

A Study to Assess the Knowledge and Attitude Regarding Substance Use among the Adolescents Residing at Lomeshwar Nagar, Loni (Kd), Maharashtra

Sharadchandra V. Dighe

Department of Mental Health Nursing, College of Nursing, Pravara Institute of Medical Sciences (Deemed to be University), Loni, Maharashtra, India

Abstract

Introduction: Substance use usually begins during adolescence. The causes include poor parental role, peer group influence, low socio-economic status, and media through advertisement of the products. Assessment of knowledge and attitude about substance use is of vital importance for prevention as well as treatment of substance abuse especially in adolescents.

Materials and Methods: A cross-sectional survey approach was adapted with a descriptive research design for the study. The data were collected using interview techniques from 60 adolescents who were recruited using simple random sampling method. The data collection tools included Knowledge and attitude questionnaires regarding substance use.

Results: The major findings of the study show that 53.33% of the adolescents were in the age group of 12–14 years, 83.33% were male, and 73.33% were from secondary class. 81.66% of the adolescents belong to the Hindu religion, 95% were students and 53.33% were from joint family. About 73.33% of adolescents have heard about substance use. The findings regarding knowledge of substance use show that 53.33% of adolescents have a good level of knowledge. About 91.66% of adolescents have a negative attitude toward the substance use. There was a significant association between knowledge and type of family. There was a mild positive correlation (0.0031) between knowledge and attitude regarding substance use.

Conclusion: The study revealed that adolescents have good knowledge and negative attitude towards substance use.

Keywords: Adolescents, attitude, knowledge, substance use

INTRODUCTION

Substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs.^[1] Substance abuse has become a global phenomenon. It has affected almost every country, although its extent and characteristics differ from region to region. It is estimated that at least 40 million people throughout the world are regular

substance or drug abusers.^[2,3] The problem of substance abuse is a significant problem among adolescents in our societies as the problem is increasing day by day due to various factors such as easy availability and rapid socioeconomic and demographic changes.^[4]

The National Commission for Protection of Child Rights (United States Department of Health and Human Services, 2007) in a report stated that the mean age of getting exposed to drugs is 13 years. The increased vulnerability in this period related to psychological factors such as curiosity, poor impulse control, run away from reality, psychological distress, and so forth. The social factors such as peer influence, lack of clear identity, and self or intra-familial conflict also expose the adolescent to substance abuse.^[5]

Access this article online

Website: <http://innovationalpublishers.com/Journal/ijnh>

ISSN No: 2454-4906

DOI: 10.31690/ijnh.2021.v07i04.001

Address for Correspondence:

Sharadchandra V. Dighe, Department of Mental Health Nursing, College of Nursing, Pravara Institute of Medical Sciences (Deemed to be University), Loni, Maharashtra, India. E-mail: sharaddighe84@gmail.com

This is an open-access journal, and articles are distributed under the terms of the Creative Commons Attribution Noncommercial Share Alike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms

The common substances of abuse among adolescents in India are tobacco and alcohol, but the use of illicit and stronger drugs such as cannabis, opium, or even intravenous use of drugs such as heroin has also been reported. A new trend has emerged in drug and substance abuse with children now taking a cocktail of drugs through injection, and often sharing the same needle, which increases their vulnerability to HIV infection AIDS and Hepatitis B and C.^[6]

Recent studies have shown that the drug addicts registered for treatment and rehabilitation of various treatment centers are mostly adolescents and youth students.^[7]

There is casual relationship between alcohol consumption and more than 60 types of diseases and injury. Worldwide alcoholism is estimated to cause about 20–30% of esophageal cancer, liver cancer, and cirrhosis of the liver, homicide, epilepsy, and motor vehicle accidents. Worldwide 1.8 million deaths and 58.3 million daily attributed to the use of alcohol.^[8]

The use of the drugs may lead to criminal penalty in addition to possible physical, social, and psychological harm. There are many cases in which criminal or antisocial behavior occurs when the person is under the influence of a drug. Long-term personality changes in individuals may occur as well.^[9]

Studies conducted in India regarding knowledge and attitude of adolescents about substance use show wide discrepancies in findings. Such as a study conducted in Kolkata on 100 pre degree students revealed that students' knowledge of drug abuse was inadequate,^[10] whereas another study conducted on 416 adolescents shows that participants have very high knowledge regarding substance use (urban — 84.6% and rural — 61.5%).^[11] Hence keeping all these in mind the researcher planned a study to assess the knowledge and attitude regarding substance use among the adolescents with the objectives (1) to assess knowledge on substance use among adolescents. (2) to assess attitude on substance use among adolescents. (3) to find an association between knowledge and attitude regarding substance use and their selected socio demographic variables. (4) to find correlation between knowledge and attitude regarding substance use.

METHODOLOGY

Research approach

The present study aims to assess the knowledge and attitude regarding the substance use among the adolescents residing at Lomeshwar Nagar, Loni KD. For the present study cross sectional survey research approach was adopted.

Research design

For the present study descriptive research design was used.

Setting of the study

The setting of the study was Lomeshwarnagar. It is a slum area of Loni (Kd) village of Rahata tehsil. Maharashtra.

Study population

Adolescents residing in the Lomeshwar nagar area of Loni village were study population.

Sample size

60 adolescents were selected based on the predefined sampling criteria.

Sampling technique

Researcher adapted simple random sampling for selection of sample. The researcher conducted survey in Lomeshwarnagar area to identify the total number of adolescents. There were 95 adolescents residing in the particular area. Each adolescent was assigned a code number and chits were prepared and put in a box. Then out of 95 chits, 60 chits were randomly hand-picked from the box. These 60 adolescents were judged against the predetermined eligibility criteria and recruited for the study. The inclusion criteria were set up as: The participants who are (1) in the age group of 12–18 years (2) both boys and girls (3) available during study (4) willing to participate (5) giving written informed consent. Participants who are not comfortable during data collection were excluded from the study.

Data collection instrument

Data collection instrument consist of (1) Socio-demographic data of participants (2) Knowledge questionnaire regarding substance use (3) Attitude scale regarding substance use

1. Socio-Demographic Data: It consists of 12 items such as age, gender, education of participant, education of father, education of mother, religion, occupation of participant, type of family, whether participant heard about substance use, family history of alcohol use, family history of nicotine use, history of any substance use
2. Knowledge questionnaire regarding substance use: This scale consists of 25 items. For every correct response 1 score was given. Total maximum score for the knowledge scale is 25 and minimum score is 0
3. Attitude scale regarding substance use: It consists of 32 items with 3 point rating scale. Rating relates to three options such as agree, neutral, and disagree.

Development of the tool

Tool was developed by the researcher after thorough review of literature. Tool was validated by six experts in the field of psychiatry, psychology, and psychiatric nursing. Experts' suggestions and opinions were incorporated in the tool.

Method of data collection

Selected participants were contacted at their home settings. Participants were made comfortable during data collection. Interview technique was used for data collection. Data were collected on one to one basis. Each participant was given 20–30 min to respond to the questionnaires.

Ethical aspects

This study was approved by the Institutional Ethics Committee of the Pravara Institute of Medical Sciences (DU), Loni. Permission for data collection was sought from the Sarpanch

of the Loni (Kd) village. Then before data collection researcher explained study objectives to the participants and their parents. Researcher also described about voluntary nature of participation. Participants and their parents were ensured about the confidentiality of the data. Written informed consent was obtained from each participant.

RESULTS

Demographic data

Analysis of demographic data shows that 53.33% of participants belonged to the age group of 12–14 years., 83.33% participants were male, 73.33% participants were in secondary standards, 81.66% participants were Hindu by religion, 95% participants were students, 53.33% participants belong to the joint family, 73.33% participants had heard about the substance use. About 61.66% of participants said that they did not have family history of alcohol use, 48.33% of participants said that they have family history of nicotine use, and 91.66 % of participants did not have personal history of substance use.

Assessment of knowledge of participants regarding substance use

Table 1 shows the distribution of participants according to level of knowledge regarding substance use. It shows that 53.33% of the participants have good knowledge and 43.33% of participants have very good knowledge regarding substance use. From Table 1 we can conclude that participants have overall good knowledge regarding substance use.

Assessment of attitude of participants regarding substance use

Table 2 depicts that majority, i.e., 91.66% participants have negative attitude toward substance use, and only 8.33% of participants have a positive attitude toward substance use.

Item wise analysis of attitude of participants regarding substance use

Item wise analysis of attitude of participants regarding substance use was carried out which is presented as below:

Table 3 shows that a majority (60%) of the participants did not want cannabis legalized and 50% disagreed that use of

Table 1: Assessment of knowledge of participants regarding substance use. *n*=60

Level of knowledge	Score	Frequency (<i>n</i>)	Percentage (%)
Poor	0-8	2	3.33
Good	9-17	32	53.33
Very good	18-25	26	43.33

Table 2: Assessment of attitude of participants regarding substance use *n*=60

Attitude	Score	Frequency (<i>n</i>)	Percentage (%)
Positive	32–64	5	8.33
Negative	65–96	55	91.66

psychoactive substances should be legal in the confines of one's own home. About 51.66% of participants feel that it can be normal for adolescents to experiment with drugs. About 63.33% say that street pushers are the initial source of drugs for young people. 61.66% feel that cannabis use can lead to mental illness. About 46.66% of participants believe that drug addiction is a treatable illness. About 68.33% of participants believe that family involvement is a very important part of the treatment of alcohol and drug addiction. 66.66% agreed to the thought that the best way to treat alcohol or drug-dependent people is to refer them to a good treatment program. About 70 % believe that counselors can provide effective treatment for alcohol and drug misusers. About 51.66% believe that alcohol is so dangerous that it could destroy the youth of our country if not controlled by law. About 58.33% of participants agreed to the idea that the use of any hard drug shortens one's lifespan.

Association of knowledge of participants with their selected socio-demographic variables

Table 4 shows the association between Knowledge and socio-demographic variable regarding substance use. There is a significant association between knowledge score and family type.

Association of attitude of participants with their selected socio-demographic variables

Table 5 shows the association between attitude and socio-demographic variable regarding substance use. There is a significant association between attitudes and "Whether participant had heard about substance use."

Correlation between knowledge and attitude

In order to find out the correlation between knowledge and attitude "r" value was calculated, which was found to be 0.0031.

Hence, it is interpreted that there is a mild positive correlation between knowledge and attitude regarding substance use.

DISCUSSION

Demographic data

Analysis of demographic data shows that 53.33% of participants belonged to the age group of 12-14 years., 83.33% participants were male, 73.33% participants were in secondary standards, 81.66% participants were Hindu by religion, 95% participants were students, 53.33% participants belong to the joint family, 73.33% participants had heard about the substance use. About 61.66% of participants said that they did not have family history of alcohol use, 48.33% of participants said that they have family history of nicotine use, and 91.66% of participants did not have personal history of substance use.

Knowledge of participants regarding substance use

The present study found that 53.33% of the participants have good knowledge and 43.33% of participants have very good knowledge regarding substance use. Therefore we can

Table 3: Item wise analysis of attitude of participants regarding substance use n=60

Statement	Agree		Neutral		Disagree	
	Freq. (n)	%	Freq. (n)	%	Freq. (n)	%
Cannabis should be legalized	19	31.66	5	8.33	36	60
Personal use of psychoactive drugs should be legal in the confines of one own home	18	30	12	20	30	50
Daily use of one wrap of cannabis is not necessarily harmful	12	20	20	33.33	28	46.66
It can be normal for a adolescents to experiment with drugs	31	51.66	17	28.33	12	20
Lifelong abstinence is a necessary goal in the treatment of alcoholism	46	76.66	7	11.66	7	11.66
Once a person become drug free following treatment he can never become a social user again	16	26.66	19	31.66	25	41.66
Parents should teach their students how to use alcohol	11	18.33	9	15	40	66.66
Family involvement is a very important part of the treatment of alcohol and drug addiction	41	68.33	12	20	7	11.66
The best way to treat alcohol or drug dependent people is to refer them to a good treatment program	40	66.66	8	13.33	12	20
Group therapy is very important in the treatment of alcoholism or drug addiction	37	61.66	14	23.33	9	15
Urine drug screening can be an important part of treatment of drug misuse	28	46.66	20	33.33	12	20
Long term outpatient treatment is necessary for the treatment of drug addiction	38	63.33	15	25	7	11.66
Counsellors can provide effective treatment for alcohol and drug misusers	42	70	11	18.33	7	11.66
People who use cannabis usually do not respect authority	27	45	20	33.33	13	21.66
Smoking cigarettes leads to cannabis use, which in turn leads to the use of other hard drugs	34	56.66	14	23.33	12	20
Cannabis use leads to mental illness	37	61.66	15	25	8	13.33
Heroin is so addicting that no one can really recover once he/she becomes an addict	27	45	18	30	15	25
All heroin use leads to addiction	27	45	18	30	15	25
Weekend party users of drugs will progress to misuse	35	58.33	10	16.66	15	25
A hospital is the best place to treat an alcoholic or drug addict	31	51.66	19	31.66	10	16.66
Recreational drug use precedes drug misuse	40	66.66	10	16.66	10	16.66
Drug addiction is a treatable illness	28	46.66	17	28.33	15	25
Alcoholism is a treatable illness	33	55	15	25	12	20
An alcohol or drug dependent person who has relapsed several times probably cannot be treated	23	38.33	27	45	10	16.66
Most alcohol or drug dependent persons are unpleasant to work with	32	53.33	15	25	13	21.66
An alcohol or drug dependent person cannot be helped until he/she has hit 'rock bottom'	25	41.66	25	41.66	10	16.66
Street pushers are the initial source of drugs for young people	38	63.33	11	18.33	11	18.33
Alcohol is so dangerous that it could destroy the youth of our country if not controlled by law	31	51.66	15	25	14	23.33
Angry confrontation is necessary in the treatment of alcoholics or drug addicts	37	61.66	9	15	14	23.33
Alcohol and drug misusers should only be treated by specialists in the field	22	36.66	18	30	20	33.33
Alcoholism is associated with a weak will	33	55	16	26.66	11	18.33
Using any hard drug shortens one's lifespan	35	58.33	8	13.33	17	28.33

conclude that participants have overall good and adequate knowledge regarding substance use.

Findings of the present study are supported by different Indian studies. A study was conducted by Mr. Anilkumar which revealed that the majority 50% of adolescents have moderate level of knowledge on substance abuse and 30% have inadequate level of knowledge.^[12]

Another study on 53 students conducted in selected pre-university college of UDUPI district, Karnataka revealed that 91% of the student had average knowledge and about 2% of students had poor knowledge.^[13]

Assessment of attitude of participants regarding substance use

In this study, the majority 91.66% of adolescents have negative attitude toward the substance use whereas 8.33% have a positive attitude toward substance use. Findings of the study are consistent with other studies.

A study conducted in Dodoma municipality, Tanzania showed that the majority of student's do not accept the use of psychoactive substances which is a positive sign towards prevention of substance-related problems.^[14] Another Indian study revealed that minority had negative attitude towards substance abuse.^[15]

Table 4: Association of knowledge of participants with their selected socio-demographic variables. $n=60$

Variable	Chi-square value	Table value
Age	2.7926	9.49
Gender	0.5466	5.99
Education of participant	7.61	12.59
Education of mother	9.6669	18.21
Education of father	12.97	18.21
Religion	7.2171	9.49
Occupation of participant	0.7368	5.99
Family type	16.8249	9.49*
Have you heard about substance use	1.3476	5.99
Family history of alcohol use	3.4196	5.99
Family history of nicotine use	0.0578	5.99
History of substance use	0.69375	5.99

*Significant at $P=0.05$ **Table 5: Association of attitude of participants with their selected socio-demographic variables. $n=60$**

Variable	Chi-square value	Table value
Age	0.82	5.99
Gender	1.2353	3.84
Education of participant	0.1304	3.84
Education of mother	2.62	11.07
Education of father	3.0609	11.07
Religion	1.906	5.99
Occupation of participant	0.0148	3.84
Family type	3.0913	5.99
Have you heard about substance use	5.481	3.84*
Family history of alcohol use	0.2842	3.84
Family history of nicotine use	0.036	3.84
History of substance use	1.272	3.84

*Significant at $P=0.05$

CONCLUSION

It is evident from the findings of the study that adolescents have adequate knowledge regarding substance use. The attitude of adolescents toward substance use is largely negative. There appears to be a very mild positive correlation between knowledge and attitude of adolescents regarding substance use.

ACKNOWLEDGMENT

Investigator would like to acknowledge the Institutional Ethics Committee of Pravara Institute of Medical Sciences (DU), Loni for approving the said study. Investigator is also grateful to all the participants for their participation and cooperation during the study.

FUNDING

Self-funded.

CONFLICT OF INTEREST

Nil.

REFERENCES

1. Available from: <https://www.afro.who.int/health-topics/substance-abuse> [Last accessed on 2021 Sep 15].
2. United Nation Office on Drug and Crime (UNODC). Drug Abuse and Demand Reduction, Youth and Drugs 2002; 2006. Available from: <http://www.unodc.org> [Last accessed on 2006 Jul 17].
3. WHO. Adolescence: The Critical Phase; the Challenges and the Potential. WHO Regional Office for South East Asia. New Delhi: WHO; 1997.
4. WHO. Programming for Adolescent Health and Development: Report of a WHO/UNFPA/UNICEF Study Group on Programming for Adolescent Health; 1999.
5. Dhital R, Subedi G, Gurung YB, Hamal P. Alcohol and drug use in Nepal with Reference to Children. Child Workers in Nepal (CWIN), Research Report; 2001.
6. Available from: <http://www.factmonster.com/ce6/sci/A0857825.html> [Last accessed on 2021 Sep 15].
7. Dulay LV. Schools and Teenagers. International Drug Prevention Bulletin. 10, 12. July-September 2001. Vol. 2. A Publication of NGO, Antinarcotics Cooperating Center Philippines; 2001. p. 5.
8. American Psychiatric Association. Diagnostic and Statistical Manual of Mental Disorder. 5th ed. Washington DC: American Psychiatric Association; 2013a.
9. Burke PJ, O'Sullivan J, Vaughan BL. Adolescent substance use: Brief interventions by emergency care providers. *Pediatr Emerg Care* 2005;21:770-6.
10. Gincy. A Study to Assess Knowledge and Attitude of Adolescence Towards Alcoholism in a Selected Community in Udupi District. Karnataka: University of Manipal.
11. Richmond Fellowship Nepal. Crisis Counseling and Rehabilitation Center, Annual Report 2003, Kathmandu Nepal; 2003.
12. Jarali AB, Ogoncho PO. Knowledge on substance abuse among adolescents. *Int J Adv Nursing Manage* 2016;4:371-5.
13. Billalli SF, Paramesh GM, Prasannakumar DR. A study to assess the knowledge regarding drug abuse and its ill effects among first year degree students at D.R.M Science College in Davangere. *Int J Adv Nursing Manage* 2017;5:70.
14. Masibo RM. An Assessment of Knowledge, Attitudes and Practices of Psychoactive Substance Use among Secondary School Students in Dodoma Municipality, Tanzania; 2013. Available from: <http://www.usa-journals.com>. [Last accessed on 2021 Sep 14].
15. Kishore S, Grag BS, Muzammil K. Substance-Related Knowledge and Attitude in School; 2021. Available from: <http://www.bing.com/cr?ig=0dbe477592514b259bdab8d7dc2872a4&cid=1089d2ef167a6416204adef71787656c&rd=1&h=jthysqndhlyry4x2swe6wyklyip9b0j7e-dr7jay6ho&v=1&r;http://www.gipsy.uni-goettingen.de/gjp-article-nebhinani1-substance.pdf&p=devex.lb.1,5068.1> [Last accessed on 2021 Sep 15].

How to cite this article: Dighe SV. Study to Assess the Knowledge and Attitude Regarding Substance Use among the Adolescents Residing at Lomeshwar Nagar, Loni (Kd), M. S. *Innov J Nurs Healthc*. 2021;7(4):73-77.