Effectiveness of computer assisted planned teaching programme on knowledge of rural mothers regarding Home based management for selected health problem of under five children

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Abstract
Infant mortality rate can be measure of nation’s health and social condition. It’s a composite of a number of rates with Acute Respiratory Infection social factors and after be seen as an indicators to measures the level of socio economic Acute Respiratory Infection within a country. The under five children’s population acute higher about 30% in India and accordance of ARTI (acute respiratory tract infection) also much higher among the under five children’s. It is about 30-60% of medical admission and 20-40% of hospital admission in the year of 2007. The overall pre-test mean knowledge score was 16 and dispersion of pre test level of knowledge SD 4.8, post test mean knowledge score was 22.96 and dispersion of post test level of knowledge SD 4.99, The paired t value shows that there is a significant difference between pre-test and post-test mean knowledge score 6.96 (t59 = 2.00) and was highly significant 0.05 and 0.01 level and significant association found at 0.05 level type of family (19.814*).

Keywords: Computer assisted plan teaching program, knowledge, management for health problem, under five children

Introduction
The under five children’s population acute higher about 30% in India and accordance of ARTI (acute respiratory tract infection) also much higher among the under five children’s. It is about 30-60% of medical admission and 20-40% of hospital admission in the year of 2007. There for the investigation felt the need to provide accurate information about prevention of upper respiratory infection to the mothers. The relation between parental education and Acute Respiratory Infection in children’s has become explored in other parts of world but remains relatively unexplored in context of Karnataka. Child health is an important indicator for describing the mortality condition, progress in health and overall social and economic well-being of the country.

Objectives
1. To assess the pre interventional level of knowledge of mothers on home based management for health problem of under five children.
2. To assess the post interventional level of knowledge of mothers, regarding home based management for health problem of under five children.
3. To find out the significant deference between the pre interventional and post interventional level of knowledge regarding home based management for health problem of under five children.
4. To associate the pre interventional level of knowledge mother regarding home based management for health problem of under five children with their selected demographic

Methodology
The research design used for the study was Pre-experimental research design with one group pre-test post test design. The study was conducted among Mothers who are residing in rural area at Bhopal. A sample size of thirty (30) Mothers was selected through convenient sampling technique. The analysis, interpretation and discussion of data collected from 30 Mothers who are residing in rural area at Bhopal (MP). Descriptive and inferential statistics were adopted for the analysis and interpretation of the data.
Findings and Discussion

Section- I: Description of demographic variables

- The most of mothers 43.4% belongs to age group of 22-25 years, 30% were in the age group of 18-21 years, and 16.6% were in the age group of 30 and above 10% were in the age group of 26-29 years.
- With regard to area of residence the most of mothers 70% are living in urban area and 30% in the rural areas.
- With regard to religion most of mothers were 61.7% were in Hindu, 31.7% were in Muslim, 6.6% were in Christian and others.
- With regard to educational status of mothers 38.4% under-five children’s mothers were higher secondary school educated, 35% had educated in graduate and above 21.6% had educated in
- With regard of occupation that 63.4% of housewife mothers and 26.6% of labor and 10% of government job.
- With regard of mothers is 55% of 1-3 years at marriage and 21.7% of 10 and above years at marriage and 20% of 4-6 years of marriage and 3.3% of 7-9 years at marriage.
- With regard to type of family 65% of mothers were living in joint family and 35% of living in nuclear family.
- With regard mothers already have a 43.3% of women that is 1 child and 30% women have 2 children and 20% women have 3 children and 6.7% women had more than 4 children.
- With regard the mothers have 51.6% of have no any previous knowledge and 48.4% under-five children’s mothers had previous knowledge regarding home based management for health problem of under five children.

Section- II: Comparison of pre interventional and post interventional knowledge score on home based management for health problem of under five children. N=30

<table>
<thead>
<tr>
<th></th>
<th>Mean (x)</th>
<th>Standard deviation(SD)</th>
<th>Mean difference</th>
<th>“t” Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre test</td>
<td>16</td>
<td>4.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Post test</td>
<td>22.96</td>
<td>4.99</td>
<td>6.96</td>
<td>10.02</td>
</tr>
</tbody>
</table>

***p<0.05

The data reveals that there is significant difference in the knowledge on home based management for health problem of under five children between pre interventional and post interventional knowledge score hence null hypothesis is rejected and research hypothesis is accepted. So planned teaching program will help in enhancing the knowledge of mothers on home based management for health problem of under five children.

Section- III: Associate the pre interventional level of knowledge mother regarding home based management for health problem of under five children with their selected demographic

The results show that there is significant association between pre interventional knowledge score with selected demographic variables. It is noted that the calculated value is table shows that there is significant between pre interventional greater than the table values for the demographic variables. Level of significant where found the residence and type of family and all of demographic variables are non significant with their pre-test knowledge score mother regarding home based management for health problem of under five children mother hence research hypothesis is rejected.

Conclusion

The relation between parental education and Acute Respiratory Infection in children’s has become explored in other parts of world but remains relatively unexplored in context of Karnataka. Child health is an important indicator for describing the mortality condition, progress in health and overall social and economic well-being of the country.

Reference