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### RESEARCH ARTICLE

#### TO ASSESS THE KNOWLEDGE OF ILL EFFECTS OF GUTKHA CHEWING AMONG ADOLESCENCE MALE IN SELECTED HIGH SCHOOLS AND JUNIOR COLLEGES

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#### Manuscript Info

##### Manuscript History

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#### Abstract

Given the current pattern of tobacco use globally, it is estimated that 250 million Adolescent who are alive today, would die prematurely because of consumption of tobacco products. It is recommended that appropriate knowledge about ill effects of tobacco product (gutkha)

##### The Objectives Of The Study Were:

1. To assess the knowledge of adolescent about ill effects of gutkha chewing .
2. To find out association between knowledge and selected demographic variables.
3. To develop information booklet to improve their knowledge based on ill effects on human body of gutkha chewing for adolescent male.

**Methods:** The descriptive survey approach was adopted to collect data by self prepared structured questionnaire and administered to 50 High school and junior college male students, who were selected by using non probability purposive sampling technique at various high schools and junior colleges of Ghataprabha.

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#### Introduction:-

The Father of nation, Mahatma Gandhi told long ago: "Do not see bad, do not hear bad, and do not talk bad," in addition the following need to be added if we want healthy society is "Do not eat bad". A person's nature depends on what he/she eats, at least to some extent. When someone eats more masala, salt or sugar or consumes ill items like tobacco and tobacco products or even consumes alcohol how can his/her nature be pious.

Gutkha can well be defined as a devil in disguise, promoted as a mouth freshener, this betel nuts and tobacco preparation is designed to release a chemical reaction that makes it an addictive proposition. However, most consumers believe that the blended spices and seasonings do not make it as a harmful product. But the truth remains that gutkha; just as any other tobacco product is very addictive and injurious to health. Gutkha is proved to be carcinogenic. So far, gutkha is largely ignored, and there is no regulated body in India that works against the consumption of this deadly mouth freshener, so till the time we have proper regulations in place, let us as individuals try and help eradicate this habit. Let us use the power so proudly to educate people.

#### Statement Of The Problem

"A Study to assess the knowledge of ill effects of Gutkha chewing among adolescence male in selected high schools and junior colleges at Ghataprabha with a view to prepare an information booklet."

### **Objectives of the study:-**

- 1.To achieve the knowledge of adolescents male about ill effects of gutkha chewing.
- 2.To find out association between knowledge and selected demographic variables.
- 3.To develop information booklet to improve their knowledge based on ill effects on human body of Gutkha chewing for adolescent male.

### **Operational definitions:**

1. Assess:- In this study it refers to identification of information acquired by male adolescent about ill effects of Gutkha chewing in human body through self constructed questionnaires.
2. Knowledge:- It refers to the information possessed by male adolescence regarding gutkha chewing and its ill effects in human as assessed by self constructed questionnaires.
3. Young adolescent: In this study it refers to male students between 13-18 years of age and studying in standards 9<sup>th</sup> to 12<sup>th</sup> at selected high schools and junior colleges in Ghataprabha.
4. Gutkha: In this study it refers to, tobacco which is polished, scented and in which other chemical ingredients are added, and these are easily available at various pan shops in pouches.
5. Ill effects: It refers to the actual or potential harm caused to the human health by constant consuming these gutkha.
6. Chewing: In this study it refers to the practice of mastication of Gutkha for several minutes and spitting out remaining.
7. Cancer:It is abnormal growth of tissues associated to use of tobacco and its products.
8. Ulcers: Refers to the disturbed mucosal integrity of the buccal cavity related to Gutkha and lime consumption.
9. Legal: It is a legislative policy or procedure to enforce the law.
10. Information booklet: It refers to the information given to the adolescent male by the investigator or in the form of printed material after completion of study.

### **Assumptions: The Study Had The Following**

1. It is assumed that the knowledge of male adolescent is adequate regarding the ill effects of gutkha consumption.
2. It is assumed that peer group influence and other motivational factors are more dominant than knowledge of ill effects of gutkha consumption.

### **Hypothesis:**

To achieve the stated objectives following hypothesis has been developed.

Ho- Male adolescent students lack in the knowledge of ill effects of gutkha chewing.

H1- Male adolescent students are having significant knowledge of ill effects of ill effects of gutkha chewing but influenced by peer group and other glamourous factors.

### **Research approach:**

In view of the nature of the the problem under study descriptive survey approach was considered as appropriate to describe the knowledge of the adolescent students regarding ill effects of gutkha consumption.

### **Research design:**

The research design selected for the study is descriptive survey design.

### **Variables:**

Two types of variable are used in this study.

1)Dependent variable

In this study the dependent variable was knowledge as measured by structured knowledge questionnaires.

2)Extraneous variable

It is an uncontrolled variable that greatly influences the result of study.

### **Setting of the study:**

The study was conducted at High Schools and Junior colleges of Ghataprabha, which is located at Gokak Taluka, Belgam District.

**Population:**

In this study the populations were the adolescent students between 13 to 18 years and studying in highschools and junior colleges of Ghataprabha.

**Sample:**

The sample for present study comprised of 50 adolescent students.

**Sample technique:**

For the present study non probability purposive sampling technique was selected and considered appropriate.

**Criteria for selecting the sample :****Inclusion criteria:**

1. High School students studying in 9<sup>th</sup> and 10<sup>th</sup> standard of Ghataprabha.
2. Students studying in 11<sup>th</sup> and 12<sup>th</sup> standards of junior colleges of Ghataprabha.
3. Who are willing to participate in the study.

**Exclusion criteria:**

1. Who are not willing to participate in the study.
2. Those who are on long leave.

**Results:-**

This chapter deals with analysis and interpretation of the information collected through structured knowledge questionnaire from 50 male students studying at high schools and junior colleges of Ghataprabha.

The present study was designed to assess the knowledge regarding ill effects of Gutkha chewing among male adolescents high schools and junior colleges of Ghataprabha.

Collected data were coded, tabulated, organized and analyzed and interpreted using descriptive in the lights of objectives and hypothesis of the study.

**Organization of findings**

The data was presented under the following headings.

Section I: Description of sample characteristics.

The demographic data would be analyzed using frequency and percentage.

Section II: Level of knowledge regarding ill effects of gutkha chewing would be analyzed using frequency, percentage and mean percentage scores.

Section III: Association between the level of knowledge regarding ill effects of Gutkha chewing and the socio-demographic variables, which would be found out using chi-square test. The level of significance was set at 0.05 level.

**Section i:-description of sample characteristics.**

The present study used purposive sampling as the sampling technique.

The size of sample was 50 male students studying high schools and junior colleges of Ghataprabha.

Sample characteristics included, age, class, of study, type of family, resident, do you eat Gutkha and inspired to eat Gutkha.

The frequency and percentage of sample by their demographic characteristics are presented in the following table.

SI NO	Variable	Frequency	Percentage
1.	Age 13-14 years	09	18%

	15-16 years 17-18 years	21 20	42% 40%
2.	Class of study 9 <sup>th</sup> Std 10 <sup>th</sup> Std 11 <sup>th</sup> Std 12 <sup>th</sup> Std	12 14 12 12	24% 28% 24% 24%
3.	Type of family Nuclear Joint Extended	11 22 17	22% 44% 34%
4.	Resident Urban Rural	30 20	60% 40%
5.	Do you eat Gutkha. Yes-Regularly Yes-Occasionally No	28 10 12	56% 20% 24%
6.	How were you inspired to eat Gutkha By family members By peer groups By media By neighbours. No I am not eating Gutkha.	9 18 6 8 9	18% 36% 12% 16% 18%

**Age:**

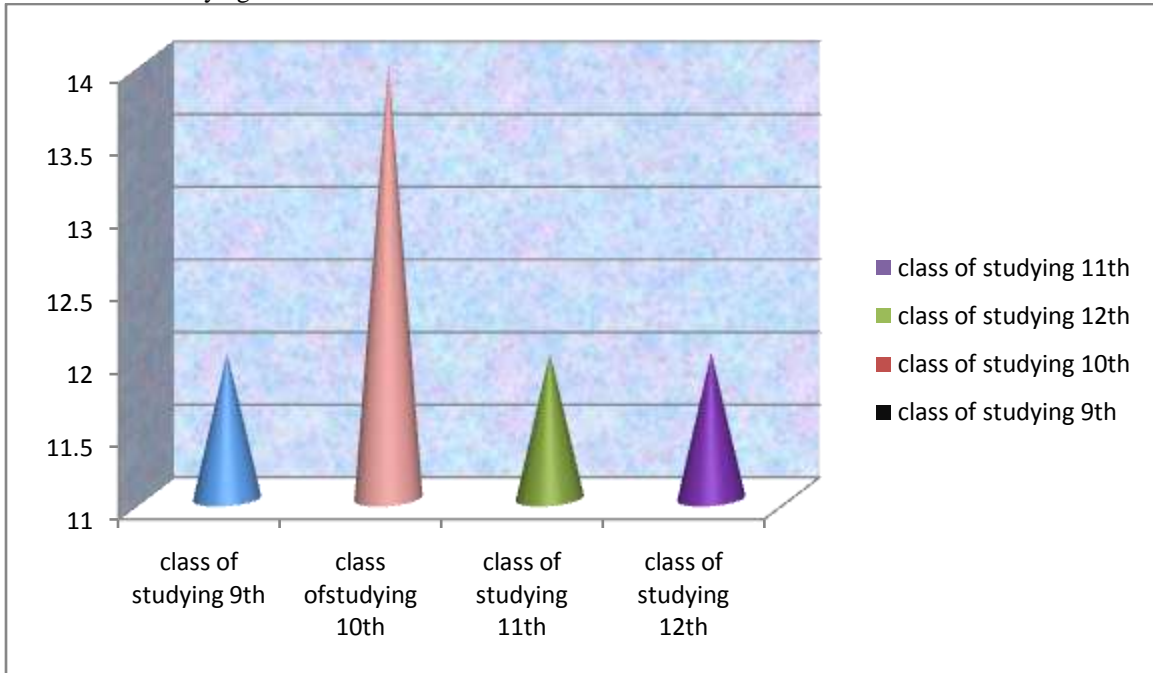
With regard to the age group 18% of the respondents were within the age group of 13-14 years, 42% of the respondents were 15-16 years and 40% respondents were within the age group of 17-18 years.

Pie diagram depicting percentage distribution of the respondents according to age



**Class of study:**

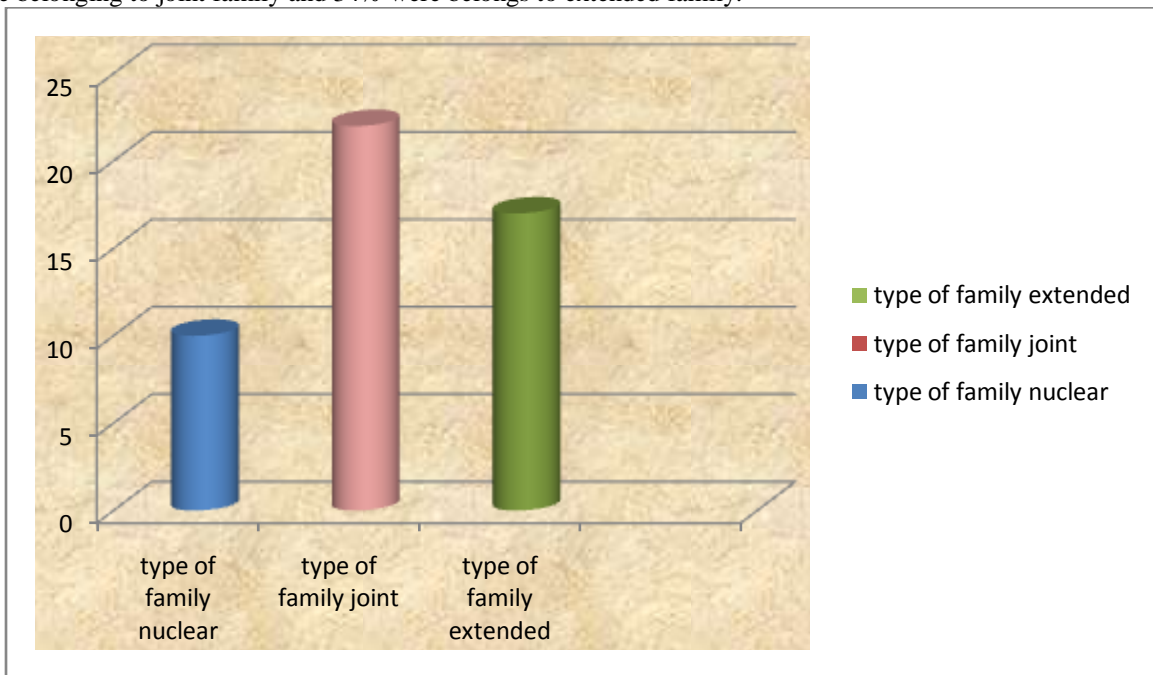
With regard to the class of study 24% of the respondents were studying in 9<sup>th</sup> Std, 28% were 10<sup>th</sup> Std, 24% were 11<sup>th</sup> Std and 24% were studying in 12<sup>th</sup> Std.



Cone diagram depicting the percentage distribution of the respondents according to the class of study.

**Type of family:**

With regard to type of family 22% of the respondents were belonging to nuclear family, 44% of the respondents were belonging to joint family and 34% were belongs to extended family.



Cylindrical diagram depicting the percentage distribution of the respondents according to the type of family.

**Residence:**

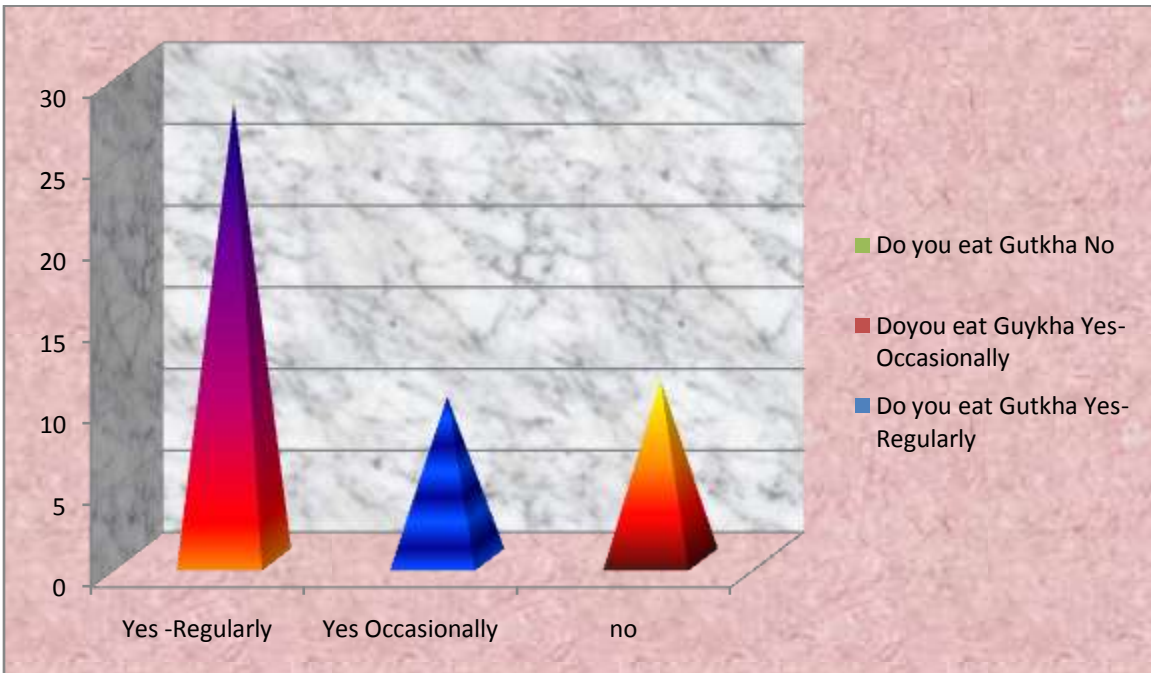
With regard to the Residence 60% of the respondents staying in urban and 40% were from area.



Doughnut diagram depicting the percentage distribution of the respondents according to residence.

**Do you eat Gutkha:**

With regard to the Gutkha chewing 56% of the respondents were chewing Gutkha regularly, 20% were chewing occasionally and 24% of the respondents were not chewing Gutkha at all.

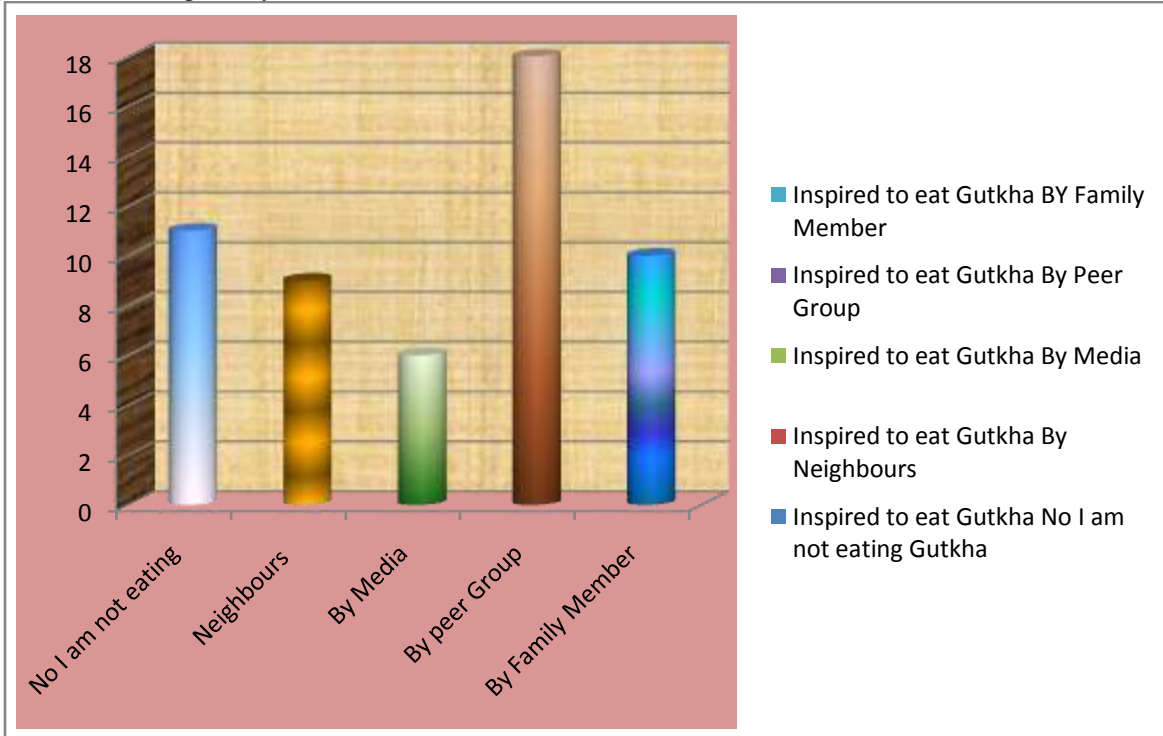


Pyramid diagram depicting the percentage distribution of the respondents according to Gutkha chewing.



**6. Inspired to eat Gutkha:**

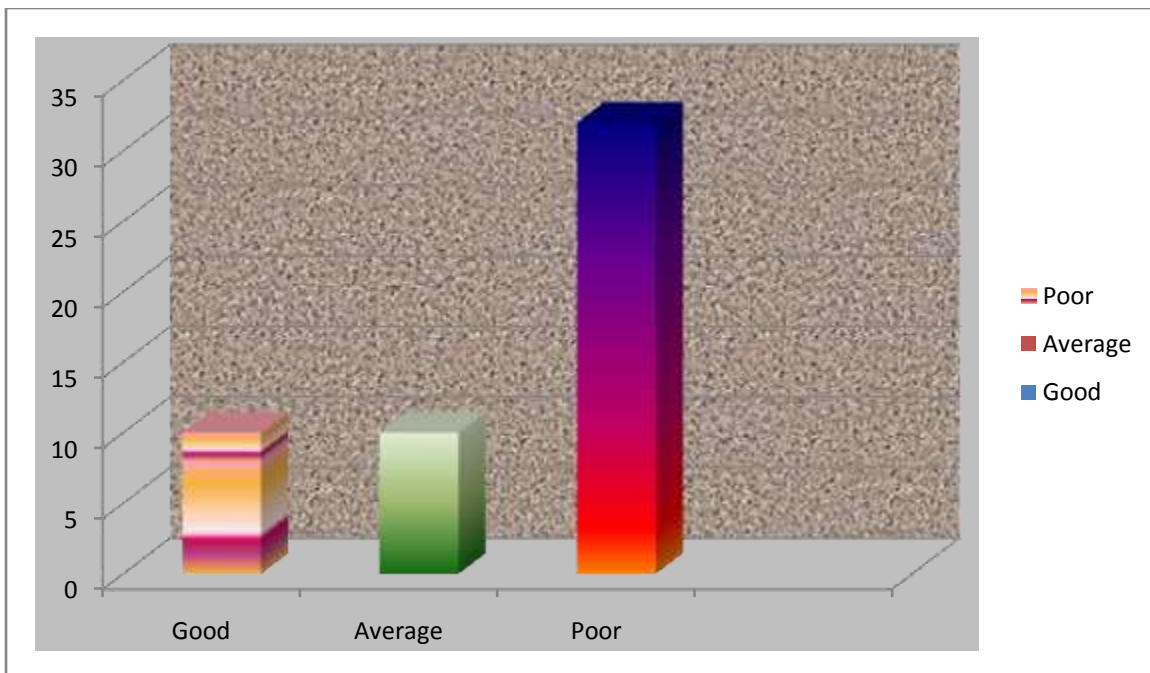
Majority (36%) of the respondents were inspired to eat Gutkha from the peer group but only (12%) of the respondents were inspired by media.



Cylinder diagram depicting the percentage distribution of the respondents according to inspired to Gutkha chewing.

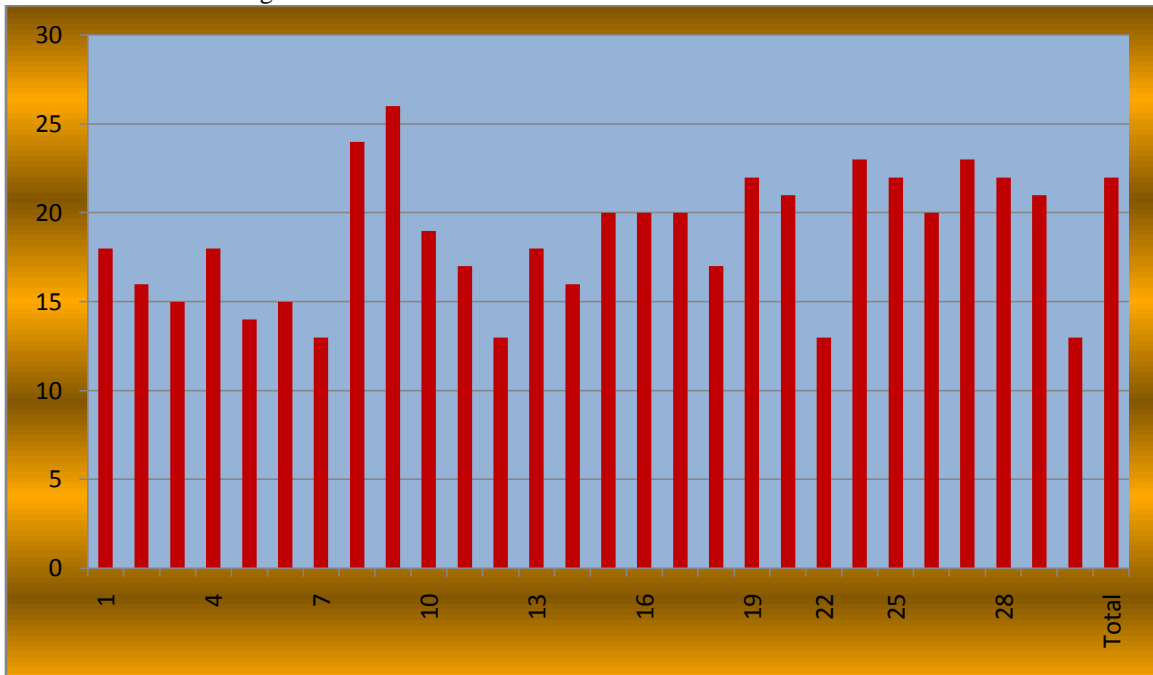
**Section ii:-level of knowledge regarding ill effects of gutkha chewing.**

Majority of the respondents ie 64% of the respondents had poor knowledge 20% with average knowledge and only 16% with good knowledge and the same is depicted in the figure.



Bar diagram depicting the level of knowledge of the respondents regarding ill effects of Gutkha chewing.

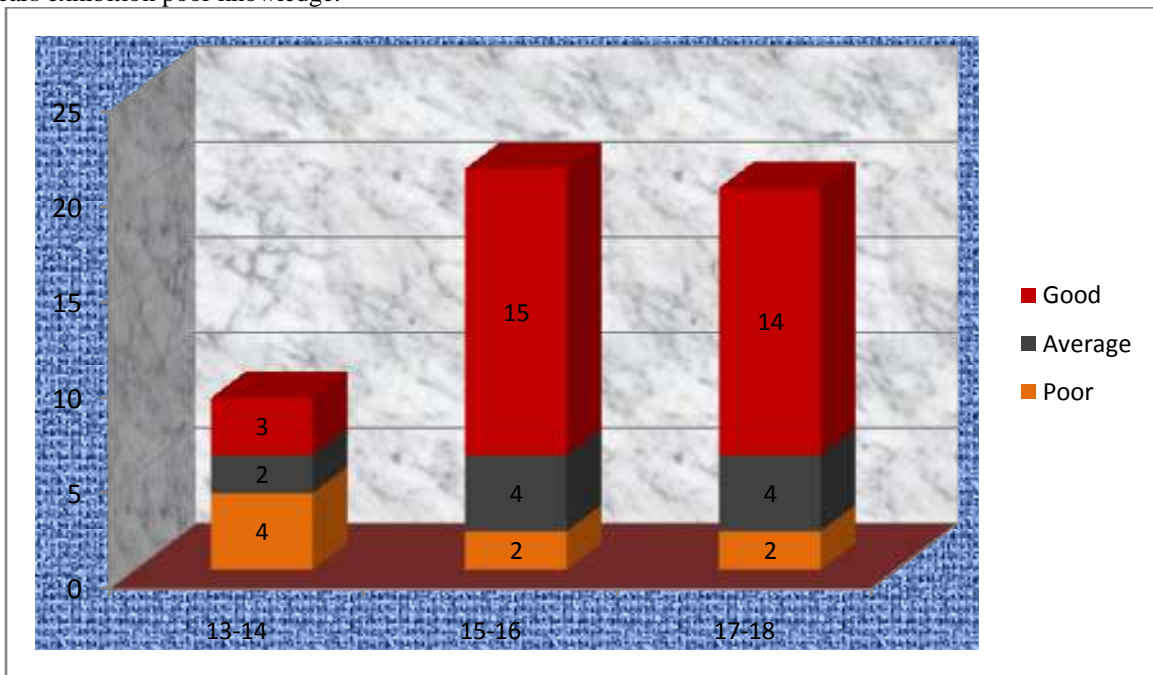
Majority of respondent responded to enjoyment of Gutkha in contrary ti this very little knowledge about treatment available for Gutkha chewing.



Bar diagram depicting the item wise analyses on Gutkha chewing.

Level of knowledge compred with age group:

Majority (15) in the student in the group of 15-16 had poor knowledge where as only (3) in the age groupof 13-24years exhibition poor knowledge.

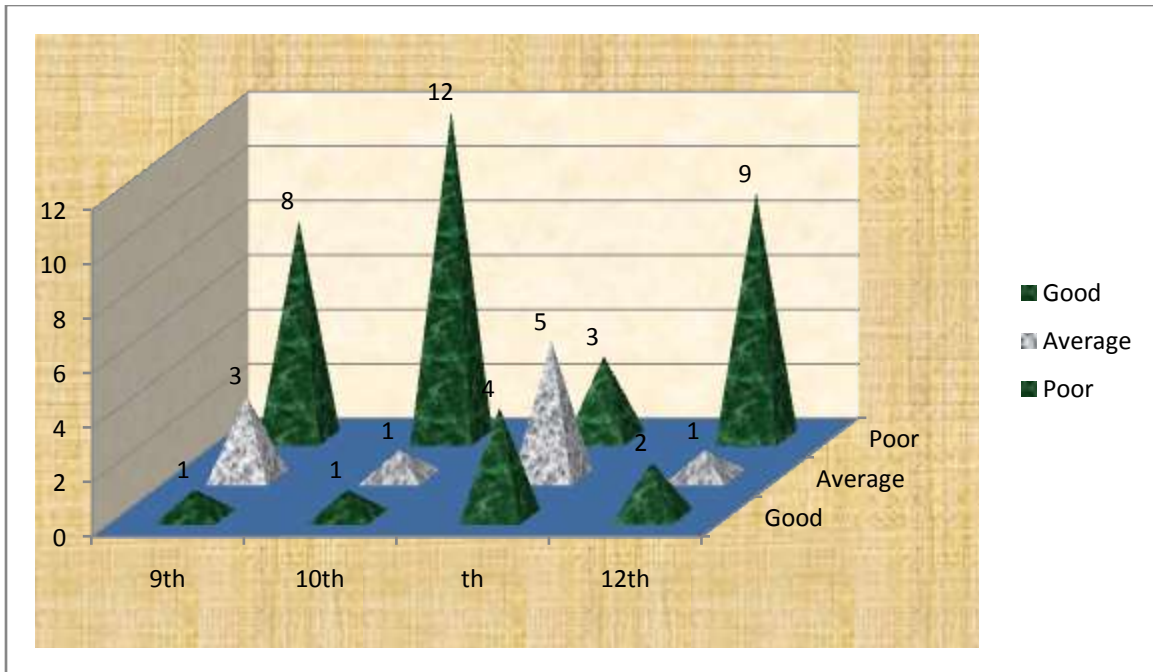


Bar diagram depicting the level of knowledge on Gutkha chewing compared with age group.

Level of Knowledge compared with class of studying.

Majority(12) students had poor knowledge are 10<sup>th</sup> Std and and (3) students had poor knowledge were in 11<sup>th</sup> Std.

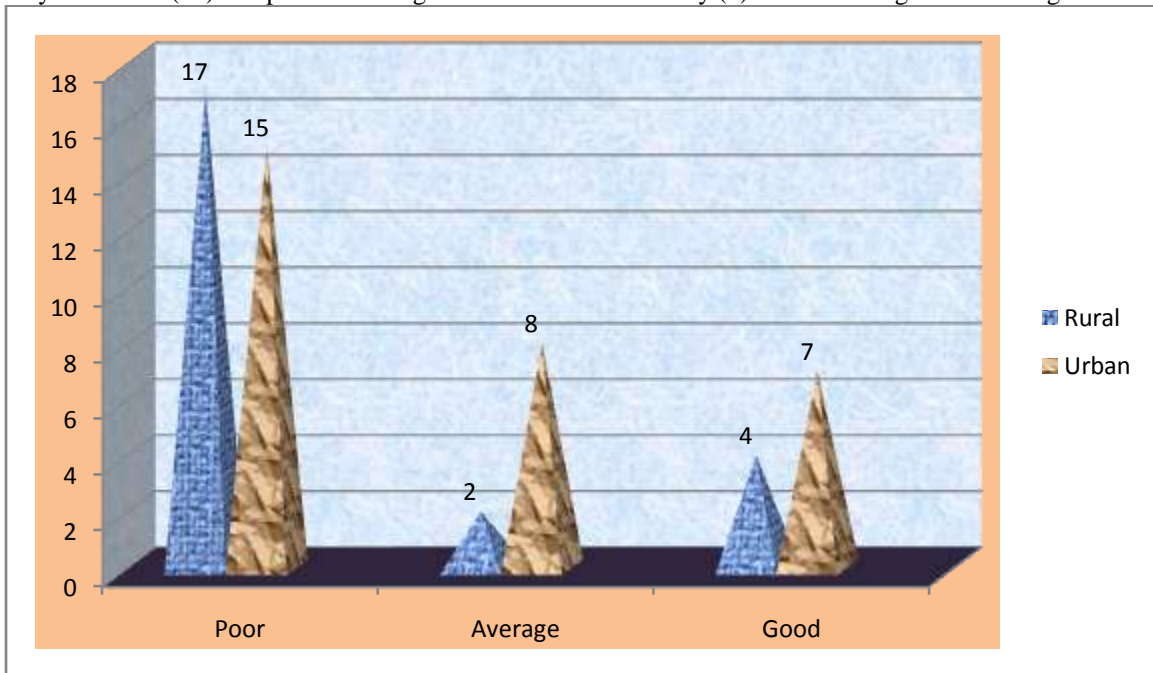




Pyramid diagram depicting the level of knowledge on Gutkha chewing compared class of studying.

Level of Knowledge compared with residence.

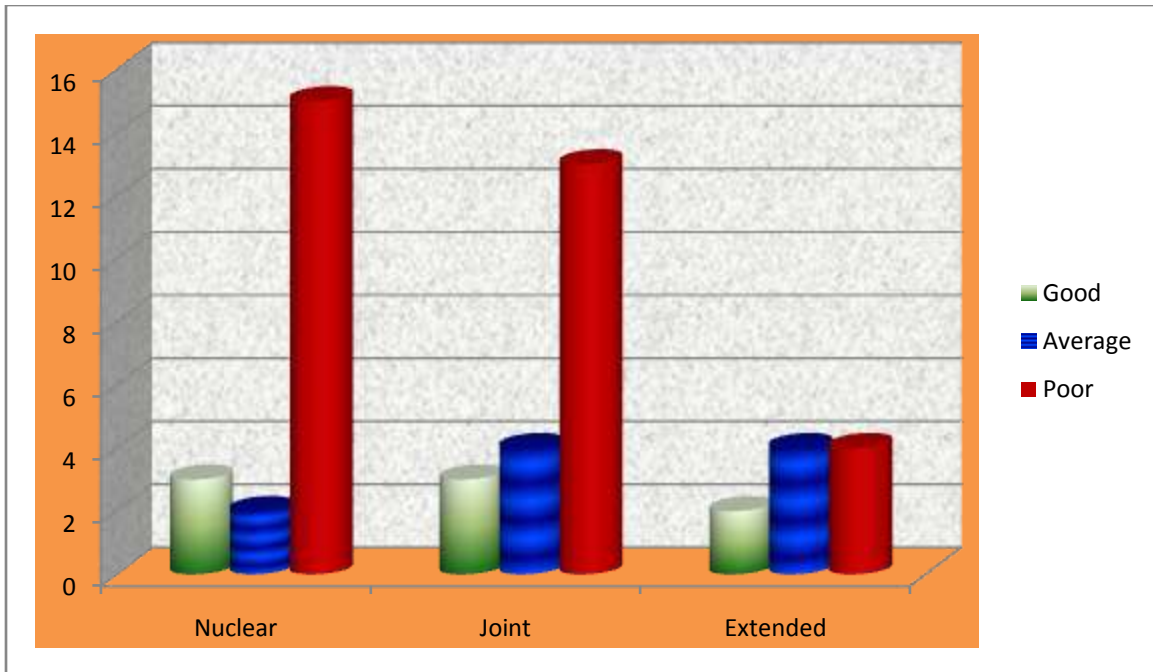
Majority of student (17) had poor knowledge were from rural and only (1) students had good knowledge.



Pyramid diagram depicting the level of knowledge on Gutkha chewing compared with residence.

Level of knowledge compared with type of family.

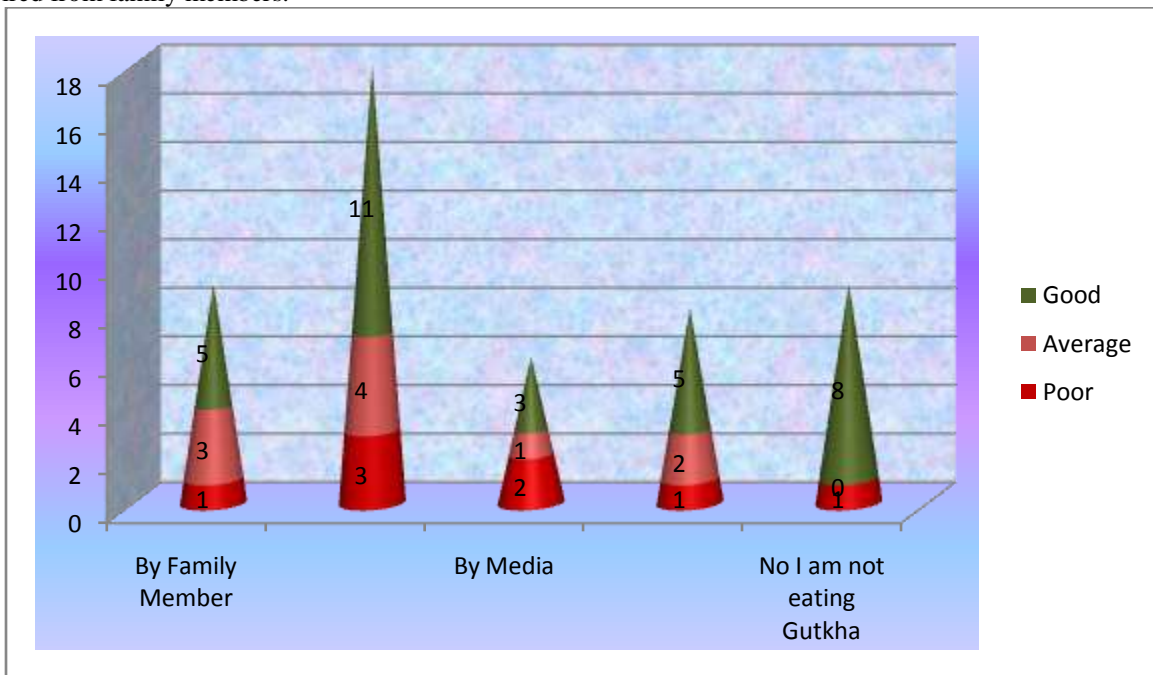
Majority of students(15) had poor knowledge were from nuclear family and only (4) students from extended family were having poor knowledge.



Cylindrical diagram depicting the level of knowledge on Gutkha Chewing compared with type of family.

Level; of Knowledge compared with inspired to eat Gutkha chewing.

Majority of students (11) had poor knowledge were from peer groups and only (1) students had good knowledge inspired from family members.



Cone diagram depicting the level of knowledge on Gutkha Chewing compared with inspired to eat Gutkha chewing.

**Section iii:-**

1) Association between the level o knowledge regarding Gutkha chewing and age of respondents.

This section deals with the analysis of association between level of knowledge regarding ill effects of Gutkha chewing and age of the respondents.

In order to find out association between the level of knowledge regarding ill effects of Gutkha chewing and the age of respondents the following null hypothesis was formulated.

H<sub>01</sub>: There is no association between the level of knowledge regarding ill effects of Gutkha chewing and age of respondents.

The chi-square test was computed in order to determine the significance of association between the level of knowledge regarding ill effects of Gutkha chewing and age of the respondents.

**Table 2:-** Association between level of knowledge and age of the respondents. n=50

Selected variable	Knowledge			Chi-square	d.f
	Good	Average	Poor		
Age	≥ 26	16-25	≤ 15		
13-14 years	2	2	3	2.642	4
15-16 years	2	4	15		
17-18 years	2	4	14		

$$X^2 = 9.49, p < 0.05$$

Referring chi-square table for 2 df  $X^2 = 0.05, 9.49$ ; calculated  $X^2$  is lower than  $X^2_{0.05}$  hence no significant association between level of knowledge regarding ill effects of Gutkha chewing and age of the respondents, it is indicated as  $p < 0.05$ .

From table No.2 it is seen that calculated chi-square value is  $X^2 = 2.642, p < 0.05$ .

Hence the null hypothesis is accepted at 5% level of significance. This indicates that there is no association between the level of knowledge and age of the respondent.

2. Association between the level of knowledge regarding ill effects of Gutkha chewing and class of the respondents.

This section deals with the analysis between the level of knowledge regarding ill effects of Gutkha chewing and class of study of the respondents.

In order to find out the association between the level of knowledge regarding ill effects of Gutkha chewing and class of respondents, the following null hypothesis was formulated.

H<sub>02</sub>: There is no association between level of knowledge regarding ill effects of Gutkha chewing and class of study of the respondents.

The chi-square test was computed in order to determine the significance of association between the level of knowledge regarding ill effects of Gutkha chewing and class of study of the respondents.

**Table 3:-** Association between level of knowledge and class of study of the respondents.

Selected Variable	Knowledge			Chi-square	d.f
	Good	Average	Poor		
Class of studying	≥ 26	16-25	≤ 15		
9 <sup>th</sup> Std	1	3	8	5.45	9
10 <sup>th</sup> Std	1	1	12		
11 <sup>th</sup> Std	4	5	3		
12 <sup>th</sup> Std	2	1	9		

$$X^2 = 16.92, p < 0.05$$

Referring chi-square table for 2 df  $X^2$  is lower than  $X^2_{0.05}$  hence no significant association between level of knowledge regarding ill effects of Gutkha chewing and class of study of the respondents, it is indicated as  $p < 0.05$ .

From table it is seen that calculated chi-square value is  $X^2=5.45$ ,  $P<0.05$ .

Hence the null hypothesis is accepted at 5% level of significance. This indicates that there is no association between level of knowledge and class of study of the respondents.

3. Association between level of knowledge regarding ill effects of Gutkha chewing and type of family of the respondents.

This section deals with the analysis between level of knowledge regarding ill effects of Gutkha chewing and type of family of the respondents.

In order to find-out the association between the level of knowledge regarding ill effects of Gutkha chewing and type of family of respondents, the following null hypothesis was formulated.

$H_{03}$ : There is no association between the level of knowledge regarding ill effects of Gutkha chewing and type of the

The chi-square test was computed in order to determine the significance of association between the level of knowledge regarding ill effects of Gutkha chewing and type of family of the respondents.

**Table 4:-** Association between level of knowledge and type of family of the respondents.

Selected variable	Knowledge			Chi-square	df
	Good	Average	Poor		
Type of family	$\geq 26$	16-25	$\leq 15$		
Nuclear	3	2	15	2.13	4
Joint	3	4	13		
Extended	2	4	4		

$X^2=9.49$   $p<0.05$

Referring chi-square table df  $X=0.05$ , 9049, calculated  $X^2$  is lower than  $X^2_{0.05}$  hence no significant association between the level of knowledge regarding ill effects of Gutkha chewing and type of family of the respondents, it is indicated as  $p,0.05$ .

From table No 4 it is seen that calculated chi-square value is  $X^2=2.13$ ,  $P<0.05$ .

Hence the null hypothesis is accepted at 5% level of significance. This indicates that there is no association between the level of knowledge and type of family of the respondents.

1. Association between the level of knowledge regarding ill effects of Gutkha chewing and inspired to eat Gutkha of the respondents.

This section deals with the analysis of association between level of knowledge regarding ill effects of Gutkha chewing and inspired to eat Gutkha of the respondents the following null hypothesis was formulated.

$H_{04}$ : There is no association between the level of knowledge regarding ill effects of Gutkha chewing and inspired to eat Gutkha of the respondents.

The chi-square test was computed in order to determine the significance of association between the level of knowledge regarding ill effects of Gutkha chewing and inspired to eat Gutkha of the respondents.

**Table No 5:-** Association between level of knowledge and inspired to eat Gutkha by the respondents.

Selected variable	Knowledge				
	Good	Average	Poor		
Inspired to eat Gutkha	$\leq 26$	16-25	$\leq 15$		
By family members	1	3	5		
By peer groups	3	4	11	1.02	8

By media	2	1	3		
By neighbors	1	2	5		
No I am not eating Gutkha	1	0	8		

$\chi^2=15.51, p<0.05$

Referring chi-square table for 2 df  $\chi^2_{0.05} = 13.9$ ; calculated  $\chi^2$  is lower than  $\chi^2_{0.05}$ . hence no significant association between the level of knowledge regarding ill effects of GUTKH chewing and inspired to eat Gutkha of the respondents, it is indicated as  $p<0.05$ .

From the table No .5 it is seen that calculated chi-square value is  $\chi^2 = 1.02, p<0.05$ .

Hence the above null hypothesis is accepted at 5% level of significance. This indicated that there is no association between the knowledge and inspired to eat Gutkha of the respondents.

### Summary:

This chapter deals with the analysis and interpretation of findings of the study. The analysis was organized and presented under various sections like, analysis of knowledge scores and association between knowledge and the socio-demographic variable.

### Data were analyzed by applying descriptive and inferential statistics.

Frequency and percentage were used to describe the sample characteristics.

Mean and mean percentage were used to describe the knowledge scores. The chi-square test was used to find out the association between knowledge and the socio-demographic variables.

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