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Original Article

"A Quasi Experimental Study to Evaluate the Effectiveness of Planned Teaching Program on Knowledge Regarding Contributing Factors and Ill Effects of Virtual Betting Activities Among Nursing Students at Selected College of Bareilly, U.P."

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ABSTRACT

Background: Virtual betting activities have emerged as an increasing digital risk behaviour among young people, particularly with the easy availability of internet-based betting platforms and applications. Inadequate awareness regarding the contributing factors and ill effects of virtual betting activities may negatively influence students' behaviour, academic performance, financial well-being, and overall health. Nursing students, as future health professionals, need adequate knowledge regarding such emerging behavioural and digital health risks. Therefore, the present study was undertaken to evaluate the effectiveness of a planned teaching programme on knowledge regarding contributing factors and ill effects of virtual betting activities among nursing students. Objective: • To assess the knowledge regarding contributing factors and ill effects of virtual betting activities among nursing students. •To evaluate the effectiveness of planned teaching programme on knowledge regarding contributing factors and ill effects of virtual betting activities among nursing students. •To compare the pre-test and post-test knowledge scores regarding contributing factors and ill effects of virtual betting activities among nursing students. •To find out the association between the pre-test knowledge score regarding contributing factors and ill effects of virtual betting activities and selected socio-demographic variables among nursing students. Methodology: A quantitative research approach with a quasi-experimental research design was adopted for the study. The study was conducted among 60 nursing students studying at a selected college of Bareilly, Uttar Pradesh. The participants were selected using a non-probability convenient sampling technique. Data were collected using a socio-demographic proforma and a structured knowledge questionnaire regarding contributing factors and ill effects of virtual betting activities. A pre-test was conducted, followed by the administration of a planned teaching programme. The post-test was conducted after 7 days using the same structured knowledge questionnaire. The collected data were analysed using descriptive and inferential statistics. Results: The findings revealed that in the pre-test, 39 (65.0%) nursing students had poor knowledge, 21 (35.0%) had average knowledge and none had good knowledge. Following administration of the planned teaching programme, the post-test findings showed that 42 (70.0%) students had average knowledge, 18 (30.0%) had good knowledge, and none remained in the poor knowledge category. The mean pre-test knowledge score was 9.25 ± 3.27, which increased to 18.30 ± 4.26 in the post-test, with a mean difference of 9.05. The calculated paired t-value was 31.36 with df = 59, which was statistically significant at $p < 0.001$, indicating that the planned teaching programme was effective in improving the knowledge of nursing students regarding contributing factors and ill effects of virtual betting activities. No statistically significant association was found between the pre-test knowledge score and selected socio-demographic variables, including age, gender, type of family, course and year of study, daily digital betting duration, previous awareness regarding virtual betting activities, and source of information. Conclusion: The study concluded that nursing students had inadequate knowledge regarding contributing factors and ill effects of virtual betting activities before the intervention. The planned teaching programme was found to be effective in significantly improving their knowledge. Therefore, planned teaching programmes may be used as an effective educational strategy to strengthen awareness regarding virtual betting activities and their potential ill effects among nursing students.

Relevant conflicts of interest/financial disclosures: The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

ABSTRACT

Keywords: Virtual Betting Activities Planned Teaching Programme, Knowledge, Contributing Factors, Ill Effects, Nursing Students.

INTRODUCTION

The rapid advancement of digital technology has transformed almost every aspect of human life, including communication, education, healthcare, entertainment, banking, and financial transactions.[1] Easy access to smartphones, high-speed internet, digital payment systems, and mobile applications has created countless opportunities for learning and social interaction. However, these technological developments have also introduced several new behavioural risks, one of the most concerning being the rapid expansion of **virtual betting activities**. Unlike conventional gambling, virtual betting allows individuals to place bets instantly through online platforms without visiting physical betting centres.[2] The convenience of round-the-clock accessibility, instant payment methods, and continuous promotional advertisements has made virtual betting increasingly attractive, particularly among adolescents and young adults.[3]

Virtual betting refers to the placement of wagers on digitally simulated sporting events, casino games, fantasy sports, electronic gaming platforms, or other online events using websites or mobile applications. These activities may involve real money or virtual currency and are designed to provide immediate betting opportunities within a short period.[4] In recent years, virtual betting has evolved into a rapidly growing global industry. Continuous technological innovations, widespread smartphone ownership, expansion of online payment services, and increasing digital literacy have accelerated the growth of internet-based gambling platforms worldwide. [6] According to recent international evidence, millions of individuals participate in various forms of online betting every year, with sports betting representing one of the fastest-growing sectors.[7] Scientific research indicates that digital betting platforms have become more engaging than traditional gambling because they provide immediate results, shorter betting cycles, and constant opportunities to place multiple bets within a limited period. Such features encourage repetitive gambling behaviour and increase the likelihood of excessive betting among vulnerable individuals. [8]

NEED FOR STUDY

Scientific evidence strongly indicates that online betting is associated with greater health risks than traditional forms of gambling. A 2024 systematic review and meta-analysis published in The Lancet Public Health, which included representative data from 68 countries, reported that approximately 46.2% of adults and 17.9% of adolescents had participated in gambling during the previous year. More importantly, the prevalence of problem gambling among individuals involved in online casino and virtual betting reached 15.8%, compared with only 1.41% in the general adult population. These findings demonstrate that online betting substantially increases the likelihood of gambling-related harm and behavioural addiction, emphasizing the urgent need for preventive educational interventions among young people. [9]

Young adults enrolled in colleges and universities constitute one of the most vulnerable populations because they frequently use smartphones, internet-based applications, digital payment systems, and social media platforms. Exposure to aggressive online advertisements, promotional bonuses, peer influence, curiosity, financial expectations, and the misconception of earning quick money often motivates students to experiment with virtual betting applications. [10]

International research has consistently demonstrated that gambling-related harm extends far beyond financial loss. Studies have reported strong associations between problematic online betting and anxiety, depression, chronic stress, sleep disturbances, reduced academic performance, impaired concentration, poor decision-making, impulsive behaviour, substance use, and suicidal thoughts. Such multidimensional consequences highlight that virtual betting affects not only individual health but also educational achievement, family relationships, workplace productivity, and community well-being. Consequently, many researchers now recommend that gambling prevention should be integrated into educational and

public health programmes targeting adolescents and young adults.[11]

Although virtual betting has become increasingly popular worldwide, there is a noticeable shortage of research focusing on knowledge regarding virtual betting activities among nursing students, particularly within the Indian context. Most available studies have primarily investigated gambling prevalence, addiction, or psychological outcomes among the general population, while relatively few have assessed whether nursing students possess adequate knowledge regarding the contributing factors, warning signs, health consequences, legal aspects, and preventive strategies related to virtual betting. This lack of evidence suggests that important educational needs remain unaddressed within nursing institutions.[12]

Considering the increasing accessibility of virtual betting platforms, the growing participation of young adults in online betting, the limited awareness regarding its contributing factors and ill effects, the scarcity of Indian research involving nursing students, and the professional responsibility of nurses in promoting behavioural health, the investigator considered it essential to conduct the present study. Evaluating the effectiveness of a Planned Teaching Programme will provide evidence regarding its usefulness in improving knowledge among nursing students and may contribute to the development of educational strategies aimed at preventing gambling-related harm within educational institutions and the wider community.[13]

Therefore, the present study is undertaken to evaluate the effectiveness of a Planned Teaching Programme on knowledge regarding the contributing factors and ill effects of virtual betting activities among nursing students. The findings of the study will help in assessing the existing level of knowledge, identifying educational gaps, and determining the effectiveness of a structured teaching programme in improving students' awareness. The results may also assist nurse educators, educational institutions, and health professionals in developing appropriate educational strategies to prevent virtual betting-related harm and promote responsible digital behaviour among nursing students.

OBJECTIVE OF THE STUDY

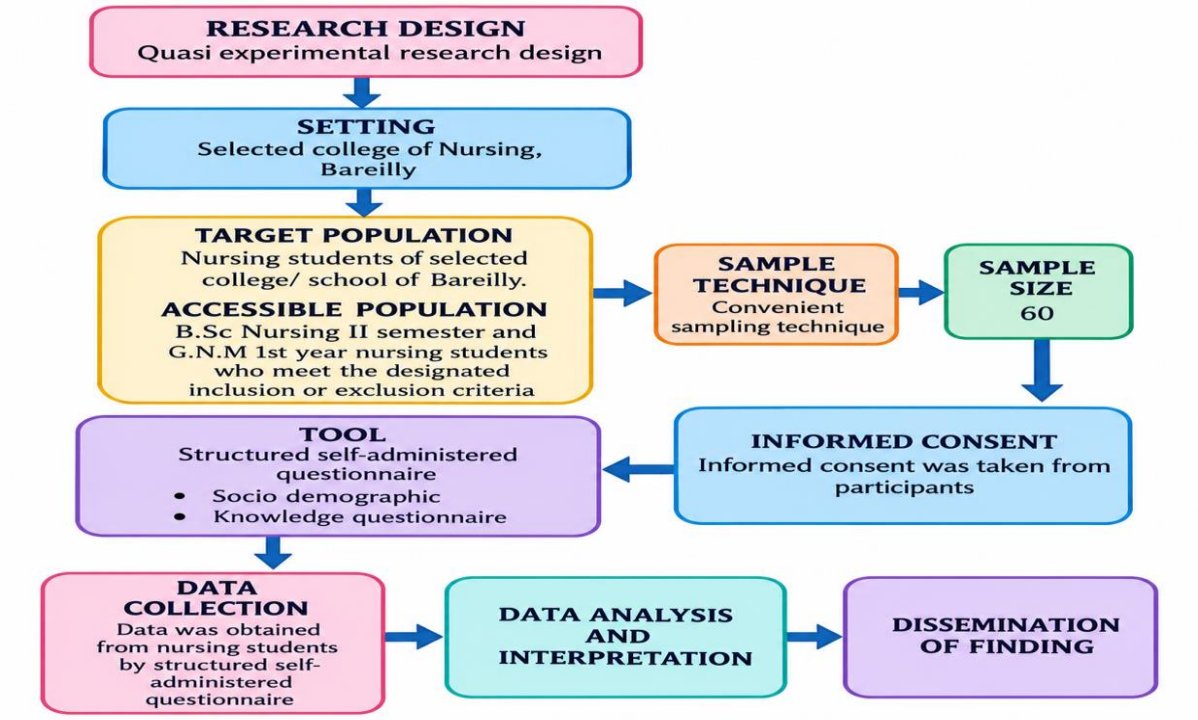
1. To evaluate the effectiveness of planned teaching program on virtual betting activities among nursing students.
2. To find out the association between the pre-test knowledge score of nursing students with their selected to two demographic variables.

HYPOTHESIS

H1: There will be significant difference between pre-test and post-test knowledge score regarding contributing factors and ill effects of virtual betting activities among nursing students.

H2: There will be a significant association between the pre-test knowledge scores of nursing students and their selected demographic variables on virtual betting activities.

MATERIALS & METHODS:



ANALYSIS AND INTERPRETATION:

Table 1: Frequency and Percentage Distribution of Nursing Students in Terms of Demographic Variables N = 60

S. No.	Socio-Demographic Variables	Frequency (f)	Percentage (%)
1	**Age (in years)**		
	a) Below 18 years	20	33.3
	b) 18–25 years	37	61.7
	c) 26–35 years	3	5.0
	d) Above 35 years	0	0.0
2	**Gender**		
	a) Male	31	51.7
	b) Female	29	48.3
3	**Type of Family**		
	a) Nuclear	30	50.0
	b) Joint	20	33.3
	c) Extended	7	11.7
	d) Single-parent	3	5.0
4	**Course & Year of Study**		
	a) B.Sc. Nursing 1st Semester	34	56.7
	b) GNM 1st Year	26	43.3
5	**Daily Digital Betting Duration**		
	a) No Participation	57	95.0
	b) 1–3 hours per day	3	5.0
	c) 4–6 hours per day	0	0.0
	d) More than 6 hours per day	0	0.0
6	**Have you heard about virtual betting activities before?**		
	a) Yes	26	43.3
	b) No	34	56.7
7	**Source of Information**		
	a) Social media	28	46.7

S. No.	Socio-Demographic Variables	Frequency (f)	Percentage (%)
	b) Friends/Peers	15	25.0
	c) Television/News	7	11.7
	d) Internet/Website	10	16.7

Table 10: Comparison of the pre-test and post-test level of knowledge score

Level of Knowledge	Score	Pre-test Frequency (f)	Pre-test Percentage (%)	Post-test Frequency (f)	Post-test Percentage (%)
Poor Knowledge	0–10	39	65.0	0	0.0
Average Knowledge	11–20	21	35.0	42	70.0
Good Knowledge	21–30	0	0.0	18	30.0
Total	0–30	**60**	**100.0**	**60**	**100.0**

Table 11: Effectiveness of Planned Teaching Programme and Testing of the Research Hypothesis N=60

Test	Mean	Standard Deviation	Mean Difference	Calculated "t" Value	df	p-value
Pre-test	9.25	3.27	9.05	31.36	59	<0.001
Post-test	18.30	4.26				

Table 12: Association between the pre-test level of knowledge score and the selected demographic variables of adolescent girls.

S. No.	Demographic Data	Poor Knowledge n (%)	Average Knowledge n (%)	Good Knowledge n (%)	Chi-Square (χ^2)	df	p-value	Result
1	**Age (in years)**							
	a) Below 18 years	12 (60.0)	8 (40.0)	0 (0.0)	1.994	2	0.369	NS
	b) 18–25 years	26 (70.3)	11 (29.7)	0 (0.0)				
	c) 26–35 years	1 (33.3)	2 (66.7)	0 (0.0)				
	d) Above 35 years	0 (0.0)	0 (0.0)	0 (0.0)				
2	**Gender**							
	a) Male	18 (58.1)	13 (41.9)	0 (0.0)	1.356	1	0.244	NS
	b) Female	21 (72.4)	8 (27.6)	0 (0.0)				
3	**Type of Family**							
	a) Nuclear	19 (63.3)	11 (36.7)	0 (0.0)	0.167	3	0.983	NS
	b) Joint	13 (65.0)	7 (35.0)	0 (0.0)				
	c) Extended	5 (71.4)	2 (28.6)	0 (0.0)				
	d) Single-parent	2 (66.7)	1 (33.3)	0 (0.0)				
4	**Course & Year of Study**				**0.361**	**1**	**0.548**	NS
	a) B.Sc. Nursing 1st Semester	21 (61.8)	13 (38.2)	0 (0.0)	0.361	1	0.548	NS
	b) GNM 1st Year	18 (69.2)	8 (30.8)	0 (0.0)				

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