

"A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING THE ILL EFFECTS OF SMOKING AND TOBACCO HANDLING AMONG STUDENTS STUDYING IN SELECTED NURSING COLLEGES OF GREATER NOIDA, UTTAR PRADESH."

By

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In partial fulfilment of the requirements for the Degree of

BACHELOR OF SCIENCE IN NURSING

Under the guidance of

Assistant Professor Ms Priyanka Thakur, M.Sc. (N)

MAY 2020

CERTIFICATE

This is to certify that Mr Gulzar Ahmad Mir ,ms.Ayushi have undergone the prescribed course of studies leading to Bachelor of Science in Nursing for a period of four years in accordance with the regulation of Galgotias University. We Certify that the work embodied in this dissertation astudy "A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING THE ILL EFFECTS OF SMOKING AND TOBACCO HANDLING AMONG STUDENTS STUDYING IN SELECTED NURSING COLLEGES OF GREATER NOIDA, UTTAR PRADESH." is original and has been carried in Galgotias University

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We hereby declare that the present dissertation entitled "A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING THE ILL EFFECTS OF SMOKING AND TOBACCO HANDLING AMONG STUDENTS STUDYING IN SELECTED NURSING COLLEGES OF GREATER NOIDA, UTTAR PRADESH." is the outcome of the original research work undertaken and carried out by us under the guidance of Ms Priyanka Thakur, Assistant Professor, Department of Community Health Nursing, School Of Nursing Galgotias University Greater Noida.

We also declare that the material presented in this thesis is original and does not form the basis for the award of any degree or diploma in this University or any other Universities.

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ACKNOWLEDGEMENT





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ACKNOWLEDGMENT

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With heartful regard



ABSTRACT



ABSTRACT

A research study titled "A study to assess the effectiveness of structured teaching programmed on knowledge regarding the ill effects of smoking and tobacco handling among the students studying in selected nursing college of Greater Noida, Uttar Pradesh".

Mr.Gulzar Ahmad Mir, ms. Ayushi conducted educational research in partial fulfilment of the requirements for the award of the degree of Bachelor of Science in Nursing at Galgotias University School Of Nursing, Greater Noida, Uttar Pradesh.

Objective of the study: To assess the level of pre-test knowledge of nursing students at Galgotias University School of Nursing about the negative effects of smoking and tobacco. A post-test assessment of the level of knowledge of nursing students at Galgotias University School of Nursing about the harmful effects of smoking and tobacco products. Evaluating the effectiveness of educational programs on the harmful effects of smoking and tobacco use among students enrolled in Galgotias University School of Nursing. Correlation of pre-test and post-test education levels and selected demographic variables of Galgotias University School of Nursing students.

A structured teaching programme developed for students studying in Galgotias University School Of Nursing with a view to assessing the effectiveness of structured teaching programme in terms of the difference in knowledge levels among students of Galgotias University School Of Nursing.

A quasi-experimental, one group pre-test and post-test, an evaluative approach adopted for the present study. The research study carried out between February 2020, and March 2020 and the settings selected were Galgotias University School Of Nursing, Greater Noida, Uttar Pradesh. A total of 30 students from Galgotias University School Of Nursing were selected.

Hypothesis

H1: - There will be a significant increase in knowledge about the negative effects of smoking and tobacco use after the adoption of the proposed Education Program.

H2: - There will be a significant relationship between pre- and post-test knowledge about the harmful effects of smoking and tobacco use among students with selected demographic variables of Galgotias University School of Nursing.

Conceptual framework

A conceptual framework or model is a basic structure or framework of abstract ideas that represent reality. Concept structure is a set of mental images or concepts that are related, but the relationship is not clear. A conceptual framework is adopted for research based on General Systems Theory.

Methodology

The research approach adopted for this study is an evaluative approach. The research design adopted for this study is pre-experimental one group pre-test post-test design to assess the effectiveness of structured teaching programme on knowledge regarding ill effects of smoking and tobacco handling among students of Galgotias University School Of Nursing . The investigator had utilized Non-probability sampling in which a convenient sampling technique was used for the selection of the subjects.

The tool used for the data collection organized into two sections:

The collected data was gathered, analyzed and interpreted in terms of the objectives of the study. The data obtained were analyzed by using descriptive and inferential statistics in terms of frequency, percentage, mean, standard deviation, paired 't' test and Chi-square test. A sample of 30 students of Galgotias University School Of Nursing were selected for the study by convenient sampling technique.

Section I

Socio-demographic data containing 8 items age, gender, religion, educational status, type of family, diet, family history of smoking, family income, previous knowledge about ill effects of Tobacco use.

Section II

30 multiple choice questions on three areas of ill effects of smoking and tobacco handling. The different areas covered were basic aspects of smoking & tobacco handling, ill effects of smoking and tobacco handling preventive measures and treatment. Each question has four responses and had only one correct answer. The respondents were required to select the best possible answer. Each correct response was awarded one score according to the predetermined key, and a zero score was awarded to wrong response. Total score for all the 30 items was 30.

Results

The results of major findings indicated that students of PIPRAMS had inadequate knowledge in various aspects of the ill effects of smoking and tobacco handling. Structured teaching programme was found to be a very effective method of providing information regarding the ill effects of smoking and tobacco handling.

- Age in years was found to be n=12(20%) of them belongs to 17-18 years, n=30(50%) of them belonged to 19-20 years, n=16(26.7%) of the students were aged between 21-22 years and only n= 02 (3.3%) of them belongs to 23-24 years
- Gender majority of them n=38 (63.3%) were males and n=22(36.7%) were female
- Religion represented n=35(58.3%), of them from Hindus, n=12(20%) of them were from Muslim, n=5(8.3%) were Christians and n=8(13.4%) were others.
- Under education majority of the students were BSC 1st Semester i.e. n=40(66.7%), followed by BSC 2nd semester, n=20(33.3%), whereas BSC 3rd year & BSC 3RD Semester was 0(0%)
- Majority of students i.e. n=40(66.7%) belonged to nuclear family, whereas n=12(20%) students belonged to joint family, there were n=5(8.3%) who were from extended family and n=3(5%) were broken family.
- Regarding family history of smoking most of them n=22(36.6%) smokers were fathers whereas n=20(33.4%) of them were relatives, n=10(16.6%) were mothers and n=8(13.4%) smokers were brothers.
- Majority of students' family n=37(67.7%) smoked beedi under type of family tobacco smoking method, whereas n=15(25%) smoke hukkah, n=8(13.3%) smoked cigarettes and none of them smoked vaporizer.
- Type of family tobacco handling method showed that n=12(20%) chewed dry tobacco in pan, n=14(23.4%) used snuff, n=32(53.3%) chewed gutka, n=2(3.3%) used dissolvable tobacco.
- Knowledge regarding hazards on tobacco smoking and tobacco handling showed that n=24(40%) had some knowledge because of mass media, n=3(5%) by health worker, n=1(1.7%) by family members and friends and n=32(53.3%) had no information
- The result of this study shows that in the Pre-Test the overall mean of knowledge was 13.37 with 3.11 SD and mean percentage was 44.5% whereas in the Post-Test overall mean of knowledge was 25.08 with 2.37 SD and mean percentage was 83.6% with paired "t" =24.95 at P=0.001 significance and DF=59. Further computed paired ['t'] test value (24.95) in knowledge revealed that there was a significant gain in the knowledge of students of senior secondary schools after the administration of a structured teaching programme.

The comparison of overall pretest and posttest percentage of students of Galgotias University School Of Nursing reveals that the total effectiveness of structured teaching programme on knowledge regarding the ill effects of smoking and tobacco handling was 39.1%. The above findings indicated that a structured teaching programme was an effective method of improving the knowledge of students of PIPRAMS regarding the ill effects of smoking and tobacco handling.

Knowledge of the students who participated in the educational research study by using structured teaching programme were independent of their demographic variables' they are age ($\chi 2$ (1) =6.940, P>0.05), gender ($\chi 2$ (2) =0.550, P>0.05), religion ($\chi 2$ (3) =4.282, P>0.05), education ($\chi 2$ (4) =7.576, P>0.05), type of family ($\chi 2$ (5) =6.14, P>0.05), diet ($\chi 2$ (6) =10.165, P>0.05), Family history of smoking ($\chi 2$ (7) =9.461, P>0.05), Types of family tobacco smoking method ($\chi 2$ (8) =1.940, P>0.05), Type of family tobacco handling method ($\chi 2$ (9) =2.659, P>0.05), Knowledge regarding hazards on smoking and tobacco handling ($\chi 2$ (10) =1.230, P>0.05)

No significant association was found between knowledge scores of students of PIPRAMS regarding ill effects of smoking and tobacco handling by their age, gender, religion, education, type of family, diet, family history of smoking, previous knowledge of smoking, family income. Thus, it can be interpreted that the difference in the mean score related to knowledge is the more true difference and the research hypothesis was accepted.

Interpretation and conclusion

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The researcher concluded that the curriculum on the harmful effects of smoking and tobacco products is an effective method to provide good education to the poor and help students at Galgotias University School of Nursing to increase their knowledge about the harmful effects of smoking and tobacco. in the future, help Galgotias University School of Nursing students decide to better serve the community and be the best in their careers. Key Words:

Students of Galgotias University School Of Nursing , structured teaching programme, effectiveness, Knowledge, ill effects of smoking and tobacco handling

TABLE OF CONTENTS

CHAPTER	CONTENTS	PAGE
NO.		NO.
Ι	INTRODUCTION	15 – 26
II	REVIEW OF LITERATURE	27 – 33
III	RESEARCH METHODOLOGY	33- 39
IV	ANALYSIS & INTERPRETATION OF THE DATA	40- 58
V	SUMMARY, DISCUSSION, CONCLUSION IMPLICATION, LIMITATIONS AND RECOMMENDATIONS	59-66
VI	REFERENCES	67-71
VII	ANNEXURES	71- 89

LIST OF TABLES

Table no.	Title	Page no.
1		
1	The systematic representation of one group pre experimental design	35
2	Frequency and percentage distribution regarding socio demographic variables of students studying in Galgotias University School Of Nursing	42- 44
3	Representation of age in years	44
4	Representation of gender	

		45
5	Representation of religion	
		46
6	Representation of education	47
7	Representation of types of family	
		48
8	Representation of diet	
		49
9	Representation of family history of smoking	50
		50
10	Representation of type of family smoking method	
		51
11	Representation of type of family tobacco handling method	
		52
12	Representation of knowledge regarding hazards on smoking and	
	tobacco handling	53
13	Frequency and percentage distribution of pre-test level	
	knowledge of students studying in Galgotias University School	54
	Of Nursing	
14	Overall mean and S.D of pre-test knowledge scores of students	55
15	Frequency and percentage distribution of post-test level of	55
	knowledge in students studying in Galgotias University School	56
	Of Nursing	

16	Overall mean and standard deviation of post-test level of	
	knowledge of students	57
17	Comparison of pre-test and post-test knowledge scores of	
	students studying in Galgotias University School Of Nursing	58

LIST OF FIGURES

Fig No.	Figures	Page no.
1	Conceptual framework based on Bertalanffy's general system's theory	26
2	Schematic representation of research study.	45
3	Bar diagram showing percentage distribution of students of Galgotias University School Of Nursing according to their age.	46
4	Cylindrical diagram distribution of the subjects according to Gender	47
5	Cone diagram distribution of the subjects according to religion	48
6	Pie diagram distribution of the subjects according to Education	49
7	Bar diagram distribution of the subjects according to the type of family	50
8	Cylindrical diagram distribution of the subjects according to diet	51
9	Bar diagram distribution of the subjects according to family history of smoking	52

10	Cylindrical diagram distribution of the subjects according to type of family smoking method	53
11	Bar diagram distribution of the subjects according to type of family tobacco handling method	54
12	Columnar diagram distribution of the subjects according to knowledge regarding hazards on smoking and tobacco handling	55
13	Bar diagram distribution of percentage subject regarding pre- test level of knowledge	56
14	Bar diagram distribution of percentage subject regarding post- test level of knowledge	57
15	Box and Whisker diagram shows difference of mean knowledge scores pre and post Intervention	58



INTRODUCTION



<u>Chapter-1</u> <u>INTRODUCTION</u>

Background of the study

According to data from the World Health Organization, more than 1.1 billion people smoked in 2015. Men smoke more than women. Although smoking prevalence is increasing worldwide, it is also likely to increase in many countries in the Eastern Mediterranean and African regions ("WHO Smoking Prevalence", n.d.). Tobacco-related diseases kill more than 7 million people every year. More than 6 million of these are caused directly by smoking, while approximately 890,000 are caused by non-smokers being exposed to secondhand smoke (WHO fact sheet, 2018).

Smoking is not just an addiction to the smoker's body; Smoking is also a behavioral, emotional, and social part of their lives and an important part of the daily and routine practices of many smokers (Derek Yach, 2018). Smoking kills 1 billion people in the 21st century. The World Health Organization said. Cigarettes consume approximately 6% of the world's healthcare expenditure and approximately 2% of global GDP. In 2012, international funds reached US\$ 1.436 billion, 40% of which came from developing countries (Hindustan Times, 2018).

Heart disease and stroke are the most common causes of smoking; tobacco is responsible for more than 1 million deaths annually and 9.5% of all deaths 1 ; 266.8 million people currently smoke, and more smokers face heart disease. Risk of infection. Many people start smoking too early, which increases their risk of heart disease. The average age at which young people start smoking daily is 18.7 years (Manju Rani n.d.)

Approximately 250 million non-smoking adults live in 11 countries in the WHO Southeast Asia region, accounting for 90% of the world's tobacco users. A study on the medical costs of smoking in India estimated the direct medical cost of tobacco-free treatment in India in 2004 to be \$285 million. The direct cost of not smoking, including the cost of child care and the cost of job loss due to illness, is \$104 million. Therefore, the total disease burden of smokeless tobacco was US\$389 million (approximately INR 17.9 billion) in 2004 (WHO Southeast Asia, 2013).

Tobacco is a product obtained from the leaves of the tobacco plant. The plant belongs to the Nicotiana genus and the Solanaceae family. Although there are more than 70 species of tobacco, the most important commercial product is Nicotiana tabacum ("Tobacco", 2019).

Tobacco contains nicotine alkaloids (stimulants) and camel alkaloids (Rudgley, 1998). Dried tobacco leaves are used only for smoking, cigarettes, pipe tobacco and flavored tobacco. These also include snuff, chewing tobacco, tobacco and snuff (WHO M-power report, n.d.)

Smoking comes in many forms and in many different forms. Some examples include bidis, cigars, cigarettes, chewing tobacco, incense, dipping tobacco, gutka, hookah, pipe tobacco, etc. ("Tobacco", 2019). Smoking is dangerous to health because you breathe in toxic substances in the smoke, such as carbon monoxide, cyanide, and carcinogens that have been shown to cause heart and lung disease and inflammation and cancer (Centers for Disease Control and Prevention, 2020).

Investigation of diseases caused by smoking is carried out by the Epidemic Intelligence Service (EIS), which consists of "epidemic investigators" who investigate health problems at home and abroad (CDC, 2019). Smoking can cause cancer, chronic lung disease, heart disease, stroke, asthma, pregnancy, premature birth with low birth weight, diabetes, cataracts, lung cancer, liver cancer, liver cancer, stomach cancer, and lung cancer (US Lungsten). Association, date-a).

A cross-sectional study was conducted based on current smoking habits. It is estimated that by 2050, 450 million adults will die due to smoking. Total deaths from cancer and smoking have decreased in high-income countries, mostly among men aged 30 to 69, but deaths will increase worldwide (excluding current smokers, most of whom live in low-income and middle-income countries). smoking first. or in middle age. Tripling the tobacco tax could rapidly increase smoking cessation rates and deter people from starting to smoke. Increasing taxes, controlling smoking and informing consumers could prevent at least 115 million smoking deaths over the next few years; this includes an estimated 25 million people dying from cancer (Jha, 2009).

Smoking is the leading cause of cancer, the biggest cancer killer in the world. This section discusses the role of carcinogens in cigarette smoke in causing cancer. A general mechanism is proposed in smoke carcinogens and their metabolically activated forms, which, along with other effects, cause changes in important genes that control growth. Evidence and unresolved issues regarding various carcinogens such as polycyclic aromatic hydrocarbons, nitrosamines, volatile organic compounds, and lung cancer-causing metals are discussed. Studies on smoking in experimental animals are also described. Overall, extensive research on the carcinogenicity of tobacco smoke and its products provides a solid basis for understanding the mechanisms of human lung cancer (Hecht, 2011). Need of the study

To understand smoking and its negative effects, we must understand what happens to our body when we smoke. When you smoke for the first time, your lungs will feel like they're on fire. You may cough a lot. This is your body telling you that it is poisoned. The respiratory tract is lined with small brush-like hairs. They sweep out mucus and dirt, so your lungs stay clear. Over time, smoking damages and destroys these brushes. The risk of cancer and other associated diseases increases as the progress of smoking continues (Elana Pearl Ben, n.d)

When you quit smoking, your health benefits begin almost immediately:

• After 20 minutes, your blood pressure drops to a level close to the level it was before you last smoked.

• After eight hours, the amount of carbon monoxide in your blood drops to normal. After two weeks to three months, your circulation improves and your lung function increases by up to 30%.

• After one to nine months, your cough, sinus congestion, fatigue, and shortness of breath will decrease. > • After one hour and one year, your increased risk of heart disease will be half that of a smoker.

• After five years, your risk of having a stroke will be reduced to that of a non-smoker.

• After ten years, your death rate from cancer will be half that of a continuing smoker, and you will be at risk of developing cancer of the mouth, throat, esophagus, bladder, kidney and pancreas (Laura J, n.d.)

The National Youth Tobacco Survey was conducted to determine past (at least once) and current (at least 1 day in the last 30 days) use of one or more of 10 tobacco products (cigarettes, cigarettes, hookah, smokeless cigarettes, e-cigarettes). . cigarettes.) Popular. Cigarette (e-cigarette), pipe, snuff, bidis, kretek, and tobacco use among U.S. middle school (grades 6-8) and high school (grades 9-12) students. Results showed that 22.9% of high school students reported currently using tobacco products and 12.6% reported currently using two or more tobacco products; carry electronic devices (e.g. cigarettes, cigars, pipes, bidis, cloves and/or hookah). use more tobacco (20.7%) than other types of tobacco. Additionally, 46.0% of high school students stated that they had tried one tobacco product, and 31.4% stated that they had tried two or more tobacco products (Arrazola, Neff, Kennedy, Holder-

Hayes, & Jones, 2014). The idea of reducing smoking was created more than 50 years ago. Quit smoking or stop smoking temporarily. For years. More desirable, licensed nicotine products that can compete sensory, chemically and behaviorally with cigarettes are thought to be the way forward. The public health benefits of encouraging people to quit smoking and switch to licensed nicotine replacement products cannot be ignored (Fagerstöm and Bridgman, 2014).

The relationship between diet and oral cancer is now being investigated. Oral cancer is a highly preventable disease. Good oral hygiene is important to keep your mouth clean. It is also important to quit smoking and alcohol because these are causes of oral cancer. Finally, the risk of oral cancer can be reduced with a preventative, healthy diet that includes a diet rich in fruits, vegetables, and fish, and low in fat and cholesterol in meat, rice, and refined grains (Mangalath et al., 2014).

A cross-sectional study was conducted using a multistage random sampling technique. To understand the effects of second-hand smoke on oral health and risk factors for smoking among Saudi Arabian students. A total of 277 students participated in this study. The results showed that more than 69.9% of participants (n=277) were aware of the negative effects of smoking on oral health; These include not only oral health, odor and breath, but body diseases, dental diseases, oral diseases and oral cancer. . Students who are aware of the effects of secondhand smoke are 22%-47% less likely to smoke than those who are unaware of these issues. The smoking rates of students who think that smoking can cause mouth ulcers and negatively affect oral health are lower than other students (OR: 0.414; CI: 0.201-0.50) and (OR: 0.433; CI: 0.194-0.965), respectively. . Who would have thought that smoking did not have such disadvantages? This study concluded that educating students about the oral health problems of smoking should be part of smoking cessation programs and policies (Nazir and Almas, 2017).

This review article details various aspects of tobacco control with special reference to the Indian context. Prevalence of smoking in India, health hazards and environmental hazards of smoking, harmful effects and effects of smoking, economics of smoking, tobacco control laws in India, discussion of tobacco programs and future directions for tobacco control are urgently needed. India is the second-highest smoking country in the world and accounts for approximately one-sixth of the world's smoking-related deaths. India has a particular smoking problem, with many people using both smokeless and tobacco products. Understanding the problem of smoking in India, focusing more efforts on effective measures and investigating the impact of cultural and social norms Spending on various tobacco control programs should be our top priority (Mishra, Pimple, and Shastri, 2012).

The research was conducted to evaluate medical students' "knowledge about tobacco use and cancer." Among the side effects of smoking, the incidence of cancer in the majority of men and women is 56.4% and 44.9%, respectively. It's common among teens and 20s to fall into this bad habit, which has serious physical, mental and financial consequences. Among young people, students can easily get involved in the process due to education and life pressures. The results show this. The reasons for starting smoking are friends, parents and movie influence at 22%, 20% and 27% respectively. A surprising 31% of students listed exams and smoking-related stress as reasons in their lives. 97% of smokers are men and 3% are women. All women smoke (Taran, no date).

An observational study was used, including a pre-test and post-test group created before the experiment. A simple random sampling technique was used to select a sample of 30 young adults and collect data. Data were analyzed using descriptive and inferential statistics. The results showed that the average knowledge score in the posttest (17.43%) was higher than the average knowledge score in the pretest (9.6%). Comparison of pretest and posttest scores showed a significant improvement in teenagers' cognitive scores after a training program. The results of the study show that an educational program is very effective in improving knowledge about the prevention of oral diseases in young people. (Sira and Raju, 2017).

The need for effective tobacco control and prevention strategies includes:

- Monitor tobacco use and prevention policies.
- Protect people from smoking.
- Provide help with quitting smoking.
- Warn people about smoking. Dangers of Tobacco.
- Cigarette advertising, publicity and promotion should be prohibited.

• Increase the price of cigarettes in the state for cigarettes. (American Lung Association, n.d.b)

Community and school health programs and school policies should be coordinated using common measures to create a smoke-free environment (Pearson et al., 2015).

• Tax increases caused sales of tobacco products to increase. ¤ Smoking is prohibited in workplaces and public places. (Pearson et al., 2015)

Students' decision to smoke and their ability to smoke is an important issue that should be emphasized. The content of the treatment and educational needs are developed and lesson plans are developed to improve students' communication skills to meet these needs. Components of smoking prevention (health, 2012). The researcher's experience as a physician was seen in working with students on the negative effects of smoking and chewing tobacco. In general, students' experience is low, mood dissatisfaction, stress and anxiety, and burnout lead them to smoke, reducing the quality of care. In the current context, training programs in the field of teaching are very important and effective in improving the knowledge levels of research participants. The number of studies examining the negative effects of smoking and chewing tobacco is quite low. These conditions led the researcher to conduct this research.

Statement of the problem

A study to assess the effectiveness of structured teaching programmed on knowledge regarding the ill effects of smoking and tobacco handling among the students studying in selected Nursing College Of Greater Noida, Uttar Pradesh

Purpose of the study

The purpose of the study is to build the capacity of the students studying in the nursing college, thereby improving the knowledge regarding the ill effects of smoking and tobacco handling and thus improving quality of life.

Objectives of the study

1. To evaluate the preliminary knowledge levels of nursing students regarding smoking and its negative effects.

2. To evaluate the preliminary knowledge of nursing students about smoking and its negative effects. Smoking and the effects of smoking.

3. A review of the effectiveness of an educational program addressing the adverse effects of smoking and smoking among nursing students. 4. A study on the pre-test and post-test knowledge levels of nursing students regarding foreign selection.

Hypotheses

H1: - There will be a significant increase in the knowledge score regarding the ill effects of smoking and tobacco handling after administration of a structured teaching programme.

H2: - There will be a significant association between Pre and Post-Test knowledge scores regarding the ill effects of smoking and tobacco handling among students studying in nursing college with a selected demographic variable.

Assumptions

- The students studying in nursing college may have some knowledge regarding the ill effects of smoking and tobacco handling.
- Administration of structured teaching programme may have an impact on the knowledge of students studying in nursing college regarding ill effects of smoking and tobacco handling.

Variables

•Dependent variable: knowledge of students studying in nursing college regarding ill effects of smoking and tobacco handling

• Independent variable:Structured teaching programme

Operational definition

Assess

It refers to an activity to estimate the knowledge of students studying in nursing college regarding ill effects of smoking and tobacco handling before and after the structured teaching programme as revealed by suitable knowledge questionnaire.

Effectiveness

It refers to the significant increase in the level of knowledge of students studying in nursing college schools regarding ill effects of smoking and tobacco handling which is measured from the response of pre-test, structured teaching programme and post test.

Structured teaching programme

It refers to systematically organized instructions on knowledge teaching regarding ill effects of smoking and tobacco handling, programme Introduction, Basics of tobacco and its components, smoking and its ill effects, tobacco handling and its ill effects, dimensions of the diseases which occur due to smoking and handling, preventive measures, treatment modalities, conclusion, and references for future students studying in nursing college regarding ill effects of smoking and tobacco handling.

Knowledge

It refers to the understanding and awareness of students studying in in nursing college regarding ill effects of smoking and tobacco handling as expressed to the response of knowledge questionnaire

Ill effects of smoking and tobacco handling

According to this research in this study Refers to the abnormal, harmful or undesirable effect on an organism that causes anatomical or functional damage, irreversible physical changes, or increases the susceptibility to other biological, chemical or environmental stress.

Prevention

Refers to avoid the smoking and tobacco handling its ill effects among students studying in nursing college

Conceptual framework

Connecting scientific research into a unified system facilitates the understanding of the structure of knowledge when it is put into an appropriate concept. A conceptual framework is a generalization of ideas and principles taken from one field of research and used to develop subsequent representations. It can be used as a tool for scaffolding research and helps researchers understand the significance of subsequent findings. A general methodology is used in this study.

Generalized thinking is a pattern of how people interact with their environment. The theory was proposed by Ludwig Von Bertalanffy in 1968. General systems theory aims to provide a language, a system of communication and learning. A system is a collection of integrated, interacting entities (including humans) that function as a whole.

According to general theory, the system has a set of interactions in the field that filter the type and value of exchange with the environment. The system includes inputs, outputs, and outputs over the entire monitoring period. Structure refers to the simultaneous arrangement of objects. All living systems are open systems in which there is a constant exchange of matter, energy and information.

Input : In general terms, input is the duration of movement of energy or information from the environment into the system. Data entry included demographic variables and information questions for students enrolled in the College. These individuals were asked to ask some questions regarding smoking and its negative effects. In this study, data were collected from students studying in a nursing college in Greater Noida as the sample population.

Through put :Interventions designed to change personal information through investments. Teaching methods include planning teaching methods, validating and updating teaching methods, and evaluating the knowledge of students studying at the School of Nursing regarding smoking and the quality of smoking. Through the process and use of teaching methods in the form of problems, energy and knowledge. It is recommended that students studying at the Faculty of Medicine follow the show to understand and have knowledge about smoking and its negative effects.

Output: The end product of this process is to raise awareness among university students about smoking and its negative effects. After the seventh day following the teaching process. The researchers conducted the final test. After the test, the researcher compared the pre-test and post-test results. A teaching project is said to be important if it has a positive impact, for example, increasing the knowledge of students studying at the Faculty of Medicine about smoking and its impact on their quality.

Feedback : If the increase in knowledge is not sufficient, the researcher repeats the entire process. This is not included in this research

Fig No1: MODIFIED THEORETICAL MODEL BASED ON VON BERTANLANFFY'S GENERAL SYSTEMS





REVIEW

LITERATURE



Chapter-2

REVIEW OF LITERATURE

Data analysis is a necessity of scientific research. It means trying to read and write information related to the research topic. It also encourages and explains why the topic was chosen for research, avoiding unnecessary publications to explore possibilities and guide new researchers.

Data analysis is not just reading, it is objective and reading. The main purpose of a literature review is to obtain background information on the research topic, identify sources used by other researchers, and understand different patterns and their publications.

Data analysis begins with selecting the research question, goes through each stage of the research process, and ends with its writing. In this research, the researcher used different types of data analysis at different stages of the research process.

A literature review is provided below.

- i. Explanations about cancer and its causes
- ii Explanations about smoking, smoking and its negative effects
- iii. Selective screening smoking can cause cancer
- iv. Prevention of smoking-related cancer

Reviews regarding cancer and its causes

Cancer is often described as a "genetic disease" (Pillai et al., 2019). Chromosomal translocations caused by abnormal recombinase activity during the production of antibodies and T cell receptors are a hallmark of many leukemias and lymphomas. Cancer genes can cause chromosomal breaks, and these chromosomal changes can lead to cancer (Kirkham et al., 2019).

The causes of cancer are many a few include the following (Joensu, 2013)

• Properties of biological organisms or materials; age, gender, genetics and skin type

• Lifestyle factors that cause skin cancer include smoking, alcohol, ultraviolet radiation from the sun, baked goods containing nitrites, and certain foods such as polycyclic aromatic hydrocarbons.

•Carcinogens that affect work and life in the environment include asbestos fibers, tar and asphalt, polynuclear hydrocarbons (such as benzopyrene), some plastic chemicals (such as vinyl chloride)

•Carcinogenic bacteria and this virus are Helicobacter pylori (H. pylori). Helicobacter pylori, causing stomach ulcers), HBV, HCV (hepatitis virus, causing hepatitis), HPV (human papillomavirus, causing changes in the uterus, etc.), EBV (herpesvirus, causing EB infection, lymph nodes causing sore throat). • Radiation, including ionizing radiation (such as X-rays, soil radon), non-ionizing radiation (ultraviolet radiation from the sun) can cause cancer (Joensu, 2013)

Multiple myeloma is a rare blood plasma cancer that occurs at twice the rate in African-American patients than in European-American patients. The incidence of multiple myeloma varies by race, but the cause of racial discrimination in multiple myeloma is largely unknown. Infection has been identified as a risk factor for multiple myeloma, including race, age, gender, family history, and exposure to different chemicals, such as fever, potency. Race and ancestry play an important role in predicting the risk of multiple myeloma, but research reports on the molecular contribution of race and ancestry to the disease are rare. In this review, we distinguish between tumor immunobiology and ancestral differences in populations (Smith, Ambs, & Landgren, 2018).

A study evaluating clinical, diagnostic, and demographic characteristics as well as HER2 expression status in breast cancer patients showed positive results with a total of 210 patients (25.2% women and 74.8% men). At 5 years of observation (follow-up rate: 45.7%), the survival rate was 9.4 ± 10.9 months. Twenty-four percent of patients have significant HER2 overexpression. There was no significant relationship between HER2 expression and tumor location (p-value = 0.63), histopathological type (p-value = 0.72), or tumor grade (p-value = 0.051). In addition, no correlation was found between tumor size and tumor grade, regardless of male or female and in patients aged ≥ 60 and ≥ 60 years (all p values > 0.05).

Additionally, no significant relationship was found between HER2 status (p value = 0.88), gender (p value = 0.31) and age (p value = 0.055) and patient survival (Feizy et al., 2018)

Prostate cancer It is the most common cancer in men. Androgen deprivation therapy and age-related androgen loss in cancer patients promote many diseases related to aging and quality of life, such as osteoporosis, sarcopenia, and dementia in men (Takayama, 2017).

Reviews regarding smoking, tobacco handling its ill effect

A systematic review investigating the association between smoking and lung cancer, chronic lung disease, ischemic heart disease, and stroke in Japan. Results from 40 studies, 26 reported results for cancer and 7 to 9 reported results for other diseases. RRs (95% CI) for current smoking were 3.59 (3.25-3.96) for lung cancer, 3.57 (2.72-4.70) for COPD, 2.21 (1) for IHD. .96-2.50) and 1.40 (1.25-1.57) for stroke. The relative risk of lung cancer from smoking is low, but the relative risk of ischemic heart disease increases with the amount of smoking and decreases with time since quitting smoking. Studies have concluded that the relative risk of cancer is increased by smoking (Lee, Forey, Thornton, and Coombs, 2018).

A prospective case-control study was conducted to evaluate the predictive role of smoking-associated DNA methylation markers on lung cancer. The risk of developing breast cancer increased with decreased DNA methylation; lowest adjusted ORs (95% CI) for lowest participants were 15.86 (4.18-60.17), 8.12 (2.69-4.48), and 10.55 (3.44-32 ,31). AHRR, 6p21.33, and F2RL3 quartiles were compared to control group participants in the 2 highest quartiles for each region. One marker or its combination is best for self-reporting of smoking, especially for smokers (Zhang et al., 2016).

A study aimed at assessing mouth ulcers and risk of mouth ulcers among fishermen on the South Indian island of Mahe. The population of the research consisted of 362 fishermen aged between 15 and 54. The results showed that out of 362 fishermen, 266 (73.48%) were male and 96 (26.52%) were female. The prevalence of smoking, drinking and chewing gutka was 24.3%, 48.85% and 32.4% respectively. Non-smoking (32.4%) was the most common habit, followed by smoking (24.3%). The prevalence of oral mucosal lesions was 14.9%.

There was a significant relationship between age group and personality. The results of this study show that the fishing community has poorer oral health, more habits and more mouth area. This epidemiology study provides the basis for planning further research in this area (Anzil et al., 2016).

A study to assess negative attitudes and future smoking intentions among Malaysian secondary school students. Despite the known health effects of smoking, the prevalence of smoking among secondary school students has not changed in the last three years. Almost half of children come from homes where one or both parents smoke, and a third of parents do not discuss the consequences of smoking with them. Many students are classified as "experimenters" because they have tried smoking but are unsure whether they will quit smoking in the future. According to our expectations, most students agree that smoking makes people uncomfortable and causes weight loss. It seems that most students are aware of the negative effects of smoking. They think that they receive sufficient information from schools about the health effects of smoking. This study concluded that efforts should be made to help middle school students understand negative thoughts about smoking and dispel myths (Caszo et al., 2015).

A prospective study to evaluate the effects of smoking on cardiovascular and respiratory conditions among male university students in the UAE. A quasi-experimental study was conducted on 97 male volunteers over the age of 17. Blood pressure, heart rate and respiratory rate were measured for all participants before and immediately after smoking. A self-administered questionnaire was used to collect personal details and information on smoking habits. The results showed that mean increases in blood pressure ($12 \pm 1 \text{ mmHg}$), heart rate ($20 \pm 2 \text{ bpm}$), and respiration ($4 \pm 1 \text{ breaths/minute}$) were observed (p = 0.483). The study concluded that smoking has a significant impact on systolic blood pressure, heart rate and breathing. Smoking prevention programs should address the pain of such smoking. The findings call for further research into this smoking process (Shaikh et al., 2012).

Review selecting to tobacco use leading to cancer

Tobacco products can cause many types of cancer, including lung, mouth, nose, lung, oropharynx, hypopharynx, esophagus, stomach, liver, pancreas, bladder urinary, ureter, kidney and cervical cancer, and myeloid leukemia. Carcinogen biomarkers (DNA adducts, protein adducts, and urinary metabolites) provide information about carcinogen absorption,

metabolic activation, and detoxification in individuals who use or are exposed to tobacco products (Hecht, 2003).

More than 60 types of cigarettes contain carcinogenic substances, and unburned cigarettes contain at least 16 carcinogenic substances. These include pharmaceutical nitrosamines (such as 4-(methyl-nitroso-amino)-1(3-pyridyl)-1-butanone (NNK) and N'-nitroso-n-nicotine (NNN)), polycyclic aromatic hydrocarbons (such as benzo[a]pyrene) and aromatic amines (e.g. 4-aminobiphenyl) appear to play an important role in carcinogenesis (Hecht, 2003)

A retrospective study was conducted to evaluate the effects of smoking while chewing or smoking. There is now sufficient evidence that chewing and smoking are crucial in the etiology of cancers of the mouth, pharynx, larynx and esophagus, which are most sites of the disease in the region versus Mumbai. This association may be as strong as the association between smoking and lung cancer (Jussawalla and Deshpande, n.d.).

The carcinogenic effect of chewing tobacco is especially evident in areas where tobacco is stored for a long time. Likewise, inhaling smoke while smoking causes carbon monoxide and other substances to directly affect the oropharynx, especially the beginning of the palate, putting smokers at risk of cancer in the end areas. The oropharynx does not carry smoke directly, rather the tissue there does not continue into the mouth. A common observation is that areas with high smoking risk have the least impact on smokers and vice versa (Jussawalla& Deshpande, n.d.).

The use of smoke-free products is widespread throughout the world and its use is increasing in many countries. This is despite epidemiological data from the United States and Asia showing an increased risk of oral cancer. Smokeless tobacco products are a significant source of carcinogenic nitrosamines; Biomarkers of exposure have been developed to measure exposure as a basis for human models of carcinogenesis. Carcinogenicity studies in animals support the clinical results. The cancer risk of nonsmokers is lower than that of smokers but higher than that of nonsmokers (Boffetta, Hecht, Gray, Gupta, & Straif, 2008).

A study evaluating not only oral cancer, but also the risk of cancer from chewing hazelnuts: when combined with smoking, many carcinogenic substances appear. The results showed that one-third (33%) of smokers chewed, but most smokers (90%) smoked. Chewers have a double risk of all cancers (HR = 2.00). Chewers have an increased risk for at least six

cancer sites: oral cavity (HR = 12.52), esophagus (HR = 5.64), liver (HR = 2.27), pancreas (HR = 2.67), larynx (HR = 6.24) and lungs. (HR = 2.43) The risk increased with increasing nut intake. Over the past 20 years, obesity has increased 5- to 10-fold, and the age-adjusted mortality rate for all cancers in Taiwan has increased by 25%, including a 223% increase in oral cancer. Eating while smoking increases the risk and accounts for at least half (50%) of cancer cases among the 2 million people who eat in Taiwan. The life expectancy of chewers is 5.93 years shorter at age 20 and 5.55 years shorter at age 40 than non-chewers. The study concluded that in addition to oral cancer, chewing also has a significant impact on the development of esophageal, liver and pancreatic cancer. larynx, lung, and all cancers (Wen et al., 2010).

A study evaluating the effects of tobacco chewing, smoking and alcohol consumption on all-cause and cancer: Thiruvananthapuram, India. The results showed that smoking was associated with cancer; The mortality risk of smoking is 1.31 (1.24–1.39), 1.63 (1.37–1.94), and 1.68 (1.36–2.08), respectively; risk of drinking alcohol 1.13 (1.06–1.06–1.), 1.32 (1.11– 1.57) and 1.47 (1.19–1.80). Research has concluded that smoking and alcohol consumption in any form is a problem and that a better quality of life can be achieved by avoiding these habits (Ramadas et al., 2010).

Preventive measures to be followed for preventing tobacco-induced cancer

Smoking and alcohol also cause oral cancer and pre-cancer. Many recent studies have shown that these foods are important in preventing precancerous lesions and cancer in the mouth. Antioxidants found in fruits and vegetables appear protective. Primary prevention focuses on eliminating risk factors (smoking, alcohol) that have been neglected to date in the prevention of oral precancerous lesions and cancer (Reichart, 2001), testing and use of effective cessation interventions to prevent tobacco use and increase consumer demand; (b) The impact of the smokeless tobacco industry on smoking, these products, and the public hazard. (c) Prevention implemented in schools has a short-term (but not long-term) effect on young people. (d) Various methods, including telephone counseling, have increased the number of users trying to quit smoking. Self-help strategies alone are ineffective, but counseling and medication alone or together may increase quitting success; (e) Provide educational and training content to improve the quality of medical care provided by healthcare providers. Effectiveness of physician-based intervention to reduce smoking. (f) Effectiveness of community and provider programs to promote the use of evidence-based smoking cessation strategies. (g) The effectiveness of marketing campaigns to encourage consumers to quit smoking and switch to smokeless tobacco products; (h) Effective interventions for people with conflict and risk behaviors (such as depression, drug and alcohol addiction) (Ranney et al., 2006).

A study was conducted to evaluate the effectiveness of cognitive intervention to prevent youth smoking. Lessons at school are taught for skills and knowledge purposes, and they receive a one-hour prevention program every week. Eight social media graduates were trained in using technical and informational interventions. After 40 hours of planning the intervention, leaders were selected to present the skills or relevant information to groups in their schools during the winter months. Both interventions included health and smoking-related videos, peer assessment, and homework assignments. Skills are also learned to deal with smoking problems, prevent smoking and temptation, and prevent stress caused by smoking. Skills interventions include: Parts 1 and 2, monitoring and photography; Chapters 3 and 4, peer review and group discussion; Chapter 5, problem solving; Chapter 6, skills to resist attacks and temptations; Chapter 6 Chapter 7, dealing with personal stress; Chapters 8 and 9, additional exercises on problem solving, resisting temptation and temptation, and coping with personal stress; Chapter 10 reviews previous material. Every lesson ends with homework (Steve Paul Schinke, n.d.)

A study was conducted to evaluate the prevention of smoking and drinking in primary school children through lifestyle education. Prevention programs teach personal and social awareness as well as social protection. Attitudes, attitude, knowledge, expectations and other variables were investigated among students in 20 schools (N = 1090) who were selected to receive defense (9 schools, n = 426) or to work as students in defense (N = 1090). (NWS = 1090). Control group (11 schools, n = 664). School evaluations showed that compared to control schools, schools receiving the prevention program had a 61% reduction in smoking and a 25% reduction in drinking water each year of follow-up (Botvin, Griffin, Paul, & Macaulay, 2003).

Smoking is considered a life-threatening disease with serious oral consequences requiring behavioral support and medication. While smoking is the most dangerous and common form of smoking in the West, other factors such as bidis in India, resumption of smoking among some people in rural areas, and the use of snus and chewing tobacco must also be taken into account. People suffering from oral thrush are not recommended to smoke

regularly or frequently. Health professionals encourage and support smoking cessation as part of cancer prevention (Warnakulasuriya, Sutherland, & Scully, 2005).



RESEARCH METHODOLOGY



Chapter-3

RESEARCH METHODOLOGY

This chapter explains the methodology followed "A study to assess the effectiveness of structured teaching programmed on knowledge regarding the ill effect of smoking and tobacco handling among the student studying in selected nursing college of greater Noida Uttar Pradesh." This is discussed under the following heading -research approach, research design, setting, population, sample and sampling technique, development and description of the tool, the procedure of data, collection and analysis.

Research Approach

Research approach tells the researcher about what data must be collected and how to analyze. It also suggests possible conclusions to be drawn from a data, the view of nature of the problem selected, and objectives to be accomplished, an evaluative research approach was adopted for the present study

Research design

	Pre-test	Treatment	Post-test
	01		02
One group	Day -01,	Х	Day-7

Table no 1 shows the systematic representation of one group pre-experimental design

Key-

O 1 - Pre-test knowledge score before STP

- X Educational variables (STP)
- O 2 Post-test knowledge score after 7 days of administering ST

Research variables

• Independent variable: - structured teaching program on the ill effects of smoking and tobacco handling hazards.

• Dependent variable: - Dependent variable for the present study refers to knowledge of college students.

Setting

The study was conducted on Galgotias University Greater Noida

Population

Target population

• College student of Galgotias University 60 student sample of Galgotias University Greater Noida

Sampling technique

• Non-probability purposive sampling technique was used to select the sample.

Criteria of sampling

Inclusion criteria for sampling

- College student learning in Galgotias University Greater Noida
- Students are present at the time of data collection.
- The student who can understand and communicate in English.

Exclusion criteria for sampling

• The students who are not available at the time of data collection.

Data collection tools & technique

Description of the tool

The tool will be developed based on professional experiences and under the guidance of experts. The tool consists of two parts section A and section B

Section A: consists of socio-demographic characteristics.

It is comprised of 8 items seeking information on social demographic data which include such as age, gender, religion, education, type of family, diet, family history of smoking, type of smoking method and types of family tobacco handling method, Knowledge regarding hazards on smoking and tobacco handling.

Section B: consists of structured knowledge questionnaire regarding the ill effects of tobacco handling and smoking

The self-administered questionnaire used to assess the knowledge of college students regarding the ill effects of smoking and tobacco handling. There were totally 30 items was yes or no type in nature. There was one correct response that carried one mark, and the wrong response carried zero. The total score was 30. The respondent was expected to choose the correct response

Scoring

The knowledge of Students was measured in terms of knowledge score. Each correct answer was given one and wrong answer score zero. The maximum score was 30 to interpret the level of knowledge the scores were distributed as follows: -

- Inadequate knowledge < 50%
- Moderate knowledge 51-75%

• Adequate knowledge > 75% An answer key was prepared for scoring answer to the selfadministered questionnaire.

Method of data collection

Prior to the study, written permission will be obtained from the concerned authority and sample. After obtaining permission researcher will explain the purpose of the study to the subject. A pretest will be conducted by using structure knowledge questionnaire followed by administration of a structured teaching programmed post-test will be conducted after one week by using the same questionnaire. Duration of data collection will be up to 4 weeks.

The validity of the tool

Validity is the degree to which an instrument measures what is indented to measure. Content validity of the tool was established by ten experts comprising of various educators from the department of medical-surgical nursing, mental health nursing, OBG, child health nursing, community health nursing, and subject experts in English. The experts were requested to give their opinion and suggestions regarding the relevance of the tool and content of the items. Based on the recommendations from experts, the tool we are modified and finalized.

Reliability of the tool

The reliability of the instrument is a major criterion for assessing the quality and adequacy of the tool. Reliability of the instrument is the degree of consistency, which measures the attribute it is supposed to measure for the study. The reliability of the instruments was analyzed by using split-half methods. The reliability of the knowledge tool r = 0.90

Pilot study

A pilot study is a small preliminary investigation of the same general character of the major research. It is designed to acquaint the investigator with the problems to be correlated in preparation for the larger research project.

The purpose of the pilot study was to:

- Find out the feasibility for conducting the final study.
- Determine the method of statistical analysis.
- To refine the instruments.
- To determine the time required for administering the questionnaire.
- To know if the subjects understood the wording of the tool.

Data collection procedure

Prior to data collection, written permission was obtained from the Dean of Galgotias shool of Nursing Gr. Noida further also from the participants for the study. After obtaining consent investigator explain the purpose of the study to the participant. The main study was conducted in February 2020 among 60 samples from Galgotias School Of Nursing . Samples were selected by using non-probability purposive sampling technique. A pre-test was conducted by using structured knowledge questionnaire followed by a structured teaching programmed for one hour thirty minutes; each participant took 30-40 minutes to complete the questionnaire. Post-test was conducted after seven days by using the same questionnaire. Duration of data collection was up to four weeks.

Method of data analysis

Data will be analyzed in terms of the objectives of the study by using descriptive and inferential statistics

Descriptive statistics

- Frequency and percentage distribution will be used to analyze demographic variable.
- Mean, and standard deviation will be used to the level of knowledge.

Inferential statistics

1. Paired 't' test will be used to assess the effectiveness of structured teaching programme.

2. Chi-square will be used to find out the association between the posttest's levels of knowledge with selected demographic variables.

3. Experts in the field of nursing and statistics directed the development of a data analysis plan, which was as follows.

Organization of data on a master sheet

Tabulation of the data in terms of frequencies, percentage, mean, standard deviation and range to describe the data.

Classification of knowledge by using the following formula (Obtained score /maximum score) * 100

Knowledge score was graded as below

Inadequate knowledge -50 % and above

Moderately adequate knowledge-51-75%

Adequate knowledge-76-100%

Structured knowledge questionnaire

A score of one was awarded to a correct response while a score of zero will be awarded to the incorrect response of structured knowledge questionnaire.

Ethical consideration

- Administrative permission was obtained from the principal
- Written permission was obtained from the selected college administrators
- Written consent was obtained from the participant.

SUMMARY

This section describes the nursing interventions, suggestions, and recommendations of this study. Current research shows that lesson plans are an effective way to convey information to the subject. In this study, students of the School of Nursing of Galgotías University were educated through teaching about smoking and the negative effects of smoking. The results of this research were analyzed and discussed. Results from other similar studies. This helped the researchers see that the study was actually happening and that the education provided at the Galgotías University School of Nursing was effective in raising awareness among students about smoking and its negative effects. The experience of conducting this course was very enjoyable due to the good cooperation between students and university authorities. This study is a new study for researchers.



DATA ANALYSIS & INTERPRETATION



CHAPTER-4

DATA ANALYSIS AND INTERPRETATION

This chapter offers with the evaluation and interpretation of records amassed for you to the effectiveness of structured teaching programme on know-how concerning prevention of deep vein thrombosis. The information accrued have been analyzed in step with the plan for records evaluation, which include as both descriptive and inferential data. The findings were organized and provided underneath following headings.

Objectives of the study

1. To evaluate the pre-test knowledge of Galgotias University students regarding smoking and its negative effects.

2. Evaluation of post-test knowledge of Galgotias University students regarding smoking and its negative effects.

3. Evaluation of the effectiveness of the educational program on smoking and the negative effects of smoking among students of the University of Galgotias. 4. Analysis of pre- and post-test knowledge levels of Galgotias University students with publicly available options.

Hypotheses

H1: -After the implementation of the educational process, knowledge scores regarding smoking and its negative effects will increase.

H2:- There will be a significant relationship between pre-test and post-test scores on the negative effects of smoking and smoking among school students pursuing Nursing Degree from Galgotias University and choosing a different population.

Presentation of data

All elements in this tool are coded and converted into the main form of computer programming

Part A: Distribution of Sociodemographic Variables Among Students.

Part B: Distribution of prior knowledge levels of students enrolled at the Faculty of Nursing of Galgotías University Research on smoking and the effects of smokin

- Part C: Distribution of students studying at the Faculty of Medicine of Galgotías University About the Research on Cigarettes and Smoking.
 - Part D: Compare knowledge level at pre-test and post-test to determine the effectiveness of the instructional model.

SECTION A

DISTRIBUTION OF SOCIO DEMOGRAPHIC VARIABLES OF STUDENTS STUDYING IN GALGOTIAS UNIVERSITY SCHOOL OF NURSING

 Table 2: Frequency and percentage distribution regarding socio demographic variables of students studying in Galgotias University School of Nursing

S.NO	Socio demographic variables	Frequency(N= 60)	Percentage %
1	Age in years.		
	(a) 17-18 years	12	20.0
	(b) 19-20 years	30	50.0
	(c) 21-22 years	16	26.7
	(d) 23-24 years	2	03.3
2	Gender.		
	(a) Male	38	63.3
	(b) Female	22	36.7
3	Religion		

N=60

-		1	
	(a) Hindu	35	58.3
	(b) Muslim	12	20.0
	(c) Christian	5	8.3
	(d) Other	8	13.4
4	Education		
	(a) BSc 1 st semster	0	0.0
	(b) Bsc 2 nd semester	20	33.3
	(c) Bsc 3 rd semster	20	66.7
	(d) Bsc 3 rd year	40	0.0
		60	
5	Type of family.		
	(a) joint family	12	20.0
	(b) nuclear family	40	66.7
	(c) extended family	05	8.3
	(d) broken family	03	05.0
6	Diet		
	(a) Vegitarian	27	45.0
	(b) Non-Vegitarian	5	8.3
	(c) Mixed (veg-non)	23	38.4
	(d) Special Protein diet	05	08.3
7	Family history of smoking		

	(a) Father	22	36.6
	(b) Mother	10	16.6
	(c) Brother	8	13.4
	(d) Relative	20	33.4
8	Types of family smoking method		
	(a) Beedi	37	61.7
	(b) cigarette	8	13.3
	(c) Hukka	15	25.0
	(d) vaporizer	0	0.0
9	Type of family tobacco handling		
	method	12	20.0
	(a) Dry tobacco in pan	14	23.4
	(b) Snuff	32	53.3
	(c) Gutka	02	03.3
	(d) Dissolvable tobacco		
10	Knowledge regarding hazards on		
	smoking and tobacco handling	24	40.0
	(a) Mass Media	3	05.0
	(b) Health Worker	1	01.7
	(c) Family members and friends	3	53.3
	(d) No information		

Table 2: Depicts the frequency and percentage distribution of various socio demographic variable of students studying in Galgotias University School Of Nursing, which states that age in years that n=30(50%) of them belongs to 19-20 years where only n=2 (3.3%) of them belongs to 23-24 years, regarding gender majority of them n=38 (63.3%) were males, further under religion n=35(58.3%), of them were hindus and in education n=40(66.7%) of them were from BSC 1 st year.

Type of family most of them n=40(66.7%) were nuclear families. Whereas diet followed by majority was vegetarian diet n=27(45%). The family history of smoking majority showed that n=22(36.6%) were fathers.

The details regarding types of family tobacco smoking method showed most of them n=37(61.7%) were beedi smokers. Whereas n=32(53.3%) of them consumed gutka under type of family tobacco handling method. Knowledge regarding hazards on smoking and tobacco handling was n=32(53.3%) of students has no information about ill effects of tobacco use

Table 3: Representation of age in years

Socio demographic variables	Frequency (N=60)	Percentage (%)
Age in years.		
(a) 17-18 years	12	20.0
(b) 19-20 years	30	50.0
(c) 21-22 years	16	26.7
(d) 23-24 years	2	03.3

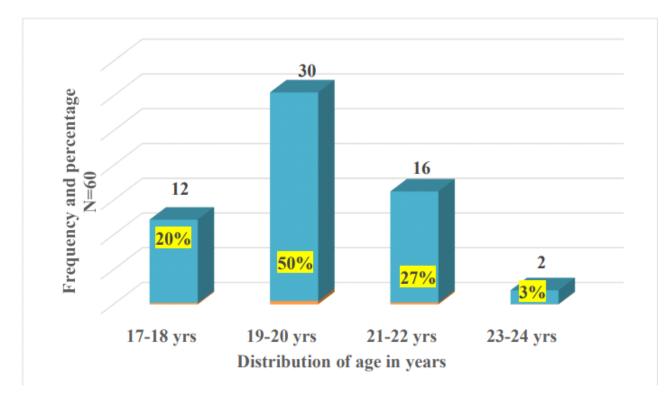


Fig 3: Bar diagram distribution of the subjects according to age depicts the frequency and

percentage distribution of socio demographic variable of students studying in PIPRAMS which states

that age in years that n=30(50%) of them belongs to 19-20 years, n=16(26.7%) of belongs to 21-

22 years, n=12(20%) of belongs 17-18 years and where only 02(3.3%) of them belongs to 23-24

years.

Socio demographic variables	Frequency (N=60)	Percentage (%)
Gender.		
(a) male	38	63.3
(b) female	22	36.7

Table 4: Representation of gender

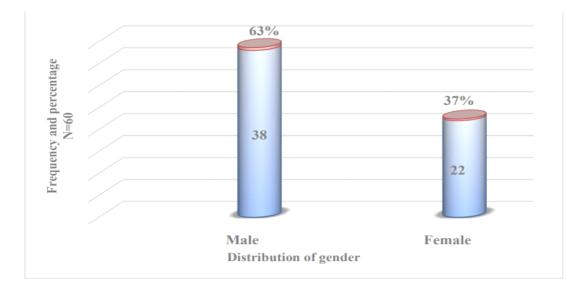


Fig 4: Cylindrical diagram distribution of the subjects according to Gender depicts the frequency and

percentage distribution of socio demographic variable of students studying in Galgotias University school of Nursing which states

that regarding gender majority of them n=38(63.3%) were males, whereas 22(36.7%) were females

Socio demographic variables	Frequency (N=60)	Percentage (%)
Religion		
(a) Hindu	35	58.3
(b) Muslim	12	20.0 8.3
(c) Christian	5	13.4
(d) Other	8	

Table 5: Representation of religion

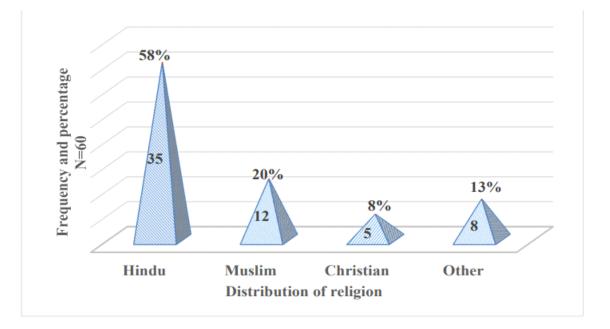


Fig 5: Cone diagram distribution of the subjects according to religion depicts the frequency and percentage distribution of socio demographic variable of students studying in PIPRAMS which states that hindus were n=35(58.3%), followed by muslim n=12(20%), Christians were n=5(8.3%) and n=8(13.4%) of them were from other religions.

Table 6 Representation of education

Socio demographic variables	Frequency (N=60)	Percentage (%)
Education		
• BSC 1 st semester	0	0.0
(b) BSC 2 nd semester	20	33.3
(c) BSC 3 rd semester	40	66.7
(d) BSC 3 rd year	00	0.0

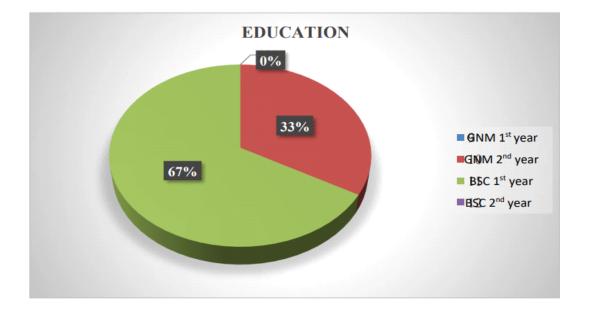


Fig 6: Pie diagram distribution of the subjects according to Education depicts the frequency and percentage distribution of socio demographic variable of students studying in Galgotias University School Of Nursing which states that regarding educational qualification, most of them n=40(66.7%) of them were studing in BSC 1st semester and n=20(33.3%) of them were studying in BSC 2nd semester

Table 7	types of family

Socio demographic variables	Frequency (N=60)	Percentage (%)
Types of Family		
(a) Joint Family	12	20
(b) Nuclear Family	40	66.7
(c) Extended Family	05	08.3
(d) Broken Family	03	05.0

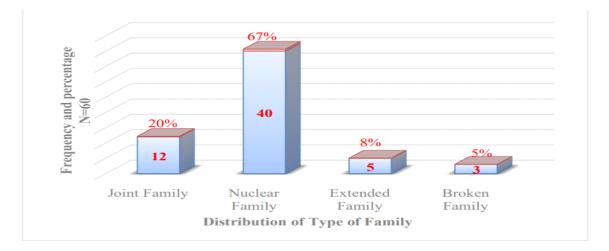


Fig 7: Bar diagram distribution of the subjects according to the type of family depicts the frequency and percentage distribution of socio demographic variable of students studying in Galgotias University School Of Nursing which states that most of them belonged to nuclear families i.e. n = 40(66.7%), followed by n = 12(20%) were from joint families, n = 5(08%) were extended family and n = 3(5%) of them were broken families.

e 8 diet		
Socio demographic variables	Frequency (N=60)	Percentage (%)
Diet		
(a) Vegitarian	27	45.0
(b) Non vegitarian	05	08.3
(c) Mixed	23	38.4
(d) Special protein diet	5	8.3

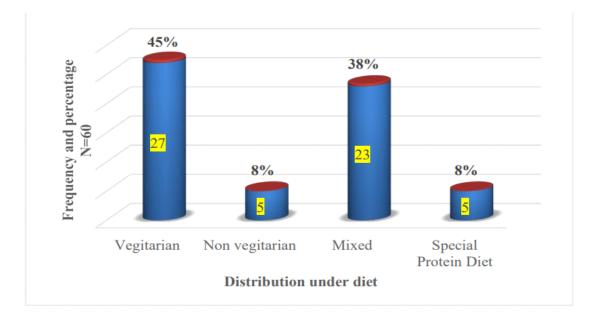
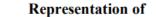


Fig 8: Cylindrical diagram distribution of the subjects according to diet depicts the frequency and percentage distribution of socio demographic variable of students studying in PIPRAMS which states that majority of them n=27(45%) were vegitarians, n=23(38.4%) were mixed diet, n=5(8.3%) were non-veg and special diet respectively.

Socio demographic variables	Frequency (N=60)	Percentage (%)
Family history of smoking		
(a) Father	22	36.6
(b) Mother	10	16.6
(c) Brother	8	13.4
(d) Relative	20	33.4



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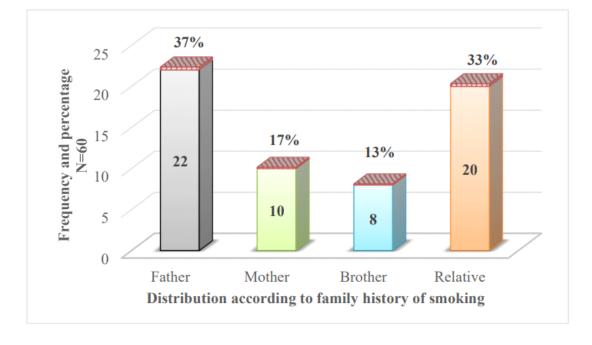


Fig 9: Bar diagram distribution of the subjects according to family history of smoking depicts the frequency and percentage distribution of socio demographic variable of knowledge regarding ill effects of smoking and tobacco handling. The details regarding family history of smoking was n=22(36.6%) were fathers who smoked, n=10(16.6%) were mothers, n=8(13.4%) of them were brother and n=20(33.4) were relatives.

R

Table 10: epresentation of type of family tobacco smoking method

Socio demographic variables	Frequency (N=60)	Percentage (%)
Type of family tobacco		
smoking method		
(a) Beedi	37	61.7
(b) Cigaratte	8	13.3
(c) Hokka	15	25.0
(d) Vaporaiser	0	0.0

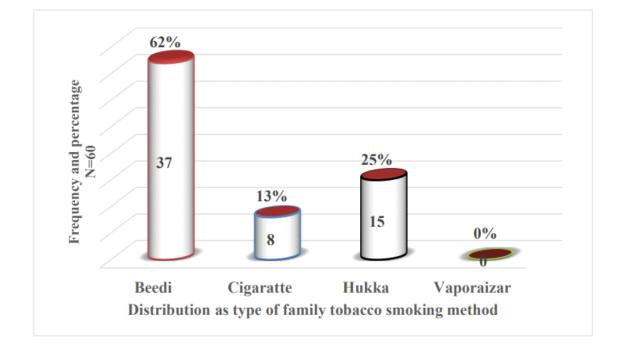


Fig 10: Cylindrical diagram distribution of the subjects according to type of family tobacco smoking method depicts the frequency and percentage distribution of socio demographic variable of students studying in PIPRAMS which states that n=37(61.7%) were smoking beedi, n=8(13.3%) smoked cigarette, n=15(25%) smoked hukka, and n=0(0%) smoked vaporaizer

R

Table 11: epresentation of type of family tobacco chewing method

Socio demographic variables	Frequency (N=60)	Percentage (%)		
Type of family tobacco				
chewing method				
(a) Dry tobacco in pan	12	20		
(b) Snuff	14	23.4		
(c) Gutka	32	53.3		
(d) Dissolvable Tobacco	2	3.3		

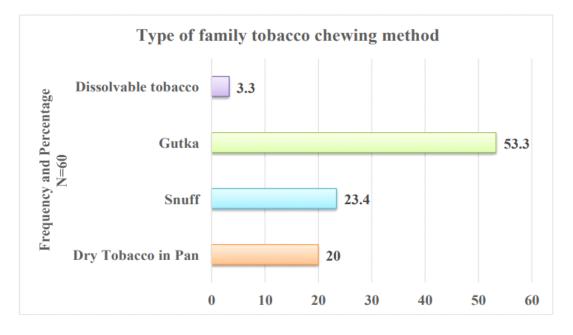


Fig 11: Bar diagram distribution of the subjects according to type of family tobacco chewing method depicts the frequency and percentage distribution of socio demographic variable of students studying in PIPRAMS which states that n=12(20%) were handling dry tobacco in pan, n=14(23.4%) were handling snuff, n=32(53.3%) chewed gutka, and n=2(3.3%) were handling dissolvable tobacco

R

Socio demographic variables	Frequency (N=60)	Percentage (%)
Knowledge regarding hazards on tobacco smoking and tobacco chewing		
(a) Mass Media	24	40
(b) Health worker	3	5
(c) Family members / friends	1	1.7
(d) No information	32	53.3

Table 12: epresentation of knowledge regarding hazards on tobacco smoking and tobacco chewing

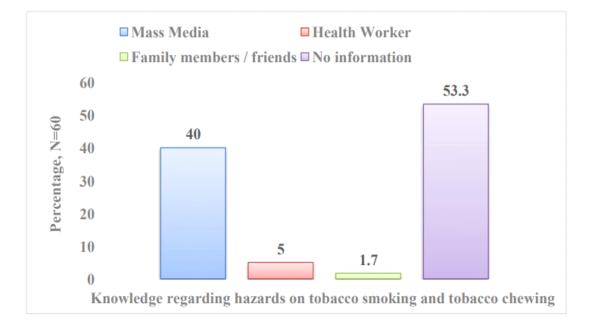


Fig 12: columnar diagram distribution of the subjects according to knowledge regarding hazards on smoking and tobacco handling depicts the frequency and percentage distribution of socio demographic variable of students studying in PIPRAMS which states that n=24(40%) gained knowledge by mass media, n=3(5%) gained knowledge by health worker, n=1(1.7%) gained knowledge from family members and friends, and n=32(53.3%) were having no information.

SECTION B

DISTRIBUTION OF PRE-TEST LEVEL OF KNOWLEDGE B

Table 13: Frequency and percentage distribution of pre-test level knowledge of students studying in Galgotias University School Of Nursing

M = 60

Sl. No.	Level of knowledge	Frequency	Percentage%
1.	Inadequate knowledge (<50%)	42	70.0
2.	Moderately adequately knowledge (50-75%)	18	30.0
3.	Adequate knowledge (>75%)	-	-

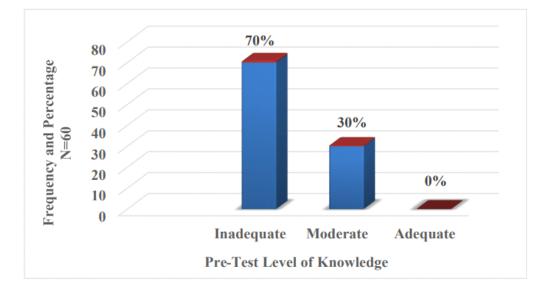


Fig 13: Bar diagram distribution of percentage subject regarding pre-test level of knowledge discussed about the frequency and percentage distribution of pre-test level knowledge of students studying in Galgotias University School Of Nursing. Which shows that majority of the subjects n=42(70%) of them had inadequate knowledge whereas n=18(30%) of them had moderately adequate knowledge and none of them had got adequate knowledge regarding ill effects of smoking and tobacco handling.

Table 14: overall mean and S.D of pre-test knowledge scores of students

S.NO	Study	Minimum	Maximum	Mean	SD
	variable	score	score		

rall mean				
S.D of	08	17	12.32	3.433
est				
vledge				
es of				
ents				
ying in				
SON				
	est wledge es of ents	S.D of 08 est wledge es of ents ying in	S.D of 08 17 est 17 wledge 17 es of 17 ents 17 ying in 17	S.D of 08 17 12.32 est wledge es of ents ying in

Table 14 depicts about the overall mean and standard deviation of pre-test knowledge scores of students studying in Galgotias University School of Nursing which shows the minimum scores of 08 and maximum score of 17 with overall mean has 12.32 and standard deviation of 3.443 respectively.

SECTION C

DISTRIBUTION OF POST TEST LEVEL OF KNOWLEDGE

Table 15: Frequency and percentage distribution of post-test level of knowledge in studentsstudying in Galgotias University School Of Nursing

			(N=60)		
Sl.no	Level of knowledge	Frequency(f)	Percentage (%)		
1	Inadequate (<50%)	7	12.0		
2	Moderate (51-75%)	24	40.0		
3	Adequate (>75%)	29	48.0		

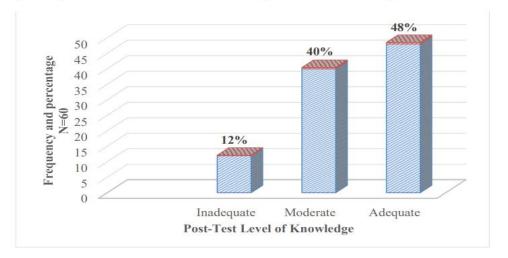


Fig 14: Bar diagram distribution of percentage subject regarding post-test level of knowledge discussed about the Frequency and percentage distribution of post-test level of knowledge of students studying in Galgotias University School Of Nursing which shows that majority of them n=29(48%) had adequate knowledge and n=24(40%) of them had moderately adequate knowledge whereas only n=7(12%) of them had inadequate knowledge regarding ill effects of smoking and tobacco handling.

s.no	study	Minimum	Maximum	Overall mean	SD
	variable	score	score		
1	Overall mean	15	27	21.36	4.685
	and standard				
	deviation of				
	post-test				
	knowledge				
	scores of				
	students				
	studying in				
	Galgotias				
	University				
	School Of				
	Nursing				

Table 16: Overall mean and standard deviation of post-test level of knowledge of students

Table 16 depicts that overall mean and standard deviation of post-test knowledge scores of students studying in Galgotias University School Of Nursing status that the minimum score of 15 and maximum score of 27 with overall mean as 21.26 and standard deviation of 4.685 respectively.

SECTION D

COMPARISON OF PRETEST AND POSTTEST LEVEL OF KNOWLEDGE TO DETERMINE THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME

Table 17: Comparison of pre-test and post-test knowledge scores of students studying in Galgotias University School Of Nursing

SNO	Study	Pretest		Posttes	st	Enhan	cemen	Paired 't'
	variable	knowledge		knowledge		t	in	test value
						knowledge		
		Mean	SD	Mean	SD	Mean	SD	
1	Comparison	12.32	3.443	21.36	4.685	9.040	7.993	8.086
	of pretest							df=49 p
	and posttest							
	knowledge							
	scores of							
	knowledge							
	of students							
	studying in							
	Galgotias							
	Unviversity							
	School Of							
	Nursing to							
	determine							
	the							
	effectiveness							
	of STP on							
	knowledge.							

df= degree of comparison, significant at p < 0.001.

Table 17 describes about the comparison of pretest and posttest knowledge scores of students studying in Galgotias university school of nursing to determine the effectiveness of STP on knowledge which shows the pretest mean and S D has 12.32 and 3.443 respectively and posttest knowledge scores has 21.36 and 4.685 where the enhancement in knowledge scores

has found to be 9.040 and 7.993 as mean and S.D so paired 't' test was carried out of find the effectiveness of STP which shows the paired 't' test value as 8.086 with df=49, which signifies that it is highly statistically significant at p<0.001, which reveals that the STP has shown its effectivesness in enhancing the knowledge of students studying in Galgotias University School Of Nursing

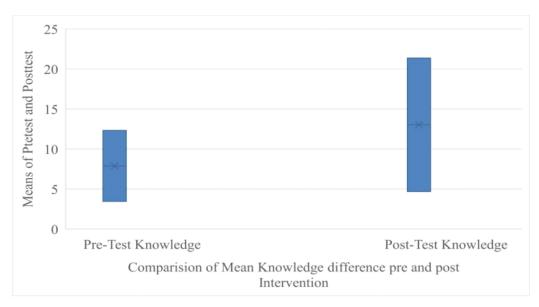


Fig 15: Box and Whisker diagram shows difference of mean knowledge scores pre and post Intervention.

Pretest and posttest knowledge scores of students to determine the effectiveness of structured teaching program on knowledge which shows the pretest mean and standard deviation has 12.32 and 3.443 respectively and posttest knowledge scores has 21.36 and 4.685 where the enhancement in knowledge scores has found to be 9.040 and 7.993 as mean and standard deviation.



DISCUSSION, CONCLUSION, IMPLICATION, & LIMITATIONS & RECOMMENDATIONS



Chapter-5

DISCUSSION, CONCLUSION, IMPLICATIONS AND LIMITATIONS AND RECOMMENDATIONS

This chapter deals with the discussion, conclusion, implications, limitations and recommendations of interpretation and findings in accordance with the objectives of the study and hypothesis. The statement of the problem is "A study to assess the effectiveness structure teaching program on knowledge regarding the ill effect of smoking and tobacco handling among the student studying in selected nursing colleges of Greater Noida, Uttar Pradesh"

Findings of the study

The results of the research are as follows:

Demographic Form

• The age of the participants is n=12 (20%) between 17-18 years old, n=30 (50%) of the participants are between 19-19 years old. 20 years old, n=16 (26.7%) students in the 21-22 age range, only n=02 (3.3%) in the 23-24 age range

• The gender of the majority of them is n=38 (63.3%) % male, n=22 (36.7%) female

• Religion, n=35 (58.3%) Hindu, n=12 (20%) Muslim, n=5 (8%) ,3) Represents Christian. , n=8 (13.4%) are other races.

• Most of the students are in first semester of BSC i.e. n=40 (66.7%) followed by second year of BSC i.e. n=20 (33.3%), 0 in first semester of BSC and 0 in third year of BSC (0%)) is found.

• Most of the students i.e. n = 40 (66.7%) belong to nuclear family, n = 12 (20%) students belong to joint family, n = 5 (8.3%) belong to extended family, n = 5 (% 8.3%)) come from large families, and n = 3(5%) come from broken families.

• In the field of nutrition research, the majority of students, n=27(45%), followed a diet. Additionally, n = 23 (38.4%) students followed a mixed diet, and n = 5 (8.3%) students followed a meatless and protein-based diet, respectively.

• When looking at the history of smoking in the family, n = 22 (36.6%) of the smokers are fathers, n = 20 (33.4%) are relatives of smokers, n = 10 (16.6%) are mothers of smokers. , n = 8 (13.4%) %) smokers are siblings.

• Most of the students' families say that n=37(67.7%) smoke beedi at home as well as

cigarettes, n=15(25%) smoke hukkah, n=8(13.3%) smoke cigarettes and no one

smokes electronic cigarettes. .

Smoking types found at home: n=12 (20%) chewing potted dry tobacco, n=14 (23.4%)
 using snus, n=32 (53.3%) chewing gutka, n= 2 (% 3,3)) Use of melted tobacco.

• Awareness about cigarettes and the dangers of smoking, n=24 (40%) had some experience with mass media, n=3(5%) were known by healthcare professionals, n=1

(1%) showed that 7) were given by the family. et al., n=32 (53.3%) no information.

Effectiveness of structured teaching programme

• Mean pretest scores were 12.32 ± 3.443 and mean posttest scores were significantly higher i.e. 21.36 ± 4.685 . The computed scores were having enhanced difference of 9.04 ± 7.993 and p=0.01 <0.05 impressing that association was because of education via structured teaching programme where in there was improvement in posttest knowledge scores compared to pretest. Hence, structured teaching programme was effective in the said research.

Association between demographic variables and pretest knowledge scores

• Knowledge of the students who participated in the educational research study by using structured teaching programme were independent of their demographic variables' they are age (χ 2 (1) =6.940, P<0.05), gender (χ 2 (2) =0.550, P> 0.05), religion (χ 2 (3) =4.282, P>0.05), education (χ 2 (4) =7.576, P>0.05), type of family (χ 2 (5) =6.14, P>0.05), diet (χ 2 (6) =10.165, P>0.05), Family history of smoking (χ 2 (7) =9.461, P>0.05), Types of family smoking method (χ 2 (8) =1.940, P>0.05), Type of family tobacco handling method (χ 2 (9) =2.659, P>0.05), Knowledge regarding hazards on smoking and tobacco handling (χ 2 (10) =1.230, P>0.05)

Discussion

This study adopted a pretest group pretest posttest design, and data were collected from 30 students at Galgotias University School of Nursing. The purpose of this study is to evaluate the pre-test knowledge of Galgotías University School of Nursing students regarding smoking and its negative effects. To evaluate the background knowledge of students of the School of Nursing of the University of Galgotías regarding smoking and its negative effects. To evaluate the smoking and its negative effects. To evaluate the smoking and its negative effects.

its harmful effects among students of the School of Nursing of Galgotías University. Check pre-test and post-test information of Galgotias University School of Nursing students through public options. The hypothesis of this study is H1: Awareness scores regarding smoking and the negative effects of smoking will increase with the use of teaching methods. H2: There is a significant relationship between the negative effects of smoking and smoking and pre-test and post-test scores among different student populations studying Home Nursing at the University of Galgotias. The different demographic characteristics of Galgotias University School of Nursing students are as follows: Age n = 12 (20%), 17-18 years, n = 30 (50%) 17-18 years 19 -20 years, n = 16 (26%) 7) student is between 21-22 years old and only n = 02(3.3%) is between 23-24 years old. Gender: 38 (63.3%) were male and 22 (36.7%) were female. The number of Christians is 35 (58.3%), of which 12 are Hindu (20%), 12 are Muslims (20%), 5 are Christians (8.3%) and 8 are other (13.4%). 'truck. Most of the students who want to study take BSC in the first semester i.e. n = 40 (66.7%), followed by BSC in the second semester n = 20 (33.3%), BSC in the third semester and BSC in the third academic year 0 (0%)) Majority of the students i.e. n = 40 (66.7%) were from nuclear family, n = 12(20%) were from joint family, n = 5 (8.3%) were from extended family and n = 3 (% 5) consists of a broken family. . In this field where nutrition research is conducted, the majority of students followed a diet plan, n = 27 (45%). In addition, n = 23 (38.4%) students were fed a mixed diet and n = 5 (8.3%) students were fed a meat-free and protein-only diet. Considering the history of smoking in the family, 22 (36.6%) of the smokers were fathers, n =20 (33.4%) were relatives, n = 10 (16.6%) were mothers and n = 8 were smokers. (13.4%) smokes. relatives. cousin Most of the students' families, n=37(67.7%) smoke beedi at home, n=15(25%) smoke hukkah, n=8(13.3%) smoke cigarettes and do not smoke e-cigarettes. According to smoking style at home, n = 12 people (20%) chewed tobacco from a plate, n =14 people (23.4%) used snus, n = 32 people (53.3%) chewed coca, and n = 2 people (3%),3)) Can be used to melt tobacco. Awareness about smoking and its dangers showed that n = 24(40%) learned about it from the media, n = 3 (5%) learned about it from healthcare professionals, n = 1 (1.7%) learned about it from the media. family and friends, n = 32(53.3%) had no information.

This study shows that Galgotias University School of Nursing students should be educated about smoking and its negative effects and that teaching is a good way to improve nurses' knowledge. The effectiveness of the teaching program showed that the average score in the pre-test was 12.32 ± 3.443 and the average score in the post-test was higher i.e. 21.36 ± 4.685 . The difference in the calculated score was 9.04 ± 7.993 , p = 0.01 < 0.05. It is

interesting that this organization arises from training through the teaching process, in which the information in the test is lower than in the previous test. . Points increased. Therefore, training programs are effective in the above studies.

Current research is supported by

to understand the negative effects of smoking and smoking and what happens to our bodies when we smoke. When you smoke for the first time, your lungs will feel like they're on fire. You may cough a lot. This is your body telling you that it is poisoned. The respiratory tract is lined with small brush-like hairs. They clear mucus and dirt to keep your lungs clean. Smoking can damage and destroy these brushes. The risk of cancer and other diseases increases as you continue to smoke (Elana Pearl Ben, n.d.) When you quit smoking, your health benefits begin to increase.

• After 20 minutes, your blood pressure drops to near the level before you last smoked.

• After eight hours, the carbon monoxide level in the blood drops to normal. After two weeks to three months, your circulation improves and your lung function increases by up to 30%.

• After one to nine months, your cough, sinus congestion, fatigue, and shortness of breath will decrease. > • After one hour and one year, your risk of heart disease is half that of a smoker.

• After five years, your risk of having a stroke drops to that of a non-smoker.

• After ten years, your death rate from cancer is about half that of a continuing smoker, and there is also a reduced risk of cancers of the mouth, throat, esophagus, bladder, kidney and liver (Laura J, n.d.)

A prospective case-control study was conducted to evaluate the predictive role of smokingassociated DNA methylation markers on lung cancer. The risk of developing breast cancer increased with decreased DNA methylation; lowest adjusted ORs (95% CI) for lowest participants were 15.86 (4.18-60.17), 8.12 (2.69-4.48), and 10.55 (3.44-32 ,31). AHRR, 6p21.33, and F2RL3 quartiles were compared to control group participants in the 2 highest quartiles for each region. One marker or its combination is best for self-reporting of smoking, especially for smokers (Zhang et al., 2016).

Tobacco products can cause many types of cancer, including lung, mouth, nose, lung, oropharynx, hypopharynx, esophagus, stomach, liver, pancreas, bladder urinary, ureter, kidney and cervical cancer, and myeloid leukemia. Carcinogen biomarkers (DNA adducts, protein adducts, and urinary metabolites) provide information about carcinogen absorption, metabolic activation, and detoxification in individuals who use or are exposed to tobacco products (Hecht, 2003).

A study assessing the impact of cigarette smoking and alcohol consumption on all causes and cancer: Thiruvananthapuram, India. The results showed that smoking was associated with cancer; The mortality risk of smoking is 1.31 (1.24–1.39), 1.63 (1.37–1.94), and 1.68 (1.36–2.08), respectively; risk of drinking alcohol 1.13 (1.06–1.06–1.), 1.32 (1.11–1.57) and 1.47 (1.19–1.80). Research has concluded that smoking and drinking alcohol in any form is a problem and that a better quality of life can be achieved by avoiding these habits (Ramadas et al., 2010).

A study was conducted to evaluate the effectiveness of Tobacco Use: Prevention, Control and Control (a) the use of community and population-based interventions to prevent smoking and increase the needs of the client and interventions to effectively eliminate them; (b) Effects of smoking by the Tobacco industry on smoking, the use of these products, and the harm they cause to the public. (c) Preventive measures at university have a short-term (but not long-term) impact on young people. (d) Various methods, including telephone counseling, have increased the number of users trying to quit smoking. Self-help strategies alone are ineffective, but counseling and medication alone or together may increase quitting success; (e) Provide educational and training content to improve the quality of medical care provided by healthcare providers. Effectiveness of physician-based intervention to reduce smoking. (f) Effectiveness of community and provider programs to promote the use of evidence-based smoking cessation strategies. (g) The effectiveness of marketing campaigns to encourage consumers to quit smoking and switch to smokeless tobacco products; (h) Effects of interventions on people with disorders and risk behaviors (such as depression, drug and alcohol abuse) (Ranney et al., 2006).

Conclusion

Knowing the negative effects of smoking and smoking is an important factor in preventing students from developing these habits; Students are at increased risk; academics and their peers put them at risk of smoking.

Education is a lifelong process, and in this study, students of the School of Nursing of Galgotías University learned about smoking and the negative effects of smoking. Although there are different strategies to improve students' knowledge, in this study the researcher chose a teaching method. However, students face problems in applying what they learn in school and among their peers, which can lead to non-compliance with tobacco laws. The results of this study show that students know what the negative effects of smoking are. But few people are willing to understand the basics of smoking and smoking prevention.

Failure to comply with preventive measures against smoking and its negative effects affects the health and personal functioning of students and makes it clear if the student fails in important work in education and other fields due to the influence of smoking. The use of books poses a challenge for organizations in managing quality education in many ways. Students know the negative effects of smoking and that it can lead to non-compliance, and it is important that all organizations evaluate and improve student protection.

This study shows that teaching methods can improve students' knowledge levels and therefore promote healthy behaviors. Therefore, this study highlights the importance of cigarettes and the negative effects of smoking. Long-term use of implementation and replication of the findings of the CNE program to students will improve the skills and personality of the students and will have a positive impact on the growth of the organization. Implications

Nursing Implications:

The finding of the study has implications for the nursing profession. The implications have been written under the following headings

- Nursing Education
- Nursing Practice
- Nursing Research

Nursing education:

The findings of this study have long-term implications for nursing education. Nursing curricula should be updated to include a positive approach to nursing staff. Its aim should be to treat participants as biopsychological beings. Nursing education should train nurses who are competent to teach information about the care and management of cancer and other diseases caused by smoking, to recognize the symptoms of cancer and other diseases caused by smoking, and to prevent and treat many diseases. Complete care of affected caregivers can only be achieved by understanding the current situation in nursing care, and more importantly, nursing care can be planned to reduce the lack of awareness about the negative effects of smoking and chewing tobacco and to improve health care. Some of these interventions can be recommended for optimization in practice. Nursing practice:

The results of this study have long-term implications for nursing education. Nursing education materials should be updated to include appropriate behaviors for caregivers. The aim should be to treat participants as biopsychological beings. Nursing education should educate nurses to have knowledge about the care and management of cancer and other

diseases caused by smoking, knowing the symptoms of cancer and other diseases caused by smoking, and the prevention and treatment of many diseases. Only by understanding the current state of care can we provide effective care to affected caregivers and, more importantly, plan care to minimize awareness of the benefits of smoking, chewing tobacco, and improving health. Some of these interventions may suggest improvements. Nursing research:

The aim of the research is to improve the structure of nursing, which is a developing profession. The results of this study can form the basis for further research by professionals and students. Generalization of research results obtained from the replication of this study. Research interventions rather than educational programs may be more effective in reducing the awareness level of Galgotias University School of Nursing students about smoking and its negative effects and improving their quality of life. Strategies can be developed to help students use safe practices to prevent smoking and the negative effects of smoking. Limitations:

The study is limited to

• 60 students from the Galgotias University School Of Nursing

• Those who understand English.

• Findings cannot be generalized and limited only to the population under study

Recommendations:

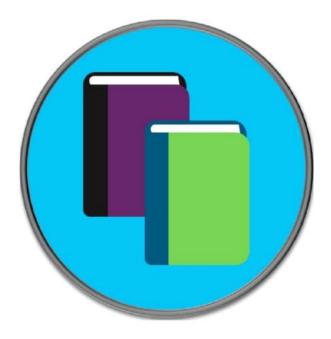
• In order for the results to be generalizable, this study can be repeated in different locations with a larger sample.

• In addition to educational programs, other research can be conducted to investigate smoking and treatments that reduce its negative effects.

• Studies can be carried out to evaluate awareness about smoking and its negative effects. Smoking and smoking were regulated in many places.

• Research aims to see how nurses can improve their work as doctors in practice Summary

This section describes the nursing interventions, suggestions, and recommendations of this study. Current research shows that lesson plans are an effective way to convey information to the subject. In this study, students of the School of Nursing of Galgotías University were educated through teaching about smoking and the negative effects of smoking. The results of this research were analyzed and discussed. Results from other similar studies. This helped the researchers see that the study was actually happening and that the education provided at the Galgotías University School of Nursing was effective in raising awareness among students about smoking and its negative effects. The experience of conducting this course was very enjoyable due to the good cooperation between students and university authorities. This study is a new study for researchers..



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