm has significantly enriched the credibility and impact of the study’s outcomes. Moreover, it has laid a strong intellectual foundation, paving the way for future scholarly exploration in this domain.

CHAPTER 4

ANALYSIS AND INTERPRETATION

“Numbers tells a story; interpretation tells the truth behind that story”

-Miles & Huberman

4.1 INTRODUCTION

Analysis means to dissect a whole into its individual components for separate examination. Data analysis is a procedure to receive raw data and transform it into information helpful for users by making decisions. Data is gathered and statistical analysis in order to provide answers to questions, test hypothesis or negate theories. Statistician "John turkey" explained technique of data analysis for describing the outcome of such processes, method of planning the collection data so that its analysis will be facilitated, more accurate or more reliable, and all such machinery and outcomes of (mathematical) statistics which are applicable to analysis data.

This chapter deals with the analysis and interpretation of data using descriptive and inferential statistics. The analysis was done according to the objectives and hypotheses of the study by descriptive and inferential statistics.

The data was organized and presented under the following headings.

SECTION I: Baseline data on selected variables

SECTION 2: Level of knowledge regarding substance abuse and its consequences

SECTION 3: Evaluate the effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences among high school students.

SECTION 4: Association between the pre-test level of knowledge and their selected variables.

4.2 SECTION 1: Baseline data on selected variables

This chapter deals with description of demographic characteristics of the high school students and has been summarized in terms of frequency and percentage. The characteristics include gender ,religion, monthly family income ,birth order, number of siblings, type of family, parent’s education(mother &father) residence, any family members use substances ,any information on substance abuse before, source of information.

Frequency and percentage distribution of students according to their selected variables

Table :2

N=40

Sl no	Demographic variables	Frequency(f)	Percentage(%)
1	Gender a) Male b) Female c) Other	23 17 0	57.5% 42.5% 0
2	Religion a) Hindu b) Muslim c) Christian d) Other	37 3 0 0	92.5% 7.5% 0 0
3	Monthly family income a) <Rs.10,000 b) Rs 10001-Rs20,000 c) Rs20,001-Rs30,000 d) >Rs30,000	16 10 8 6	40% 25% 20% 15%
4	Birth order a) 1 b) 2 c) >2	20 19 1	50% 47.5% 2.5%
5	Number of siblings a) 1 b) 2 c) >2	 9 20 1	 22.5% 50% 27.5%
6	Type of family a) Nuclear b) Joint c) Extended d) Other	17 21 1 1	42.5% 52.5% 2.5% 2.5%
7	Parent's education (Mother) a) No primary education b) Primary school	0 9	0 22.5%

	c) Higher secondary	17	42.5%
	d) Graduate and above	14	35%
8	Parent's education (Father)		
	a) No primary education	1	2.5%
	b) Primary school	3	7.5%
	c) Higher secondary	29	72.5%
	d) Graduate and above	7	17.5%
9	Residence		
	a) Urban	15	37.5%
	b) Rural	18	45%
	c) Semi-urban	7	17.5%
	d) slum	0	0
10	Any family member uses substances (eg:-alcohol, tobacco)		
	a) Yes	5	12.5%
	b) No	31	77.5%
	c) Not sure	4	10%
11	Have you ever received information on substance abuse before ?		
	a) Yes	19	47.5%
	b) No	21	52.5%
12	If yes from where was the source of information?		
	a) School	11	27.5%
	b) Parents	2	5%
	c) Media	6	15%
	d) peers	0	0

4.2.1 Gender

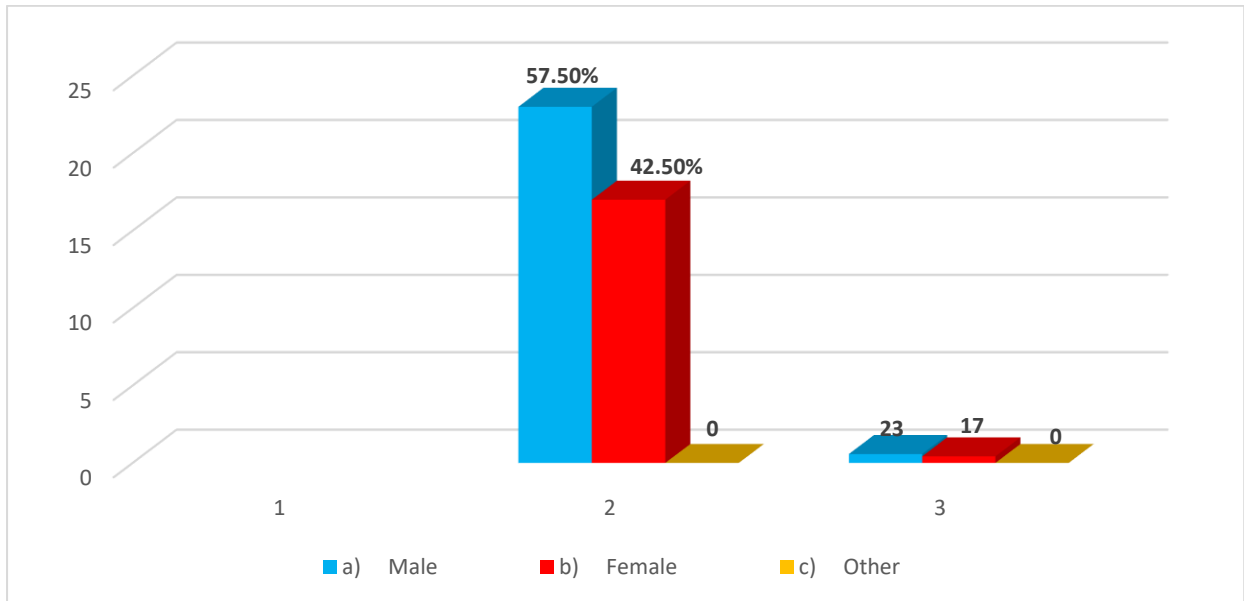


Fig 4: Diagram showing distribution of students based on their gender

Above figure reveals that majority in the study 23(57.5%) were male, 17 (42.5%) were female and no other gender.

4.2.2 Religion

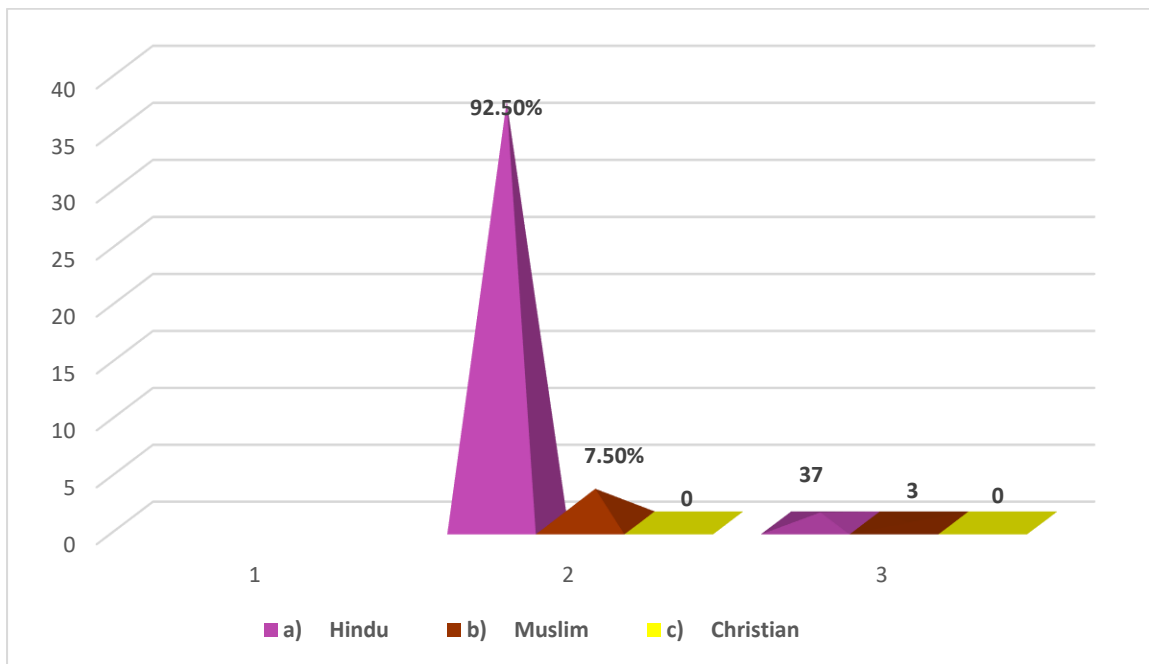


Fig 5: Diagram showing distribution of students based on their religion

Above figure reveals that majority of subjects in the study 37(92.5%) were Hindu, 3(7.5%) were Muslim and no Christian and other religion.

4.2.3 Family income

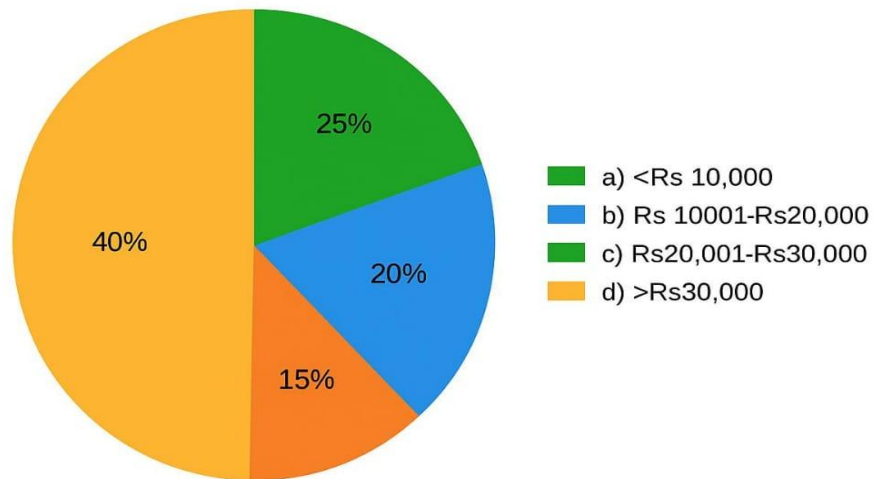


Fig 6: Diagram showing the distribution of students based on their family monthly income

Above figure showing the distribution of family monthly income the majority 16 (40%) were <Rs.10,000 , 10(25%) were Rs.10001-Rs.20,000, 8(20%) were Rs.20,001-Rs.30,000, 6(15%) were >30,000

4.2.4 Birth order

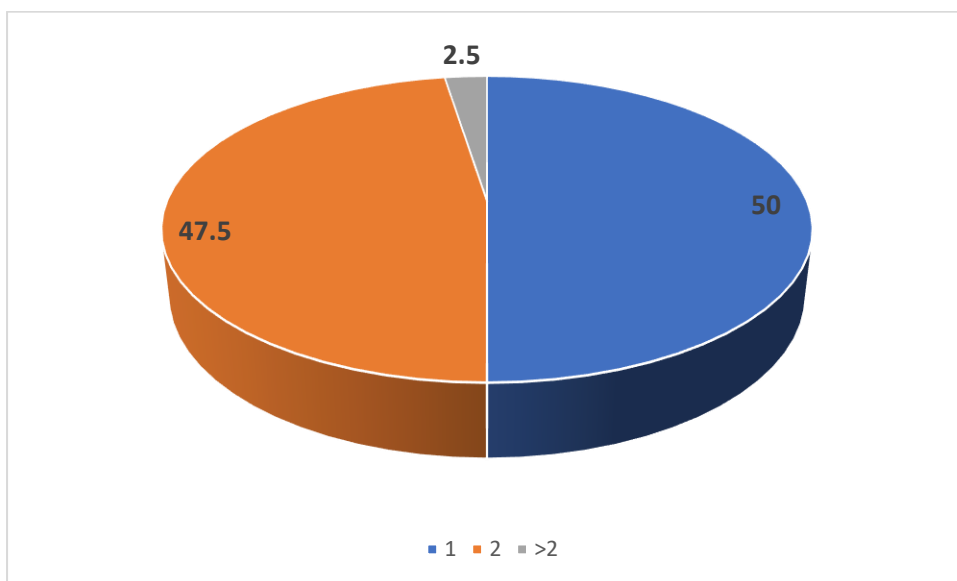


Fig 7: Diagram showing the distribution of students based on their birth order

Above figure showing the distribution of birth order the majority 20(50%) were 1, 19(47.5%) were 2, 1(2.5%) were >2.

4.2.5 Number of siblings

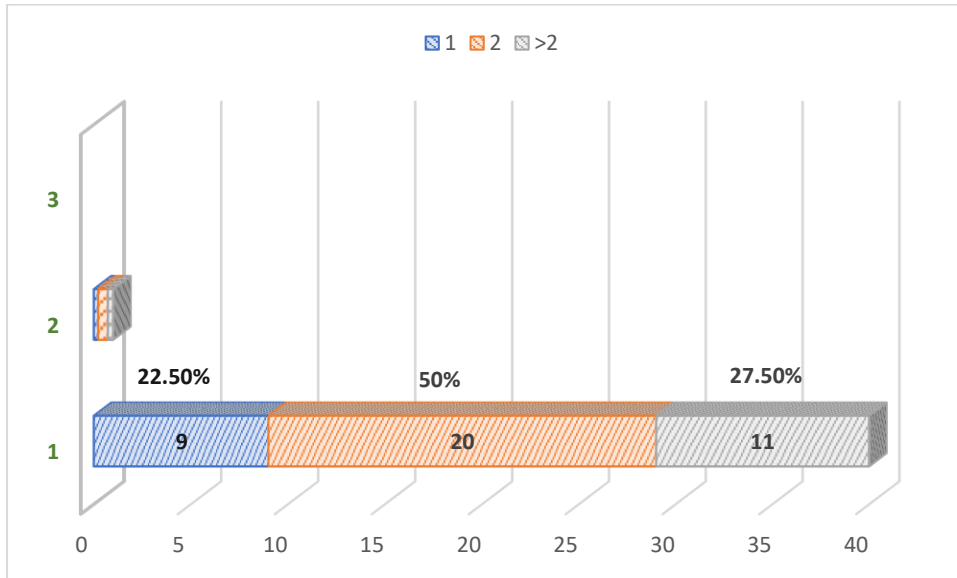


Fig 8: Diagram showing the distribution of students based on their number of siblings

Above figure showing the distribution of number of siblings the majority 20(50%) were 2, 9(22.5%) were 1, 1(27.5%) were >2.

4.2.6 Type of family

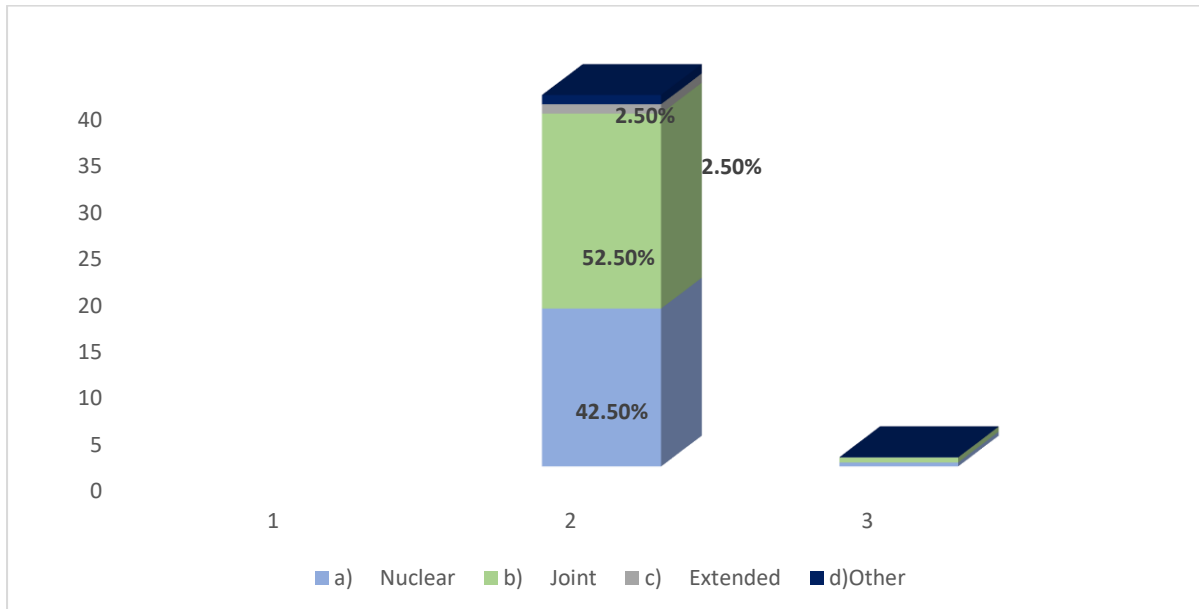


Fig 9: Diagram showing the distribution of students based on their types of family

Above figure reveals that the majority of students in the study 21(52.5%) were joint family, 1(2.5%) were extended family, 1(2.5%) were others.

4.2.7 Mother's education

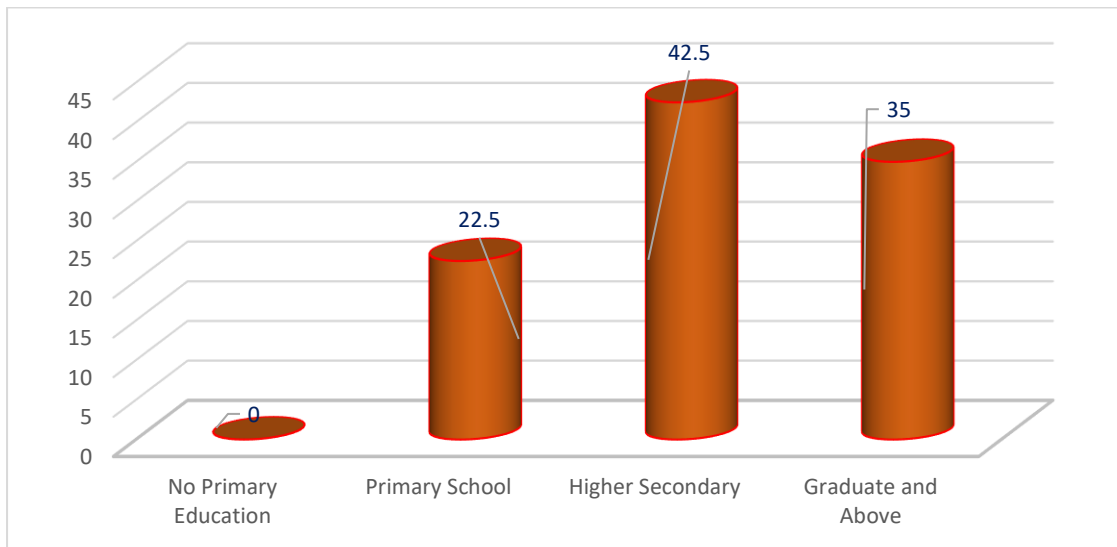


Fig 10: Diagram showing the distribution of students based on their mother's education

Above figure showing the distribution of the mother's education the majority 17(42.5%) were higher secondary, 14(35%) were graduate and above, 9(22.5%) were primary school and no primary education.

4.2.8 Father's education

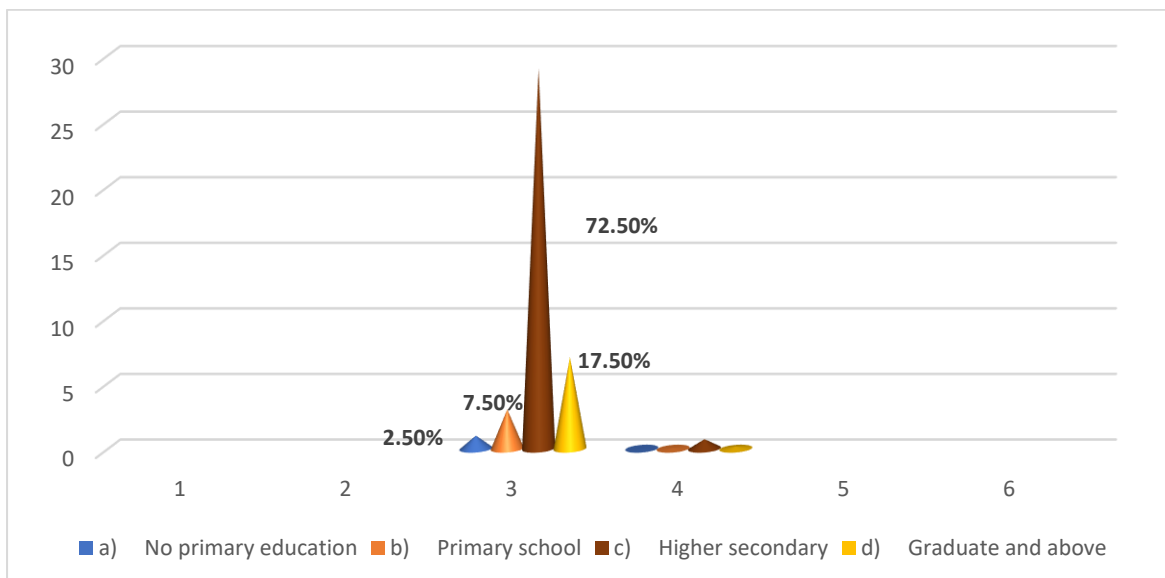


Fig 11: Diagram showing the distribution of students based on their father's education

Above figure showing the distribution of the father's education the majority 29(72.5%) were higher secondary, 7(17.5%) were graduate and above, 3(7.5%) were primary school, 1(2.5%) were no primary education.

4.2.9 Residence

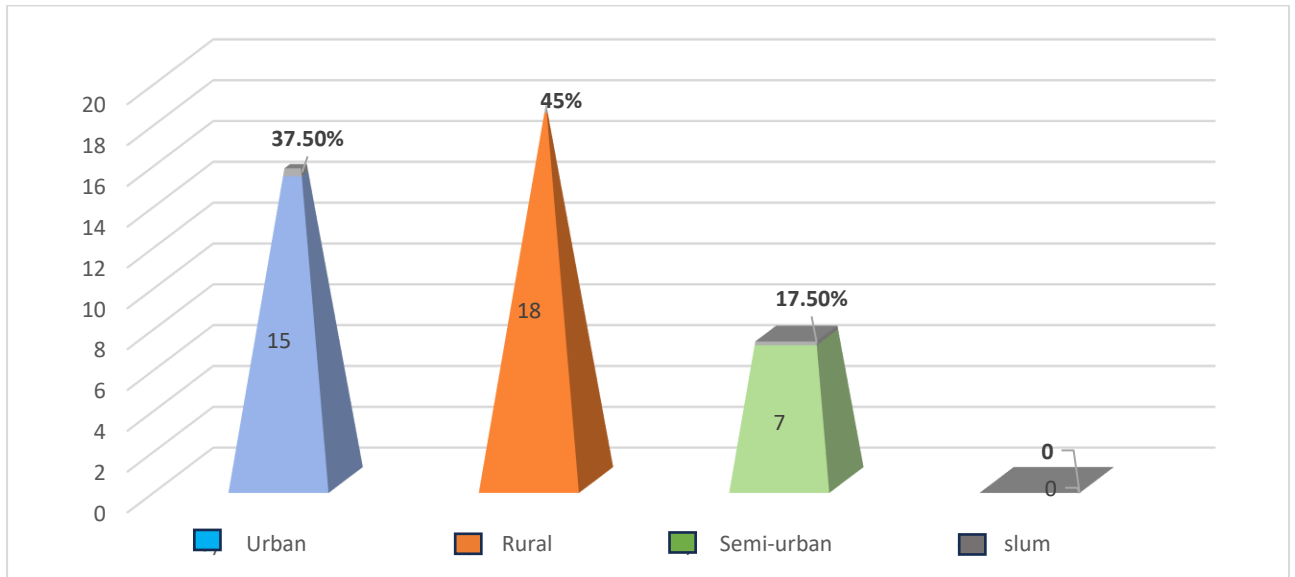


Fig 12: Diagram showing the distribution of students based on their residence

Above figure showing the distribution of the residence the majority 18(45%) were from rural, 15(37.5%) were from urban, 7(17.5%) were from semi-urban and no slum.

4.2.10 Any family member uses substances

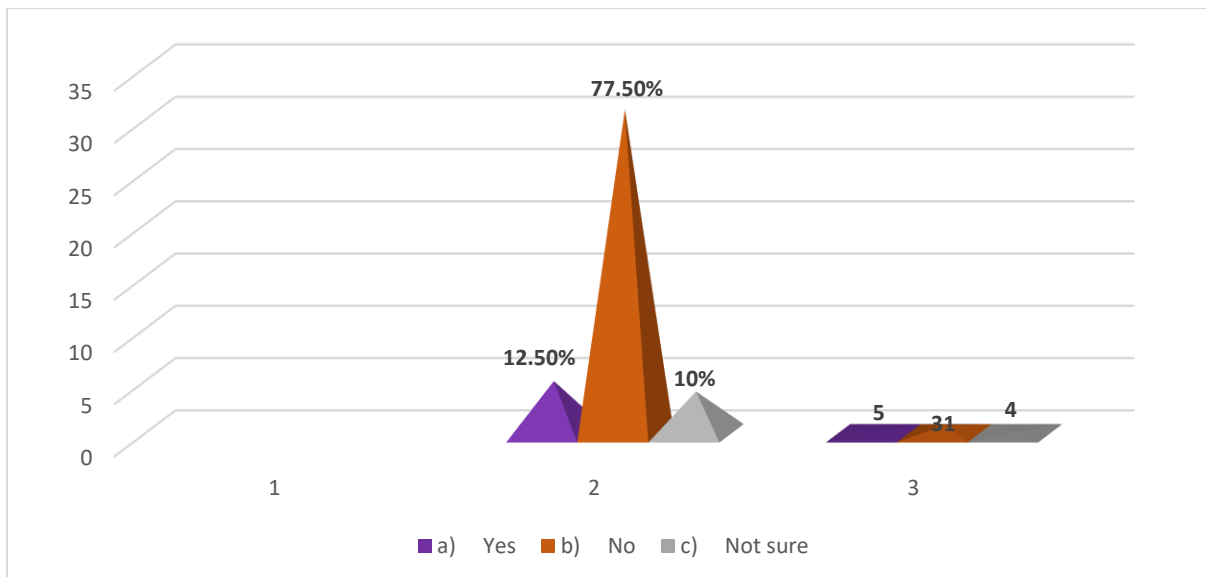


Fig 13: Diagram showing the distribution of students based on any family member uses substances

Above figure reveals that the majority of students 31(77.5%) reported that no family member use substances, while 5(12.5%) reported yes, 4(10%) students were not sure.

4.2.11 Have you ever received information on substance abuse before

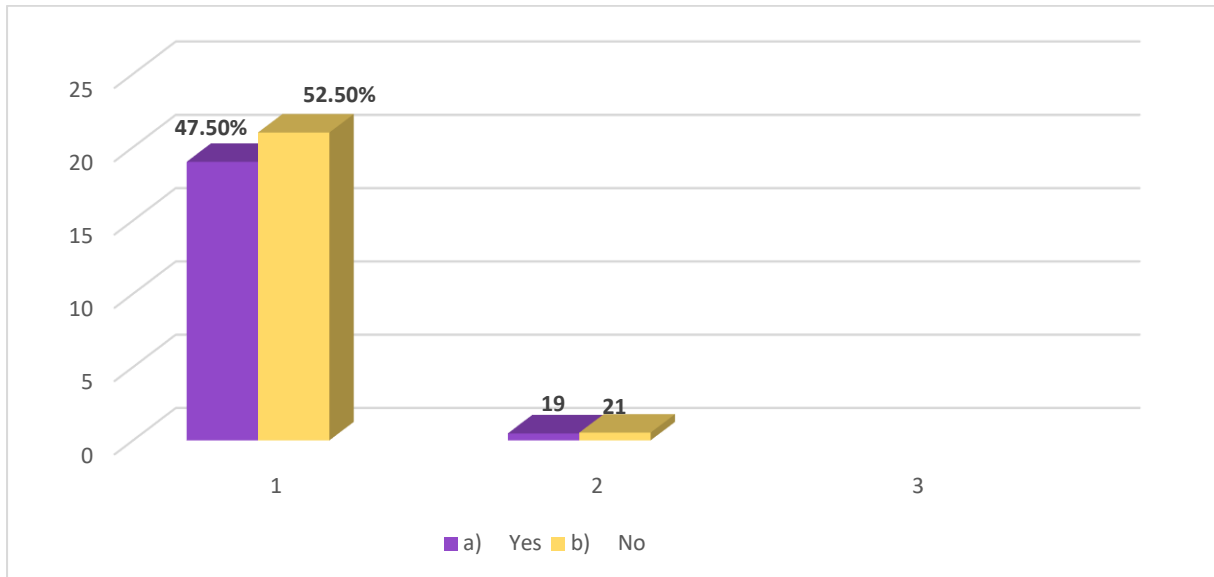


Fig 14: Diagram showing the distribution of students based on ever received information on substance abuse before

Above figure reveals that the majority 21(52.5%) were responded no, 19(47.5%) were responded yes.

4.2.12 : Source of information

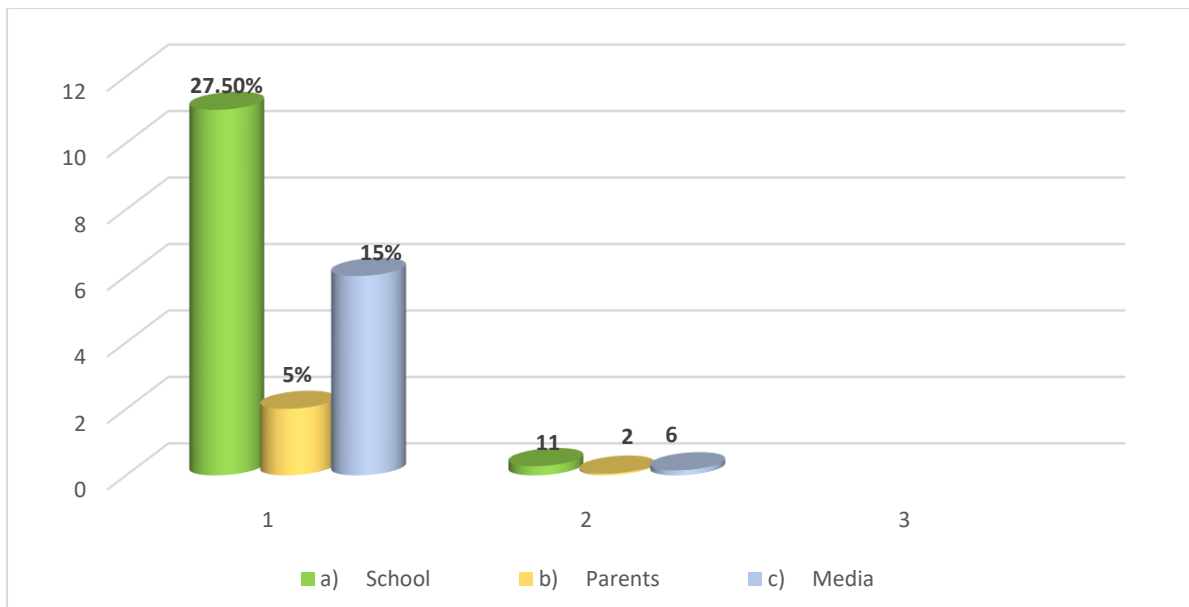


Fig 15: Diagram showing the distribution of students based on their source of information

Above figure reveals that the majority of students in the study 11(27.5%) were from school, 6(15%) were from media, 2(5%) were from parents and no one from peers.

4.3 Section 2: Level of knowledge regarding substance abuse and its Consequences

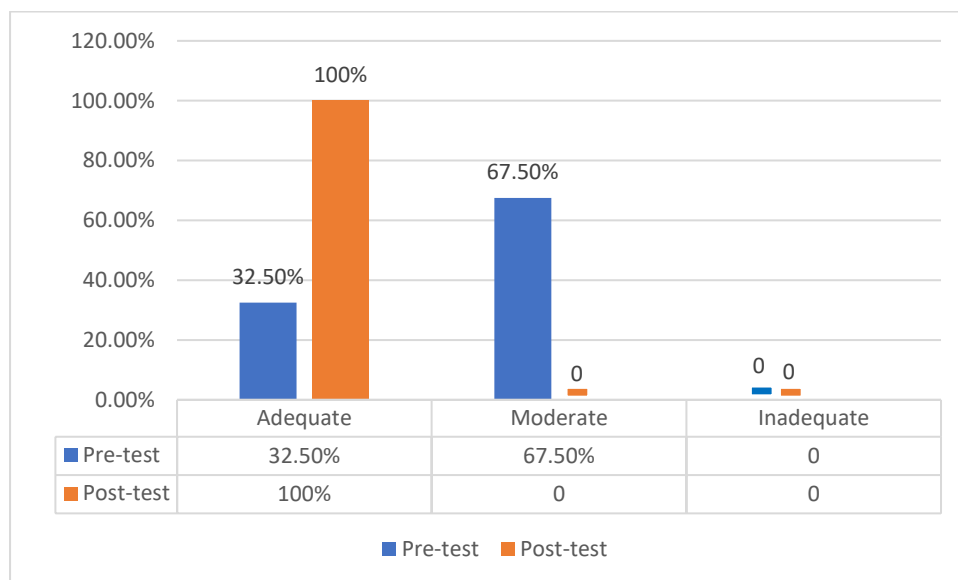


Fig 16: Diagram showing the distribution of pre-test and post-test knowledge score of students

In this section the knowledge of students was gathered through self-structured knowledge questionnaire by conducting pre-test and post-test. The total score of the self-structured knowledge questionnaire was 30 and it is categorized as (<10) considered as inadequate and the (10-20) considered as moderate, (>20) considered as adequate. Before the intervention, the majority of students 27(67.50%) demonstrated a moderate level of knowledge, while 13(32.50%) had an adequate level of knowledge. There were no students in the inadequate.

After the intervention, 40(100%) achieved an adequate level of knowledge. No students were found in the moderate and inadequate categories.

N=40

Level of knowledge	Scores	Pre-test		Post-test	
		frequency	percentage	frequency	percentage
Inadequate	<10	0	0	0	0
Moderate	10-20	27	67.50%	0	0
Adequate	>20	13	32.50%	40	100%

Table 3: Showing the frequency distribution and percentage of pre-test and post-test level of knowledge

4.4 Section 3: Effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences among high school students

Table 4 **N=40**

Assessment	Mean	Mean difference	Standard deviation	t value	df	p value
Pre-test	18.275	8.275	3.86	13.21961	39	<0.01
Post-test	26.55		1.20			

t₃₉=2.0227 at 0.05 level of significance

Table illustrate the mean pre-test knowledge score of students was 18.275 and has been increased to 26.55 in the post-test. The computed (t) value is (13.21961) is greater than the table value (2.0227).So the test is significant at 0.05 level.

4.5 Section 4: Association between the pre-test level of knowledge regarding substance abuse and its consequences among students and their selected variables

SL NO	DEMOGRAPHIC VARIABLES	df	Chi ² VALUE	INFERENCE
1	Gender	4	4.3	NS
2	Religion	6	31.44	S*
3	Monthly income	6	2.34	NS
4	Birth order	4	0.76	NS
5	No of siblings	6	2.22	NS
6	Type of family	6	1.34	NS
7	Mother's education	6	16.12	S*
8	Father's education	6	2.8	NS
9	Residence	6	14.72	S*
10	Any family members use substances	4	2.79	NS

11	Information on substance abuse before	2	0.29	NS
12	Source of information (if yes)	6	19.19	S*

Table 5:

N=40

S*=significant

NS=Not significant

On referring to the chi-square (χ^2) table at degrees of freedom 2, 4, and 6, the tabular values of χ^2 at 0.05 level of significance are 5.99, 9.49, and 12.59, respectively. The calculated values of χ^2 for the selected variables—religion (31.44), mother’s education (16.12), residence (14.72), and source of information (19.19)—are greater than the respective tabular values. Therefore, these selected variables are statistically significant. So, we accept the research hypothesis (H₂).

On the other hand, the calculated χ^2 values for selected variables such as gender (4.3), monthly income (2.34), birth order (0.76), number of siblings (2.22), type of family (1.34), father’s education (2.8), any family members using substances (2.79), and information on substance abuse before that (0.29) are less than the tabular values. Therefore, these selected variables are not statistically significant.

4.6 Summary

In this chapter researcher enabled to get the total picture of the data obtained. Captured data presented, analyzed, described and interpreted in a systematic manner It has presented data in an intelligible and interpretable form in accordance with the stated hypotheses. Analysis and it's description of data using descriptive and inferential statistics.

CHAPTER 5

RESULTS

“Statistics are the grammar of science.”

- Karl Pearson

5.1 INTRODUCTION

This chapter deals with the results of the study. The findings obtained through analysis and interpretation of the data which is collected from 40 high school students of selected school at Kannur district, Kerala through a self structured knowledge questionnaire regarding substance abuse and its consequences.

5.2 OBJECTIVES

- To assess the pre-test and post-test level of knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala.
- To evaluate the effectiveness of structured teaching program on knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala.
- To find out the association between the pre-test level of knowledge regarding substance abuse and its consequences among high school students and their selected variables.

5.3 HYPOTHESES

H_{0.1}: There is no significant difference between pre-test and post-test level of knowledge score regarding substance abuse and its consequences among high school students.

H_{0.2}: There is no significant association between the level of knowledge score regarding substance abuse and its consequences among high school students and their selected variables.

H₁: The mean post-test level of knowledge score is significantly higher than the mean pre-test level of knowledge score regarding substance abuse and its consequences among high school students.

H₂: There is a significant association between the pre-test level of knowledge score regarding substance abuse and its consequences among high school students and their selected variables.

5.4 RESULTS

A) THE DEMOGRAPHIC CHARACTERISTICS OF THE SAMPLES

It deals with the gender, religion, family income, birth order, number of siblings, type of family, mother's education, father's education, residence, any family member uses substances, information on substance abuse before, source of information.

- Majority of the students 23(57.5%) were male, 17 (42.5%) were female and no other gender.
- The sample consisted of 37(92.5%) were Hindu, 3(7.5%) were Muslim and no Christian and other religion.
- With regard to the family income 16 (40%) were in the range of <Rs.10,000, 10(25%) of the families belonged to the income of Rs.10001-Rs.20,000 and 8(20%) were belonged to the income of Rs.20,001-Rs.30,000, remaining 6(15%) were >30,000.
- Regarding the birth order, the majority of students 20(50%) were 1, 19(47.5%) were 2, 1(2.5%) were >2.
- With regard to number of siblings the majority of students 20(50%) were 2, 9(22.5%) were 1, 1(27.5%) were >2.
- While comparing the students with their family type, most of them 21(52.5%) were joint family, 1(2.5%) were extended family, 1(2.5%) were others.
- While looking the students with the educational status of mother the majority of the subjects 17(42.5%) were higher secondary, 14(35%) were graduate and above,9(22.5%) were primary school and no primary education.
- While comparing the students with their father's education, 29(72.5%) were higher secondary, 7(17.5%) were graduate and above, 3(7.5%) were primary school, 1(2.5%) were no primary education.
- 18(45%) were residing in rural area, 15(37.5%) were in urban area, 7(17.5%) of students were in semi-urban area and none of them from slum area.
- While comparing the students with their family members uses substances before the majority 31(77.5%) were reported no, 5(12.5%) were reported yes, 4(10%) were not sure about it.

- Regarding the information on using substance before, the majority 21(52.5%) were responded no, 19(47.5%) were responded yes.
- Majority of students regarding source of information 11(27.5%) were from school, 6(15%) were from media, 2(5%) were from parents and no one from peers.

B) ASSESSING THE KNOWLEDGE REGARDING SUBSTANCE ABUSE AND ITS CONSEQUENCES AMONG HIGH SCHOOL STUDENTS IN SELECTED SCHOOL AT KANNUR DISTRICT, KERALA

Among the 40 students assessed for knowledge regarding substance abuse and its consequences, the pre-test results showed that none had inadequate knowledge, 27 students (67.5%) had moderate knowledge, and 13 students (32.5%) had adequate knowledge.

After the implementation of the structured teaching programme, the post-test results revealed a significant improvement, with all 40 students (100%) achieving adequate knowledge, and none remaining in the inadequate or moderate categories. This demonstrates the effectiveness of the structured teaching programme in enhancing students' knowledge about substance abuse and its consequences.

C)EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING SUBSTANCE ABUSE AND ITS CONSEQUENCES AMONG HIGH SCHOOL STUDENTS

There was a significant difference in the mean pre-test and post-test knowledge scores regarding substance abuse and its consequences among high school students. The calculated t-value was 13.21961, which is greater than the table value of 2.0227 at the 0.05 level of significance. This indicates that the difference in scores is statistically significant. Therefore, the research hypothesis (H_1) was accepted, and it was concluded that the structured teaching programme was effective in improving the knowledge of students about substance abuse and its consequences.

D) TO FIND OUT ASSOCIATION BETWEEN THE PRE-TEST LEVEL OF KNOWLEDGE REGARDING SUBSTANCE ABUSE AND ITS CONSEQUENCES AMONG HIGH SCHOOL STUDENTS AND THEIR SELECTED VARIABLE.

On referring to the chi-square (χ^2) table at degrees of freedom 2, 4, and 6, the tabular values of χ^2 at 0.05 level of significance are 5.99, 9.49, and 12.59, respectively. The calculated values of χ^2 for the selected variables—religion (31.44), mother's education (16.12), residence (14.72), and source of information (19.19)—are greater than the respective tabular values. Therefore, these selected variables are statistically significant. So, we accept the research hypothesis (H_2).

On the other hand, the calculated χ^2 values for selected variables such as gender (4.3), monthly income (2.34), birth order (0.76), number of siblings (2.22), type of family (1.34), father's education (2.8), any family members using substances (2.79), and information on substance abuse before that (0.29) are less than the tabular values. Therefore, these selected variables are not statistically significant.

5.5 SUMMARY

The results of the study enable to get the total picture of the findings, A Summarized form help to orient the discussion. The researchers found that there was a significant gain in the knowledge level among high school students regarding substance abuse and its consequences.

CHAPTER 6

Discussion, Summary and Conclusion

“The end is where we start from”.

-T S Eliot

6.1 INTRODUCTION

In this chapter the investigators, discusses, summarizes and appropriately generalise the form of conclusion of the major findings was done. Also reviews those in term of results of other studies and the solution to the problem are offered in the form of recommendations.

6.2 DISCUSSION

Substance abuse among adolescents represents a critical and escalating public health issue with profound biopsychosocial ramifications. The term "substance abuse" encompasses the maladaptive consumption of psychoactive agents such as alcohol, nicotine, cannabis, inhalants, and various illicit or prescription drugs for non-therapeutic purposes. The pattern of substance use in this vulnerable population varies in severity, ranging from experimental or recreational usage to chronic dependency, with each stage imposing distinctive health and behavioral risks.

The clinical manifestations of substance misuse in adolescents are multifaceted, affecting cognitive, emotional, and physical domains. Mild presentations may include academic underachievement, diminished concentration, mood instability, and social withdrawal. Conversely, severe cases are frequently associated with neurocognitive deficits, impaired judgment, physical dependence, legal entanglements, and heightened susceptibility to mental illnesses such as anxiety, depression, and suicidal tendencies. Prolonged exposure to addictive substances exacerbates the risk of irreversible hepatic, renal, cardiovascular, and neurological impairments, thus compounding the disease burden.

The etiopathogenesis of adolescent substance abuse is multifactorial. Peer group influence, familial dysfunction, socio-economic deprivation, academic stressors, and pervasive exposure to media depictions of substance use have all been implicated as significant contributory factors. In developing regions and socioeconomically marginalized communities, the prevalence of substance abuse is exacerbated by insufficient health education, lax regulatory oversight, and easy accessibility of psychoactive substances.

Epidemiological investigations consistently underscore the high prevalence of substance abuse among high school students, with studies indicating that 20–30% of adolescents have engaged in the consumption of one or more psychoactive substances. However, these figures are likely to underestimate the true incidence, given the pervasive underreporting driven by

stigma, fear of punitive consequences, and lack of parental or institutional awareness. Furthermore, demographic analyses suggest that urban adolescents and those residing in socioeconomically disadvantaged environments bear a disproportionate burden of substance use disorders.

The sequelae of adolescent substance abuse extend beyond the individual to encompass broader societal detriments, including increased healthcare expenditures, school dropout rates, juvenile delinquency, and familial discord. These consequences underscore the urgent necessity for multifaceted preventive interventions. Implementation of structured, evidence-based educational programs, coupled with parental engagement, psychological counselling services, and stringent legislative measures, is imperative to mitigate the escalating threat of substance abuse and to preserve the holistic well-being of adolescents.

6.2.1 SOCIO -DEMOGRAPHIC VARIABLES

- **Gender**

In the present study the majority were males constituted 57.5%, females 42.5%, and no others.

The current study parallel to the study of Fatima N., et al. (2021). In this study, out of 60 adolescent students, the majority were males (56.7%) and the remaining were females (43.3%), with no representation of other genders. The study found that the male students formed the larger portion of the study sample.

- **Religion**

In the present study demographic pattern, the majority were Hindus comprised 92.5%, Muslims 7.5%, and no representation from Christians or others.

Kaur P., et al. (2019) In this study, out of 60 adolescent students, the majority (90%) were Hindus, followed by Muslims (8.3%) and Christians (1.7%), with no respondents from other religions. This religious distribution closely resembles our study.

- **Monthly family income**

In the present study the majority were 40% of the respondents reported a family income of less than ₹10,000, 25% belonged to the ₹10,001–₹20,000 income range, 20% fell in the ₹20,001–₹30,000 bracket, and 15% had a family income of more than ₹30,000.

A study was conducted by Rani et al. (2018) In their study, it was found that the majority of the participants (42.5%) belonged to families with a monthly income of less than ₹10,000, while 27.5% of the students had a family income between ₹10,001 and ₹20,000. Additionally, 20% of the respondents reported a monthly family income ranging from ₹20,001 to ₹30,000, and the remaining 10% belonged to families with an income above ₹30,000. The similarity in income distribution across both studies supports the representativeness of the sample in the present research and suggests that socioeconomic status may play a role in shaping knowledge levels among adolescents regarding substance abuse.

- **Birth order**

In the present study were the majority of the students (50%) were first-born, 47.5% were second-born, and 2.5% were of third or higher birth order.

A study conducted by Verma S., et al. (2018) In their study, it was reported that 48% of the students were first-born children, while 46% were second-born, and only 6% belonged to third or higher birth orders. The similarity in the distribution of birth order indicates that the sample characteristics of both studies are comparable and strengthens the representativeness of the present study population regarding familial positioning, which is considered an important demographic variable in adolescent-related research studies.

- **Number of siblings**

In the present study were the majority of students (50%) had two siblings, 22.5% had one sibling, and 27.5% had more than two siblings.

A study conducted by Kumari S., et al. (2017) In this study, it was reported that 52% of the students had two siblings, 24% had one sibling, and 24% had more than two siblings. The similarity in the distribution of the number of siblings suggests that family size remains a consistent demographic characteristic in adolescent populations across different regions, supporting the generalizability of the present study sample.

- **Type of family**

In the present study students with their family type, most of them 21(52.5%) were joint family, 1 (2.5%) were extended family, 1 (2.5%) we're others

A study conducted by Kumar and Sharma (2019) the majority of students belonged to joint families (53%), followed by nuclear families and a very small proportion from extended or other family types. The findings support the current study where 21 students (52.5%) were from joint families, while only 1 (2.5%) each were from extended and other types of families.

- **Mother's Education**

In the present study were the majority 42.5% of mothers were educated up to higher secondary level, 35% were graduates and above, and 22.5% had primary school education. Notably, no respondents reported mothers with no formal education.

A study conducted by Kaur (2020) In her study, the majority of students' mothers (44%) had completed higher secondary education, followed by 36% who were graduates and above, and 20% who had only primary education. Mother's educational background significantly influences her child's learning environment, awareness level, and overall development. Educated mothers are more likely to engage with their children's education, promote health-seeking behavior, and provide emotional and academic support.

- **Father's Education**

In the present study While comparing the students with their father's education , the majority 29(72.5%) were higher secondary, 7(17.5%) were graduate and above, 3(7.5%) were primary school, 1(2.5%) were no primary education.

Study was conducted by Patil and Wasnik (2016) It was observed that the majority of adolescents whose fathers had attained higher secondary education (68%) or graduation and above (20%) demonstrated a better level of knowledge compared to those whose fathers had primary education or were illiterate (12%).

- **Residence**

In the present study the majority 18(45%) were residing from rural area, 15(37.5%) were from urban area, 7(17.5%) of students were from semi-urban area and none of them from slum area.

A study was conducted by Kamble P. & Bhosale S. (2020) Study highlights that a large proportion of students belonged to rural and urban areas, indicating varied exposure and awareness levels based on their residential background. In their sample, the majority of students were from rural (42%) and urban (36%) areas, while fewer students came from semi-urban backgrounds and none from slum areas.

- **Any family member uses substances**

In the present study with their family members uses substances before the majority 31(77.5%) were no, 5(12.5%) were yes, 4(10%) were not sure.

Study was conducted by Sharma et al. (2018) The study highlighted that the presence or absence of substance use among family members significantly influenced the students' awareness and attitude towards substance abuse. It was reported that the majority of adolescents (73%) came from families where no member used substances, whereas 15% had at least one family member who consumed alcohol or other substances, and 12% were unsure about their family's substance use history.

- **Have you ever received information on substance abuse before**

In the present study Regarding the information on using substance before, the majority 21(52.5%) were no, 19(47.5%) were yes

Study was conducted by Kumar et al. (2019) The study revealed that prior exposure or experimentation with substances significantly affected the baseline knowledge levels of students regarding substance abuse and its harmful consequences. The findings indicated that 49% of the students had a history of using substances at least once, while 51% reported no such experience.

- **Source of information**

In the present study Majority of students regarding source of information 11 (27.5%) were school, 6 (15%) were media 2 (5%) were parents and no peers.

A study was conducted by Kamble P. & Bhosale S. (2020) Study highlights that a large proportion of students belonged to rural and urban areas, indicating varied exposure and awareness levels based on their residential background. In their sample, the majority of students were from rural (42%) and urban (36%) areas, while fewer students came from semi-urban backgrounds and none from slum areas.

6.2.2 TO ASSESS THE PRE-TEST AND POST-TEST LEVEL OF KNOWLEDGE REGARDING SUBSTANCE ABUSE AND ITS CONSEQUENCES AMONG HIGH SCHOOL STUDENTS.

In the present study Assessing the knowledge regarding substance abuse and its consequences among high school students at selected school in Kannur district, Kerala .Among the 40 students to assess the knowledge regarding substance abuse and its consequences before structured teaching programme the inadequate knowledge was nil, moderate include 27(67.50%), and finally the adequate 13(32.50%).During post-test, after the structured teaching programme regarding substance abuse and its consequences the inadequate and moderate knowledge was nil, the adequate include 40(100%).

A study conducted by Kamble P. and Bhosale (2020) pre-test results indicated that 60% of the students possessed moderate knowledge, 40% had inadequate knowledge, and none demonstrated adequate knowledge about substance abuse and its consequences. However, following the administration of the structured teaching programme, a remarkable improvement was observed, with 100% of the students achieving adequate knowledge in the post-test, and no students remaining in the moderate or inadequate categories, thereby highlighting the significant impact of the educational intervention.

6.2.3 TO EVALUATE THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING SUBSTANCE ABUSE AND ITS CONSEQUENCES AMONG HIGH SCHOOL STUDENTS.

In the present study Effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences among high school students. There is a significant difference in the mean, pre-test and post-test knowledge score of substance abuse and its consequences among high school students and difference is statistically significant ($t=13.21961$) greater than the table value (2.0227 at 0.05). Hence hypotheses (H_1) was accepted and concluded that there is a significant effectiveness on structured teaching programme.

A study was conducted by Anju Sharma (2019) The study highlights that the mean pre-test score was significantly lower than the mean post-test score, and the calculated t-value was 15.27, which was greater than the table value at 0.05 level of significance. This indicated a statistically significant improvement in knowledge after the structured teaching programme.

6.2.4 TO FIND OUT THE ASSOCIATION BETWEEN SELECTED VARIABLES & LEVEL OF KNOWLEDGE REGARDING SUBSTANCE ABUSE AND ITS CONSEQUENCES AMONG HIGH SCHOOL STUDENTS.

On referring to the chi-square (χ^2) table at degrees of freedom 2, 4, and 6, the tabular values of χ^2 at 0.05 level of significance are 5.99, 9.49, and 12.59, respectively. The calculated values of χ^2 for the selected variables—religion (31.44), mother's education (16.12), residence (14.72), and source of information (19.19)—are greater than the respective tabular values. Therefore, these selected variables are statistically significant. So, we accept the research hypothesis (H_2).

On the other hand, the calculated χ^2 values for selected variables such as gender (4.3), monthly income (2.34), birth order (0.76), number of siblings (2.22), type of family (1.34), father's

education (2.8), any family members using substances (2.79), and information on substance abuse before that (0.29) are less than the tabular values. Therefore, these selected variables are not statistically significant.

A study by Kaur and Kaur (2018) involving 100 high school students examined the association between students' knowledge of substance abuse and their socio-demographic variables using the Chi-square test. Significant associations were found with mother's education, place of residence, religion, and source of information ($p < 0.05$), indicating these factors influenced knowledge levels. However, variables such as gender, type of family, father's education, birth order, number of siblings, and monthly family income showed no significant association ($p > 0.05$). These findings align with the present study, which also reported significant associations with religion, mother's education, residence, and information source, but not with gender, income, family type, or number of siblings.

6.3 SUMMARY

This chapter deals with the summary of the study and conclusions. The findings of study proved that majority of the high school students had lack of knowledge on substance use in pre-test. The study assumed that high school students have some knowledge on substance use.

The following objectives were set for the study:

- To assess the pre-test and post-test level of knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala.
- To evaluate the effectiveness of structured teaching program on knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala.
- To find out the association between the pre-test level of knowledge regarding substance abuse and its consequences among high school students and their selected variables.

6.4 CONCLUSIONS OF THE STUDY

Effectiveness of structured teaching program on level of knowledge regarding substance abuse and its consequences among high school students is the main concept of the study. So, the following conclusions were drawn from the study

- Administration of structured teaching program found to be effective among high school students in selected school at Kannur district, Kerala on knowledge regarding substance abuse and its consequences.
- There was a significant association between the pre-test level of knowledge among high school students and their selected variables such as religion of the student, mother's education, residence and source of information.

6.5 NURSING IMPLICATIONS

The findings of the study have implication in various areas including Nursing practice, Nursing education, Nursing administration, Nursing research.

6.5.1 NURSING PRACTICE

- Nurses play a vital role in delivering health services related to substance abuse at all levels of preventive, promotive, curative, and rehabilitative care for individuals affected by addiction.
- The nursing care provided to clients not only focuses on managing the current effects of substance abuse but also gives equal importance to the prevention of potential complications and relapse.

6.5.2 NURSING EDUCATION

- The present study helps the nurse educators and student nurses to focus on knowledge regarding substance abuse and its consequences. Innovative teaching should be an integral part of the nursing curriculum.
- Nurse educators can train nursing students to gain in-depth knowledge regarding the causes, effects, and prevention strategies of substance abuse, which is one of the major public health concerns at present.
- Educational campaigns involving student nurses can be conducted to develop awareness about the harmful effects of substance abuse and the importance of early intervention. This can improve students abilities in providing effective health education.
- Nurse educators should take responsibility to help students gain deep insights into the consequences of substance abuse so that they can spread awareness and motivate individuals to seek help and avoid harmful behaviors.

6.5.3 NURSING ADMINISTRATION

- Work closely with government agencies, NGOs, local health centres, and schools to create a supportive network for substance abuse consequences and its prevention, must take initiative in formulating effective policies for the prevention, management of individuals affected by substance abuse.
- Nurse administrators can organize various developmental programs and in-service education to evaluate the effectiveness of structured teaching programs on improving knowledge regarding substance abuse.
- Being in top-level positions, nursing administrators have the responsibility not only to oversee proper nursing practice but also to enhance the quality of care delivered to substance abuse patients by continuously improving nurses' knowledge and skills through training and educational support.

6.5.4 NURSING RESEARCH

- The nursing profession is increasingly involved in the development of scientific knowledge relating to its practice. Research is becoming an important force in nursing and is being used to change practice, education, and policy.
- Nursing research can be helpful in determining the appropriate strategies for prevention and rehabilitation of substance abuse across different age groups. Quality research studies on motivation, relapse triggers, and recovery support systems can provide valuable insights.
- Research should also focus on understanding the barriers and challenges faced by individuals dealing with substance abuse, and the impact on their physical, mental, and social well-being.
- The results of the study encourage nurses to conduct research in various aspects related to substance abuse, including awareness, early intervention, and long-term recovery.

6.6 LIMITATIONS

- The study was limited to high school students only.
- Study period was only 2 weeks.

6.7 RECOMMENDATIONS

1. A comparative study can be done to assess knowledge regarding substance abuse among rural and urban communities.
2. A similar study can be undertaken on a larger scale for making a more valid generalization.
3. A comparative study has to be conducted to evaluate two different teaching methods for substance abuse prevention and awareness.
4. A similar study can be conducted on people of different age groups to understand varied impacts and responses to substance abuse.
5. A similar study can be done with experimental and control groups to assess the effectiveness of structured intervention programs.

6.8 CONCLUSION OF THE STUDY

This chapter deals with discussion, summary, and conclusion of the present study which emphasizes that the structured teaching program on substance abuse and its consequences was effective.

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ANNEXURE 1

SCIENTIFIC RESEARCH COMMITTEE CERTIFICATE
OF APPROVAL

SCIENTIFIC RESEARCH COMMITTEE
KANNUR MEDICAL COLLEGE
ANJARAKANDY, KANNUR, KERALA



CERTIFICATE OF APPROVAL

No . KMCSRC/ 08/2025

Date: 02 June 2025

This is to certify that the study titled EFFECTIVENESS OF STRUCTURED TEACHING PROGRAM ON KNOWLEDGE REGARDING SUBSTANCE ABUSE AND ITS CONSEQUENCES AMONG HIGH SCHOOL STUDENTS AT SELECTED SCHOOL IN KANNUR DISTRICT, KERALA was reviewed by the Scientific Research Committee, Kannur Medical College, Anjarakkandy on 30 May 2025 and was approved on 02 June 2025.

Secretary

Shamila K
PR-SHAMILAK




Chairman

ANNEXURE 2

LETTER GRANTING PERMISSION TO CONDUCT THE PILOT STUDY

COLLEGE OF NURSING KANNUR MEDICAL COLLEGE

(Recognized by Indian Nursing Council and Kerala Nurses and Midwives Council, affiliated to
Kerala University of Health Sciences)

ANJARAKANDY, KANNUR – 670 612, Phone: 0497-2855006

e - mail: collegeofnursing@anjarakandy.in

CON/06/2025-1

DATE: 02.06.2025

To

The Headmaster
CHM HSS
Elayavoor

Subject: Permission to conduct Research study .

Respected Madam,

As part of BSc Nursing curriculum, the following Seventh Semester BSc Nursing students need to conduct Pilot study. The students are selected the topic “A study to evaluate the effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences among students at selected school in Kannur , Kerala”.

1. Nanditha P.
2. Niha Parvin
3. Niransha M C
4. Prabin C
5. Rismy Thomas
6. Sarabenny
7. Saradhenth.S
8. Shahana M
9. Sana Salam

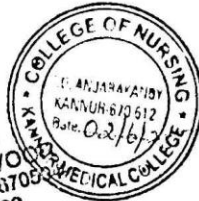
May I request you to kindly help our students to conduct the research study at your School from 02.06.2025 to 14.06.2025. The students will meet you personally.



Thanking you

[Handwritten signature]
8/06/2025

Headmaster
CHM HSS ELAYAVOOR
P.O.Varam, Kannur-670502
PEN No: 252492



[Handwritten signature]
02/06/2025
Dr. J. Sathyapriya
PRINCIPAL
PRINCIPAL
College Of Nursing
Kannur Medical College
Anjarakandy, Kannur-670 612

ANNEXURE 3

LETTER GRANTING PERMISSION TO CONDUCT RESEARCH STUDY

COLLEGE OF NURSING KANNUR MEDICAL COLLEGE

(Recognized by Indian Nursing Council and Kerala Nurses and Midwives Council, affiliated to
Kerala University of Health Sciences)
ANJARAKANDY, KANNUR – 670 612, Phone: 0497-2855006
e - mail: collegeofnursing@anjarakandy.in

CON/05/2025-1

DATE: 03.05.2025

To

The Head Teacher
Anjarakandy Higher Secondary School
Anjarakandy

Subject: Request for permission to conduct Research study by seventh semester BSc Nursing students Reg:-

Respected Madam,

As part of BSc Nursing curriculum, the following seventh semester BSc Nursing students need to conduct Research Project. The students are selected the topic "A study to evaluate the effectiveness of structured teaching programmes on knowledge regarding substance abuse and its consequences among students of Anjarakandy Higher Secondary school".

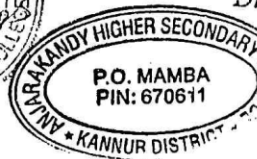
1. Niha parvin
2. Nanditha p
3. Niransha M S
4. Prabin c
5. Rismy Thomas
6. Saradhenth S
7. Sara Benny
8. Sana Salam
9. Shahana M

May I request you to kindly help our students to conduct the study at your esteemed institution from 02/06/2025 to 14/06/2025. The students will meet you personally.

Thanking you

Permitted.

03/05/25
SALIM, T.K
HEADMASTER
Anjarakandy Higher Secondary School
(P.O.) Mamba - 670611, Kannur (Dist.)



03/05/25
Dr. J. Sarin
PRINCIPAL
College Of Nursing
Kannur Medical College
Anjarakandy, Kannur-670 612

ANNEXURE 4

LETTER SEEKING PERMISSION TO CONDUCT THE RESEARCH STUDY

ANJARAKANDY HIGHER SECONDARY SCHOOL

KANNUR, MAMBA (PO), 670611, KANNUR DISTRICT

Email id: AnjarakandyHss@gmail.com

From

Head Master
Anjarakandy, HSS
Mamba (P.O)

To

The principal
College of Nursing
Kannur Medical College
Anjarakandy

Sub:- Permission to conduct research study on Substance Abuse and its consequences by seventh semester BSc Nursing Students.

Respected Madam,

As per received letter from College of Nursing, Kannur Medical College Anjarakandy, we permit the students mention in the letter to take class on 11/06/2025 and _____ related to the research study.



Head Master
Anjarakandy HSS

SALIM T.K.
SALIM T.K.
HEADMASTER
Anjarakandy Higher Secondary School
(P.O.) Mamba - 670611, Kannur (Dist.)

ANNEXURE 5

INFORMED CONSENT FORM

സമ്മതപത്രം

ഞാൻ, ശ്രീ./ശ്രീമതി _____, ഒൻപതാം ക്ലാസ്സിൽ പഠിക്കുന്ന വിദ്യാർത്ഥിനിയായ/വിദ്യാർത്ഥിയായ _____ യുടെ അച്ഛൻ/അമ്മ/ഗാർഡിയൻ എന്ന നിലയിൽ, ഹൈസ്കൂൾ വിദ്യാർത്ഥികളിൽ മയക്കുമരുന്നിന് ദുരുപയോഗത്തെ കുറിച്ചുള്ള അറിവ് വർദ്ധിപ്പിക്കുന്നതിനായി കോളേജ് ഓഫ് നഴ്സിംഗ്, കണ്ണൂർ മെഡിക്കൽ കോളേജ് ഏഴാം ട്രെയിനിംഗ് ബി.എസ്.സി നഴ്സിംഗ് വിദ്യാർത്ഥികൾ നടത്തുന്ന ബോധവൽക്കരണ ക്ലാസ്സിലും, തുടർന്ന് നടത്തപ്പെടുന്ന ചോദ്യാവലിയിൽ പങ്കാളിയാകുന്നതിലും, ഹൈസ്കൂൾ/ഹൈസ്കൂൾ സിസ്റ്റിൻറെ അനുമതിയോടെ പങ്കെടുത്തുകൊള്ളുന്നതിൽ എനിക്ക് പൂർണ്ണ സമ്മതമുണ്ടെന്നു അറിയിച്ചു കൊള്ളുന്നു.

പേര്:

ഒപ്പ്:

തീയതി:

ഫോൺ നമ്പർ:

Consent Letter

I, Mr./Mrs. _____, as the father/mother/guardian of _____, a student studying in 9th standard, hereby give my full consent for my child to attend and participate in the awareness class regarding "Substance Abuse and Its Consequences Among High School Students", conducted by 7th semester B.Sc. Nursing students of the College of Nursing, Kannur Medical College.

I also permit my child to be part of any data collection process that may be carried out as a part of this awareness program with the approval of the class teacher/principal.

Name:

Signature:

Date:

Phone Number:

ANNEXURE 6
TOOL 1
Baseline data on selected variables

Instruction:

Please read the questions carefully and choose correct answer. Your response will be kept confidential.

1. Gender

- a) Male
- b) Female
- c) Other

2. Religion

- a) Hindu
- b) Muslim
- c) Christian
- d) Other

3. Monthly family income

- a) <Rs.10,000
- b) Rs 10001-Rs20,000
- c) Rs20,001-Rs30,000
- d) >Rs30,000

4. Birth order

- a) 1
- b) 2
- c) >2

5. Number of siblings

- a) 1
- b) 2
- c) >2

6.Type of family

- a) Nuclear
- b) Joint
- c) Extended
- d) Other

7.Parent's education (Mother)

- a) No primary education
- b) Primary school
- c) Higher secondary
- d) Graduate and above

8. Parent's education (Father)

- a) No primary education
- b) Primary school
- c) Higher secondary
- d) Graduate and above

9. Residence

- a) Urban
- b) Rural
- c) Semi-urban
- d) slum

10.Any family member uses substances (eg:-alcohol, tobacco)

- a) Yes
- b) No
- c) Not sure

11. Have you ever received information on substance abuse before?

- a) Yes
- b) No

12. If yes from where was the source of information?

- a) School
- b) Parents
- c) Media
- d) peers

TOOL 2
**Self Structured Questionnaire on knowledge regarding substance abuse
and its consequences among High school students**

1. What is substance abuse?

- a) Experimental use of substances
- b) Regular use of substances to the point of harm
- c) Occasional use of substances for relaxation
- d) Use of prescription medication as directed

2. What is peer pressure?

- a) When a person is encouraged to make their own independent decisions ,free from external influence
- b) The influence exerted by a friends on an individual to change their attitudes, values or behavior to conform to group norms
- c) A feeling of anxiety experienced when performing in front of others
- d) The process of learning from teachers and mentors in an academic setting

3. Which of the following is a psychological factor contributing to substance abuse in adolescent?

- a) Coping with depression
- b) High academic pressure
- c) Peer pressure from friends who use substance
- d) Lack of parental supervision

4. What may low self esteem in students leads to?

- a) Substance experimentation
- b) Drug resistance
- c) Healthy eating
- d) Better study habits

5. What is the most common gateway substance for adolescents?

- a) Cannabis
- b) Tobacco
- c) alcohol
- d) Prescribed medications

6. What is passive smoking?

- a) Smoking cigarettes occasionally
- b) Inhaling smoke from someone else's cigarette
- c) Smoking with friends
- d) Smoking herbal products

7. Which age group is considered as a major problem of drug addiction?

- a) childhood
- b) Old age
- c) Adulthood
- d) Adolescent

8. What does watching substance use in media cause?

- a) Curiosity
- b) Fear
- c) Complete avoidance of substances
- d) Decreased interest

9. What is the common risk factor for substance abuse among adolescents?

- a) chronic physical illness
- b) Unresolved grief
- c) Strict parenting
- d) Lack of supervision

10. Why is family history of substances is considered important?

- a) A protective factor
- b) An irrelevant factor
- c) A Risk factor
- d) A solution

11. Which of these is a physical symptoms of substance abuse?

- a) Shaking hands
- b) Poor coordination
- c) Increased social isolation
- d) Energetic behaviour

12. Which of the following behaviours. may indicate substance abuse?

- a) Engaging in new hobbies and interest
- b) Consistently meeting deadline at work
- c) Spending too much time on electronic devices
- d) Neglecting responsibilities & decline in personal hygiene

13. Which one of these is considered as withdrawal symptoms?
- a) Improved sleeping patterns
 - b) Increased energy and focus
 - c) Intense craving for the substances
 - d) Enhanced social engagement
14. What should you do if you suspect a friend is using drugs??
- a) Ignore them
 - b) Confront them
 - c) Talk to a trusted counsellors
 - d) Talk to them calmly
15. which of these professions can help manage substance abuse?
- a) lawyer
 - b) counsellor
 - c) Accountant
 - d) chef
16. Which is the best way to avoid substance abuse?
- a) Only using substances when alone to prevent social judgement
 - b) Trying substances in small amount to understand their effect
 - c) Ignoring peer pressure and developing refusal skills
 - d) Relying solely on willpower to resist cravings one started
17. Which is a healthy alternative to drug use?
- a) Over eating
 - b) Skipping school
 - c) Sleeping
 - d) Exercise
18. What is the role of family in treatment?
- a) Provide nutritious diet
 - b) Go out for a trip
 - c) Providing emotional support
 - d) Offering comfortable space
19. Which therapy is often used for treating substance abuse?
- a) Radiotherapy
 - b) Cognitive behavioural therapy
 - c) Occupational therapy
 - d) Dialysis

20. What should be the primary goal of treatment for adolescents struggling with substance abuse?

- a) Punishment & discipline
- b) Education & awareness
- c) Isolation & confinement
- d) Rehabilitation & support

21. Which extra curricular activity helps reduce risk of drug abuse ?

- a) Substance use workshops
- b) Isolation techniques
- c) Participation in sports
- d) Online gaming

22. Which organ is most commonly damaged by long term alcohol abuse?

- a) Kidney
- b) Heart
- c) Liver
- d) Lungs

23. What does long term smoking cause?

- a) Lung cancer
- b) Skin changes
- c) Kidney stones
- d) Cardiac failure

24. How can substance abuse affect an adolescents academic performance?

- a) It can lead to risk taking behavior
- b) It has no impact on academic performance
- c) It can lead to decreased motivation and poor grades
- d) It only affects the attendance

25. What is the potential long-term consequences of substance abuse among adolescents?

- a) Personality changes
- b) Chronic health problem
- c) School drop out
- d) Frequent conflicts

26. Which one is the legal consequences of substance abuse among adolescents?
- a) Community service sentence
 - b) Isolation from family & friends
 - c) Loss of rights
 - d) Arrest/criminal record
27. Which of the following may occur in the family due to substance abuse?
- a) Decreased likelihood domestic disputes
 - b) Neglect of responsibilities & emotional volatility
 - c) Greater financial stability & joint decision making
 - d) Improved over all family well being
28. When is international day against drug abuse celebrated?
- a) June 26
 - b) August 12
 - c) September 14
 - d) December 1
29. Which of the following is an effective strategy to prevent substance abuse?
- a) Believing addiction is a moral failure not a disorder
 - b) Denying or Ignoring the problem
 - c) Awareness programs
 - d) Punishing or shaming the person
30. Which of the following involves relapse prevention?
- a) Taking supplements
 - b) good sleep
 - c) Learning coping strategies
 - d) Engage in a hobby

Answer key

Q.NO	ANSWER
1	b
2	b
3	a
4	a
5	c
6	b
7	d
8	a
9	d
10	c
11	a
12	d
13	c
14	d
15	b

Q.NO	ANSWER
16	C
17	D
18	C
19	B
20	D
21	C
22	C
23	A
24	C
25	B
26	D
27	B
28	A
29	C
30	C

അനുബന്ധം - 1
ഗവേഷണ ഉപകരണം-1

1. ലിംഗം
 - a) പുരുഷൻ
 - b) സ്ത്രീ
 - c) മറ്റുള്ളത്

2. മതം
 - a) ഹിന്ദു
 - b) മുസ്ലിം
 - c) ക്രിസ്ത്യാനി
 - d) മറ്റുള്ളത്

3. കുടുംബത്തിന്റെ മാസ വരുമാനം
 - a) <₹10,000
 - b) ₹10,001 - ₹20,000
 - c) ₹20,001 - ₹30,000
 - d) >₹30,000

4. ജനനക്രമം
 - a) 1
 - b) 2
 - c) >2

5. സഹോദരങ്ങളുടെ എണ്ണം
 - a) 0
 - b) 1
 - c) 2
 - d) >2

6. കുടുംബത്തിന്റെ തരം

a) അണുകുടുംബം

b) കുട്ടുകുടുംബം

c) വിപുലമായ കുടുംബം

d) മറ്റുള്ളത്

7. മാതാവിന്റെ വിദ്യാഭ്യാസം

a) പ്രാഥമിക വിദ്യാഭ്യാസം ഇല്ല

b) പ്രൈമറി സ്കൂൾ

c) ഹയർ സെക്കൻഡറി

d) ബിരുദം അല്ലെങ്കിൽ അതിന് മുകളിലേക്ക്

8. പിതാവിന്റെ വിദ്യാഭ്യാസം

a) പ്രാഥമിക വിദ്യാഭ്യാസം ഇല്ല

b) പ്രൈമറി സ്കൂൾ

c) ഹയർ സെക്കൻഡറി

d) ബിരുദം അല്ലെങ്കിൽ അതിന് മുകളിലുള്ളത്

9. താമസസ്ഥലം

a) നഗരം

b) ഗ്രാമം

c) അർദ്ധനഗരം

d) ചേരി

10. കുടുംബത്തിലെ ഏതെങ്കിലും അംഗം മദ്യമോ തന്മാക്കോ ഉപയോഗിക്കുന്നുണ്ടോ?

a) അതെ

b) ഇല്ല

c) ഉറപ്പില്ല

11.ലഹരിവസ്തുക്കളുടെ ദുരുപയോഗത്തെക്കുറിച്ച് നിങ്ങൾക്ക് മുമ്പ് എപ്പോഴെങ്കിലും വിവരം ലഭിച്ചിട്ടുണ്ടോ?

- a) ഉണ്ട്
- b) ഇല്ല

12.അതെ എങ്കിൽ, ഈ വിവരത്തിന്റെ ഉറവിടം എന്തായിരുന്നു?

- a) സ്കൂൾ
- b) മാതാപിതാക്കൾ
- c) മീഡിയ
- d) കൂട്ടുകാർ

അനുബന്ധം - 2 ഗവേഷണ ഉപകരണം-2

നിർദ്ദേശങ്ങൾ: ചോദ്യങ്ങൾ ശ്രദ്ധാപൂർവ്വം വായിച്ചു, ശരിയായ ഒരു ഉത്തരം മാത്രം തിരഞ്ഞെടുക്കുക.

1. മയക്കുമരുന്നു ദുരുപയോഗം എന്നത് എന്താണ്?
 - a. മരുന്നുകൾ പരീക്ഷിച്ച് ഉപയോഗിക്കൽ
 - b. മനുഷ്യൻ ഹാനികരം ആയ രീതിയിൽ മരുന്നുകൾ സ്ഥിരമായി ഉപയോഗിക്കൽ
 - c. ആശ്വാസത്തിനായി എല്ലായിടത്തും മരുന്നുകൾ ഉപയോഗിക്കൽ
 - d. ഡോക്ടർ നിർദ്ദേശിച്ച പോലെ മരുന്നുകൾ ഉപയോഗിക്കൽ

2. പിയർ സമ്മർദ്ദം എന്താണ്?
 - a) ബാഹ്യ സ്വാധീനങ്ങളിൽ നിന്ന് മുക്തമായി, ഒരു വ്യക്തി സ്വന്തം സ്വതന്ത്ര തീരുമാനങ്ങൾ എടുക്കാൻ പ്രോത്സാഹിപ്പിക്കുന്നത്
 - b) ഗ്രൂപ്പ് മാനദണ്ഡങ്ങൾക്ക് അനുസൃതമായി അവരുടെ മനോഭാവങ്ങൾ, മൂല്യങ്ങൾ അല്ലെങ്കിൽ പെരുമാറ്റങ്ങൾ മാറ്റുന്നതിന് ഒരു വ്യക്തിയിൽ ഒരു സമപ്രായക്കാരുടെ ഗ്രൂപ്പ് ചെലുത്തുന്ന സ്വാധീനം
 - c) മറ്റുള്ളവരുടെ മുന്നിൽ പ്രകടനം നടത്തുമ്പോൾ അനുഭവപ്പെടുന്ന ഉത്കണ്ഠ.
 - d) ഒരു അക്കാദമിക സാഹചര്യത്തിൽ സാഹചര്യത്തിൽ അധ്യാപകരിൽ നിന്നും ഉപദേശകരിൽ നിന്നും പഠിക്കുന്ന പ്രക്രിയ

- 3) താഴെ പറയുന്നതിൽ ഏതാണ് കൗമാരപ്രായത്തിലുള്ളവരിൽ ലഹരിവസ്തുക്കളുടെ ഉപയോഗത്തിന് കാരണമാകുന്ന മനോവിഭവകാര്യമായ ഘടകം?
 - a) ദുഃഖത്തെ മറികടക്കാൻ

b) ഉയർന്ന അധ്യയനമർദ്ദം

c) ലഹരിവസ്തുക്കൾ ഉപയോഗിക്കുന്ന സുഹൃത്തുക്കളിൽ നിന്നുള്ള സമ്മർദ്ദം

d) മാതാപിതാക്കളുടെ മേൽനോട്ടം ഇല്ലായ്മ

4. കുറഞ്ഞ ആത്മവിശ്വാസം വിദ്യാർത്ഥികളിൽ എന്തിലേക്ക് എത്തിക്കുന്നു ?

a) മയക്കുമരുന്ന് പരീക്ഷണം

b) മരുന്നുകളോട് പ്രതിരോധം

c) ആരോഗ്യകരമായ ഭക്ഷണശീലം

d) നല്ല പഠനശീലങ്ങൾ

5. കൗമാരക്കാരുടെ ഏറ്റവും സാധാരണമായ പ്രവേശന കവാടം ഇവയിൽ ഏതാണ്?

a) കഞ്ചാവ്

b) തമ്പാക്ക്

c) മദ്യം

d) ഡോക്ടർ നിർദ്ദേശിച്ച മരുന്നുകൾ

6. പാസ്റ്റീവ് സ്മോക്കിംഗ് എന്നത് എന്താണ്?

- a) എപ്പോഴെങ്കിലുമൊക്കെ സിഗരറ്റ് വലിക്കൽ
- b) മറ്റൊരാളുടെ സിഗരറ്റിൽ നിന്നുള്ള പുക ശ്വസിക്കൽ
- c) സുഹൃത്തുക്കളുമായി പുകവലി
- d) ഹെർബൽ ഉൽപ്പന്നങ്ങൾ വലിക്കൽ

7. മയക്കുമരുന്ന് ആസക്തിയുടെ പ്രധാന പ്രായസംഘം ഏതാണ്?

- a) ശൈശവം
- b) വാർദ്ധക്യം
- c) പ്രായപൂർത്തിയാകുന്ന പ്രായം
- d) കൗമാരപ്രായം

8. മാധ്യമങ്ങളിൽ മയക്കുമരുന്ന് ഉപയോഗം കാണുന്നത് എന്ത് പ്രഭാവം സൃഷ്ടിക്കുന്നു?

- a) കൗതുകം
- b) ഭയം
- c) മരുന്നുകളിൽ നിന്നും പൂർണ്ണമായും അകലം പാലിക്കൽ
- d) താൽപര്യമില്ലായ്മ

9. കൗമാരപ്രായക്കാർക്കിടയിലെ മയക്കുമരുന്നു ഉപയോഗത്തിന്റെ പൊതുവായ അപകടഘടകം ഏതാണ്?

- a) ദീർഘകാല ശാരീരിക രോഗങ്ങൾ
- b) പരിഹരിക്കാത്ത ദുഃഖം
- c) കർശനവും കൃത്യവുമായ മാതാപിതാക്കളുടെ പരിപാലനം
- d) മേൽനോട്ടം ഇല്ലായ്മ

10. മയക്കുമരുന്ന് ഉപയോഗത്തിന്റെ കുടുംബചരിത്രം എങ്ങനെയാണ് പ്രധാനമാകുന്നത്?

- a) ഒരു സംരക്ഷണഘടകം

b) ബന്ധപ്പെട്ടിട്ടില്ലാത്ത ഘടകം

c) ഒരു അപകടഘടകം

d) ഒരു പരിഹാരം

11. താഴെ പറയുന്നവയിൽ ഏതാണ് ലഹരി ദുരുപയോഗത്തിന്റെ ശാരീരക ലക്ഷണം?

a) കൈകുലുക്കൽ

b) മോശം ഏകോപനം

c) കൂട്ടുകാരോടും സമൂഹത്തോടും ഉള്ള ബന്ധം കുറയുന്ന

d) ഉത്സാഹഭരിതമായ പെരുമാറ്റം

12. ഇനിപ്പറയുന്ന പെരുമാറ്റങ്ങളിൽ ഏതാണ് ലഹരിവസ്തുക്കളുടെ ദുരുപയോഗം സൂചിപ്പിക്കുന്നത്?

a) പുതിയ ശീലങ്ങളും താൽപര്യങ്ങളും സ്വീകരിക്കുന്നത്

b) ജോലി സമയപരിധികൾ സ്ഥിരമായി പാലിക്കുന്നത്

c) ഇലക്ട്രോണിക് ഉപകരണങ്ങളിൽ അധികം സമയം ചെലവഴിക്കുന്നത്

d) ബാധ്യതകളെ അവഗണിക്കുകയും വ്യക്തിഗത ശുചിത്വത്തിൽ കുറവുണ്ടാകുകയും ചെയ്യുന്നത്

13. ഇവയിൽ ഏതാണ് പിൻവലിക്കൽ ലക്ഷണമായി കണക്കാക്കുന്നത്?

a) മെച്ചപ്പെട്ട ഉറക്ക രീതികൾ

b) വർദ്ധിച്ച ഊർജ്ജവും ശ്രദ്ധയും

c) പദാർത്ഥത്തോടുള്ള തീവ്രമായ ആസക്തി

d) മെച്ചപ്പെട്ട സാമൂഹിക ഇടപെടൽ

14. ഒരു സുഹൃത്ത് ലഹരി ഉപയോഗിക്കുന്നതായി സംശയിക്കുന്നുവെങ്കിൽ എന്ത് ചെയ്യണം?

- a) അവരെ അവഗണിക്കുക
- b) നേരിട്ട് ചോദിക്കുക
- c) വിശ്വസനീയമായ കൗൺസിലറെ സമീപിക്കുക
- d) സമാധാനത്തോടെ സംസാരിക്കുക

15. ലഹരിവസ്തുക്കളുടെ ദുരുപയോഗം നിയന്ത്രിക്കാൻ സഹായിക്കുന്ന തൊഴിൽ ഏതാണ്?

- a) അഭിഭാഷകൻ
- b) കൗൺസിലർ
- c) അക്കൗണ്ടന്റ്
- d) ഷെഫ്

16. ലഹരിവസ്തുക്കളുടെ ദുരുപയോഗം ഒഴിവാക്കാൻ ഏറ്റവും നല്ല മാർഗ്ഗം ഏതാണ്?

- a) സാമൂഹിക വിധി തടയുന്നതിന് ഒറ്റയ്ക്ക് ലഹരിവസ്തുക്കൾ മാത്രം ഉപയോഗിക്കുക.
- b) പദാർത്ഥങ്ങളുടെ ഫലങ്ങൾ മനസ്സിലാക്കാൻ ചെറിയ അളവിൽ ഉപയോഗിക്കാൻ ശ്രമിക്കുന്നു.
- c) സമപ്രായക്കാരുടെ സമ്മർദ്ദം അവഗണിക്കുകയും നിരസിക്കൽ കഴിവുകൾ വികസിപ്പിക്കുകയും ചെയ്യുക
- d) ഒരാൾ ആരംഭിച്ച ആഗ്രഹങ്ങളെ ചെറുക്കാൻ ഇച്ഛാശക്തിയെ മാത്രം ആശ്രയിക്കുന്നു

17. ലഹരി ഉപയോഗത്തിന് ആരോഗ്യകരമായ ഒരു ബദൽ ഏതാണ്?

- a) അധികം ഭക്ഷണം കഴിക്കൽ
- b) സ്കൂൾ ഒഴിവാക്കുക
- c) നിരന്തര തർക്കിക്കൽ
- d) വ്യായാമം

18. ചികിത്സയിൽ കുടുംബത്തിന്റെ പങ്ക് എന്താണ്?

- a) പോഷകാഹാരമുള്ള ഭക്ഷണം നൽകുക
- b) യാത്രക്ക് കൊണ്ടുപോകുക
- c) മാനസിക പിന്തുണ നൽകുക
- d) സൗകര്യമുള്ള സ്ഥലം ഒരുക്കുക

19. ലഹരി ഉപയോഗം ചികിത്സിക്കാനായി പ്രധാനമായും ഉപയോഗിക്കുന്നത് ഏത് തൈറാപ്പിയാണ്?

- a) റേഡിയേഷൻ തൈറാപ്പി
- b) കോഗ്നിറ്റീവ് ബിഹേവിയറൽ തൈറാപ്പി
- c) ഓക്സുപേഷണൽ തൈറാപ്പി
- d) ഡയാലിസിസ്

20. ലഹരിവസ്തുക്കളുടെ ദുരുപയോഗവുമായി മല്ലിടുന്ന കൗമാരക്കാർക്കുള്ള ചികിത്സയുടെ പ്രാഥമിക ലക്ഷ്യം എന്തായിരിക്കണം?

- a) ശിക്ഷയും കർശനവും
- b) വിദ്യാഭ്യാസവും ബോധവൽക്കരണവും
- c) ഒറ്റപ്പെടുത്തി പൂട്ടിയിടൽ
- d) പുനരധിവാസവും പിന്തുണയും

21. ലഹരി ഉപയോഗ സാധ്യത കുറയ്ക്കാൻ സഹായിക്കുന്ന സഹപാഠികളുടെ പ്രവർത്തനമേത്?

- a) ലഹരി ഉപയോഗ ശിൽപ്പശാലകൾ
- b) പുനരധിവാസ കേന്ദ്രങ്ങൾ
- c) കായിക പ്രവർത്തനങ്ങളിൽ പങ്കെടുപ്പ്
- d) ഓൺലൈൻ ഗെയിമിംഗ്

22. ദീർഘകാല മദ്യപാനത്തിൽ ഏറ്റവും കൂടുതൽ ബാധിക്കപ്പെടുന്ന അവയവം ഏത്?

- a) വൃക്ക
- b) ഹൃദയം
- c) കരൾ
- d) ശ്വാസകോശം

23. ദീർഘകാല പുകവലിയിൽ എന്ത് സംഭവിക്കും?

- a) ശ്വാസകോശ ക്യാൻസർ
- b) ത്വക്ക് മാറ്റങ്ങൾ
- c) വൃക്കക്കല്ലുകൾ
- d) ഹൃദയ നഷ്ടം

24. ലഹരി ഉപയോഗം വിദ്യാർത്ഥികളുടെ അക്കാദമിക് പ്രകടനത്തെ എങ്ങനെ ബാധിക്കും?

- a) ഗ്രേഡുകൾ മെച്ചപ്പെടും
- b) അക്കാദമിക് പ്രകടനത്തെ ബാധിക്കില്ല
- c) ഉത്സാഹ കുറയുകയും നന്നായുള്ള ഗ്രേഡുകൾ കുറഞ്ഞതാകാൻ
- d) ഹാജറിൽ മാത്രമേ ബാധിക്കൂ

25. കൗമാരക്കാർക്കിടയിൽ ലഹരിവസ്തുക്കളുടെ ദുരുപയോഗത്തിന്റെ ദീർഘകാല പ്രത്യാഘാതങ്ങൾ എന്തൊക്കെയാണ്?

- a) വ്യക്തിത്വത്തിൽ മാറ്റങ്ങൾ
- b) ദീർഘകാലാരോഗ്യ പ്രശ്നങ്ങൾ
- c) സ്കൂൾ ഉപേക്ഷിക്കൽ
- d) സ്ഥിരമായ തർക്കങ്ങൾ

26. നിയമപരമായ പ്രത്യാഘാതം ഏത് ആണെന്ന് തിരഞ്ഞെടുക്കുക?

- a) സമൂഹസേവന ശിക്ഷ
- b) കുടുംബത്തിലും സുഹൃത്തുകളിലും നിന്ന് അകലം പാലിക്കുക
- c) അവകാശങ്ങളുടെ നഷ്ടം
- d) അറസ്റ്റ് ചെയ്യപ്പെടുക അല്ലെങ്കിൽ കുറ്റ രേഖ ഉണ്ടാകുക

27. ലഹരി ഉപയോഗം കുടുംബത്തിൽ ഉണ്ടാക്കുന്ന പ്രശ്നം ഏത്?

- a) വീട്ടിലുള്ള വഴക്കുകൾ കുറയുന്നത്
- b) ജോലി കൃത്യമായി ചെയ്യാതിരിക്കുക, പെട്ടെന്നുള്ള ദേഷ്യം
- c) കുടുതൽ സാമ്പത്തിക സ്ഥിരതയും, ഒരുമിച്ചുള്ള തീരുമാനമെടുക്കലും
- d) കുടുംബം മുഴുവൻ നല്ലതിലേക്കു മാറുന്നു

28. ലഹരി വിരുദ്ധ ദിനമായി ആചരിക്കുന്നതെന്താണ് ?

- a) ജൂൺ 26
- b) ഓഗസ്റ്റ് 12
- c) സെപ്റ്റംബർ 14
- d) ഡിസംബർ 1

29. ലഹരി ഉപയോഗം തടയാൻ ഫലപ്രദമായ തന്ത്രം ഏതാണ്?

- a) ലഹരി ഉപയോഗം ഒരു നൈതിക പരാജയമാണെന്ന് വിശ്വസിക്കുക
- b) പ്രശ്നം നിഷേധിക്കുക അല്ലെങ്കിൽ അവഗണിക്കുക
- c) ബോധവൽക്കരണ പരിപാടികൾ
- d) ശിക്ഷ നൽകുകയോ കളിയാക്കുകയോ ചെയ്യുക

30. താഴെ പറയുന്നവയിൽ ഏതാണ് വീണ്ടും രോഗം വരുന്നത് തടയുന്നത്?

- a) സപ്ലിമെന്റുകൾ സ്വീകരിക്കൽ
- b) നല്ല ഉറക്കം
- c) പ്രതിസന്ധി കൈകാര്യം ചെയ്യാനുള്ള തന്ത്രങ്ങൾ പഠിക്കൽ
- d) ഒരു ഹോബിയിൽ ഏർപ്പെടൽ

ഉത്തരങ്ങൾ

Q.NO	ഉത്തരം
1	b
2	b
3	a
4	a
5	c
6	b
7	d
8	a
9	d
10	c
11	a
12	d
13	c
14	d
15	b

Q.NO	ഉത്തരം
16	c
17	d
18	c
19	b
20	d
21	c
22	c
23	a
24	c
25	b
26	d
27	b
28	a
29	c
30	c

ANNEXURE 7

LESSON PLAN ON SUBSTANCE ABUSE AND ITS CONSEQUENCES

GROUP: Research group

Course: BSc nursing 7th semester

Subject: Nursing Research

Topic : substance abuse and its consequences

Method of teaching :lecture cum discussion

Previous knowledge: audience may have some knowledge regarding substance abuse and its consequences

Teaching aids : slides

Number of participants: 50

Name of the evaluator: Mrs. Little Flower. P

Venue:

Time :

Date:

Duration: 45 minutes

Group: High school students

GENERAL OBJECTIVES

On the completion of the class the students will gain knowledge regarding substance abuse & its consequences and apply the knowledge in day to day life.

SPECIFIC OBJECTIVES

At the end of the class students will be able to understand about;

- 1]define substance, abuse and substance abuse.
- 2]enlist the causes of substance abuse.
- 3]explain the types of substance abuse.
- 4]describe the risk factors of substance abuse.
- 5]explain the signs & symptoms of substance abuse.
- 6]discuss the consequences of substance abuse.
- 7]describe the management of substance abuse.
- 8]enumerate the preventive measures of substance abuse.

SL NO	TIME	SPECIFIC OBJECTIVES	CONTENT	TEACHERS ACTIVITY	LEARNERS ACTIVITY	AV AIDS	EVALUATION
1	1 MIN	Introduce the topic	<p style="text-align: center;">INTRODUCTION</p> <p>Substance abuse, also known as substance use disorder, is a growing public health concern that affects individuals, families, and communities worldwide. It involves the harmful or hazardous use of psychoactive substances, including alcohol, prescription medications, and illicit drugs. Substance abuse not only leads to physical and mental health complications, but also contributes to social, economic, and legal problems. Understanding the causes, signs, and consequences of substance abuse is essential for effective prevention and intervention. Health education plays a critical role in raising awareness, promoting healthy choices, and supporting individuals at risk. Through education, we can empower people to make informed decisions, reduce stigma, and encourage early treatment and support.</p>	Introducing the topic	Listening	-	-
2	2 Min	define substance, abuse ,sub-stance abuse	<p style="text-align: center;">DEFINITION</p> <p>Substance: A substance is any material or chemical that can affect the structure or function of the body or mind. This includes drugs, alcohol, medications, and toxic chemicals.</p>	defining substance, Abuse, Substance abuse	Active listening	Slide	What is substance, Abuse, Substance Abuse?

Abuse: Abuse refers to the improper, excessive, or harmful use of something. In the context of health, it often means using something in a way that causes harm or violates accepted norms.

Substance Abuse: Substance abuse is the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. It involves using these substances in a way that leads to addiction, health problems, or failure to meet responsibilities at work, school, or home.

3	1 Min	enlist the causes of substance abuse	<p style="text-align: center;">CAUSES</p> <p><i>1) Biological factors</i> <i>2) Psychological factors</i> <i>3) Social factors</i></p> <p><u>1)Biological Factors</u> *Genetic factor:- Family history *Biochemical factor:- Role of dopamine and norepinephrine have been implicated in cocaine and opioids</p> <p><u>2)Psychological Factors</u> *Sense of inferiority *Poor impulse control *Low self esteem *Desire of escape from reality *Pleasure seeking *Sexual immaturity</p> <p><u>3)Social Factors</u> *Religious reasons *Peer pressure *Urbanization *Unemployment *Over crowding *Poor social support</p>	enlisting the causes of substance abuse.	Active Listening	slide	What are the Causes of Substance Abuse?
4	2 Min	explain the types of substance abuse	<p style="text-align: center;">TYPES</p> <p><u>1.Alcohol Abuse</u> *Underage drinking *Binge drinking *Long-term effects on brain development</p>	explaining the types of substance	Active listening	Slide	What all are the types of Substance abuse?

2. Tobacco/Nicotine Use

- *Cigarettes
- *Vaping and e-cigarettes (especially popular among teens)
- *Smokeless tobacco

3. Cannabis (Marijuana) Use

- *Perception of safety vs. reality
- *Risks to mental health and academic performance

4. Prescription Drug Abuse

- *Painkillers (e.g., opioids like oxycodone)
- *ADHD medications (e.g., Adderall, Ritalin)
- *Anti-anxiety medications (e.g., Xanax)

5. Over-the-Counter (OTC) Drug Abuse

- *Motion sickness pills (e.g., dimenhydrinate)

6. Inhalant Abuse

- Solvents, aerosols, glue, and gases
- *Often accessible and highly dangerous

7. Illicit Drug Use

- *Cocaine
- *Heroin
- *Methamphetamine
- *Synthetic drugs (e.g., spice, bath salts)

8. Energy drinks and caffeine abuse

- *Often overlooked
- *Links to risky behaviours and poor health outcomes

5	2 Min	describe the risk factors of substance Abuse	<p style="text-align: center;">RISK FACTORS</p> <ol style="list-style-type: none"> 1) Peer Pressure – Adolescents may be influenced by friends or social groups who use substances. 2) Family History – A family background of substance abuse increases vulnerability. 3) Mental Health Disorders – Conditions like depression, anxiety, or trauma can lead to self-medication through drugs. 4) Lack of Parental Supervision – Poor communication and weak parental monitoring contribute to risk. 5) Low Academic Performance – Struggles in school may increase the likelihood of drug use. 6) Availability of Drugs – Increases the chances of experimentation. 7) Curiosity and Risk-Taking Behaviour – Adolescents are naturally curious and may experiment for excitement. 1) Low Self-Esteem – Individuals with low confidence may turn to substances to cope or feel accepted 	describing the risk factors of substance Abuse	Active listening	slide	What are the risk factors of substance abuse?
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6	2 Min	explain the signs and symptoms of substance abuse	<p>SIGNS AND SYMPTOMS</p> <p><u>Physical Signs:</u></p> <ul style="list-style-type: none"> •Sudden weight loss or gain •Bloodshot eyes or dilated pupils •Unusual body odours •Tremors or unsteady movements •Poor hygiene or personal appearance <p><u>Behavioural Signs:</u></p> <ul style="list-style-type: none"> •Secretive or suspicious behaviour •Drop in school performance or attendance •Loss of interest in hobbies •Sudden mood swings or aggression •Borrowing or stealing money <p><u>Psychological Signs:</u></p> <ul style="list-style-type: none"> •Anxiety or paranoia •Depression or mood instability •Hallucinations or delusions (in severe cases) •Poor concentration and memory issues 	explaining Signs & symptoms	Active listening	slide	Which are the signs & Symptoms of Substance abuse?
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7	2 min	discuss the consequences of substance abuse	<p>CONSEQUENCES</p> <p>1.Physical Health Consequences</p> <ul style="list-style-type: none"> ❖ <i>Brain development issues:</i> Substances can interfere with brain growth, affecting memory, judgment, and learning. ❖ <i>Weakened immune system:</i> Increases vulnerability to infections and illnesses ❖ <i>Injuries and accidents:</i> Higher risk of accidents, falls, and risky behaviour under the influence. ❖ <i>Sleep disturbances and appetite changes.</i> <p>2.Mental and Emotional Health Effects</p> <ul style="list-style-type: none"> ❖ Increased risk of depression and anxiety. ❖ Personality changes, mood swings, and irritability. ❖ Paranoia or psychosis from long-term use of certain drugs. <p>Suicidal thoughts or self-harm in severe cases</p>	lecturing	Active listening	ppt	What are the consequences of substance abuse?
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3. Academic and Cognitive Decline

- ❖ Poor academic performance due to lack of focus and motivation.
- ❖ Increased absenteeism and school dropout.
- ❖ Memory and concentration problems.

4 .Behavioural and Social Consequences

- ❖ Aggressive or violent behaviour under influence.
- ❖ Isolation from family and friends.
- ❖ Loss of interest in hobbies and normal activities.
- ❖ Involvement with delinquent peer groups.

5. Legal and Criminal Consequences

- ❖ Arrest or criminal record for possession, use, or distribution.
- ❖ School suspensions or expulsions.
- ❖ Driving under the influence (DUI) leads to legal penalties.

6. Family Problems

- ❖ Breakdown of trust and communication with parents.
- ❖ Frequent conflicts and arguments at home.

- ❖ Neglect of responsibilities and family duties.

7. Financial Consequences

- ❖ Spending money on substances rather than essentials.
- ❖ Stealing or illegal behaviour to obtain drugs.

8. Risk of Addiction

- ❖ Early use increases the chance of addiction in adulthood.
- ❖ Tolerance and dependency develop over time, leading to repeated use.

9. Unsafe Sexual Behaviour

- ❖ Increased risk of STIs and unplanned pregnancies due to impaired judgment.

Higher vulnerability to sexual abuse under the influence

8	2 min	describe the Management Substance abuse	<p>10.Long-Term Life Impact</p> <ul style="list-style-type: none"> • Damaged reputation and reduced career opportunities. • Chronic health problems (e.g., liver disease, respiratory issues). • Difficulty forming healthy adult relationships <p>MANAGEMENT</p> <p>Managing substance abuse in adolescents requires a comprehensive, multi-disciplinary approach involving medical, psychological, familial, and social support.</p> <p>1. Assessment and Diagnosis: Screening tools: CRAFFT (Car, Relax, Alone, Forget, Friends, Trouble) screening tool is commonly used. Full evaluation: Includes medical history, mental health status, family dynamics, academic performance, and social environment.</p>	describing the management of substance abuse	Active listening	ppt	Explain the Management of substance abuse?
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2. Treatment Options:

Behavioural Therapy:

Cognitive-behavioural therapy (CBT), motivational interviewing (MI), and contingency management are effective

Family-Based Therapy:

Multidimensional Family Therapy (MDFT) and Functional Family Therapy (FFT) involve the family in recovery.

Group Therapy: Helps adolescents gain peer support and social skills

3. Educational and Social Support

School-based programs, academic support, and peer mentorship help reintegrate adolescents into productive routines.

4. Relapse Prevention :

Ongoing counselling, support groups (e.g., Teen AA/NA), and strong follow-up care. Building coping mechanisms and addressing underlying mental health issues.

5. Parental Involvement :

Educating parents on signs of substance use and engaging them in therapy is crucial for successful outcomes

9	3 Min	enumerate the preventive measures of substance abuse	<p style="text-align: center;">PREVENTIVE MEASURES</p> <p>1) <i>Start with Awareness:</i> Educate adolescents about different types of substances (alcohol, tobacco, drugs), their harmful effects on the body and mind, and the long-term consequences of addiction.</p> <p>2) <i>Teach Refusal Skills:</i> Help students practice how to say "no" confidently through role-play, real-life scenarios, and peer discussions. Strengthen their ability to resist peer pressure</p> <p>3) <i>Promote Healthy Lifestyles:</i> Encourage involvement in sports, arts, music, and hobbies as positive outlets for stress and energy, reducing the temptation to try substances.</p> <p>4) <i>Build Self-Esteem and Confidence:</i> Teach students how to value themselves, set personal goals, and make responsible choices, which helps in resisting risky behaviours.</p> <p>5) <i>Encourage Open Communication:</i> Emphasize the importance of talking to parents, teachers, or counsellors when feeling stressed, anxious, or tempted by peer influence.</p>	enumerating the preventive Measures Of substance abuse	Active listening	pamphlet	Describe the Preventive Measures of Substance Abuse?
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6) Highlight Legal and Social Consequences: Inform adolescents about the legal actions, academic impacts, and family/social relationship problems caused by substance use.

7) Involve Real-Life Testimonials: Invite recovering addicts, health professionals, or counsellors to share stories that illustrate the dangers of substance abuse and the power of recovery.

8) Promote Support Networks: Introduce students to available local resources such as counselling centers, helplines, and youth support groups where they can seek help if needed.

9) Interactive Sessions: Use games, videos, quizzes, and group discussions to keep the seminar engaging and help reinforce the learning.

10) Follow-Up Activities: Distribute brochures, posters, or booklets and assign small projects or surveys to keep students thinking about prevention beyond the seminar

10	1 min	Summarize the topic	<p style="text-align: center;">SUMMARY</p> <p>So far we discussed about the definition ,causes, types, risk factors, signs & symptoms, consequences, management & preventive measures of substance abuse.</p>	Lecture	Active Listening	-	-
11	1 Min	Recapitulation	<p>RECAPITULATION</p> <p>1]What is substance, abuse, substance abuse?</p> <p>2]What are the causes of substance abuse?</p> <p>3]Which all are the types of Substance abuse?</p> <p>4]What are the risk factors of Substance abuse?</p> <p>5]Which are the signs & symptoms of substance abuse?</p> <p>6]what are the consequences of substance abuse?</p> <p>7]Explain the management of substance abuse?</p> <p>8]Describe the preventive methods of substance abuse?</p>	Questioning	Answering	-	-

1 Min	Conclude the Topic	<p style="text-align: center;">CONCLUSION</p> <p>In conclusion, substance abuse among adolescents is a multifaceted issue that poses significant challenges to individual health, social development, and community well-being. The adolescent years, characterized by a search for identity and peer acceptance, can heighten susceptibility to experimentation with drugs and alcohol. Early intervention and prevention strategies are crucial in mitigating the risk factors associated with substance abuse, such as mental health issues, socio-economic challenges, and lack of access to education and support systems.</p>	Lecture	Active Listening	-	-
1 Min	-	<p style="text-align: center;">BIBLIOGRAPHY</p> <ul style="list-style-type: none"> • R Sreevani ,A Guide to Mental Health &Psychiatric Nursing, Jaypee brothers Medical Publishers Pvt. Limited,Pg no:205-207 • https://www.slideshare.net/ • American psychiatric association (2022).Diagnostic and statistical manual of mental disorders (5th ed.text rev ;DSM-5-TR).American psychiatric publishing • Centres for disease control &prevention(2023)substance usehttps://www.cdc.gov/substanceuse • Neeraja K.P (2008)Textbook of mental health and psychiatric nursing (2nd ed) Jaypee brothers medical publishers page no;158-159 	-	-	-	-

ANNEXURE 8
LETTER SEEKING FOR CONTENT VALIDITY

Ihere by certify that I have the tool of Research group 5, 4th year BSC Nursing students at College of Nursing, Kannur Medical College, Anjarakandy working on the dissertation "Effectiveness of structured teaching programme on knowledge regarding substance abuse and its consequences among high school students in selected school at Kannur district, Kerala

Signature of expert

Date:

Place:

CERTIFICATE OF VALIDATION

This is to certify that the Members of Nursing Research Group 05. B.Sc.(N) 7th Semester, College Of Nursing, Kannur Medical College, Anjarakandy, have developed a lesson plan and structured knowledge questionnaire as part of their research project titled:

“A Study to evaluate the Effectiveness of Structured Teaching Programme on Knowledge regarding substance abuse and its consequences among High school students at selected school in Kannur district ,Kerala .

The tool have been reviewed and validated by the undersigned expert and found to be clear, relevant, and suitable for the study.

Validated by,

Name of the Expert:

Signature:

Designation and seal:

ANNEXURE 9

LIST OF EXPERTS FOR CONTENT VALIDITY

SLNO	NAME	DESIGNATION
1	Dr. Udhayalakshmi	Doctor ,Department of Psychiatry
2	Dr. Prof. Usha .V	Vice Principal of CON,KMC
3	Dr. Prof. Beena Narayanan	HOD of Mental Health Nursing, Thaliparamba Co-operative College of Nursing
4	Mrs . Nimisha. K	Assistant Professor, Koyili College of Nursing
5	Ms. Ruby Pankajakshan	Lecturer GCON, Manjeri

