A Study to Assess the Effectiveness of Planned Teaching Programme regarding Knowledge on oral Cancer and Oral Self Examination among the Auto Drivers at Kanyakumari District

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Abstract: *This study was conducted with a purpose to assess the effectiveness of a structured teaching program regarding oral cancer and oral self examination among auto drivers in a selected village. A pre - experimental one group pre test post test design was used for this study. Sample sizes of 50 fulfilling the inclusive criteria were selected by means of a convenience sampling technique. The findings of the study were presented according to the objectives of the study. Half of the samples 25 (50%) had secondary education and none of the samples were illiterate.19 samples (38%) had a habit of consuming brandy/ arrack. Most of the samples had habit of smoking and smokeless tobacco usage, of the samples 18 (36%) and 15 (30%) used cigarette and pan masala respectively. The results showed in pre test 34 (68%) of the samples had inadequate knowledge regarding oral cancer and 30 (60%) of the samples had inadequate knowledge regarding oral self examination and none of them had adequate knowledge. whereas in post test majority of the samples 42 (84%) had adequate knowledge regarding oral cancer and 44 samples (88%) had adequate knowledge regarding oral self examination. The results showed in pre test 19 (38%) of the samples had moderate attitude regarding oral cancer and 27 samples (54%) had moderate attitude regarding oral self examination and none of them had favorable attitude regarding oral cancer and oral self examination. In post test 37 (74%) of the samples had favorable attitude and 41 samples (82%) had favorable attitude regarding oral self examination. The mean score of the knowledge on oral cancer in pre test was 3.18 and standard deviation was 1.119 and in post test the mean score was 8.26 and standard deviation was 0.876. The mean score of the knowledge on oral self examination in pre test was 3.18 and standard deviation was.983 and in post test the mean score and standard deviation were 8.400 and 0.782 respectively. The "p" value of the mean score and standard deviation of level of knowledge on oral cancer and oral self examination showed significance (P <0.05). Hence the research Hypothesis (H₁) accepted.*

Keywords: Oral cancer, Oral self Examination, Planned teaching Programme, Auto Drivers, Cancer.

1. Background and need of the study

Cancer is group of diseases with similar characteristics. Cancer can occur in all living cells in the body and different cancer types have different natural history. Epidemiological studies have shown that 70 - 90% of all cancers are environmental. Lifestyle related factors are the most important and preventable among the environmental exposures. Tobacco consumptions either as chewing tobacco or smoking tobacco will account for 50% of all cancers in men. Dietary practices, reproductive and sexual practices etc will account for 20 - 30% of cancers. Appropriate changes in lifestyle can reduce the mortality and morbidity from a good proportion of all type of cancers.

Oral cancer often has no specific symptoms, so it is important that people limit their risk factors and undergo appropriate cancer screening. People with risk factors for oral cancer should be acutely aware of potential oral cancer symptoms.

It is quite evident that the public are less aware about the repercussions of tobacco usage and its close association with the development of oral cancer. There are studies which suggest that the educational program regarding oral cancer can bring about improvement in knowledge and attitude among the public and education on mouth self examination can helps in detecting the early signs of oral cancer if an individual perform it on a regular basis.

Oral self examination is inexpensive, safe and could easily do by nearly with all adult men if they are adequately motivated and trained. If taught about oral self examination, people can more effectively find any abnormalities in the oral cavity in its initial stage, which could be signs of oral cancer.

Statement of the Problem
A study to assess the effectiveness of planned teaching programme regarding knowledge on oral cancer and oral self examination among the Auto drivers at kanyakumari district.

Objectives of the Study
1) To assess the level of knowledge on oral cancer and OSE before and after planned teaching programme.
2) To assess the effectiveness of planned teaching programme on knowledge and attitude regarding oral cancer and oral self examination.

3) To associate the demographic variables and the knowledge and attitude of oral cancer and oral self examination after the PTP.

Hypothesis
H₁: There is significant difference between pre test and post test level of knowledge regarding oral cancer and oral self examination among the auto drivers with planned teaching programme.

Settings and design
The study is conducted among Auto drivers in arasanvilai village kanyakumari district has 64 auto drivers in it. They work between 6.30 A. M to 8.30 P. M. Most of them have the habit of smoking, chewing pan masala and alcoholism. All of them were non - vegetarian and often takes food from fast foods. The local secretary is the head of the auto drivers union, who arrange monthly meetings in a common party hall located near by the auto stand. There were no health related awareness programs conducted so far by the union.

2. Methods and Analysis

Data collection for main study was done after permission was obtained from the secretary of the auto drivers union after proper explanation of the study. The investigator hired a party hall i. e. accessible to the auto drivers, LCD projector, loud speakers and mic in order to deliver the lecture. The hall was arranged and all the selected participants were seated comfortably. The investigator welcomed all the auto drivers and recruited 50 samples who fulfilled the inclusion criteria after obtaining informed consent. According to the convenience of the auto drivers the investigator planned to conduct two sessions, one in the morning and the other in the evening. In the morning 25 participants were given pretest, which was around 25minutes, followed by the Planned teaching programme was given on oral cancer and oral self examination which went on for 45 minutes. The investigator used power point, and distributed hand outs in order to deliver the lecture in an effective manner. The oral self examination steps were demonstrated to the auto drivers. The first session completed and the investigator thanked all the auto drivers. Similarly the afternoon session also was conducted. On the14th day the investigator met the participants individually in the auto stand and clarified their doubts regarding oral cancer and OSE and encouraged them to perform oral self examination on a regular basis. A post test was conducted after 21 days.

According to the demographic data such as Age of the sample varied from 21 - 50 years.19 of the Samples (38%) were in the age group of 31 - 40yrs, 17 samples (34%) were in the age group of 41 - 50yrs, and 14 (28%) of the samples were in the age group of 21 - 30yrs. Regarding Educational status 25 (50%) of the samples had secondary education, 12 (24%) of the samples had primary education, 8 (16%) of the samples had higher secondary education, 5 (10%) of them had graduation and above and none of them were illiterate. Most of the samples 21 (42%) had a monthly income between 2001 - 3000, 17 (34%) of the samples had a monthly income between Rs.3001 - 4000 and 12 (24%) of the samples had a monthly income between Rs.4001 - 5000 respectively. The samples belonged to different religion like Hindu, Christian, and Muslim.26 (52%) of the samples were Christians, 16 (32%) of them were Hindus and 8 (16%) of the samples were Muslims. Most of the samples 21 (42%) had no history of cancer in the family, 14 (28%) of the samples had an incidence of cancer among their Kins.9 (18%) and 6 (12%) of the samples had an incidence of cancer within their family, grad parents and parents respectively. Majority of the samples 18 (36%) had a habit of cigarette smoking, 15 (30%) uses bidi, and 6 (12%) uses ganja. Only 11 (22%) of the samples were non users.
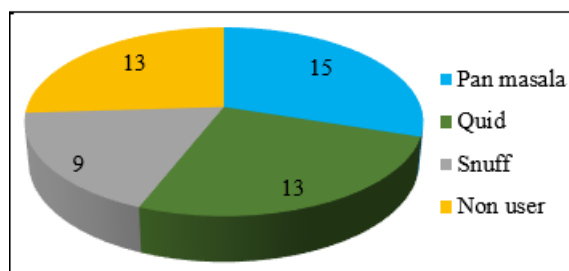

Figure 1: Frequency and percentage distribution of samples regarding bad habits.

Regard to alcohol consumption Most of the samples 19 (38%) uses brandy or arrack, 13 (26%) of the samples drink toddy, 10 (20%) of the samples drink beer and only 8 (16%) were non users. Regard to Information about oral cancerThe samples got information about oral cancer from different sources such as T. V and Radio, News paper, medical professionals and other sources.14 (28%) and 11 (22%) of the samples got information from News paper and T. V/Radio respectively, only 9 (18%) of them had been given information from a medical professional and a majority of the samples 16 (32%) of them got information from other sources.
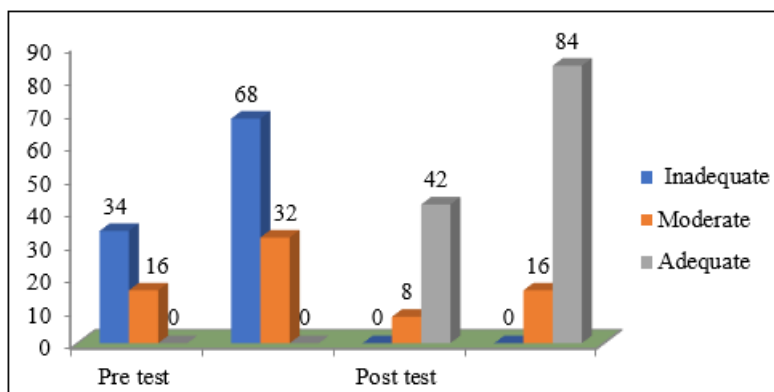

Figure 2: Frequency and percentage distribution on knowledge regarding oral cancer

The data revealed that in pre test 34 samples (68%) had inadequate knowledge, 16 samples (32%) had moderate knowledge and in post test 42 samples (84%) had adequate knowledge, 8 (16%) samples had moderate knowledge regarding oral cancer. The data revealed that in pre test 30 samples (60%) had inadequate knowledge, 20 samples (40%) had moderate knowledge and in post test 44 samples (88%) had adequate knowledge, 6 (12%) samples had moderate knowledge regarding oral self examination.

The mean score of the knowledge on oral cancer in pre test was 3.18 and standard deviation was 1.119 and in post test the mean score was 8.26 and standard deviation was 0.876. The mean score of the knowledge on oral self examination in pre test was 3.18 and standard deviation was.983 and in post test the mean score and standard deviation were 8.400 and 0.782 respectively. The "p" value of the mean score and standard deviation of level of knowledge on oral cancer and oral self examination showed significance ($P < 0.05$). Hence the **research Hypothesis (H$_1$) accepted.**

3. Conclusion

Generally Planned Teaching Program is one of the best methods of teaching. The results of this study suggested that Structured Teaching Program on oral cancer and oral self examination was an effective method to teach Students to improve their knowledge.

In addition to that the findings of this study revealed the level of knowledge and attitude regarding oral cancer and OSE of the participants were inadequate. Hence, health education by mass media such as TV/Radio or printed media such as newspaper, magazine, handouts etc can also be helpful to improve the knowledge of a community towards oral cancer and oral self examination, and thereby reduce the incidence of oral cancer in our country. The participation of non - governmental and charitable organizations in creating awareness about oral cancer and oral self-examination will also be helpful in solving this problem.

4. Recommendations

1) Similar study can be done in various settings with different group of people.
2) Replication of this study can be done with large samples.
3) Similar study can be done to assess the practice on oral self examination.
4) Similar study can be conducted with the use of a self instructional module.

References

Books
[1] Freshwater Dawn, Bishop Veronica (2004). "Nursing Research in Context". First edition. New York: Palgrave Macmillan. Page no: 73 - 87.
[2] Kothari C. R. (2007). "Research Methodology Methods and Techniques". Second edition. New Delhi: Wiswa parkas publication. Page no: 39 - 67.
[3] Potter A. Patricia and Perry Griffin Anne (2006). "Fundamentals of Nursing". Sixth edition. New Delhi: Elsevier. Page no: 92 - 93, 709 - 712
[4] (2009). "Lippincott Manual of Nursing Practice". Ninth edition. New Delhi: Wolters Kluwer (India) Pvt Ltd. Page no: 632 - 634

Journals
[5] Suzanne E. Scott, Kulsoom Rizvi, Elizabeth A. Grunfeld, and Mark McGurk, 2010 Wiley Periodicals, Pilot study to estimate the accuracy of mouth self - examination in an at - risk groupInc., 2010
[6] Gozum S, Karayurt O, Kav S, Platin N. Effectiveness of peer education for breast cancer screening and health beliefs in eastern Turkey. Cancer Nursing. 2010 May - Jun; 33 (3): 213 - 20.
[7] Nur N. Breast cancer knowledge and screening behaviors of the female teachers. U. S. National Library of Medicine, 2010; 50 (1): 37 - 52.
[8] Ho Olasoji, Babagana Ahmad, T Ligali, and A Yahaya. Explanatory models of and attitudes towards Oral Cancer in two Nigerian ethnic groups: Implications in treatment and preventive program, Pakistan Oral & Dental Journal, 2007 Vol 28, No.1

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