# A Study To Assess The Knowledge Of Mothers Regarding Diarrhea Among Under Five Children In Selected Rural Area, Bhucho Mandi, Bathinda, Punjab.

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#### Abstract

A descriptive study to assess the knowledge of mothers regarding diarrhoea among under five children in selected rural area Bhucho Mandi, Bathinda. For this study Quantitative approach and descriptive research design was adopted. The study was conducted on 60 mothers with under five children. Knowledge was assessed with the help of structured questionnaire. Sampling technique used in this study was convenient purposive sampling. The study revealed that out of 60, the level of knowledge of mothers 26(43.3%) were having inadequate knowledge, 29(48.3%) were having moderate knowledge, 5(8.3%) were having adequate knowledge. Occupation of mother variable came out to be significant in association with level of knowledge.

**Keywords:** Knowledge, Mothers.

Date of Submission: 18-03-2022 Date of Acceptance: 02-04-2022

## I. Background

Diarrhoea is the one of the commonest cause of Morbidity in children in developing countries. Diarrhoea is responsible for 4,000 million episodes and 2.4 million deaths each year in children under 5 years. In Nepal the prevalence of diarrhoea is 15% with higher rate in rural area. In last 2 decades, the motility due to diarrhoea in children under 5 years has reduced. Diarrhoea is derived from a Greek word 'FLOWING THOUGHT'. It's a common cause of infant death worldwide, it's the change in consistency of stool rather than the number of stool that is more important.

Every year there are about 2, million cases of diarrhoea diseases worldwide Diarrhoea is leading cause of child mortality and morbidity in the world. It's mostly result from contaminated food and water sources. Diarrhoea due to infection is wide spread throughout developing countries. E.coli (bacteria), Rotavirus (virus), Entamoeba Histolytica (parasites) are 3 common cause, drugs like intake of antibiotics and iron supplements may lead to diarrhoea. Dietary cause food poisoning, food allergies, over eating and eating of stale food can cause diarrhoea in children. This reduction may be due to correct case management as per standard treatment guidelines recommended by WHO & USE OF ORAL Rehydration therapy as on KEY STONE in the management. According WHO guidelines for the management of diarrhoea, anti- microbial, anti- bacterial have little role to play. Despite this fact over use of anti- microbial agent have reported for the management of diarrhoea. Community health education is the at most importance for effective case management, since, it has potential to establish production contact between the service and community to increase capability of families to recognize the danger signs of diarrhoea in children and encourage appropriate and early seeking behaviour. Diarrhoea can be treated according to WHO & UNICEF recommended & distributed ORS. Packets as a drug for treatment of clinical dehydration. More ever administration of antibiotics & binding agents (LOPERAMIDE, CODINE) and Anti-secretary agent (ASPIRIN). Maintenance of nutritional status and educating parent.

### **Problem statement**

A descriptive study to assess the knowledge of mothers regarding diarrhoea among under 5 children's in selected rural area Bhucho Mandi, Bathinda, Punjab.

#### Purpose

Through this research researcher wanted to assess the knowledge of mothers regarding diarrhoea and its prevention.

## **Objectives**

• To assess the knowledge of mothers regarding diarrhoea.

• To determine the association between the mother's knowledge with selected variable age, education, religion, occupation, type of family, Family income and number of children.

#### **Assumptions**

- Under five children may be in more risk of diarrhoea.
- Mother may have some knowledge regarding diarrhoea..

## **Review of Literature**

- Literature related to knowledge of mothers on diarrhoea.
- Literature related to prevention of diarrhoea.

#### Research Methodology

• Research Approach: Quantitative research approach was adopted.

Research Design: Descriptive non-experimental research design was adopted.

#### Variables under study

**Dependent Variable**: Knowledge of mother.

Demographic variables: Age (in years), Religion, Family income, Educational status of mother, Type of family, Occupational status of mother, Number of children.

Research Setting: Study was conducted in mothers of under five children.

**Target Population**: The target population of the study were 60 mothers with under five children taken from Bhucho Mandi, Bathinda

#### Sample Size

The sample for present study were 60 mothers of under five children.

## **Sampling Technique**

The sample was selected by convenient purposive sampling technique.

## **Sampling Criteria**

Inclusion Criteria

- Mothers with under five children.
- Mothers who will participate in this study.
- Mothers who knows Punjabi.

## **Exclusion Criteria**

• Mothers who are not willing to participate in research study.

## **Selection and Development of the Tool**

To accomplish the objectives of the study, the research tool was constructed in following two sections:

Section A: Demographic variables

Section B: Structured Knowledge questionnaire

**Section A**: Demographic variables:

This section consist of 8 items for obtaining personal information about children i.e. Age (in years) ,Religion , Education of mother ,Occupation of mother, Type of family, Numbers of children, Family Income.

#### Section B: Structured Knowledge questionnaire:

In this study, structured knowledge questionnaire consists of 20 items related to diarrhoea and its prevention. A score value of one (1) was allotted to each correct response and zero (0) for every incorrect response. Total score of structured questionnaire was 20. An answer key was also prepared.

## **CRITERION MEASURE**

15-20 ..... Adequate

7-14.....Moderately adequate

0-7..... Inadequate

#### Content validity of the Tool

Content validity of the socio demographic variables was determined by expert's opinion. The socio demographic variables and knowledge questionnaire was given to the Medical and Nursing experts in the field of Maternal and Child Health and language experts in English and Punjabi (participant information sheet, consent form and socio demographic variables). As per the guidance and suggestions from the experts, the suggested amendments were made in the tool.

#### **Reliability of Tool**

Reliability of tool was estimated by test retest reliability method. The reliability came out be 0.7. Thus, the tool was reliable.

## Pilot study

Pilot study was conducted on 6 mothers selected as per the sampling criteria.

#### **Ethical Considerations**

Ethical clearance was taken from research and ethical committee of College of Nursing Adesh University for the study to be conducted. Apart from this, written informed consent was taken from each study subject and permission was taken from authorities of the respected area to collect the data.

Description about Intervention

The study participants were the mothers who had under five children. The tool as described earlier was structured questionnaire.

Plan and Procedure for Data Collection

The Data was planned to be collected from the mothers with under five children present in Bhucho Mandi, District Bathinda.

## Plan of Analysis

Data analysis was done as per the objectives of the study. The data was analyzed by using SPSS version 20, by descriptive statistics (%) and inferential statistics. Chi-square value was used to find out association between variables. Data has been represented in the form of tables.

## **DEMOGRAPHIC VARIABLES**

Table 1
Percentage distribution of demographic variables
N-60

S. NO.	VARIABLES	F	%
1.	Age (in Years)		
	20-23	21	35
	24-26	06	10
	27-30	12	20
	31-35	21	35
2.	Religion		
	Hindu	60	100
	Muslim	0	0
	Christian	0	0
3.	Educational status of mothers	-	
	Illiterate	12	20
	Primary	20	33
	Secondary	13	22
	Graduate	15	25
4.	Occupation of mother	15	23
	House wife	30	50
	Private job	15	25
	Government job	12	2
	Own business	3	5
5.	Type of family		
	Nuclear family	18	30
	Joint family	42	70
6.	Number of children's		
	I	3	5
	II	15	25
	III	27	45
	IV	15	25
7.	Family income		
	Rs 5,000-10,000	9	15
	Rs 10,000-20,000	37	62
	Rs 20,000-30,000	14	23
	Rs 40.000-above	0	0
	NS 40.000-above	V	U

Section-II

Objective I- To assess the knowledge of mothers regarding diarrhoea and its prevention.

N = 60

Level of Knowledge	f	%
Inadequate	26	43.3
Moderately adequate	29	48.3
Adequate	5	8.3

Table revealed that Majority of 29 (48.3%) mothers were having moderately adequate knowledge, 26(43.3%) mothers were having Inadequate and 5(8.3%) were having adequate knowledge.

Objective II- To find out the association between the knowledge of mothers regarding diarrhoea and its prevention with their selected socio-demographic variables.

N-60	I.K	M.K	A.K			
				$\chi^2$	df	p-value
Age (in Years) 20-23 24-26 27-30 31-35	0 1 0 4	10 3 5 11	11 2 7 6	8.544 (NS)	6	0.201
Religion Hindu Muslim Christian	5 0 0	29 0 0	26 0 0	(NS)		
Educational status of mothers Illiterate Primary Secondary Graduate	0 2 2 1	6 8 6 9	6 10 5 5	3.367 (NS)	6	0.762
Occupation of mother House wife Private job Govt.job Own business	2 0 1 2	14 6 8 1	14 9 3 0	18.076 (S)	6	0.006
Type of family  Nuclear family  Joint family	1 4	11 18	6 20	1.700 (NS)	2	0.427
Number of children's I II III IV	0 0 5 0	1 9 10 9	2 6 12 6	8.270 (NS)	6	0.219
Family income Rs 5,000-10,000 Rs 10,000-20,000 Rs 20,000-30,000 Rs 40.000-above	1 3 1 0	2 21 6 0	6 13 7 0	3.857 (NS)	4	0.426

It was evident from the table that chi square value computed for demographic variables. Occupational status of mother showed statistically significant associated with the level of knowledge regarding diarrhoea and its prevention.

#### II. Discussion

The first objective to assess the mother knowledge regarding diarrhoea and its prevention in Bhucho Mandi Bathinda.

Results of the study are 21(35%) mothes belong to the age group of 20-30 years,6(10%) belongs the age group of 24-26 years,12(20%) belongs to the age group of 27-30 years 21(35%) belongs to the age group of 31-35 years.60(100%) mothers were hindu.12(20%) had illiterate 20(30%) had completed primary education, 13(22%)had completed secondary education,15(25%) were graduate. Regarding occupation of mother 30(50%)housewife,15(25%) were private job,12(2%) were government job,3(5%) were own business regarding type of family 18(30%) were nuclear family,42(70%) were joint family.3(5%) mother have 1 child,15(25%) have ii,27(45%) have iii, 15(25%)have iv children 9(15%) belongs to income group of Rs.5000-10,000,37(62%) 10,001-20,000,14(23%) Rs.20,001-30,000.

Objective 1showed that 5(8.3%) subjects had adequate knowledge, 29(48.3%) moderately adequate knowledge and 26(43.3%) had inadequate knowledge on diarrhoea.

Chi square analysis showed that there was significant association found with occupation of mother and there was no significant association found with age, religion, education status of mother, type of family number of children and family income.

## **IMPLICATIONS**

## **Nursing Education**

Nursing education need to be strengthened to enable nursing students to know about current knowledge on diarrhoea and its prevention.

Nursing curriculum should provide clinical experience on conduction to provide education regarding prevention of child diarrhoea in various settings. Community, wards and OPD etc.

#### **Nursing Research**

The findings of the study serve as a basis for the nursing professionals and the students to conduct further studies in different aspects of prevention of child abuse.

Recommendations Based on the results of the study, following recommendation are made:

Further researches can be conducted.

The study can be replicated on a large sample to validate and generalize its findings.

A multi centre study could be done.

A true experimental (RCT) study could be done.

## III. Conclusion

On the basis of the findings of the study, it was concluded that majority of the subject had moderately adequate knowledge regarding diarrhoea and its prevention.

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Navjot Kaur, et. al. "A Study To Assess The Knowledge Of Mothers Regarding Diarrhea Among Under Five Children In Selected Rural Area, Bhucho Mandi, Bathinda, Punjab." *IOSR Journal of Nursing and Health Science (IOSR-JNHS)*, 11(02), 2022, pp. 19-23.

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