

Ill Effects of Tobacco among Adults Selected Village, Kancheepuram District

M. Vetriselvi

Assistant Professor

*Adhiparasakthi College of Nursing, Melmaruvathur,
Tamilnadu, India*

Dr. N. Kokilavani

Professor Cum Principal

*Adhiparasakthi College of Nursing, Melmaruvathur,
Tamilnadu, India*

Abstract

Title: Ill effects of tobacco among adults selected village, Kancheepuram District

Objective: To assess the ill effects of tobacco among adults.

Methodology: Descriptive study design was adopted. Convenient sampling technique was used and 40 adults were selected at kancheepuram district. The data was collected, organized and analyzed in terms of both descriptive and inferential statistics.

Result: The analysis revealed that the mean value of pretest was 7.92 ± 3.92 . Demographic variable influence by Do you like to see the favourite Heroes using the substances in film shows moderately significant association with $\chi^2 = 12.47$ at $p < 0.01$ level.

Conclusion: The investigator after analyzing the data has come to the conclusion that most of the adults have inadequate ill effects of tobacco.

Keywords: Ill Effects, Ill Effects, Tobacco, Abuse, Adults, & Village

I. INTRODUCTION

In 1981, oral cancer accounted for 10,000 yearly deaths in the United States. In 2001, it continued to be a significant problem with 31,000 oral and oropharyngeal cancers developing in that year. In 2011, over 37,000 Americans are estimated to develop oral or pharyngeal cancer.¹

The death rate has remained fairly steady over the last decade, however, with about 8,000 deaths predicted for 2012. These statistics suggest that oral cancer death rates are higher than those from Hodgkins lymphoma, laryngeal cancer, and endocrine system cancers such as thyroid and skin cancer. The incidence of oral cancer also appears to be significantly different based on race and other confounders such as smoking, and alcohol consumption.²

A. Need for the Study

Around 1 million deaths a year in India will be attributable to smoking by the early 2010. According to the national family health survey conducted in 2005-2006, tobacco use is more prevalent among men rural population, illiterates, poor and vulnerable section of the society. Tobacco is deadly in any form or disguise. Scientific evidence has unequivocally established that exposure to tobacco smoke causes death, disease and disability. According to the International Agency for Research on Cancer (IARC) monograph, there is sufficient evidence in humans that tobacco causes cancer of lung, oral cavity other cancers are associated with tobacco use.³

Oral cancer accounts for 9.4 per cent of all cancers in India; oral cancer is not a common disease in the west and continues to be the major cause of cancer-related death in Indian men. India has one of the highest rates of oral cancer in the world. More than 80,000 new cases are reported every year across the country. The NCRP study reported 35,000 cases of oral cancer in Madhya Pradesh alone, equivalent to four times the national average of around 13 cases per 100,000 people and almost eight times the world's.⁴

II. REVIEW OF LITERATURE

A cross sectional study was conducted in rural area of Bihar using structured schedule by interviewing 9097 respondents. The response rate was 91%. Among 3566 Children (<15 years), smokeless tobacco use was 6.2% and smoking was 0.3%. Most smokeless tobacco use in the form of red tooth powder (77%) smokeless tobacco use among adults was 32.7% Smoking prevalence was 27.7%. The most prevalent form (>81%) was beedi smoking both in men and women.⁵

An exploratory study was conducted among 200 apparently health smokers aged 14-45 years to determine their attitude and behavior regarding tobacco smoking by using a questionnaire. Females constituted 10% of the study group and 90% were males. Majority of them belonged to nuclear families from urban backgrounds. Forty percent of the subjects belonged to low income status and 20% to higher economic strata. About 2/3rd of the smokers indulged in cigarette smoking, 36.5% were mainly urbanites in 15-36 years and 46% smoked beedi who were mainly from rural folks in 35-45 years. The half of the respondents started smoking in their teens. The urge to experiment emerged as the most important factor for inception of the habit (68%) followed by societal factor and family influence. The habit is probably being acquired at younger age since a majority of those aged over 35 years

started smoking after attaining the age of 20 years. More than 75% of smokers were aware of the injurious effect of tobacco on their health and were concerned about harmful effects on themselves and their family members.⁶

III. STATEMENT OF THE PROBLEM

Assess the ill effects of tobacco among adults selected village, Kancheepuram District.

IV. OBJECTIVES

- 1) To assess the ill effects of tobacco among adults.
- 2) To associate the ill effects of tobacco among adults with selected demographic variables.

V. ASSUMPTIONS

- All tobacco users will not have adequate knowledge about ill effects.

VI. RESEARCH HYPOTHESES

- H₁: There will be a significant association of ill effects of tobacco with selected demographic variables among adults.

VII. METHODOLOGY

A. Research Design

- Descriptive survey design

B. Setting

- The study will conduct in PSG public school, Coimbatore.

C. Population

- The study population comprises of Acharapakkam, Kancheepuram District.

D. Sample Size

- The total sample of this study was 40.

E. Sampling Technique

Convenient sampling technique was adapted for the study

VIII. CRITERIA FOR SELECTION OF SAMPLE

A. Inclusion Criteria

- 1) Age group of 30 -60 years.
- 2) Persons intake tobacco or smoking more than five years

B. Exclusion Criteria

- 1) Persons with oral cancer
- 2) Persons treated for some other infection in the oral cavity

C. Description of Tool

1) Section A

a) Demographic Variables

Demographic variables include age, sex, religion, educational status, occupational status, income (Rs. Per month). Living Status, Habits, Do you like to see the favourite Heroes using the substances in film, Have you used substances: Yes / No, If yes specify that. Have you attended any tobacco abuse classes: Yes/ No, If yes specify that.

2) Section B

Structured knowledge questionnaire on effects of tobacco abuse. It consists of 20 items. It includes General information, Misconceptions, effects and Treatment.

a) Score Interpretations

- >75: Adequate

- 50-75: Moderately Adequate
- <50: Inadequate

3) Findings

Table – 1
Frequency and Percentage Distribution of Level of Pre and Post Test Level of ill Effects of Tobacco among Adults
n=40

Level of ill effects of tobacco	Pre test		
	Inadequate <50%	Moderately adequate 50-75%	Adequate >75%
General Information	35	5	0
Causes	30	10	
Signs & symptoms	25	15	0
Management	32	8	0

Table – 2
Mean and Standard Deviation of Level of ill Effects of Tobacco among Adults
n = 40

Level of knowledge on tobacco abuse	Pre Test	
	Mean	SD
General Information	1.56	2.03
Causes	2.03	1.24
Signs & symptoms	1.96	1.47
Management	2.33	1.51
Over all	7.9	3.92

- Demographic variable influence by Do you like to see the favourite Heroes using the substances in film shows moderately significant association with $\chi^2 = 12.47$ at $p < 0.01$ level.

IX. CONCLUSION

The investigator after analyzing the data has come to the conclusion that most of the adults have inadequate ill effects of tobacco.

REFERENCES

[1] Disha Chhadva et al. Effectiveness of Life Skill Education on Adolescents. International Journal of Research in Education Methodology. 2013 June; Vol.3 No.1

[2] Fatemeh Parasteh Ghombavani et al. Construct Validity Examination of Life Skills for Primary School Students in Iran. Mediterranean Journal of Social Sciences 2012 November; Vol. 3 (11)

[3] Mohammad Sahebalzamani, Mahtab Moraveji, Mohammad Farahani, Fariba Feizi. Investigation the Effect of Life Skills Training on Students' Emotional Reactions. Journal of Applied Environmental and Biological Sciences.2013; 3(9)134-137.

[4] Mohammad Sahebalzamani, Hojjatollah Farahani, and Fariba Feizi. Efficacy of life skills training on general health in students. Iran J Nurs Midwifery Res. 2012 Nov; 17(7):553-5.

[5] Mostafa Sheikhzade. The efficacy of training life skills' on educational achievement and social acceptance. World of Sciences Journal; 2013[04]

[6] Sandhya khera, Shivani khosla. A study of core life skills of adolescents in relation to their self-concept developed through Yuva School Life Skill Programme. International Journal of Social Science & Interdisciplinary Research 2012 November; Vahid Vol.1 Issue 11.