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# EFFECTIVENESS OF STRUCTURED TEACHING PROGRAM ON KNOWLEDGE, ATTITUDE AND PRACTICE REGARDING PREVENTION OF PNEUMONIA AMONG MOTHERS OF UNDER FIVE CHILDREN

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### **ABSTRACT**

Each year more than 10 million children die before they reach their fifth birthday seven to ten of these deaths are due to just five preventable and treat able conditions pneumonia, diarrhea, malaria, measles and malnutrition and often a combination of these conditions. There are approximately 150 million cases of childhood pneumonia reported each year. A large number of children suffering from pneumoniafail to reach health facilities well in the appropriate time because their mothers fail to recognize seriousness of their illness. Early prevention of pneumonia by mothers and their participation in effective case management of pneumonia may reduce childhood mortality. This study to assess the mothers of underfive children regarding Knowledge, attitude and practices in prevention of Pneumonia. One group pretest posttest design was used with purposive sampling about 50 mothers of underfive children were educated .The findings reveals that there is a increased level of knowledge attitude and practices in mothers of underfive children regarding prevention of Pneumonia, after the structured planned teaching program.

Key words: Knowledge, Attitude, Practice, Prevention, Pneumonia, mothers of underfive children.

## Introduction

Approximately 150 million new cases of pneumonia occurs annually among children younger than five years worldwide, accounting for approximately 10-20 million hospitalizations. In India an estimated 25 million babies born annually and of these 24% (6 million) succumb to death. 7 out of every 10 of these are die due to acute respiratory infections. The incidence of clinical pneumonia in developing countries range between 20-30%. Millenium Development Goal (MDG)(1990-2015) increasing focus on the reduction of under five mortality rate by two thirds. Edwin S G et al (2004)conducted a study regarding the effectiveness of planned teaching programme (PTP)on knowledge, attitude and knowledge on practice of acute respiratory infections among mothers and found that there was a gross inadequacy (100%) of knowledge regarding ARIs among the mothers & PTP was found to be Effective. HaryCambell et al (May 2008) conducted a study on epidemiology and etiology of childhood pneumonia on 15 countries stated that the estimated incidence is 0.37 episodes per child per year in India. Bulletin of WHO(2008) estimated that the incidence of childhood pneumonia among the under five children are about 156 million new episodes each year worldwide, of which 151 million episodes are in the developing world & in India it is about 43 million. Parket al (2010), approximately 2 million death occurs due to pneumonia among the under five children. Pneumonia is the inflammation of the lung parenchyma characterized by cough, sore throat, running nose, fast & difficulty breathing, wheezing, fever, irritability, chest pain, chill, tachycardia etc. It is one of the major reason for which children are brought to the hospitals and health facilities. Most children have 3 to 5 attacks of ARI in each year. Prognosis of pneumonia is good in early diagnosis & early initiation of treatment in appropriate time otherwise leads to serious complications and may have fatal outcome.

Several risk factors for acquiring respiratory infections in developing countries such as low parental education, low birth weight and lack of breast feeding have been described Nutritional factors also influence the risk of developing disease, family size and crowding have been linked to the risk of developing pneumonia, parent's smoking habits, bad weather in winter and sanitation influences many health outcomes and might affect the risk of developing pneumonia directly or indirectly Over the past two decades, there have been several attempts to investigate the relationship between socio demographic risk factors and severe pneumonia in young children, but few reports have proven whether this relationship actually exists. The lack of epidemiological studies from developing countries makes it

difficult to develop effective intervention strategies that may help to reduce the overall burden of this disease.

As prevention is better than cure, the rate of incidence can be reduced by giving adequate knowledge regarding the risk factors, etiology, clinical manifestation, prevention& when to seek medical help. Mothers are the primary care givers of the child, so they need to be sufficiently aware regarding prevention of pneumonia. Though they have some knowledge regarding home management of cough, they did not practised it correctly. If mothers would possess appropriate knowledge, and maintain a positive attitude with correct practice on the prevention of pneumonia, thereby decreasing the burden of the disease at the community and helps in social reconstruction. The structured teaching program with adequate key concepts regarding prevention of pneumonia definitely improve the knowledge, attitude and practices to prevent pneumonia.

# **Objectives**

- 1. Assess the level of knowledge of mothers of under five children on prevention of pneumonia before and after education
- 2. Assess the level of attitude of mothers of under five children on prevention of pneumonia before and after education
- 3. Assess the level of practice of mothers of under five children on prevention of pneumonia before and after education

## **Review of Literature**

ShireenQassimBhem,et.al., (2016) Conducted a study on Knowledge ,attitude and practice among mothers of underfive children on Prevention of Pneumonia. The objective of this study was to assess the knowledge, Attitude and Practice among mothers of underfive children on prevention of pneumonia. In this study the cross sectional survey was used and the results reveals that mothers of underfive children has good knowledge on prevention of Pneumonia.

**Susan Mary Pradhan(2016)** conducted a study on knowledge and perception regarding pneumonia among mothers of underfive children in rural areas of South India. The objective of this study was to assess the level of knowledge and perception regarding pneumonia among mothers of underfive children. A cross sectional study was conducted among 460 mothers of underfive children. The sample technique used was three stage cluster sampling.

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The result found that the mothers were predominantly secondary school educators and in this 41.5% had fair knowledge about pneumonia.

**Asrat** (2015) conducted a study on assessment of knowledge, attitude and practices and factors affecting mothers regarding pneumonia among underfive children. In this study Institutional based cross sectional study was employed among mothers of underfive children. The results revealed that 32.8% of mothers have satisfactory knowledge on prevention on pneumonia.

# Methodology

One group Pretest post test design was adopted,100 samples were selected through purposive sampling technique. The planned teaching program was administered on Prevention of Pneumonia. The tool was developed by the researcher with the guidance of experts. The questionnaire includes

- I. Demographic data
- II. Sources of Information regarding Prevention of Pneumonia
- III. Knowledge regarding prevention on Pneumonia
- IV. Attitude regarding prevention on Pneumonia
- V. Practices regarding prevention on Pneumonia

The Pilot study was conducted before the main study and it elicited that the study was feasible. The tool was found to be highly reliable and valid. During the data collection the researcher introduced herself to each subject and they were informed about the purpose of study.

### **Results**

Table. No:1 Sources of Information regarding Prevention of pneumonia

<b>Sources of Information</b>	Frequency N=50	Percentage
Health Workers	15	30%
Anganwadi Workers	15	30%
Hospitals	8	16%
Media	7	14%
Others	5	10%

Figure. No:1 Sources of Information regarding Prevention of pneumonia

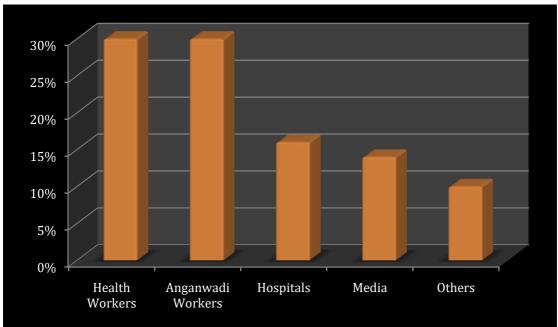


Figure No :2 Comparison of Level of Knowledge score of mothers of Underfive Children regarding Prevention of Pneumonia before and after Structured Teaching Program

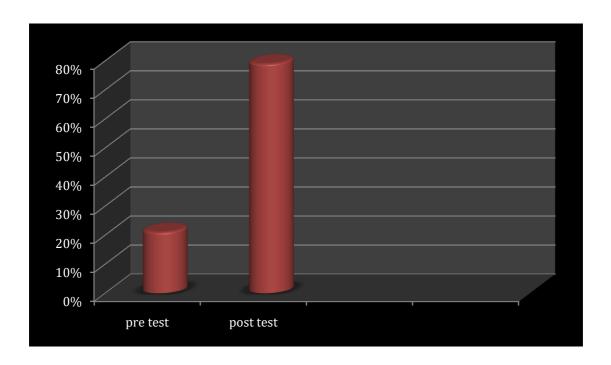


Figure No :3 Comparison of Level of Attitude of mothers of Underfive Children regarding Prevention of Pneumonia before and after Structured Teaching Program

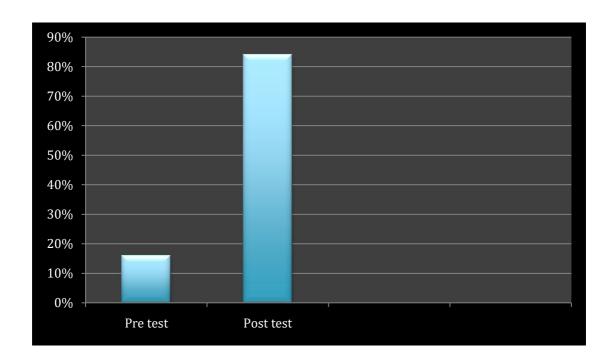
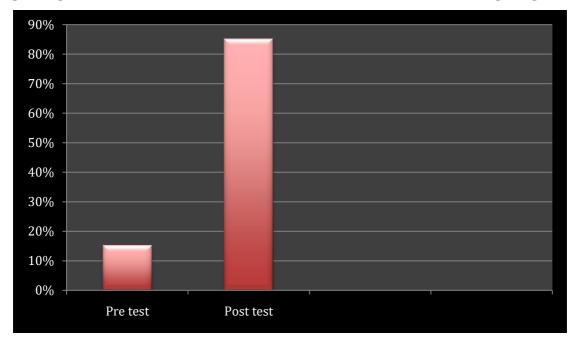


Figure No :4 Comparison of Level of Practice score of mothers of Underfive Children regarding Prevention of Pneumonia before and after Structured Teaching Program



## **Discussion**

The present study reveals that the majority of mothers of underfive children received information on prevention of pneumonia from health workers 30% and the level of knowledge ofmothers of underfive children regarding prevention of pneumonia got increased from 22% to 78% and level of attitude got increased to 87% level of practice got increased to 86% respectively.

# **Nursing Implications**

**Nursing Practice**: All the Nursing Personnel working in the hospital and community Health centre must be made aware about the risk factors, clinical features and treatment and prevention of Pneumonia and conduct mass and group health education Program by role playing.

**Nursing Administration**: The nurse administrat or have responsibility to provide the nurses with continuing educational opportunities and to motivate them to create awareness regarding prevention of pneumonia

**Nursing Education:** The nursing teachers can educate the students the value of human life, the concept of primary health care, health promotion and prevention of under five pneumonia for reducing the under five mortality rate in the society

**Nursing Research:** The effectiveness of the research study findings is verified by the utility of knowledge of the practicing nurses, which validate great contribution to the nursing profession and evidence based practice (EBP) can be implemented based on research findings

### **Conclusions**

The study was undertaken to evaluate the effectiveness of the educational program to the mothers of underfive children on prevention of pneumonia. Hence this type of researches and education should be conducted in other parts of state for the improvement of health.

### Recommendations

Similar studies can be done on a larger scale, in urban & rural areas so as to compare children in selected [sep] districts. A study can be conducted using other strategies such as manual, computer assisted instruction, self [sep] instruction module, video show. An experimental study

also can be conducted with control group among the mothers of under five children.

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