A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAM ON KNOWLEDGE REGARDING PREVENTION OF HOUSEHOLD INJURIES AMONG THE MOTHERS OF TODDLERS IN SELECTED VILLAGE OF BELGAUM

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ABSTRACT

Children are the most important and vulnerable group of our population. Childhood accident is a sudden cause of death or an emergency in children. Accidents are usually related to the growth and development of children. The sudden changes in their activities may place the children at the risk of accidents. The lack of knowledge and ignorance of child care may add to the predisposing factors for the childhood accidents. Nowadays most of the mothers are Jobholders which increases the risk of household injuries. Increased eagerness to watch tele serials among the mothers increases the risk. Another reason is that children are brought up by care takers till they are going to start schooling.

Keywords: Effectiveness, Structured Teaching Program, Prevention, household injuries, under five children.

INTRODUCTION

Mother is an important care provider and she is strongly responsible to improve the safety of the children. Children are the most important and vulnerable group of our population. Childhood accident is a sudden cause of death or an emergency in children. Accidents are usually related to the growth and development of children. The sudden changes in their activities may place the children at the risk of accidents. The lack of knowledge and ignorance of child care may add to the predisposing factors for the childhood accidents. Among children under-five are always at the door step. It is a challenging time for parents and child to know each other. Under-five are like a discovery machine because of curious in nature. According to WHO, unintentional injuries ranks fourth among the leading cause of death of children in India. In 2005, 15,281 toddlers were killed due to unintentional injuries. In 2000, there were 120,000 deaths due to accidents. In 2004, there were 3,308 unintentional drowning cases in the United States, an average of nine children per day. It is estimated that drowning deaths among toddlers of 1-3yrs of age was due to nonfatal submersion which needs hospitalization. Children who still require Cardio Pulmonary Resuscitation at the time they arrive at the emergency department have poor prognosis with at least half of survivors suffering from significant neurologic impairment. Around 19% of drowning death involving in children occurs in public pools with certified life guard present. From 2005-2007 there were an average of 283 fatal drowning cases among toddlers. Among them 65% were boys and 46% were girls. Burns are caused by a number of agent factors, such as chemicals, hot liquids, fumes, electrical items, leakage of kerosene stoves, practice of low-level cooking, unsafe crackers used during festivals without supervision. About 30% of burns occur in children between the ages of 1-3 years. Thermal injuries are the third leading cause of accidental deaths in children and are the second leading cause of injuries in the age-group between 1 -3 years. Nearly 80% of the burns occur at home. Major burn injuries occur in toddlers. The problems like contracture, deformities and disfigurements are some of the complications of burn injuries. During 2001 there were 32,509 toddlers died in India due to burn injuries. The world health day 2003 was dedicated to “Healthy environment for children”. In September 2002, WHO launched the Healthy Environment for Children Initiative Young children are known for exploring vigilantly with their mouth. They don’t know the difference between what is good
OBJECTIVES OF THE STUDY
1. To assess the knowledge of mothers of toddlers regarding prevention of house hold injuries.
2. To evaluate the effectiveness of STP on knowledge regarding prevention of house hold injuries.

HYPOTHESIS
H1: The mean post test knowledge scores of the mothers of toddler after the structured teaching is significantly higher than the pre test knowledge.

RESEARCH METHODOLOGY

RESEARCH APPROACH: Evaluative approach was used for the present study.

RESEARCH DESIGN: The research design selected for the study was pre experimental one group pre test -post test design.

RESEARCH SETTING:
Setting is the physical location and condition in which data collection takes place in a study. The setting planned for particular study was G. Hosur village, Belgaum.

SAMPLE SIZE:
The sample size for the present study consists of 30 mothers of toddlers from G. Hosur village, Belgaum

SAMPLING TECHNIQUE:
Purpose sampling was used to select the samples for the present study.

DESCRIPTION OF THE TOOL:
The tool used for data collection was structured knowledge questionnaire with 30 items.

Section A: Socio demographic Performa

Section B: Structured knowledge questionnaire on Prevention of household injuries among toddlers.

The knowledge score of respondents was graded as:
- Good knowledge score (mean±S.D)
- Average knowledge score (mean±S.D) & (mean-S.D)
- Poor knowledge score (mean-S.D)

RESULTS

Section 1: Findings related to socio demographic variables of mothers of toddlers:
- Majority of the samples (43.3%) were in the age group between 18-25yrs while minimum were (23.3%) in the age group between 32-39yrs.
- Majority of the samples (53.3%) were having secondary education, while (33.3%) were illiterate.
- Majority of samples (73.3%) were housewives while (66.6%) were coolie.
- Majority of samples were (100%) were Hindus.
- Majority of samples (100%) were having income less than Rs 3000/month.
- Majority of samples (73.3%) were having one toddler, while minimum (6.6%) were having three toddlers.
- Majority of samples (73.3%) were living in nuclear family, while minimum (26.6%) were from joint family.
- Majority of samples (70%) were residing in semi-pucca house, while minimum (16.6%) were staying in pucca houses.
Section 2: Findings related to pretest and post test knowledge level of mothers of toddlers.

In the pretest 8(27%) had poor knowledge where as in post test none of the samples had poor knowledge. In the pretest 16 (53%) had average knowledge and in the post test 77% had average knowledge. In the pre test 6(20%) had good knowledge and in the post test 7 (23%) had good knowledge.

<table>
<thead>
<tr>
<th>Measurement of knowledge before intervention</th>
<th>Administering Structured Teaching Programme</th>
<th>Measurement of knowledge after intervention</th>
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<td>Pre-test (O₁)</td>
<td>Intervention (X)</td>
<td>Post-test (O₂)</td>
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Table 1: Symbolic representation of Pre- experimental one group pretest -post test design

Section 3: Findings related to the effectiveness of STP regarding prevention of house hold injuries among mothers of toddlers:

In the present study , the mean post test score (26) was higher than the mean pretest knowledge score (10.16) which proved that STP was effective method in improving the knowledge of mothers. The paired ‘t’ test calculated value (49.4) was significant at p< 0.05 level of significance. Hence research hypothesis H₁ is accepted.

CONCLUSION

Based on the finding of the study, the following conclusions have drawn.

Over all pre test knowledge on prevention of household injuries among mothers of toddlers was average which suggested there is need for STP for mothers of toddlers regarding prevention of household injuries among toddlers. Post test result shown the significant improvement in the level of knowledge regarding prevention of household injuries among toddlers. It can be concluded that STP was an effective method of teaching the mothers of toddlers to improve the knowledge regarding prevention of household injuries.

NURSING IMPLICATIONS:

The finding of the study had varied implications in different areas of nursing practice, Nursing Practice, Nursing Administration, Nursing Education and Nursing Research.

Nursing Practice:

Since the present study shown that the most of mothers have average knowledge regarding prevention of house hold
injuries. The most of the mothers of toddlers having problems related to house hold injuries. The present study would enable them to become aware about the house hold injuries. It would also enable nurses to prepare themselves to treat any kind of house hold injuries among toddlers admitted.

**Nursing Administration:**
The nurse administrator can emphasize the need for organizing health education programme on prevention of household injuries among toddlers. Educational and training programmes can be planned for the nurses or in the community.

**Nursing Education:**
Findings of the study can be used by the nurse educator to highlight the house hold injuries among toddlers. This structured teaching programme can be used as reference material by student nurses.

**Nursing Research:**
The present study conducted by the investigators can be the source of review of literature for others, who are intending to conduct the study on household injuries among toddlers.

**LIMITATIONS:**
1. The present study was limited to a selected village of Belgaum.
2. The present study was delimited to only 30 mothers.
3. Generalization cannot be done due small sample size and limited setting.

**RECOMMENDATIONS:**
1. A similar comparative study can be conducted.
2. Similar study can be conducted using SIM, Informational booklet as teaching strategy.
3. Similar study can be carried out for the care givers of toddlers.

**REFERENCE**