

Knowledge Regarding Substance Abuse among 12th Standard Students of a Selected Higher Secondary School of Surat City: A Descriptive Survey

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Abstract

Background: Substance abuse is a growing public health problem among adolescents, who are vulnerable because of curiosity, peer influence, poor impulse control and psychological distress. Early use can lead to dependence, anxiety, depression and risky behaviour, and tobacco and alcohol often act as gateway substances to other drugs. Adequate knowledge of the harmful effects of substances is an important first step in prevention.

Aim: To assess the knowledge regarding substance abuse among 12th standard students of a selected higher secondary school of Surat city, and to find the association between knowledge and selected demographic variables.

Methods: A quantitative, non-experimental, descriptive survey design was used. Thirty 12th standard students of a selected higher secondary school in Surat city were chosen by convenience sampling. Data were collected using a structured knowledge questionnaire of 30 multiple-choice items. The demographic variables were age, sex, religion, place of residence, mother tongue, stream and medium of instruction. Data were analysed using descriptive and inferential statistics.

Results: Of the 30 students, 3 (10%) had good knowledge, 16 (53.33%) had average knowledge and 11 (36.67%) had poor knowledge regarding substance abuse. Thus, 27 students (90%) had only average or poor knowledge.

Conclusion: Most of the higher secondary students had average or poor knowledge of substance abuse. Structured, repeated school-based health education on substance abuse should be built into school health programmes, and nurses, as school health providers and educators, are well placed to lead it. Larger studies with random sampling are recommended.

Keywords: substance abuse; knowledge; adolescents; higher secondary students; school health; Surat.

1. Introduction

Substance abuse refers to the use of drugs, alcohol or any other mind-altering agent to such an extent that it interferes with a person's biological, psychological or social integrity. It is a growing problem throughout the world and is particularly common among children and adolescents who are about to begin their careers. Adolescence is a vulnerable period of life. Psychological factors such as curiosity, poor impulse control, a wish to escape from reality and psychological distress, and social factors such as peer influence, lack of a clear identity and family conflict, all increase the risk of substance use (Lalitha, 2010).

Repeated and regular recreational use can lead to dependence and to problems such as anxiety and depression. Some teenagers use drugs or alcohol to

cope with anxiety, depression or a lack of positive social skills. Tobacco and alcohol are of particular concern because they can act as gateway drugs to marijuana, cocaine, hallucinogens, inhalants and heroin (Shetty, 1998). Early onset of drinking has also been linked with later misuse of prescription drugs among teenagers and young adults (Hermos et al., 2008; Pradeep et al., 2010).

The World Health Organization (WHO) had projected that tobacco use would cause more than 10 million deaths per year by 2020. It has been estimated that about 5,500 young people in India start using tobacco every day, and that tobacco would account for about 13% of all deaths in India by 2020. About 190 million people worldwide are estimated to consume one drug or another. The age of initiation is falling progressively, the problem is

spreading to all socioeconomic groups and to small towns and rural areas, and several studies show that it is rising particularly among students [add primary sources and current figures for these statistics].

Substance abusers are also more likely to be involved in criminal activity, and alcohol and drugs have been linked to domestic violence and sexual assault. Drug use lowers inhibitions and increases risky behaviour, including behaviour that raises the chance of teenage pregnancy and of HIV/AIDS and other sexually transmitted infections. Injected drugs are associated with HIV and hepatitis B and C infection.

Peer pressure is one of the most widespread factors in first experimentation with drugs, and the family may either facilitate or deter use. Assessing the present knowledge of adolescents is a first step in planning prevention. Therefore, this study was undertaken to assess the knowledge regarding substance abuse among 12th standard students of a selected higher secondary school of Surat city.

2. Objectives

1. To assess the level of knowledge regarding substance abuse among 12th standard students using a structured knowledge questionnaire.
2. To find the association between the level of knowledge and selected demographic variables.

3. Materials and Methods

Research approach and design. A quantitative, non-experimental research approach with a descriptive survey design was adopted. A descriptive survey was chosen because of its flexibility and breadth of scope, and because it allows information to be collected economically from a large group.

Setting. The study was conducted in a selected higher secondary school of Surat city.

Population and sample. The target population was 12th standard students. The sample consisted of 30 students of the selected school.

Sampling technique. Convenience sampling was used.

Variables. The research variable was knowledge regarding substance abuse. The demographic variables were age, sex, religion, place of residence, mother tongue, stream and medium of instruction.

Tool. Data were collected using a structured knowledge questionnaire of 30 multiple-choice items on substance abuse and its impact. [Add scoring key and cut-off scores used for good, average and poor knowledge. Add details of content validity and reliability.]

Data collection. [Add dates of data collection, permission obtained from the school principal, informed consent or assent, and ethical committee approval.]

Data analysis. Descriptive statistics (frequency and percentage) were used to describe the level of knowledge, and inferential statistics were used to test the association between knowledge and selected demographic variables.

4. Results

Level of knowledge regarding substance abuse.

Table 1 shows the frequency and percentage distribution of the 12th standard students by their level of knowledge.

Table 1. Frequency and percentage distribution of knowledge level regarding substance abuse (n = 30)

Level of knowledge	Frequency (f)	Percentage (%)
Good	3	10.00
Average	16	53.33
Poor	11	36.67
Total	30	100.00

Only 3 students (10%) had good knowledge. More than half (16 students, 53.33%) had average knowledge, and 11 students (36.67%) had poor knowledge. Together, 27 of the 30 students (90%) had average or poor knowledge.

Association with demographic variables. [Add chi-square values, degrees of freedom and p values for the association between knowledge level and each demographic variable, with a table.]

5. Discussion

The present study found that only one in ten students had good knowledge of substance abuse, while 90% had average or poor knowledge. This indicates that knowledge of substance abuse among these students is inadequate.

This finding is in keeping with other Indian school-based studies. A cross-sectional study of 280 high-school students in Patna (2021) found that many

students had heard about substance abuse, mainly through the internet, yet 13.5% reported drug use, and curiosity and peer pressure were the main reasons. The authors stressed the need for preventive education programmes in schools. A cross-sectional study of 300 students in Bengaluru reported that 10% had used substances, most starting before the age of 15; tobacco was the most commonly used substance, and the commonest reasons were fun, peer pressure and academic stress. A descriptive survey among adolescent boys in Andhra Pradesh showed only moderate knowledge of substance use and its harmful effects, pointing to the need for health education in schools. A large school-based study in Delhi found notable rates of tobacco, alcohol and cannabis use among students, with peer and family influence significantly increasing the likelihood of use. [Add full citations for these four studies.]

Earlier work from India has also shown that non-medical drug use among school and college students is a long-standing concern (Varma & Dang, 1979), and that alcohol and drug problems in schools are widely recognised by school administrators (Moskowitz & Jones, 1988). Together, these reports support the need for school-based preventive education. Expectations about the effects of alcohol are also associated with alcohol use and problems (Wood et al., 1996).

6. Conclusion

The study assessed the knowledge regarding substance abuse among 12th standard students of a selected higher secondary school of Surat city. Most students had average or poor knowledge, and only a small proportion had good knowledge. Structured and repeated education on substance abuse should therefore be built into school health programmes. The researcher received good cooperation from the principal and the students of the selected school.

7. Implications for Nursing

Nursing practice: Nurses can screen adolescents for substance use risk and counsel students and parents.

Nursing education: Substance abuse prevention and adolescent mental health should be strengthened in the nursing curriculum, and student nurses should be prepared to teach in schools.

Nursing administration: Administrators can support school health programmes and in-service training of school health nurses and teachers.

Nursing research: Studies with larger, randomly selected samples and intervention studies, such as the effect of a structured teaching programme, are recommended.

8. Limitations

The sample was small (30 students) and was drawn by convenience sampling from a single school in one city. The findings therefore cannot be generalised to all higher secondary students.

Acknowledgements

The authors thank the principal and the students of the selected higher secondary school of Surat city for their cooperation. [Add any other acknowledgements.]

Conflict of Interest and Funding

The authors declare no conflict of interest. [Confirm.] This study received no external funding. [Confirm.]

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