

## A Study to Assess the Knowledge on Impact of Tobacco Consumption among Adolescents at Z.P.H School, Hyderabad, TS

Seema Yadav\*

College of Nursing, Sarojini Naidu Medical College, AGRA, Uttar Pradesh, India

---

**Citation:** Seema Yadav. A Study to Assess the Knowledge on Impact of Tobacco Consumption Among Adolescents at Z.P.H School, Hyderabad, TS. *Int Clin Med Case Rep Jour.* 2023;2(15):1-23.

**Received Date:** 10 September, 2023; **Accepted Date:** 14 September, 2023; **Published Date:** 16 September, 2023

\***Corresponding author:** Seema Yadav, College of Nursing, Sarojini Naidu Medical College, AGRA, Uttar Pradesh, India.

**Copyright:** © Seema Yadav, Open Access 2023. This article, published in *Int Clin Med Case Rep Jour* (ICMCRJ) (Attribution 4.0 International), as described by <http://creativecommons.org/licenses/by/4.0/>.

---

### ABSTRACT

A descriptive study was undertaken to assess knowledge level among adolescents regarding impact of tobacco consumption at Z.P.H School, Hyderabad,

### THE OBJECTIVES OF THE STUDY WERE

1. To assess the knowledge regarding impact of tobacco consumption among adolescents.
2. To find out the association between the level of knowledge of adolescents on tobacco consumption with selected demographic variables.

An extensive review and study of selected literature was done to develop structured knowledge questionnaire for assessing the knowledge and response of the adolescents regarding impact of tobacco consumption.

The study was limited to the adolescents between the age of 12 -17 years who were studying at Z.P.H School, Hyderabad. The purposive sampling was used to collect the data. The sample size of 100 adolescents was selected for data collection. A structured knowledge questionnaire was developed to collect the data.

Pilot study was conducted on ten samples at Z.P.H. School 9<sup>th</sup> B division, Hyderabad to test the feasibility of the tool. Thus, the result revealed that the tool was feasible and appropriate for the study.

Final data collection at Z.P.H. School, Hyderabad. from 100 samples, using structured questionnaire. The analysis and interpretation was done with the help of descriptive statistics using frequencies and percentages.

### Major Findings of the Study

The study revealed that most adolescents 64% belong to 15 to 17 years. The findings of the present study revealed that 54% adolescents got average knowledge, 40% adolescents got below average, and 6% adolescents got above average knowledge regarding impact of tobacco consumption.

### CONCLUSION

The study findings revealed that most of the adolescents studying at Z.P.H School had average knowledge regarding impact of tobacco consumption.

**Keywords:** assess impact tobacco consumption, improve the knowledge regarding prevention of tobacco consumption . Adolescence age, peer pressure acceptance in group, Modern trend.

## INTRODUCTION

Tobacco consumption is a worldwide practice and continues to be the leading prevalence cause of death in the world. As research findings continue to show the negative effects of tobacco consumption on health and the number of affected people increases, the list of conditions caused by tobacco consumption has grown. Tobacco is expected to develop into the single largest killer and to cause the greatest burden of disease in the 21<sup>st</sup> century.

Use of tobacco generates health disparities among different socio-economic groups and between genders. Smokeless tobacco consumption was more common in poor and less educated. The prevalence of tobacco consumption showed variation with types and varied widely between states and geographical location.

There are 267 million tobacco users in India, making it the country with the second largest number of tobacco users in the world (behind China). Approximately 100 million people ages 15 and older currently smoke tobacco (cigarettes and bidis). Approximately 200 million people ages 15 and older use smokeless tobacco. Tobacco use is higher in rural areas, among those with a lower socioeconomic status, and among those with lower levels of education. Tobacco use prevalence is also significantly higher among men (42.4%) versus women (14.2%). There is substantial variation in the prevalence of tobacco use by state, ranging from 9.7% in the southern state of Goa to 64.5% in the northeastern state of Tripura.

India is the second most populous country in the world. Even then, India is the third largest producer and consumer of tobacco in the world. The country has a long history of tobacco use. Tobacco is used in a variety of ways in India; its use has unfortunately been well recognized among the adolescents. Tobacco is used in several smokeless forms in India, which include betel quid chewing, khaini, gutka, stuff and as an ingredient of pan masala.

Use of tobacco adversely affects the vascular endothelium, resulting in increased platelet adhesion and leading to a higher probability of thrombus formation. Tobacco consumption contributes to the development and severity of coronary artery diseases. The Nicotinic acid in tobacco triggers release of catecholamines, which raise the heart rate and blood pressure. Nicotinic acid can also cause the coronary arteries to constrict. Tobacco users have an increased risk of coronary artery disease and sudden cardiac death.

Tobacco use is responsible for more than one of every six deaths in the United States from pulmonary and cardiovascular diseases. Oral cancer and lung cancers are more common in tobacco users. Tobacco use, thought to be the single most lethal chemical carcinogen, accounts for at least 30% of cancer deaths. Tobacco use is strongly associated with cancers of the lung, neck, oral, esophagus, stomach, cervix, kidney, and bladder.

The tobacco companies are now aggressively targeting their advertising strategies in the developing countries like India. There has been a perceptible fall in smoking in the developed countries, which is due to realization of harmful effects of tobacco. Adolescents often get attracted to tobacco products because of such propaganda. There has been a rapid increase in trade and use of smokeless tobacco products in recent years in the country.

### Need for the Study

Tobacco consumption is a well-recognized health hazard and social stigmatized condition. Several studies have shown that a significant growing percentage of tobacco consumption among adolescents. However, the studies differ, but it can be concluded that the prevalence of tobacco consumption among adolescents is more frequent who live in urban and semirural areas than in rural areas.

According to national sample survey organization of India, smoking and tobacco use where males, had four times higher odds of smoking and tobacco use compared to females.

"The tobacco consumption" related studies are important in India. Because tobacco consumption is beginning to feel the burden of associated chronic diseases. Tobacco consumption predisposes a person to cardiac disorders, lung disorders and upper and lower respiratory cancers we can see in girls and boys.

Tobacco kills more than 8 million people each year, including 1.3 million non-smokers who are exposed to second-hand smoke. Around 80% of the world's 1.3 billion tobacco users live in low- and middle-income countries. In 2020, 22.3% of the world's population used tobacco: 36.7% of men and 7.8% of women. Tobacco consumption is known to cause mortality due to cardiovascular diseases, cancer, respiratory conditions. And other health impacts. We have chosen this study to know the tobacco consumption among adolescents and how it is leading to various diseases, side effects and to know the mortality rate. To assess the knowledge of adolescents regarding tobacco consumption.

Hence investigators have chosen to assess the adolescents' knowledge on tobacco consumption in selected schools.

At the end of study, the investigator was able to assess the knowledge on impact of tobacco consumption among adolescents.

### **Problem Statement**

A study to assess the knowledge on impact of tobacco consumption among adolescents at Z.P.H school, Hyderabad.

### **OBJECTIVES**

1. To assess the knowledge regarding impact of tobacco consumption among the adolescents
2. To find out the association between the level of knowledge of adolescents on tobacco consumption with selected demographic variables

### **Operational Definitions**

**Assess:** Gathering information and identifying knowledge of adolescents regarding impact of tobacco consumption.

**Impact:** Impact means it causes problems or damage. Tobacco consumption is known to cause mortality due to cardiovascular, cancer, respiratory disorders, or other health impacts. It must prevent it from happening because it could be harmful or embarrassing to them.

**Adolescents:** Male and female children age between 12 to 17 years of age

**Tobacco consumption:** The practice of purposely using tobacco and chewing for its perceived physical and psychological benefits.

### **Assumption**

In the present study the investigator assumed that

- Selected adolescents have some knowledge and awareness about impact of tobacco consumption.
- The studies will frankly and willingly participate in this study and respond correctly.

### **Delimitations**

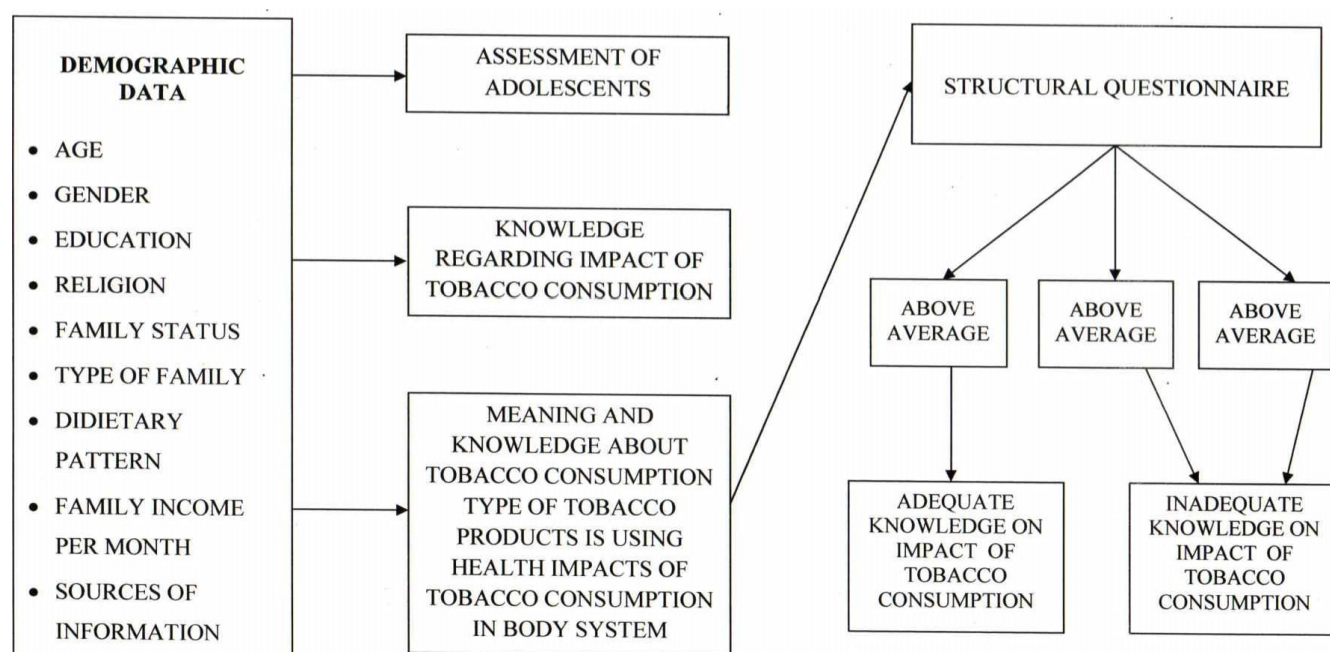
- The study is limited to only the adolescents studying x in Z.P.H school.
- Students who were willingly participate in the study.
- Students who can understand and speak Telugu and English, Hindi

### Conceptual Framework

The conceptual framework describes each of the concepts and shows in a general way how these concepts are related to one another. Conceptual framework is a theoretical approach to the study of problems that are scientifically based and emphasizes the solutions, arrangement and clarification between events and is not limited to statistical relationships.

In the present questionnaire to the adolescents with an objective of assessing knowledge of impact of tobacco consumption

### Conceptual Framework



### Review Of Literature

Literature review is a standard requisition of scientific research. It means reading and writing the pertinent information of the attempt in the research topic to understand better about the proposed topic. It also supports and explains while the proposed topics taken for research and avoids unnecessary duplication, explores the feasibility, and illuminate way to new research.

Literature review involves systematic identification, location, scrutiny, and summary of written materials that contain information on the research problem. It helps the investigator in designing the framework, developing the methodology and tools for data collection, and planning the analysis of data. A review of literature pertaining to study is aimed at recognizing and knowledge of subjects about tobacco consumption among adolescents.

### Methodology

Research designs refer to the way in which the researcher plans and structure the research process and keeps the research headed in the right direction •it is the total plan of the study.

This chapter deals with research approach and setting of the study, population, sample technique criteria for sample selection, description of the sample, method of data collection, development and description of the tool, validity of the tool, procedure of the data collection, score interpretation and plan of data analysis.

### Research Approach

The choice of approach depends upon the purpose of the study. The present study aimed to assess the knowledge on impact of tobacco consumption among adolescents studying at Z.P.H School, Hyderabad,

### Setting Of The Study

Present study was conducted at Z.P.H School, Hyderabad. The reason for selection of this school was that it will have ample strength to conduct a study and there are sufficient adolescents suitable for data collection.

### Population

**Definition:** Total group of individual people things meeting the designated criteria of interest to the researcher typically shown as 'N'.

The target population for the current study consists of 450 adolescents studying at Z.P.H School.

### Sample Size

**Sample:** "A smaller part of the population selected in such a way that the individual in the sample represent the characteristics of the population." The sample size of 100 adolescents studying in Z.P.H School.

### Sample Technique

There are 450 adolescents in the school among that 100 adolescents are selected as sample by purposive sample technique method. This method is one of the non-probability methods.

### Sample Characteristics

The sample is described in terms of demographic data which include age, gender, education, religion, type of family, income of family, family status.

### Method of Data Collection

For the present study, structured knowledge questionnaire as a method of data collection was selected to assess the knowledge level of adolescents regarding impact of tobacco consumption.

Questionnaire is a method of gathering self-report information from respondent through self-administered questionnaire.

### Development Of The Tool

The tool as an assessment of knowledge among adolescents regarding impact of tobacco consumption. The tool is in the form of structures questionnaire, and it was developed with related literature from various textbooks, journals, and validity, guidance from experts .

### Description Of Knowledge Assessment Tool

To assess the knowledge of adolescents regarding impact of tobacco consumption the questionnaire was prepared. It consists of two parts.

**Part-A:** this part deals with demographic data consisting of age, education, gender, religion, family status, type of family, income of family.

**Part-B:** It deals with assessment of knowledge level of adolescents regarding impact of tobacco consumption.

### Pilot Study

Pilot study is a small version or trial done in preparation of main study. The purpose of pilot study was to assess the feasibility of tool to plan the statistical analysis of the data. The pilot study for our project work was conducted in Z.P.H School, Tools were distributed to 10 students in the Z.P.H School B division. The time taken to complete the total was appropriate. The findings of the pilot study indicated that structured questionnaire was feasible to conduct the study.

### Data Collection Procedure

For the present study, structured knowledge questionnaire as a method of data collection was selected to assess the knowledge level of adolescents regarding impact of tobacco consumption.

This method was found to be most appropriate as the response are more educated and respond by their knowledge.

The tool consists of 2 parts.

**Part: I** Deals With Demographic Data That Is Age, Sex, Religion, Education, Family Status

**Part:II** Deals with frequency and percentage distribution of adolescents aged 12-18 years according to their knowledge scores regarding impact of tobacco consumption.

### Analysis and Interpretation

This chapter deals with the analysis and interpretation of the data related to the impact of tobacco consumption among adolescents in response to 100 students studying in Z.P.H school, Hyderabad.

#### Objectives of the Study:

1. To assess the knowledge regarding impact of tobacco consumption among adolescents.
2. To find out the association between the level of knowledge of adolescents on tobacco consumption with selected demographic variables

#### Organization of Data

The analysis and interpretation of data was planned in two sections. In this , each section will be analyzed according to data gathered based upon the 30 questions of the tools.

**Section-A:** Which includes the demographic variables of the selected sample includes age, sex, gender, and education, type of family, family status and income of family.

**Section-B:** The questions formed on the meaning of tobacco consumption, causative factors, impact of tobacco consumption and prevention.

#### Part-I

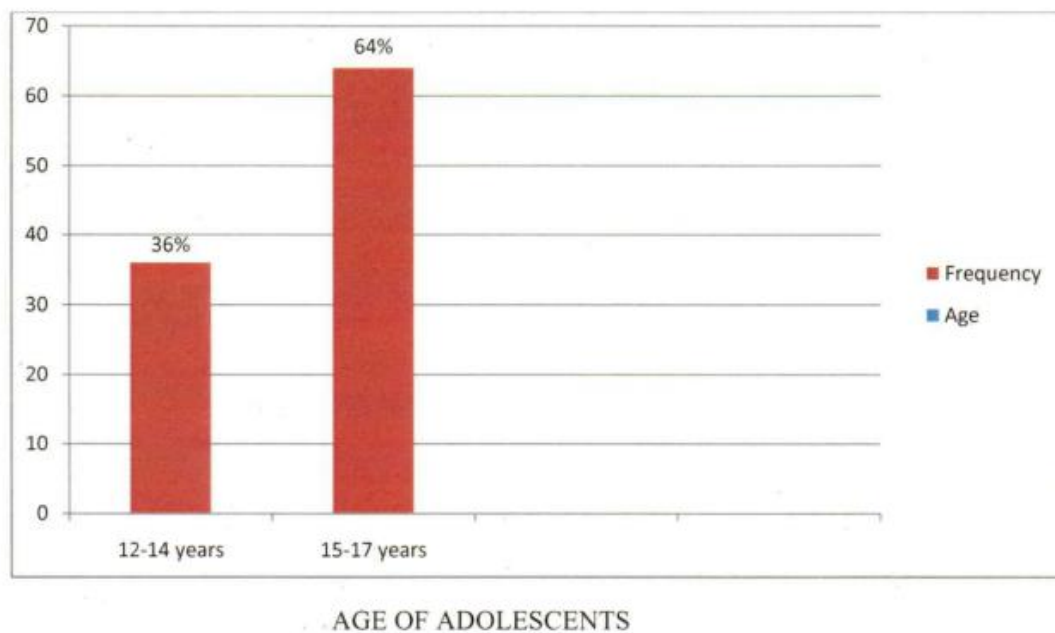
##### Distribution Of Sample According To Demographic Data

**Table -1:** Frequency and Percentage Distribution of Sample According to Age

S. No.	Age	Frequency	Percentage
1	12 to 14 years	36	36%
2	15 to 17 years	64	64%
TOTAL		100	100%

The above table shows that out of 100 samples 36% of sample belongs to 12 to 14 years age group, 64% of samples belongs to 15 to 17 years age group.

**PERCENTAGE DISTRIBUTION OF THE SAMPLES ACCORDING TO AGE**

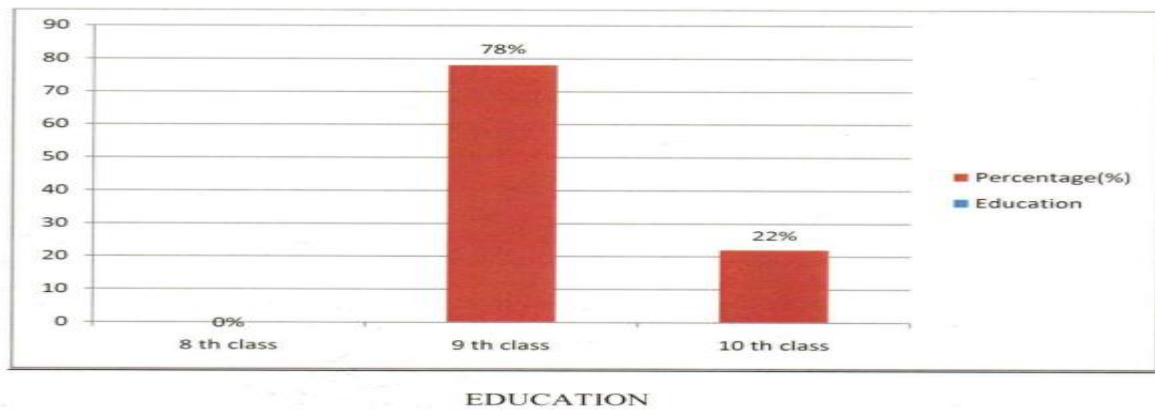


**Table II:** Frequency and Percentage Distribution According to Education.

S.NO.	Education	Frequency	Percentage
1	8 <sup>th</sup> Class	0	0%
2	9 <sup>th</sup> Class	78	78%
3	10 <sup>th</sup> Class	22	22%
Total		100	100%

The above table shows that 78% adolescents are studying in 9 class and 22% adolescents are studying in 10the class.

**Percentage Distribution Of The Sample According to the Education**



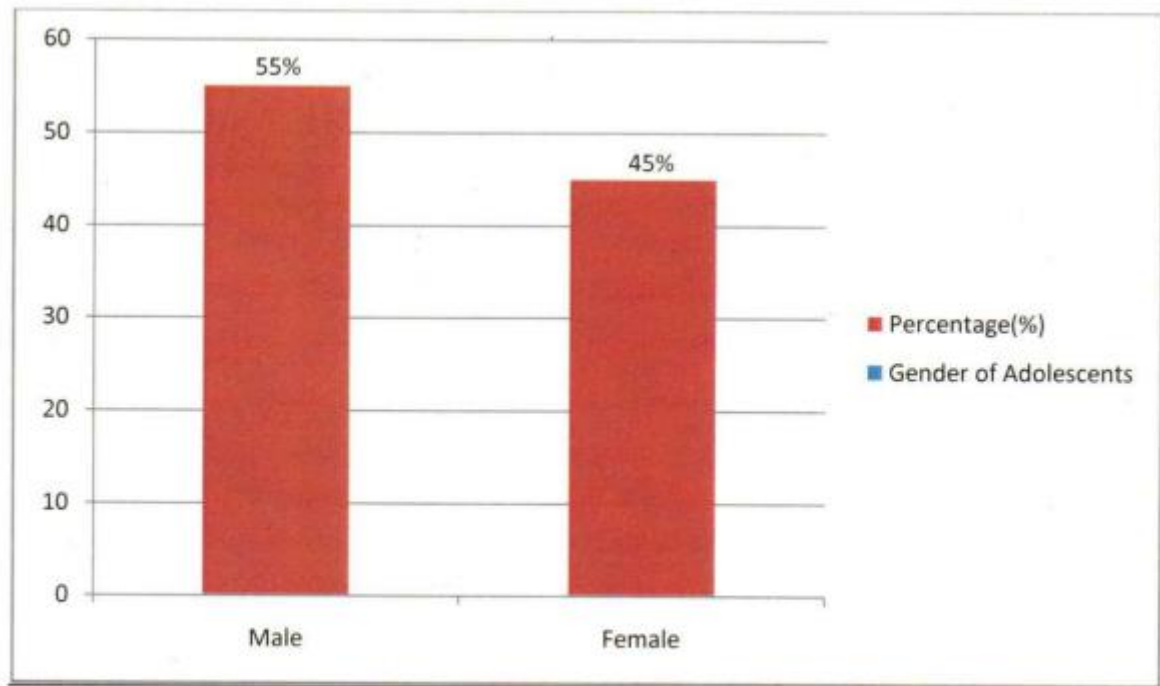
**Table III:** Frequency and Percentage Distribution According to Gender

S.No	Gender	Frequency	Percentage
1	Male	55	55%
2	Female	45	45%
Total		100	100%

The above tables shows that out of 100 samples 55 (55%) samples were male and 45 (45%) samples were female.

#### Percentage Distribution of the Samples According to the Gender





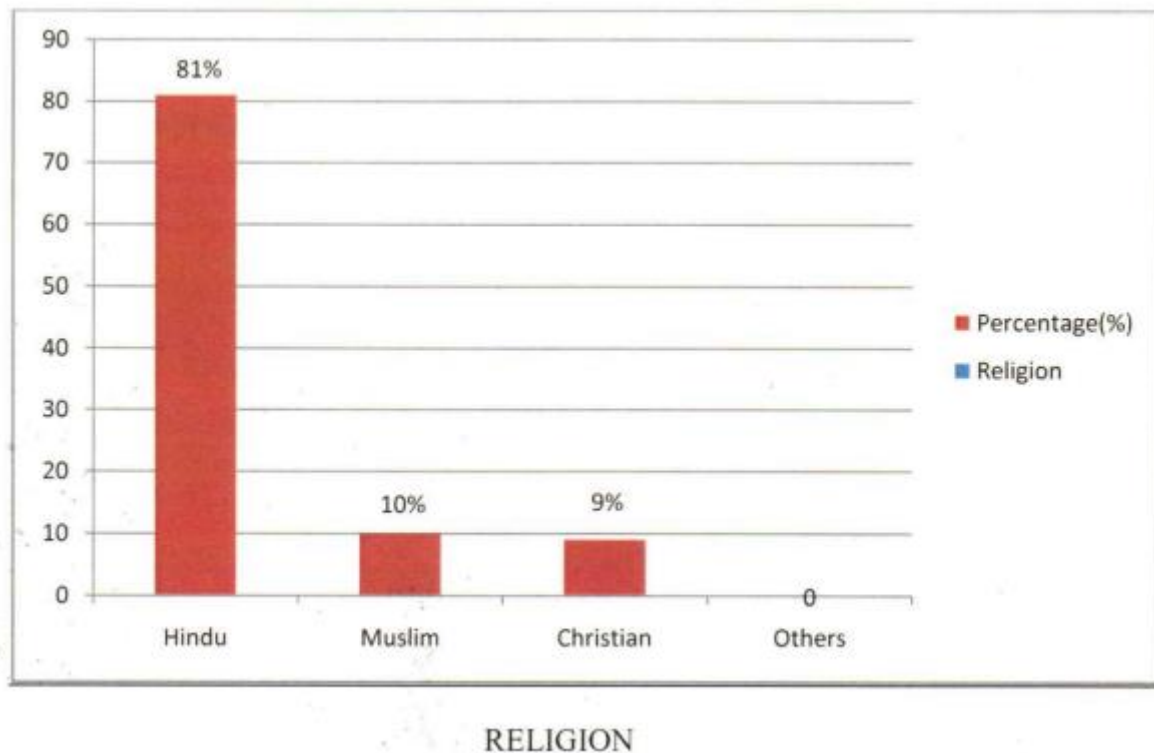
GENDER OF ADOLESCENTS

**Table-Iv:** Frequency and Percentage Distribution According to Religion

S. No	Religion	Frequency	Percentage
1	Hindu	81	81%
2	Muslim	10	10%
3	Christian	9	9%
4	Others	0	0%
T otal		100	100%

The above table shows that out of 100 samples 81% of sample belongs to Hindu, 10% of the sample belongs to Muslim, 9% of the sample belongs to Christian and no one was belongs to any other religion.

**Percentage Distribution of the Sample According to Religion.**

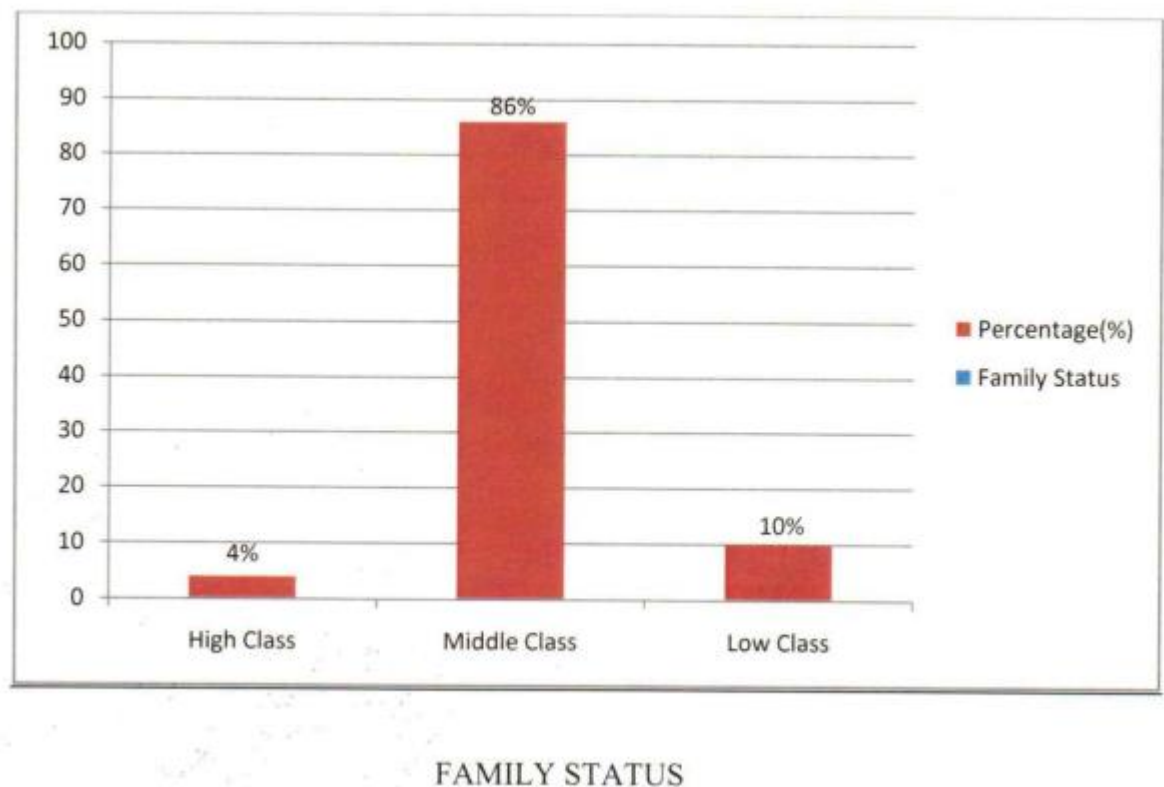


**Table-V: Frequency and Percentage Distribution According to Family Status**

S. No.	Family status	Frequency	Percentage
1	High Class	4	4%
2	Middle Class	86	86%
3	Low Class	10	10%
Tot al		100	100%

1. As per the above table 4% adolescents were high class families.
2. 86% of adolescents were middle class families.
3. 10% of adolescents were low class families.

**Percentage Distribution of the Samples According to Family Status**

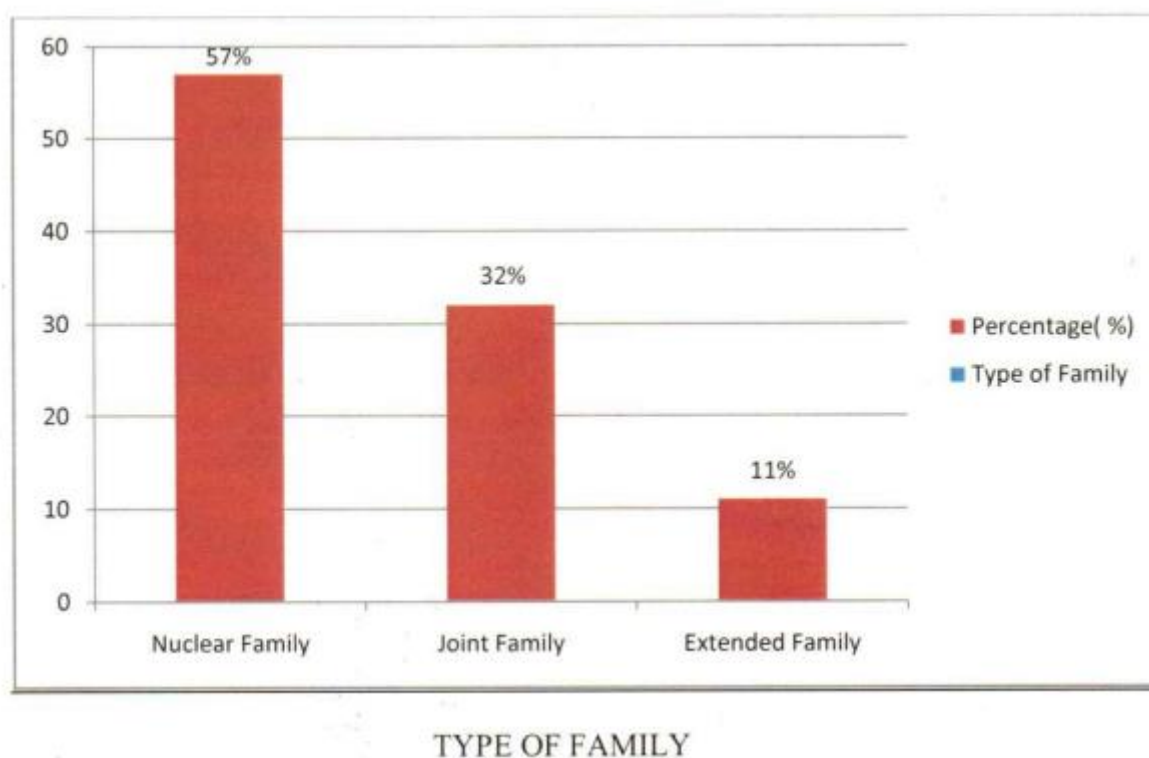


**Table – Vi:** Frequency and Percentage Distribution According to Type of Family

S. No	Type of family	Frequency	Percentage
1	Nuclear Family	57	57%
2	Joint Family	32	32%
3	Extended Family	11	
Tot al		100	100%

The above table shows that out of 100 samples 57% of sample belongs to nuclear family, 32% of samples belongs to joint family and of sample belongs to extended family.

#### Percentage Distribution of the Sample According to Type of Family

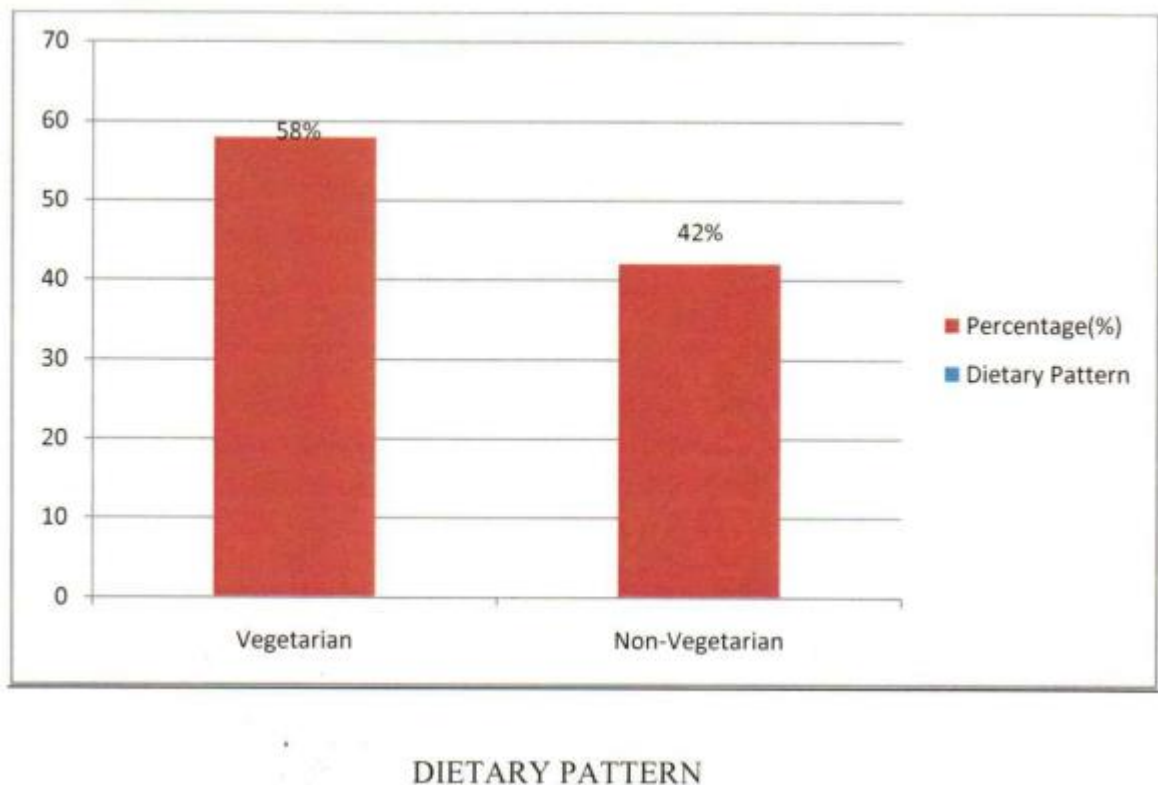


**Table – VII:** Frequency and Percentage Distribution of Sample According to Dietary Pattern

S. No.	Dietary pattern	Frequency	Percentage
1	Vegetarian	58	58%
2	Non-Vegetarian	42	42%
Total		100	100%

The above table shows that out of sample 58% of samples belong to vegetarian and 42% of samples belong to non-vegetarian.

#### Percentage Distribution of Sample according to Dietary Pattern

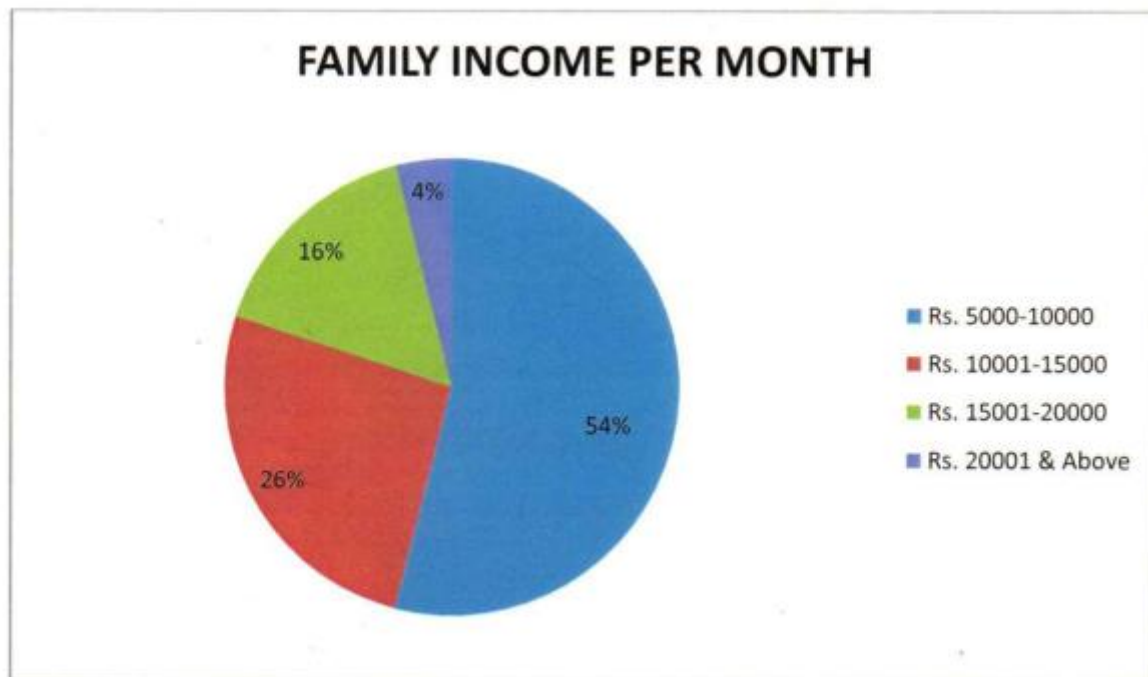


#### Frequency and Percentage Distribution of Sample According to Family Income

S. No	Family income per month	Frequency	Percentage
1	Rs. 5,000 - 10,000	54	54%
2	Rs 10,000- Rs 15,000	26	26%
3	Rs. 15,001-20,000	16	16%
4	Rs. 20,001 and above	4	4%
	<b>Total</b>	<b>100</b>	<b>100%</b>

The above table shows that out of 100 samples 54% of sample have an income of Rs 5,000-10,000, 26% have an income of Rs. 10,001 – 15,000, 16% have an income of Rs. 1,5001-20,000, 4% have an income of Rs. 20,001 and above.

#### Percentage Distribution of the Samples according to Family Income

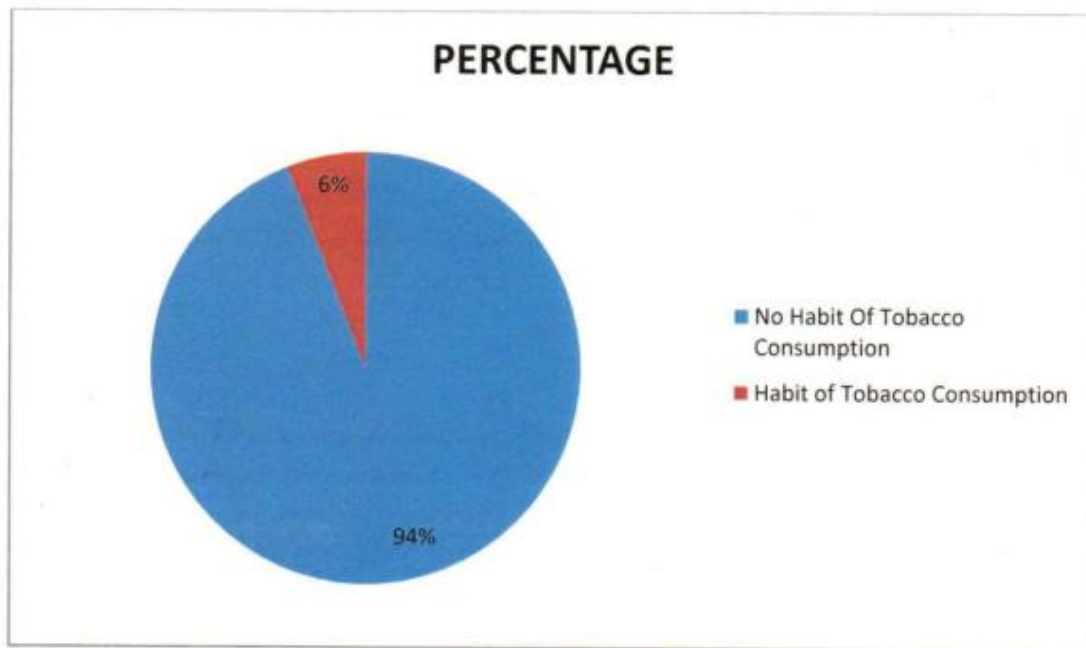


**Table -Ix:** Frequency and Percentage Sample According to Habit of Tobacco Consumption

S. No.	Habit of tobacco consumption	Frequency	Percentage
	Yes	6	6%
	No	94	94%
total		100	100%

The above table shows that out of 100 samples 6% sample having the habit of tobacco consumption and 94% of samples not having the habit of tobacco consumption.

#### Percentage Distribution of the Sample According to Habit of Tobacco Consumption

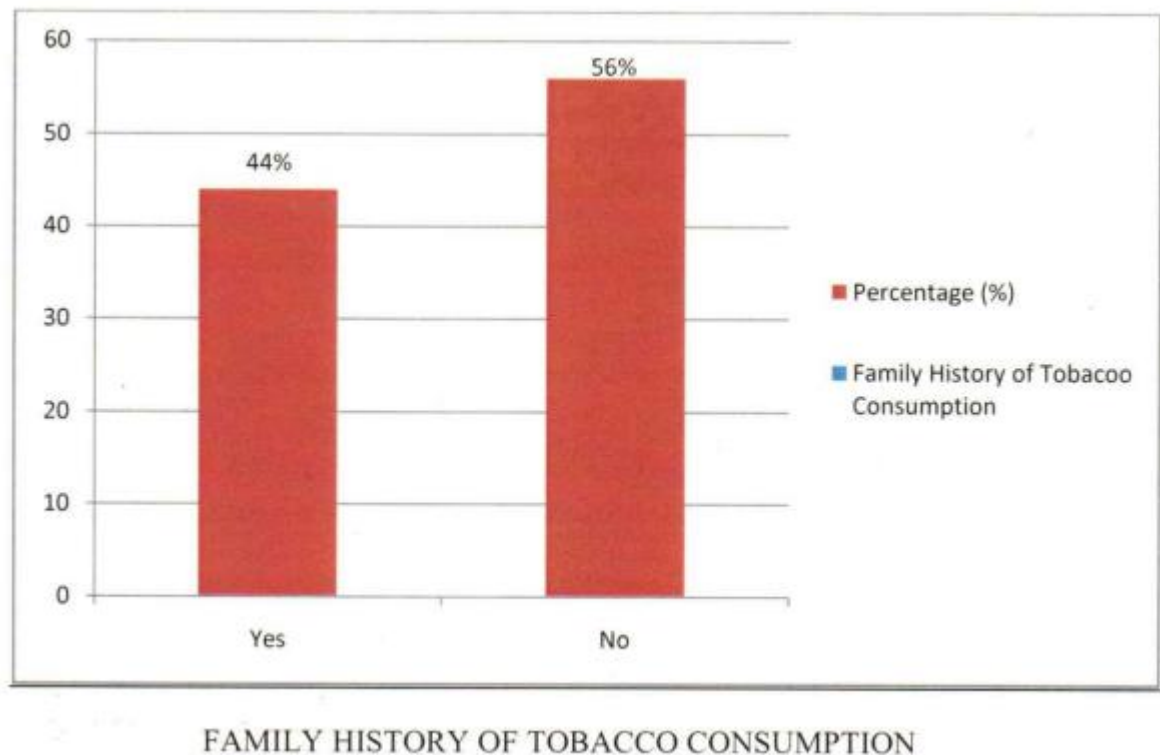


**Table -X:** Frequency and Percentage of Sample According to the Family History of Tobacco Consumption.

S. No	Family history of tobacco consumption	Frequency	Percentage
	Yes	44	44%
	No	56	56%
total		100	100%

The above table shows that 44% of the samples were having family history of tobacco consumption and 56% of the samples did not have family history of tobacco consumption.

#### **Percentage Distribution of the Samples According to the Family History of Tobacco Consumption.**



**Table – XI:** Total Knowledge Score Analysis In Tables

Frequency and Performance Distribution of Sample According to the Score Obtained Regarding Knowledge on Impact of Tobacco Consumption.

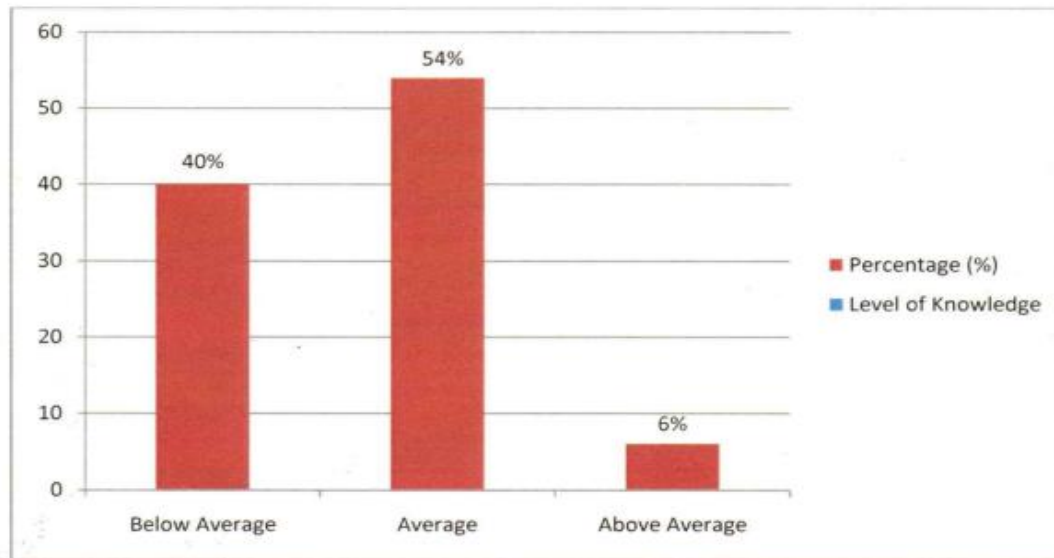
**It Deals with Frequency and Distribution of Adolescents according to the Categorization of Knowledge.**

LEVEL OF KNOWLEDGE	SCORE	FREQUENCY	PERCENTAGE
Below Average	<50%	40	40%
- Average	50-75%	54	54%
Above Average	>75%	6	6%

The above table shows that most of the adolescents 54% had average knowledge, 40% had below average knowledge, 6% had above average knowledge on impact of tobacco consumption.

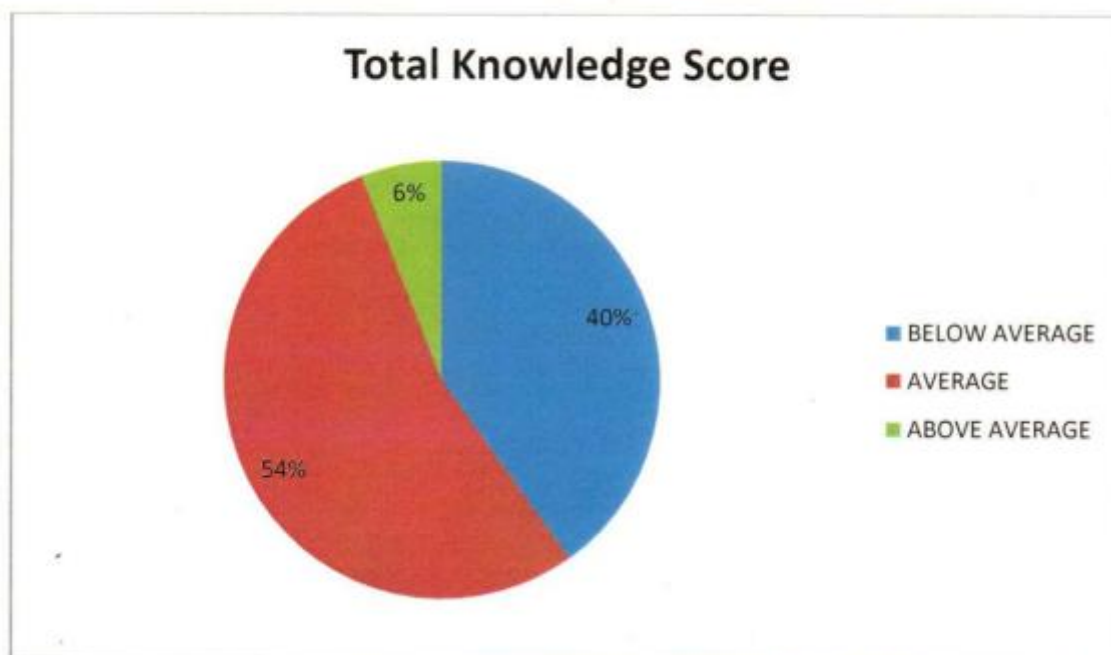
**Total Knowledge Score analysis in Bar Diagram**





LEVEL OF KNOWLEDGE

**TOTAL KNOWLEDGE SCORE ANALYSIS IN PIE DIAGRAM**



The above figure shows that out of 100 samples, 40% had below average knowledge, 54% had average knowledge, 6% had above average knowledge on impact of tobacco consumption.

**Table -XII: Frequency and Percentage Distribution of Sample**

According to Relationship between Age and Knowledge Score Regarding Impact of Tobacco Consumption

Age	Below average		Average		Above average		Total	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
12-14	17	17%	16	16%	3	3%	36	36%
15-17	23	23%	38	38%	3	3%	64	64%
Total	40	40%	54	54%	6	6%	100	100%

The above findings shows that 12-14 years of adolescents were with 17% below average knowledge, 16% average and 3% above average knowledge on impact of tobacco consumption. 15-17 years adolescents were 23% below average knowledge, 38% average and 3% above average knowledge on impact of tobacco consumption.

**Table Xiii: Frequency and Percentage Distribution of Sample Regarding Relationship Between Knowledge and Education.**

Education	Below average		Average		Above average		Total	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
8 class	0	0%	0	0%	0	0%	0	0%
9 class	33	33%	39	39%	6	6%	78	78%
10 class	7	7%	15	15%	0	0%	22	22%
TOTAL	40	40%	54	54%	6	6%	100	100%

As per the above table among 9<sup>th</sup> class adolescents 39% with average knowledge, 33% with below average and 6% with above average knowledge on impact of tobacco consumption. Among class 15% with average and 7% with above average knowledge on impact tobacco consumption

**Table- Xiv: Frequency and Percentage Distribution of Sample Regarding Relationship between Knowledge and Gender**

Gender	Below average		Average		Above average		Total	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Male	24	24%	30	30%	1	1%	55	55%
Female	16	16%	24	24%	5	5%	45	45%

<b>Total</b>	<b>40</b>	<b>40%</b>	<b>54</b>	<b>54%</b>	<b>6</b>	<b>6%</b>	<b>100</b>	<b>100%</b>
--------------	-----------	------------	-----------	------------	----------	-----------	------------	-------------

As per the above table among male adolescents 30% with average knowledge, 24% with below average and 1% with above knowledge on impact of tobacco consumption. Among female adolescents 24% with average knowledge, 16% with below average and 5% with above average knowledge on impact of tobacco consumption.

**Table Xv:** Frequency and Percentage Distribution of Sample According to Regarding Relationship Between Knowledge and Religion

Religion	Below average		Average		Above average		TOTAL	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
<b>Hindu</b>	<b>32</b>	<b>32%</b>	<b>43</b>	<b>43%</b>	<b>6</b>	<b>6%</b>	<b>81</b>	<b>81%</b>
<b>Muslim</b>	<b>4</b>	<b>4%</b>	<b>6</b>	<b>6%</b>	<b>0</b>	<b>0%</b>	<b>10</b>	<b>10%</b>
<b>Christian</b>	<b>4</b>	<b>4%</b>	<b>5</b>	<b>5%</b>	<b>0</b>	<b>0%</b>	<b>9</b>	<b>9%</b>
<b>Others</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>	<b>0</b>	<b>0%</b>
<b>Total</b>	<b>40</b>	<b>40%</b>	<b>54</b>	<b>54%</b>	<b>6</b>	<b>6%</b>	<b>100</b>	<b>100%</b>

As per the above table shows in relation to knowledge and religion, among - 100 samples, 32% Hindu have below average level of knowledge, 43% have average level of knowledge and 6% have above average level of knowledge, 6% have average level of knowledge, 5% have average level of knowledge on impact of tobacco consumption.

**Table -Xvi:** Frequency and Percentage Distribution of Sample Regarding Relationship Between Knowledge and Family Status

Family status	Below average		Average		Above average		Total	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
<b>High class</b>	<b>2</b>	<b>2%</b>	<b>2</b>	<b>2%</b>	<b>0</b>	<b>0%</b>	<b>4</b>	<b>4%</b>
<b>Middle class</b>	<b>34</b>	<b>34%</b>	<b>46</b>	<b>46%</b>	<b>6</b>	<b>6%</b>	<b>86</b>	<b>86%</b>
<b>Low class</b>	<b>4</b>	<b>4%</b>	<b>6</b>	<b>6%</b>	<b>0</b>	<b>0%</b>	<b>10</b>	<b>10%</b>
<b>Total</b>	<b>40</b>	<b>40%</b>	<b>54</b>	<b>54%</b>	<b>6</b>	<b>6%</b>	<b>100</b>	<b>100%</b>

Above table shows out of 100 samples, 2% of high-class families have below average level of knowledge and 2% of have. Average level of knowledge. • In middle class family 34% have below average level of

knowledge, 46% have average and 6% have above average level of knowledge. In low class family 4% have below average knowledge, 6% have average level of knowledge on impact of tobacco consumption.

**Table -Xvii:** Frequency And Percentage Distribution Of Sample Regarding Relationship Between Knowledge And Type Of Family

Type of Family	Below average		Average		Above average		TOTAL	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Nuclear	24	24%	29	29%	4	4%	57	57%
Joint	10	10%	20	20%	2	2%	32	32%
Extended	6	6%	5	5%	0	0%	11	11%
<b>Total</b>	<b>40</b>	<b>40%</b>	<b>54</b>	<b>54%</b>	<b>6</b>	<b>6%</b>	<b>100</b>	<b>100%</b>

The Above table shows in relation to knowledge and type of family among 100 samples in nuclear family 24% have below average level of knowledge, 4% have above average level of knowledge. In joint family 10% have below average level of knowledge, 20% have average level of knowledge, 2% have above average level of knowledge. In extended family 6% have below average level of knowledge and 5% have average level of knowledge.

**Table -Xviii:** Frequency And Percentage Distribution Of Sample Regarding Relationship Between Knowledge And Dietary Pattern

Dietary pattern	Below average		Average		Above average		Total	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Vegetarian	18	18%	37	37%	3	3%	58	58%
Non-Vegetarian	22	22%	17	17%	3	3%	42	42%
<b>Total</b>	<b>40</b>	<b>40%</b>	<b>54</b>	<b>54%</b>	<b>6</b>	<b>6%</b>	<b>100</b>	<b>100%</b>

The Above table shows in relation to knowledge and dietary pattern, among 100 samples, in 18% vegetarian have below average knowledge, 37% have average knowledge and 3% have above average knowledge. Among nonvegetarian 22% of have below average knowledge, 17% have average knowledge and 3% have above average level of knowledge.

**Table -Xix :** Frequency and Percentage Distribution of Sample Regarding Relationship Between Knowledge And Income of Family

Income of family (Per month) in rupees)	Below average		Average		Above average		TOTAL	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
5000-10000	23	23%	26	26%	5	5%	54	54%
10001-15000	11	11%	15	15%	0	0%	26	26%
15001-20000	5	10%	10	10%	1	1%	16	16%
20000 and above	1	1%	3	3%	0	0%	4	4%
TOTAL	40	40%	54	54%	6	6%	100	100%

The Above table shows out of 100 samples from Rs. 5,000 to 10,000, income group of samples 23% have below average level of knowledge, 26% have average level of knowledge, 5% have above average level of knowledge, Among Rs. 10,001 to 15,000 income group of samples 11% have below average level of knowledge, 15% have average level of knowledge. Among Rs. 15,001 to 20,000 income group of 5% have below average level of knowledge, 10% have average and 1% have above average level of knowledge. Among Rs. 20,000 and above 1% have below average level of knowledge and 3% have average level of knowledge.

**Table -Xx :** Frequency and Percentage Distribution of Sample Regarding Relationship Between Knowledge and Habbit of Tobacco Consumption

Habit Of Tobacco Consumption	Below average		Average		Above average		TOTAL	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
YES	2	2%	2	2%	2	2%	6	6%
NO	38	38%	52	52%	4	4%	94	94%
TOTAL	40	40%	54	54%	6	6%	100	100%

The Above table shows in relation to knowledge and habit of tobacco consumption, among 100 samples, among habit of tobacco consumption 2% have below average knowledge, 2% have average knowledge, 2% have average level of knowledge and 2% have above average level of knowledge. Among samples not having habit of tobacco consumption 38% have below average and 4% have above average level of knowledge on impact of tobacco consumption.

**Table -Xxi:** Frequency And Percentage Distribution Of Sample Regarding Relationship Between Knowledge And Family History Of Tobacco Consumption

Family History of Tobacco Consumption	Below average		Average		Above average		TOTAL	
	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage	Frequency	Percentage
Yes	21	21%	21	21%	2	2%	44	44%
No	19	19%	33	33%	4	4%	56	56%
Total	40	40%	54	54%	6	6%	100	100%

The Above table shows in relation to knowledge and family history of tobacco consumption, among 100 samples family, family history of tobacco consumption 21% have average level of knowledge, 2% have above average level of knowledge. Among samples were not having family history of tobacco consumption 19% have below average level of knowledge and 6% have above average level of knowledge.

### Summary

This chapter presents the summary, limitations, implications, and recommendations. The purpose of study was to assess the knowledge of adolescents regarding impact of tobacco consumption.

### OBJECTIVES

To assess the knowledge regarding impact of tobacco consumption among the adolescents

To find out the association between the level of knowledge of adolescents on tobacco consumption with selected demographic variables.

➤ A review of literature had helped the investigation to gain knowledge in depth about the content.

➤ It also helped to develop the instrument data collection and for analysis.

➤ The setting of study was at Z.P.H school, Hyderabad. A structural questionnaire consisted of two parts.

1. The population of the study were adolescents' students age group of 12 to 17 years at Z.P.H. School, Hyderabad.

### LIMITATIONS

As there was no standardized tool available the tool had to be developed by the investigation for the purpose of the study. The study was limited to the age group of between 12 to 17 years.

### IMPLICATIONS

The findings of study revealed that the adolescents (regarding impact of tobacco consumption) had below average, average, above average of knowledge regarding impact of tobacco consumption.

### **Nursing Practice**

Community health nurses can help adolescents in the prevention of tobacco consumption and to bring Our Awareness about the Mortality Rate.

### **Nursing Administrations**

Nurse administrators need to encourage and plan for guidance about tobacco consumption-prevalence, risk factors, predisposing factors, various diseases caused due to tobacco consumption.

### **Nursing Education**

Community health nurses must educate adolescents in regard to tobacco consumption.

### **Recommendations**

1. A similar study can be conducted on a large sample to validate the findings of the present study.
2. A study can be conducted on different settings to strengthen the findings comparative can be done in school settings.
3. A similar study can be conducted in the community settings.

## **REFERENCES**

1. Brunner, Siddharth's "Textbook of Medical Surgical Nursing" Twelfth Edition, published by Wolter's Kluwer 760-761.
2. Basavanthappa, BT "Textbook of community Health Nursing" II Edition, published in 2008, publishers Jaypee Brothers 695-698.
3. Dorothy R .Marlow, "Textbook of Pediatrics 768.
4. Gupta PC "Textbook of preventive & social Medicine", 3<sup>rd</sup> Edition, published, published by Jaypee Publishers 57-61
5. Joyce M Black. Textbook of Medical Surgical Nursing, 7<sup>th</sup> edition, published in 2004, Elsevier publishers, 1839
6. Park K, "Textbook of preventive & social Medicine, Edition, M/S Banarsidas Bhanot Publishers, 2009;388
7. Rooban T, "Textbook of Foundation of Community Medicine", 3<sup>rd</sup> Edition published in 2008, by Elsevier 76-85.