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A comparative study to assess the knowledge regarding home management of selected common illnesses among parents of toddler residing in rural and urban areas of Nagpur district

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Abstract

A study was conducted to compare the knowledge regarding home management of selected common illnesses among parents of toddler residing in rural and urban areas of Nagpur district. The purpose of the study is to compare the knowledge regarding home management of common illnesses among parents of toddler from rural area and urban area.

Methodology: The study was based on Qualitative research approach. In the present study Non-Experimental comparative research design was used. The setting of study were Dutta wadi, Nagpur for urban area and Lava, Nagpur for rural area. Sample size for the study was 30 from rural area and 30 from urban area. The non-probability convenient sampling technique was used for selection of sample. The tool was structured questionnaire.

Result: The level of knowledge were seen into 3 categories poor, moderate and good. The score for urban area: poor (23.33%), moderate (40%), well (36.66%). The score for rural area was: poor (20%), moderate (50%) and good (30%). There is a association between knowledge regarding home management and demographic variable.

Conclusion: After the details analysis, this study leads to the following conclusion. The findings of the present study showed that, the rural sample score was higher than the urban knowledge score. Mean of rural parents of toddler was 17.23 and Mean of parents of toddler from urban area was 16.13.

Keywords: Assess, knowledge, home management, common illnesses, parents, toddler, rural area, urban area

Introduction

Health is a both responsibility as well as right. The child health and development of children is a long-term contribution to the growth of the development of the country as whole children of toddler age constituted to 15 to 20% of the India's population. Their protection is a greatest investment for the country's economic prosperity and political stability. Today's children are the citizens of tomorrow. They deserve to inherit a safer fair and healthy world there is no task more important than said guarding their environment. Common illness can caused by organisms which are usually microscopic in size, such as bacteria, viruses, fungi, or parasites that are passed, directly or indirectly. Most common illness are simple at its early stage. But, if we are not taking care of it, then it will leads to serious ones.

Background of the study

Diarrhoeal disease are one of the leading causes for toddlers morbidity and mortality one of the important objective of the child survival and safe motherhood programme was to reduce 30% of the diarrhoeal related death in toddler by 20-70% by 2005.

India bears highest burdens of childhood morbidity and mortality due to childhood pneumonia. A study in India found that Diarrhea remains 2 nd leading cause of death among children and it accounts for more deaths rate than AIDS.

Each year toddlers throughout the world experiencing four to eight episodes of common cold. Official records Indian health ministry reveals the massive increase of dengue fever in India in the year 2012. India had recorded 15.55 cases and 96 deaths in 2009, but over 3500 cases and 216 fatality in 2012.

Need for the study

Diarrhoeal diseases are a major cause of hospitalizations and child deaths globally. Together they account for approximately one in six deaths among children younger than five years. Of India's more than 2.3 million annual deaths among children, about 334 000 are attributable to diarrhoeal diseases. In India alone, reach 1.5 million toddler children become casualty due to diarrhoea every year. Worldwide, pneumonia is the leading and single most important cause of death among toddler. Globally, pneumonia is responsible for about 19% of all toddlers. The proportion of toddler with anemia now stands at 58.5%. However, the proportion with mild anemia rose to 27.3% from 26.3% illnesses per year. The annual incidence rate of dengue was 49.5% per 1000 child years among children.

Problem Statement

“A comparative study to assess the knowledge regarding home management of selected common illnesses among parents of toddler residing in rural and urban areas of Nagpur district”.

Objectives

1. To assess the existing knowledge regarding home management of selected common illnesses among parents of toddler residing in rural and urban areas of Nagpur district.
2. To compare the knowledge of parents of toddler regarding home management of selected common illnesses residing in rural and urban areas of Nagpur district.
3. To find out the association between the demographic variable with knowledge of parents of toddlers regarding home management of selected common illnesses residing in rural and urban areas of Nagpur district.

Hypothesis

H0: There will be no significance difference between the knowledge score among parents of toddler residing in urban and rural areas of Nagpur district regarding home management of selected common illnesses.

H1: There will be significant difference between the knowledge score among parents of toddlers residing in rural and urban areas of Nagpur district regarding home management of selected common illnesses.

H2: There will be significant association between knowledge score with demographic variable among parents of toddler residing in rural and urban areas of Nagpur district regarding home management of selected common illnesses.

Research Design

Non experimental comparative research design.

Variables

Research variable

In this study research variable refers to knowledge about home management of selected common illness among

parents of toddler residing in rural and urban areas of Nagpur district. Baseline variable
Baseline variables refers to demographic variables. i.e., age, education, number of children, monthly income, occupation of mother, occupation of father, source of healthcare, type of family, previous knowledge, source of knowledge.

Settings of the study

For rural area: Lava, Nagpur

For urban area: Dutta wadi, Nagpur

Population

Target population: The target population for the present study was parents of toddler in selected rural and urban areas of Nagpur district.

Accessible population: The accessible population for this study was parents of toddler in selected rural and urban areas of Nagpur district.

Criteria for Sample Selection

Inclusive Criteria of Samples

The study includes:

1. Parents having children 1-3 years.
2. The parents those who can understand and able to read, write and speak Marathi,
3. The parents are available at the time of data collection.

Exclusive Criteria of Samples

The study excludes

1. The mothers who are not willing to participate in the study.
2. Parents who cannot understand and able to read, write and speak Marathi.
3. The parents who are not having toddler children.

Description of Tool: Tool consist of two section

Section A: This section consist of demographic data which include age, sex, religion, education status, resident, marital status, occupation, family income, previous knowledge about cardiac rehabilitation, source of information.

Section B: This section consist of 30 questions based on selected common illnesses such as diarrhea, dengue, pneumonia, anemia, common cold.

Content Validity

In order to obtain content validity the tool was given to eight experts who included two Department of Medical surgical Nursing, one from Department of Child Health Nursing, one from Department of Mental Health Nursing, two from Community Health Nursing, two from Department of Obstetrics and Gynecology.

Methods of data collection

The questionnaire will be used to gather the data about demographic variables and questions based on home management of selected common illnesses.

Method of data analysis

Sr. no.	Data analysis	Method	Remark
1.	Descriptive statistics	Mean, standard deviation, mean percentage	Knowledge regarding home management of common illnesses
2.	Inferential statistics	Unpaired t test	Effectiveness of structured questionnaire
		Chi square test	Association of knowledge of parents with selected demographic variable

Result

Section A: Distribution of parents of toddler (urban) according to their demographic variables.

Section B: Distribution of parents of toddler (rural) according to their demographic variables.

Section C: represents assessment of knowledge of parents of toddler from urban area regarding home management of common illnesses.

Section D: represents assessment of knowledge of parents

of toddler from rural area regarding home management of common illnesses.

Section E: significance of comparison between knowledge score among rural and urban parents of toddler regarding home management of common illnesses.

Section F: Association of knowledge score of rural and urban parents regarding home management of common illnesses among parents of toddler with their selected demographic variables.

Section A: Distribution of parents of toddler (urban) according to their demographic variables.

Demographic variables	Frequency	Percentage%
Age (years)		
18-23 year	06	20%
24-29 year	09	30%
30-35 year	09	30%
36-45 year	06	20%
Education		
Illiterate	06	20%
Primary- secondary	06	20%
Higher-secondary	08	26.66%
Post-graduation	10	33.33%
Number of children		
One	06	20%
Two	08	26.66%
Three	10	33.33%
More than three	6	20%
Monthly income		
Below 10,000	06	20%
10,001 to 20,000	05	16.66%
20,000 to 30,000	11	36.66%
Above 30,000	07	23.33%
Occupation of mother		
Housewife	17	56.66%
Working women	13	43.33%
Occupation of father		
Business	05	16.66%
Labour	06	20%
Government job	11	36.66%
Private job	8	26.66%
Source of healthcare		
Child specialist	06	20%
Health worker	08	26.66%
Multi-speciality	09	30%
Government hospital	07	23.33%
Type of family		
Nuclear	12	40%
Joint	10	33.33%
Extended	08	26.66%
Matrifocal	0	00%
Previous knowledge about management of common illnesses.		
yes	10	33.33%
no	14	46.66%
Source of knowledge		
Book, media,	3	10%
Newspaper	5	16.66%
Friends	4	13.33%
Family	4	13.33%

The above table depicts frequency and percentage wise distribution of number of frequency of age, education, number of children, monthly income, occupation of mother, occupation of father, source of healthcare, type of family, previous knowledge about home management of common illnesses, source of knowledge respectively of parents of

toddler from urban areas of Nagpur district.

- Majority of the age group are from 6 (20%) of them were belonging to the age 18-23 years, 9(30%) in the age range of 24-29years, 9(30%) in the age group 30-35 years, 06(20%) in the age group 36-44 years respectively.

- Majority of the education were illiterate 6(20%), primary-secondary 6(20%), higher- secondary 08(26.66) Post graduate and above 10 (33.33%).
- Data for number of children reveals that, parents who are having one child are in 20% number (frequency =6). And the parents who are having 2 child are in 26.66% number (frequency = 8) and having more than 3 are in 20% number (frequency=6)
- Majority of the Income were below 10,000 6 (20%), 10,001 – 20,000 05 (16.66%), 20, 00- 30,000 11(36.66%) and 30, 00 and above 07(23.33%).
- Majority of the occupation of mother were housewife 17 (56.66%), Private job 09(15%), and working women 13(43.33%).
- Majority of the source of health care child specialist 6 (20%) health worker 08(26.66%), multi-specialty 09 (30%) and government hospital 07 (23.33%).
- Majority of the source of knowledge Book, media, 3(10%) newspaper 05 (1 6.66%), friends 04(13.33%) and family 04 (1 3.33%).
- Majority of family nuclear 12(40%), joint 10 (33.33%), extended 08(26.6 6%), matrifocal 0(0%) Majority of the knowledge about common illnesses were yes 10(33.33%) and remaining were No 14 (46.66%).

Majority of the occupation of father were business 05

Section B: Distribution of parents of toddler (rural) according to their demographic variables. N=30

Demographic variables	Frequency	Percentage%
Age (years)		
18-23 year	05	16.66%
24-29 year	10	33.33%
30-35 year	11	36.66%
36-45 year	04	13.33%
Education		
Illiterate	08	26.66%
Primary- secondary	06	20%
Higher-secondary	10	33.33%
Post-graduation	06	20%
Number of children		
One	11	36.66%
Two	05	16.66%
Three	08	26.66%
More than three	06	20%
Monthly income		
Below 10,000	08	26.66%
10,001 to 20,000	05	16.66%
20,000 to 30,000	11	36.66%
Above 30,000	06	20%
Occupation of mother		
Housewife	16	53.33%
Working women	14	46.66%
Occupation of father		
Business	08	26.66%
Labour	06	20%
Government job	10	33.33%
Private job	06	20%
Source of healthcare		
Child specialist	05	16.66%
Health worker	10	33.33%
Multi-speciality	11	36.66%
Government hospital	04	13.33%
Type of family		
Nuclear	10	33.33%
Joint	09	30%
Extended	11	36.66%
Matrifocal	00	00%
Previous knowledge about management of common illnesses.		
yes	17	56.66%
no	13	43.33%
Source of knowledge		
Book, media,	04	13.33%
Newspaper	04	13.33%
Friends	06	20%
Family	03	10%

- The above table depicts frequency and percentage wise distribution of no. of frequency of age, education, number of children, monthly income, occupation of mother, occupation of father, source of healthcare, type of family, previous knowledge about home management of common illnesses, source of knowledge respectively of parents of toddler from rural areas of Nagpur district.
- Majority of the age group are from 05 (16.66%) of them were belonging to the age 18- 23 years, 10(33.33%) in the age range of 24-29years, 11 (36.66%) in the age group 30- 35 years, 04(13.33%) in the age group 36-44 years respectively
- Majority of the education were illiterate 08(26.66%), primary secondary 6(20%), higher-secondary 10 (33.33%) Post graduate and above 06 (20%).
- Data for number of children reveals that, parents who are having one child are in 36.66% number (frequency =11). And the parents who are having 2 child are in 16.66% number (frequency = 5), 3 child are in 26.66%(frequency=8) and having more than 3 are in 20% number (frequency=6)
- Majority of the Income were below 10,000 8(26.66%), 10,001 – 20,000 05 (16.66%), 20,00- 30,00 11(36.66%) and 30,00 and above 06(20%).
- Majority of the occupation of mother were housewife 16(53.33) and working women 14(46.66%).
- Majority of the occupation of father were business 08(26.66%), Labour 06 (20%), government job 10(33.33%), and private job 06 (20%).
- Majority of the source of health care child specialist 05(16.66%) health worker 10 (33.33%), multi speciality 11 (36.66%) and government hospital 04(13.33%)
- Majority of the source of knowledge Book, media, 04(13.33%) newspaper 04(13.33%), friends 06(20%) and family 03(10%)
- Majority of family nuclear 10 (33%) joint 09(30%) extended 11 (36.66%), matrifocal 0(0%)
- Majority of the knowledge about common illnesses were yes 17(56.66%) and remaining were No 13(43.33%).

Section C: Represents assessment of knowledge of parents of toddler from urban area regarding home management of common illnesses.

Level of knowledge score	Score range	Percentage score	Frequency	Percentage
Poor	0-10	0-33%	7	23.33%
Good	10-20	33%-66%	12	40%
Excellent	20-30	66% 100%	11	36.66%
Minimum score	03			
Maximum score	27			
Mean%	53.76%			
Mean score	16.13			

The above table show the frequency and percentage wise distribution of parents of toddler from urban area regarding home management of common illnesses. The level of knowledge were seen into 3 categories poor, good, excellent

of parents of toddler 03(23.33%) had poor, 05(40%) and 02(36.66%) had excellent knowledge score regarding home management of common illnesses.

Section D: Represents assessment of knowledge of parents of toddler from urban area regarding home management of common illnesses.

Level of knowledge score	Score range	Percentage score	Frequency	Percentage
Poor	0-10	0-33%	6	20%
Good	10-20	33%-66%	15	50%
Excellent	20-30	66% 100%	9	30%
Minimum score	06			
Maximum score	27			
Mean%	57.433%			
Mean score	17.23			

The above table no. 4.4 show the frequency and percentage wise distribution of parents of toddler from urban area regarding home management of common illnesses. The level of knowledge were seen into 3 categories poor, good,

excellent of parents of toddler 01(20%) had poor, 07(50%) and 02(30%) had excellent knowledge score regarding home management of common illnesses.

Section E: significance of comparison between knowledge score among rural and urban parents of toddler regarding home management of common illnesses.

Overall	Mean	S D	Mean percentage	T- value		P-value
Urban	16.13	7.63	53.76%	Tabulated value	Calculated value	P<0.05
Rural	17.23	5.86	57.433%	1.664	8.36	

The above table depicts the overall mean knowledge score of urban and urban parents of toddler which reveals that parents of toddler from rural area was higher 17.23 with S.D. 5.86 when compared with urban area knowledge score value was 16.13 with S.D. 7.63.

Also, the calculated value for t test greater than the tabulated value at 0.05 significance level so it can be said that there is a association between demographic variable and knowledge score of parents of toddler.

Section F: Association of knowledge score of rural and urban parents regarding home management of common illnesses among parents of toddler with their selected demographic variables.

Sr.no	Demographic Variables	Degree of freedom	Level of significance	P value	Chi. sq.	Significance
1.	Age	6	0.05	12.59	6.678	Not significant
2.	Education	6	0.05	12.59	6.99	significant
3.	Number of children	6	0.05	12.59	16.299	significant
4.	Monthly income	6	0.05	12.59	2.56	Not significant
5.	Occupation of mother	2	0.05	5.99	0.0496	Not significant
6.	Occupation of father	6	0.05	12.59	39.86	significant
7.	Source of healthcare	6	0.05	12.59	0.759	Not significant
8.	Type of family	6	0.05	12.99	0.78	Not significant
9.	Previous knowledge	2	0.05	5.99	0.457	significant
10	Source of knowledge	6	0.05	12.99	2.66	Not significant

The above table depicts an analysis of data to find association between knowledge score of urban parents of toddler regarding home management of common illnesses and their selected demographic variables. It shows that the number of children and occupation of father shows significance at 0.05% level of significance.

Personal experience

The entire study gave an enriching experience to the investigator. It helped him to develop her skill in critical thinking and analysis and realize the importance of effective communication with respondent.

The entire study was varied and rich with learning experience, which enabled the investigator to develop her skill in dealing with different personalities. The concept clarity about research as a whole was increased. At every stage the investigator received guidance and support from his guide. This boosted confidence to go ahead and carry out the planned activities. The co-operation from study samples was remarkable. The research was a great learning opportunity for the investigator.

Recommendation

On the basis of the findings of the study, it is recommended that the following studies can be conducted

A similar study on a large scale including hospitals, general population and specially parents can be carried out along with home management of on common illnesses of toddler in order to estimate the level of knowledge regarding home management of common illnesses of parents of toddler and imparting knowledge regarding these factors for generalization of finding.

Study can be conducted to evaluate the effectiveness of health education to improve the knowledge regarding on home management of selected common illnesses among parents of toddler

Study can be conducted to compare the effectiveness of structured teaching programme to improve the knowledge regarding home management selected common illnesses among parents of toddler.

A similar study can be conducted to assess the knowledge of health personnel working in paediatric hospital regarding home management of common illnesses of toddler showed after hospitalization.

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