

Effectiveness of Structure Teaching Programme on Knowledge Regarding Acute Respiratory Tract Infections among Mothers of Under Five Children at Lucknow .Uttar Pradesh.

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INTRODUCTION

The child is the nation's potential citizen. The best resource in the world for the future resides in today's youth. Today's children are the citizens and pioneers of tomorrow. Investing in infant growth thereby constitutes investing in the future of the world and improves the standard of life of the population. The serious challenge to infant survival in India is acute respiratory tract infections. Acute respiratory tract infections are a significant global public health issue that has contributed to the implementation of a national initiative to monitor the outbreak of a national acute respiratory tract.

NEED FOR THE STUDY

Up to 4.1 million deaths a year from acute respiratory tract infections worldwide. In India, high and acute respiratory tract infections are one of the main causes of death in infants and children. It is also recorded that 13% of stay deaths in paediatric hospitals are triggered by acute respiratory tract infections. As several children died at home, the share of mortality from acute respiratory tract infections in the population is far larger. The cause for high fatality could be because children are either not rushed to the hospital or taken too late. According to WHO, 9.87,000 deaths were estimated for respiratory infections in India, 10,000 for acute respiratory tract and some 9,000 for otitis media. Regular (Disability Adjusted Life Years) disease burden lost 25.5 million of the 2,74 lake as a consequence of Acute High Air Infection and 4.75 lake as a result of otitis media.

MATERIAL AND METHODS

A pre-experimental method evaluative analysis methodology was used. The method of sampling was unlikely to be easy to sample. Data from 50 mothers is taken from Lucknow. Uttar Pradesh. Pradesh. Before data collection operation, permission from the Sarpanch of the selected villages in Lucknow was obtained. The method is made up of: 1 demographic profile, section: 2 –a information portion of a 30-part acute respiratory tract infection. The tool's efficiency was determined by the test-test process. The tool was thus found to be accurate. Descriptive and inferential statistics were used to analyse the data. Frequency, mean, range and standard deviation were the descriptive statistics used. The details were also graphically displayed.

RESULTS

Demographic Characteristics – Mother age is the largest proportion of mothers (60 per cent) in ages 25-30 years and youngest (26 per cent) in ages under the age of 25 years, (14 per cent) in ages 31-35 years, and nobody in ages 36 and over. THE education status indicates the largest (42%) proportion of mothers who were educated up to secondary and less (28%) in mothers with a degree, and beyond (24%), mothers were educated up to primary and only (06%) mothers were analphabets. The plurality (94%) of mothers were house wives, and the majority (06%) of mothers were employed women. The family monthly income suggests that the main family income (64%) was Rs. 5001 and higher, the monthly family income (36%) was Rs. 3001- 5000 and (0%) of less than Rs. 1000 and Rs. 1001-3000 and Rs. 3000. The age range of under-5 children indicates that the plurality (66 per cent) of mothers have 1 child under 5 and (34 per cent) of mothers have 2 children under the

age of 5 and no of mothers have three children over the age of five. The overall number of participants (12 percent) was 6 and beyond the family members.

Analysis The Knowledge Of Mothers' Of Under Five Children Regarding Acute Respiratory Tract Infection

Pretest shows that in majority of mothers had inadequate knowledge 26(52%) and 24(48%) had moderate knowledge and no one had adequate knowledge regarding acute respiratory tract infections.—Post test shows that in majority of 32(64%)mothers have adequate knowledge 18(36%) mother have moderate knowledge and no one have inadequate knowledge.

Analysis Of Difference Between The Pre Test And Post Test Knowledge Scores Of Mothers Of Under Five Children Regarding Acute Respiratory Tract Infections.—

The investigator found that the area wise comparison of knowledge scores of mothers of under five children regarding acute respiratory tract infections., means, standard deviation, and mean score percentage ,value are compared and paired 't' test is applied at 0.05 level of significance. The tabulated 't' value for 49 degree of freedom is 2.00 and calculated' value greater than in area –wise distribution of knowledge scores .—The calculated' value were much higher than tabulated' value at 0.05 level of significance which was statistically acceptable level of significance. So there is significance difference in knowledge scores of mothers of under five children regarding acute respiratory tract infections

Comparison of level of knowledge scores of the mothers of under five children regarding acute respiratory tract infection, it shows that post test knowledge scores of mothers were much higher in knowledge as compared to pre test knowledge scores. So H1 is accepted.

Association Between Pre-Test Knowledge Of The Under Five Childrens' Mothers With Selected Socio-Demographic Variables.—

It shows that the χ^2 value computed between the knowledge level of mothers of under five children regarding acute respiratory tract infections, and selected socio-demographic variables. Age ($\chi^2=2.50$), Education($\chi^2=5.42$),occupation ($\chi^2=5.83$),Family income ($\chi^2=2.39$), Number of family member ($\chi^2=5.71$), and Number of under five children ($\chi^2=0.46$), was not significant at 0.05 level. Thus it can be interpreted that there is a no significant association between knowledge of mothers of under five children with selected socio-demographic variables .—There is no significant association between knowledge of mothers of under five children with selected socio-demographic variables such as age ,education, occupation ,Family income.Number of family member), and Number of under five children. So H2 is rejected.

CONCLUSION

The study findings concluded that mothers had inadequate knowledge regarding prevention of childhood accident before STP. After structured teaching program mothers have improve the knowledge.

Reference

- 1.Rashid S.F. Hadli A, Afsana K, Begu SA. ARI in rural Bangladesh; cultural understanding, practices and the role of mother, and community health volunteers. Trop med in health 2001 April; 6 (4); 249-255.
- 2.WHO the effect of disease under five children regarding ARI. New Delhi 2002.
- 3.Mare Laforce, Remi sogunro, reducing deaths due to ARI. Trop Med Int Health 2002 Dec; 6(8); 17-20.
- 4.Sunil, Rajneesh Nurkey, Sanjeev; Clinical profile and outcome of ARI Indian journal of pediatric 2003 Nov; 70 (11): 865-870.
- 5.WHO ARI control programme in India New Delhi,2000.9.Park. K. Textbook of preventive andsocial medicine. 17thed. Jabalpur: Banarsidas Bhanot Publishers; 2002