

A Descriptive Study to Assess the Knowledge Regarding Pneumonia among Mothers of under Five Children in Selected CHC at Gurh with a View to Develop Information Booklet

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1. Introduction

Children are one 1/3 of our populace and all of our futures however alas the present of fitness which makes the infant to be phase of future is affected by means of so many ailment conditions. One such dreadful sickness is pneumonia. According to WHO pneumonia is regarded as the forgotten killer of youngsters and it is the main motive of childhood morbidity and the demise in many growing international locations inflicting two million demise international every year. Pneumonia is an necessary public fitness trouble in India. The neighborhood have to be trained to understand the symptoms and symptom of pneumonia to apprehend the significance of early detection and ample remedy specifically incidence of pneumonia is greater applicable amongst underneath 5 teenagers and these teens are dependants on mom for their self - case. Emphasis need to be given on instructing the mom on information related to pneumonia as a first step of its prevention.

The first degree of maternal and adolescents fitness starts off evolved in the domestic and sub centers. The fitness is performance and in the end accountable for growing for turning in of fitness care services. Pneumonia has an damaging impact on toddler survival and improvement and might also even be an necessary thing for morbidity whilst it is identified that the reasons of phenomena are multi - factorial, emphasis is given to these data that are believed to best significance in growing countries. These consist of vaccination in opposition to Haemophilus influenza, streptococcus, appropriate nutrition, hygienic practices etc. Thirty - five to sixty per cent of all loss of life takes place in below 5 age group. The principal motives of demise being diarrhoeal diseases, malnutrition and acute respiratory infectious diseases. It is additionally a length of fast boom and development. In view of these motives under 5 Age people require exclusive fitness care.

Statement of the Problem

"A descriptive study to assess the knowledge regarding pneumonia among mothers of under five children in selected CHC at Gurh with a view to develop information booklet."

Objectives

- 1) To assess the knowledge regarding pneumonia among mothers of under five children.
- 2) To determine the association of knowledge with the selected demographic variables.

- 3) To prepare and distribute the information booklet among mothers of under five children regarding pneumonia.

Hypothesis

H0 - There will be no significant relationship between mothers of under five children knowledge with selected demographic variables.

H1 - There will be significant relationship between mothers of under five children knowledge with their selected demographic variables.

Operational Definition

- Assess: In this find out about it refers to information about pneumonia via structured expertise questionnaires.
- Knowledge: In this learn about it refers to the subject's information concerning the right response to questions on pneumonia as measured by means of structured knowledge questionnaire.
- Pneumonia: Refers to the inflammatory modifications in the lungs due to special kinds of micro organism and viruses.
- Mothers of beneath 5 children: Refers to the moms with young people of age beneath 5 years.

2. Review of Literature

Literature related to knowledge of pneumonia

A find out about on 'awareness of city slum moms involving domestic administration of signs of pneumonia' a complete of 635 moths of below 5 teenagers from city slum are of Nanded town have been assessed to recognize their recognition about domestic administration of signs and symptoms of pneumonia. 50.4% of the moms had no longer understood a symptom of pneumonia. A learn about on 'Mother's knowledge, mind - set and practices concerning acute respiratory infections' to manage ARI and creating countries. A whole of 309 moms have been interview 34% had no formal education. Only 18% of moms described pneumonia satisfactorily. 87.1% of the mothers stated they would be seeking for fitness core offerings for sever ARI. Formal schooling had a nice have an impact on on the KAP of the mothers. The learn about displays fitness schooling programmes can solely be nice when designed to take into account the prevailing KAP of the neighborhood closer to ARI in their children.

Literature related to treatment of pneumonia

A learn about performed on does 3 - day route of oral amoxycillin gain youngsters of non - severe pneumonia with wheeze: a multicentre randomized managed trial in India. Participants have been young people aged 2 - 59 months of age, who acquired both oral amoxycillin (31 - 54 mg/Kg/day, in three divided doses for three days). Primary result was once medical failure on or earlier than day - 4 Result was once they had been randomized 836 instances in placebo and 835 in amoxycillin group. Clinical disasters came about in 201 (24.0%) on placebo and 166 (19.9%) on amoxycillin (risk distinction 4.2% in favor of antibiotic, 95% CI: 0.2 to 8.1). They concluded that treating kids with non - severe pneumonia and wheeze with a placebo is no longer equal to cure with oral amoxycillin.

Literature related to prevalence and incidence of pneumonia

A find out about carried out on incidence of pneumonia, bacteraemia, and invasive pneumococcal sickness in Pakistani children. Methods Household surveillance from February 2012 to May 2014 was once carried out in two low - income, coastal communities of Karachi. Blood tradition used to be acquired every time feasible from teenagers assembly inclusion criteria. Results overall, 5570 teens contributed 3949 remark years. There have been 1039 scientific instances of pneumonia, of which fifty four had been extreme pneumonia and 4 instances of very extreme ailment in accordance to WHO criteria. The common pneumonia incidence used to be 0.26 (95% CI: 0.25 - 0.28) episodes per child - year. The under - five mortality fee was once fifty five per a thousand stay births, with pneumonia inflicting 12 (22%) deaths. They concluded that Clinical pneumonia is frequent in Pakistani children, with one in 4 deaths attributable to the disease.

3. Research Methodology**a) Research Approach**

Research strategy is the most extensive phase of any research. The motive of the Research find out about determines the desire of the research method to be used. A descriptive survey Research method was once viewed the great to determine the information of mothers of under five children concerning pneumonia.

b) Research Design

In the existing find out about the non - experimental research design used to be viewed the most appropriate through the investigator.

c) Setting of the Study

Setting refers to the area where the study is conducted. The study will be conducted in the CHC Gurh, Rewa (M. P.).

d) Target Population

In the present study the target population comprises of the mothers of under five children come to the CHC Gurh, Rewa (M. P.) for treatment.

e) Accessible Population

In this study, the accessible population will refer to mothers of under five children available in selected CHC, Gurh (M. P.).

f) Sample

In this study, the sample will comprise of 50mothers of under five children in selected CHC at Gurh.

Sample Size -

In this study, the sample will comprise of 50 mothers of under five children in selected CHCatGurh, fulfilling the sample criteria.

Sampling Technique

Non - probability Convenient sampling technique will be used for the study. Non - probability Convenient sampling approach uses participants who are readily available to the researcher and meet the criteria for the study.

Sample Selection Criteria

The sample selection criteria used by the researcher included the following -

Inclusion Criteria:

- Mothers who are willing to participate in the study.
- Mothers who are available at the time of data collection.

Exclusion Criteria:

- Mothers who are not willing to participate in the study.

Data collection tools and techniques

Data collection equipment is the units that the researcher used to accumulate the data. A legitimate and dependable records series instrument is viewed necessary to yield fantastic data.

A structured knowledge questionnaire was once organized to check the information of mother under 5 children concerning pneumonia. The questionnaire is regarded to be the most environment friendly and goal method. Questionnaire is a rapid and normally less expensive skill of acquiring information from a massive wide variety of respondents and questionnaires are one of the best lookup units to check for validity and reliability.

A self - reporting information series approach by using the usage of a paper and pencil technique was once used in order to achieve data.

Scoring:

The participant would respond to each MCQ item by choosing one correct option out of other in correct ones. Score of one (1) – will be awarded for every correct answer. Score of zero (0) – will be assigned for every incorrect answer.

Knowledge Score is graded as follows -

Score	Grade
0 - 10	Poor Knowledge
Nov-20	Average Knowledge
21 - 30	Good Knowledge

Data Collection Procedure

Prior to the data collection, permission used to be got from the following: Formal permission from Block clinical officer, CHC, Gurh. The learn about was once performed from 01 - 08 - 2021 to 08 - 08 - 2021. Before statistics series self - introduction used to be given and the cause of learn about was once defined to the Mothers of under 5 children. The mother of under 5 children had been guaranteed that their response would be stored confidential. Their consent was once taken prior to the study. Around 7mothers of below 5 year children participated in learn about every day.

Plan for Data Analysis

The data was analyzed in terms of the objective of the study using both descriptive and inferential statistics.

The plan for data analysis will be as follows

- For the analysis of demographic data frequencies and percentage will be calculated.
- Chi Square test will be used to find the correlation and the findings will be documented in forms of tables and graphs.

Ethical Consideration

The lookup committee has permitted the lookup trouble and goals mentioned for the current study. Informed consent used to be got from all the moms of beneath 5 adolescents who had been inclined to take part in the study. Explanation used to be given related to the cause of the study. Confidentiality used to be ensured. Permission from the greater authorities used to be obtained. Any person participant has the proper to go away from the find out about at any time besides assigning any motive thereof to investigator.

4. Data Analysis and Interpretations

Section - I

1) Frequency and Percentage Distribution of Mothers According to Age

AGE	Frequency	Percent
20 - 24 years	25	50.0
25 - 29 years	23	46.0
30 years and above	2	4.0
Total	50	100.0

According to the data shown in table the majority of the mothers 25 are between the ages of 20 and 24, 23 are between the ages of 25 and 29, and the remaining two are between the ages of 30 and above.

2) Frequency and Percentage Distribution of Mothers According to Number of under five children

No. of Under Five Children	Frequency	Percent
1	42	84.0
2	8	16.0
3 or above	0	0
Total	50	100.0

The statistics in the table reflect the distribution of moms based on the number of children under the age of five. The majority of the moms (42%) had one kid, the remaining 8 had two children under the age of five, and none of the mothers had three or more children under the age of five.

3) Frequency and Percentage Distribution of Mothers According to Vaccinated children

Vaccinated Children	Frequency	Percent
Completely	33	66.0
Incompletely	17	34.0
Not yet	0	0
Total	50	100.0

The statistics in the table illustrate the distribution of moms based on the number of children vaccinated. Thirty - three of the youngsters were fully vaccinated, while the remaining 17 were just partially immunized.

4) Frequency and Percentage Distribution of Mothers According to Educational Status

Educational Status	Frequency	Percent
Primary	12	24.0
Secondary	20	40.0
Graduation	18	36.0

The statistics in the table show the distribution of moms based on their level of education. The majority of the subjects (20) have completed secondary school, 18 have graduated, and the remaining 12 have just completed primary school.

5) Frequency and Percentage Distribution of Mothers According to Monthly Income of Family Rs

Monthly Income	Frequency	Percent
Up to 10, 000	13	26.0
10, 001 - 20, 000	27	54.0
>20, 000	10	20.0

The statistics in the table reflect the distribution of moms based on family monthly income. The majority of the moms, 27 have a monthly family income of Rs 10, 001 - 20, 000/ - , 13 have a monthly family income of up to 10, 000, and the remaining 10 have more than Rs 20, 000.

6) Frequency and Percentage Distribution of Mothers According to Occupational Status

Occupational Status	Frequency	Percent
Govt. Job	6	12.0
Private Job	12	24.0
House Wife	32	64.0

The information introduced in desk indicates the distribution of moms in accordance to the occupational status. 32 of the moms have been housewife, 12 of the moms had been in personal job and the relaxation 6 of the moms has been in govt. job.

7) Frequency and Percentage Distribution of Mothers According to type of Family

Type of family	Frequency	Percent
Joint	28	56.0
Nuclear	22	44.0
Total	50	100.0

The facts introduced in desk displays the distribution of moms in accordance to the kind of family.28 of the moms belong to joint household and 22 of the moms belong to nuclear family.

8) Frequencies and Percentage Distribution of Mothers according to Housing Condition

Housing Condition	Frequency	Percent
Pucca	30	60.0
Semi Pucca	14	28.0
Kachha	6	12.0
Total	50	100.0

The information introduced in desk displays the distribution of moms in accordance to the housing condition.30 of the moms had pucca house, 14 of the moms have been residing in a semi pucca residence and the relaxation 6 moms have been dwelling in a Kachha house.

9) Frequency and Percentage Distribution of Mothers according to Source of health information

Source of health information	Frequency	Percent
Television	14	28.0
Mobile	26	52.0
Health Care Provider	10	20.0
Total	50	100.0

Represents the distribution of moms in accordance to supply of information. Majority of the mothers, 26 acquire the data related to pneumonia via cellular phone, 14 of the moms get hold of the statistics from tv and the relaxation 10 of them acquire the facts on pneumonia thru Health care provider.

Section II

Pretest Knowledge Score of Mothers Regarding pneumonia

PRE - TEST	Frequency	Percent
Poor Knowledge	32	64.0
Average	14	28.0
Good	4	8.0
Total	50	100.0

The records introduced in desk depicts that majority 64% of moms are having bad knowledge, 14% of the mothers have common understanding and the relaxation of the moms 8% have properly know - how involving pneumonia.

Section III

Relationship between Knowledge of Mothers with Selected Demographic Variables

S. No.	Variables	Poor	Average	Good	Total	Chi square value	df	P value	Inference
1	AGE					4.018	4	.674	NS
	20 - 24 years	23	2	0	25				
	25 - 29 years	9	12	2	23				
	30 years and above	0	0	2	2				
2	NO. OF UNDER FIVE CHILDREN					12.618	2	.013	S
	1	30	11	1	42				
	2	2	3	3	8				
	3 or above	0	0	0	0				
3	VACCINATEDCHILDREN					1.566	2	.457	NS
	Completely	19	11	3	33				
	Incompletely	13	3	1	17				
	Not yet	0	0	0	0				
4	EDUCATIONAL STATUS					78.095	4	.000	S
	Primary	12	0	0	12				
	Secondary	16	4	0	20				
	Graduation	4	10	4	18				
5	MONTHLY INCOME OF FAMILY RS					11.215	4	.082	NS
	up to 10, 000	12	1	0	13				
	10, 001 - 20, 000	19	7	1	27				
	>20, 000	1	6	3	10				
6	OCCUPATIONAL STATUS					4.297	4	.117	NS
	Govt. Job	1	3	2	6				
	Private Job	2	9	1	12				
	House Wife	29	2	1	32				
7	TYPE OF FAMILY					7.761	4	.101	NS
	Joint	18	8	2	28				
	Nuclear	14	6	2	22				
8	HOUSING CONDITION					4.108	4	.114	NS
	Pucca	16	11	3	30				
	Semi Pucca	10	3	1	14				
	Kachha	6	0	0	6				
9	SOURCE OF HEALTH INFORMATION					6.706	4	.000	S
	Television	13	1	0	14				
	Mobile	18	7	1	26				
	Health Care Provider	1	6	3	10				

The facts introduced in the desk depicted the computed chi - square values between relationship of information rating with chosen demographic variables indicated that there is a sizable relationship between No. of beneath 5 children, Educational Status, and Source of Health facts with know - how and there is no large relationship between Age, Vaccinated of children, Monthly earnings of household Rs, Occupational status, Type of family, Housing Conditions with knowledge.

Hence, the research hypothesis H_1 was not accepted

5. Conclusion

From the findings of the study it is clear that the mothers had a poor knowledge regarding pneumonia and also the study determined the association between knowledge score and demographic variables like no. of under - five children, source of health information and educational status.

There is a need to educate the mothers regarding the Pneumonia and prevention of pneumonia, nurses have a pivotal role in health promotion and imparting knowledge regarding Pneumonia and its ill effects both in hospital and community settings.

The present study revealed that the mothers have poor knowledge regarding Pneumonia.

References

- [1] Park K. Parik's text book of preventive and social medicine.19th Ed. Jabalpur: Banarsidas Bhanot; 2007. p.142 - 147.
- [2] The Hindu online edition of India's National Newspaper March, 05 - 2007.
- [3] K. Park. Preventive and Social Medicine.17th ed. Jabalpur, Banaridas Bhanot Publishers; 2002. P.692
- [4] IMCI, Integrated Management of childhood Illness [online] 2009 Jan [cited 2012 Aug 10]. Available from: URL: <http://www.redcross.org/services/intl/imci/>.
- [5] Pneumonia Can Be Prevented – Vaccines Can Help. National and Global Impact. [serial online] 2010 Dec [cited 2012 Sep]; Available from: URL: <http://www.cdc.gov/Features/Pneumonia/>
- [6] Highest pneumonia mortality in India. [online] 2010 Nov19 [cited 2012 Nov25]; Available from: URL: <http://indiaenvironmentportal.org.in/content/highestpneumonia - mortality - india>
- [7] The UN Inter - agency Group on Child Mortality Estimation. UNICEF, WHO, The World Bank, the United Nations Population Division, Levels and Trends in Child Mortality, Report 2010. [Online] 2010 Sep [cited 2012 Aug 12]; Available from: URL: <http://www.childinfo.org/mortality.html>
- [8] Kallander K, Tomso G, Nsabagasani X, Sabiiti JN, Pariyo G, Peterson S. Can Community health workers and caretakers recognize pneumonia in children?. Experiences from western Uganda. Transactions of the Royal Society of Tropical Medicine and Hygiene.2006; 100 (10): 956_63