



A descriptive study to assess knowledge regarding substance use disorder and its prevention among young adults in a selected rehabilitation Centre in Amravati

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Abstract

Background: Substance Use Disorder (SUD) has emerged as a major public health crisis significantly affecting young adults globally and within India, particularly disrupting the demographic dividend. This transitional phase makes young people highly vulnerable to peer influence, stress, and substance experimentation.

Objectives: The primary objective was to assess the overall baseline knowledge regarding Substance Use Disorder and its prevention among young adults in a selected rehabilitation centre in Amravati. Secondary objectives included identifying specific knowledge gaps and exploring statistical associations with selected demographic variables.

Methodology: A quantitative descriptive research approach with a non-experimental research design was adopted. The study was conducted at the Baba Rehabilitation Health Care Center in Amravati. A sample of 30 young adults aged 18 to 25 years was selected using a non-probability purposive sampling technique. Data collection was performed using a rigorously validated 20-item Structured Knowledge Questionnaire translated into Marathi (reliability $r = 0.85$).

Results: Demographic findings indicated that 70% of the sample belonged to the highly vulnerable 18–23 age bracket, 60% were male, and 66.67% resided in rural areas. Notably, 76.66% had achieved a higher secondary or graduate-level education. Remarkably, 0.00% of the participants possessed an "Adequate" level of knowledge regarding SUD and its prevention. The vast majority (76.67%) demonstrated only "Moderate" knowledge, while 23.33% exhibited completely "Inadequate" understanding. The overall group mean score was heavily depressed at 11.40 ± 1.57 out of 20. Inferential statistical testing utilizing the Chi-square test revealed no significant association between knowledge scores and any demographic variables, including formal education ($p = 0.900$).

Conclusion: The study conclusively demonstrates a severe, universal deficit in clinical health literacy regarding addiction biology and relapse prevention among recovering youth, irrespective of their academic backgrounds. This underscores the critical necessity to integrate structured, mandatory health education modules into routine rehabilitation frameworks beyond pure physical detoxification.

Keywords: Substance use disorder, baseline knowledge, prevention, young adults, rehabilitation centre, Amravati, mental health nursing

Introduction

Background of the Study

Adolescence and young adulthood constitute a critical transitional phase in human life. For most individuals, this period is marked by significant physical, psychological, and social changes. As young people navigate academic pressures, career choices, and evolving personal relationships, they are highly vulnerable to external influences and internal stress. Because of this, their coping mechanisms play a massive role in shaping their future trajectory. As global connectivity increases and societal norms rapidly shift, young adults are exposed to a wide variety of lifestyle choices.

However, alongside modern advancements, this demographic is increasingly encountering the severe hazard of substance abuse. Young adults are frequently exposed to alcohol, tobacco, and illicit drugs through peer networks, media influence, or as a misguided mechanism to cope with psychological distress. In India, the demographic dividend is one of the country's greatest assets, with a massive percentage of the population falling within the youth bracket. While this youth population is crucial for economic

and social growth, the rising trend of substance experimentation poses a significant daily threat. From major metropolitan cities to growing semi-urban centers, substance abuse is destroying the livelihoods of countless families.

While occasional experimentation is often dismissed as a phase of youth, the progression from use to abuse poses a severe threat. The continuous consumption of psychoactive substances alters brain chemistry, creating a highly detrimental cycle of dependency. When young adults fall into this cycle, they risk developing a severe, chronic condition known as Substance Use Disorder (SUD).

Problem Statement

A Descriptive Study to Assess Knowledge Regarding Substance Use Disorder and Its Prevention among Young Adults in a Selected Rehabilitation Centre in Amravati.

Objectives of the Study

Primary Objective

- To assess the overall level of knowledge regarding Substance Use Disorder and its prevention among young adults in a selected rehabilitation centre.

Secondary Objectives

- To assess the specific knowledge regarding the causes, risk factors, signs, and symptoms of Substance Use Disorder among the young adults.
- To assess the specific knowledge regarding the prevention and management strategies for Substance Use Disorder.
- To find out the association between the knowledge scores of the young adults and their selected demographic variables (such as age, gender, education, occupation, and residential area).

Operational Definitions

1. **Assess:** Refers to the process used to evaluate or judge the quality, value, nature, or importance of something, specifically measuring the participants' understanding via a structured tool.
2. **Knowledge:** Focuses on the awareness, comprehension, and application of facts about substance use disorder and its prevention, as measured by the scores obtained from the structured questionnaire.
3. **Substance Use Disorder (SUD):** A persistent, compulsive use of drugs or alcohol despite significant harm or negative consequences in a person's life, heavily affecting their health, relationships, work, and finances.
4. **Prevention:** Refers to the participants' understanding of proactive measures—such as managing peer pressure, avoiding high-risk environments, and understanding family influence—as reflected in their questionnaire responses.
5. **Young Adult:** Chronologically refers to individuals within the developmental age bracket of 18 to 25 years participating in this research study.
6. **Rehabilitation Centre:** Refers to a formally recognized healthcare or social service facility providing treatment, counseling, and recovery support services for individuals with substance use disorder.

Review of Literature

The review of literature is helpful to gain strong knowledge to carry out research. For the purpose of logical sequence, the review of literature for this study has been organized under the following sections:

- **Section A:** Literature related to the prevalence of substance abuse in India and Maharashtra.
- **Section B:** Literature related to descriptive studies assessing knowledge regarding substance abuse in Maharashtra.
- **Section C:** Literature related to descriptive studies assessing knowledge and profiles of substance users in Rehabilitation Centers in India.
- **Section D:** Literature related to global contexts regarding substance use knowledge.

Summary of Key Reviewed Literature

Recent studies in Maharashtra and across India show an escalating trend of dependency among youth. Mohokar and

Mahajan (2025) ^[6] reported an overall high prevalence of substance use in urban slums of Maharashtra, with alcohol consumption being the most common at 38%, followed by tobacco smoking (31%) and cannabis (6%). Similarly, Pawar et al. (2025) ^[7] identified a hidden epidemic in semi-urban educational hubs, noting that 68% of active users possessed very poor knowledge regarding the long-term neurobiological and hepatic consequences of their habits, with peer pressure (52%) and academic stress (45%) acting as primary catalysts.

In clinical settings, studies by Kaur et al. (2024) at drug de-addiction centers brought to light that while patients easily recognized physical withdrawal symptoms, an overwhelming 84% were completely ignorant regarding the identification of internal psychological triggers and external precipitants, leading directly to high relapse rates. Global surveys by Avcı and Yıldız (2025) confirmed that access to modern digital information and developed educational systems does not automatically translate into deep medical literacy regarding addiction pathology, as over 70% of global youth failed to understand the underlying mechanisms of dependency.

Research Methodology

Research Approach and Design

A Quantitative Descriptive Research Approach with a Non-Experimental Descriptive Research Design was adopted for this study. This configuration is highly appropriate because the objective is to observe, quantify, and describe the existing baseline knowledge regarding Substance Use Disorder and its prevention as it naturally occurs, without introducing any clinical modifications or educational interventions. The design is symbolically represented as a single observation: O.

Setting, Population, and Sample

The study was conducted at the Baba Rehabilitation Health Care Center in Amravati district, Maharashtra. The target population comprises young adults suffering from SUD undergoing recovery programs. The final sample size was fixed at 30 young adults who met all established eligibility parameters. A Non-Probability Purposive Sampling Technique was used to carefully select stable, consenting individuals within the specified 18-25 age bracket.

Description of the Tool

The data collection instrument consisted of a Structured Questionnaire divided into two main parts:

- **Section A: Demographic Data** (5 items: Age, Gender, Educational Status, Occupation, and Residential Area).
- **Section B: Knowledge and Awareness Evaluation** (20 multiple-choice questions covering basic awareness, organ impact, causes, and structured prevention/rehabilitation strategies).

The tool was translated into Marathi, validated by an expert clinical panel, and demonstrated excellent reliability ($r = 0.85$) via split-half technique computation during a pilot run.

Data Analysis and Interpretation

This chapter presents the statistical breakdown and analytical evaluation of the empirical data gathered from the cohort of 30 young adults. Hypotheses were tested at a 0.05 level of significance using the Chi-square (χ^2) statistical test.

Demographic Distribution Analysis

S.NO	Demographic variables	Frequency (F)	Percentage (%)
1	Age (in years)		
	a) 18 - 20 years	11	36.67%
	b) 21 - 23 years	10	33.33%
	c) 24 - 26 years	7	23.33%
	d) Above 26 years	2	6.67%
2	Gender		
	a) Male	18	60.00%
	b) Female	12	40.00%
3	Educational Status		
	a) 5th Pass	1	3.33%
	b) 10th Pass	6	20.00%
	c) 12th Pass	16	53.33%
	d) Graduate	7	23.33%
4	Occupation		
	a) Student	11	36.67%
	b) Business	5	16.67%
	c) Laborer	11	36.67%
	d) Teaching	3	10.00%
5	Residential Area		
	a) Rural	20	66.67%
	b) Urban	10	33.33%

Overall Assessment of Baseline Knowledge

Knowledge category	Score range	Frequency (F)	Percentage (%)
Inadequate Knowledge	0 - 10	7	23.33%
Moderate Knowledge	11 - 15	23	76.67%
Adequate Knowledge	16 - 20	0	0.00%

The absolute minimum score obtained was 8, while the maximum was 14. The group mean score was calculated to be 11.40 with a standard deviation of 1.57, highlighting a clear universal knowledge deficit.

Inferential Analysis (Chi-Square Testing)

To determine statistical associations, a Chi-square test was executed against demographic parameters. The results revealed no significant association across any categories: Age ($p = 0.565$), Gender ($p = 0.134$), Educational Status ($p = 0.900$), Occupation ($p = 0.928$), and Residential Area ($p = 1.000$). All p -values were strictly greater than 0.05; hence, the Null Hypothesis (H_0) was accepted, confirming that knowledge deficits are distributed uniformly regardless of academic or socioeconomic background.

Discussion & Conclusion

Discussion of Findings

The empirical results collected in this research confirm that while a significant portion of young adults entering recovery possess a formal high school or university degree (over 76%), their specific comprehension of addiction biology and relapse prevention is profoundly insufficient. None of the participants achieved an adequate level of understanding. This aligns with national reports indicating that standard educational channels fail to impart practical, life-saving health literacy regarding substance abuse pathology.

Conclusion

The study draws a critical and urgent clinical conclusion: the conventional approach of focusing strictly on physical medical detoxification and managing physiological withdrawal symptoms is highly incomplete. If young adults are discharged back into society without the cognitive tools to identify and manage internal psychological triggers and

external environmental cues, the cycle of relapse remains inevitable. Rehabilitation centers must transition to a more holistic framework, embedding mandatory structured health education, trigger mapping workshops, and cognitive-behavioral counseling modules into routine nursing practices to ensure sustainable, long-term sobriety.

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