



Awareness of Mother Regarding Respiratory Tract Infections Among Children

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ABSTRACT

Respiratory infections are a priority health problem in India. Studies reported that India have prevalence of respiratory infections up to 30-50% among children. The present study was undertaken with objectives to assess the awareness of mothers regarding respiratory infections and to determine the association between selected socio personal variables and awareness of mothers of respiratory infections. A descriptive survey was conducted, among fifty mothers of children less than 12 years age group attending pediatric OPD, pediatric wards of Sree Gokulam Medical College Hospital using validated structured questionnaire. The results show that majority of the mothers (68%) have good awareness regarding respiratory tract infections and also the awareness level does not have any significant association with demographic variables such as age, religion, education, occupation, type of family, total no: of children, place of living, and source of health related information.

KEYWORDS : Mother, respiratory tract infection, children, prevalence

Introduction:

Children are the future Citizen of India. India is home to nearly twenty percentage of the World's child population. They are the foundation and backbone of our society. Despite health improvements over the last thirty years, lives continue to be lost to early childhood diseases, inadequate newborn care and childbirth-related causes. More than two million children die every year from preventable infections. Children are prone to many serious diseases. One such serious problem is respiratory infections

During the first years of life physical growth, maturation, acquisition of competence and psychological recognition occurs in discontinues burst. The child acquire new competencies in the gross motor, fine motor, cognitive and emotional domains. The family is the central focus in the children, in turn exerts considerable influence on all other families regardless of the size and form of the family unit. The parents fell more comfortable when the child reaches adulthood.

ARI represent one of the major health problems in children living in developing countries. Among the total child's deaths in developing countries nearly one fifth are directly attributed to ARI. The children and adult preferentially breathe through their nose unless nasal obstructions interfere. However, most children are obligate and nasal breaths and significant nasal obstruction presenting during the birth, such as colo anal atresia, may be a life threatening situation for the infant unless an alternative to the nasal air way is established. The most common disorder of upper respiratory tract is related to infections, bacterial, viral and allergic reaction. Both process resulting in increased mucus production and oedema. This interferes with the normal functions of upper respiratory tract including provision of a clear passage way of air to enter the lungs and humidifying of the air as it passes.

As per W.H.O estimates, respiratory infections caused about 987000 deaths in India, of which 969000 were due to acute lower respiratory tract infection. 10000 Due to acute upper respiratory infection and 9000 due to otitis media. The burden of the disease in terms of dialysis lost was 25.5 million of these 24.8 million were due to acute upper lower respiratory tract infection, 2.74 lacks due to acute upper respiratory tract infection, and 4.75 due to otitis media.

In India, some bacterial and viral diseases also causes the upper respiratory tract infection, measles causes child morbidity and significant child mortality. Diphtheria and whooping cough also causes child

mortality and morbidity. Incidents of the diphtheria in the country were about 12952 whereas the cases of whooping cough are 26 thousands.

A large number of diseases could be prevented with little or no medical interventions. Mothers play a key role in the management of child with upper respiratory tract infection. Mothers has to understand that the appropriate decision making, recognize the mild, moderate and severe respiratory tract infection and initiate correct domiciliary management for upper respiratory infection at home as soon as possible to prevent the progression of the infection. The ignorance and in adequate knowledge are important factors, which affects health of child. If upper respiratory infections are not treated in early stage it may leads to certain complication like staphylococcal, pericarditis, empyema, pneumothorax, and staphylococcal pneumonia. Which increases the risk of child mortality? Therefore the investigator felt the need to provide accurate information about prevention and domiciliary management of upper respiratory to the mothers to help them to provide effective home management to children suffering from upper respiratory tract infection.

The children's population accounts higher about 30 percentage in India. And occurrence of acute respiratory tract infection also much higher among the children, it is about 30 to 60% of medical consultations and 20 to 40% of hospital admissions in the year of 2009.

Materials and methods:

The study was conducted in the pediatric ward and pediatric outpatient department in Sree Gokulam Medical College Hospital (SGMCH), Trivandrum. SGMCH is a tertiary level multispecialty hospital with 750 beds. Data collection process begun with the identification of subjects who met the inclusion criteria. Their willingness to participate in the study was assessed. Subjects were recruited using non probability convenient sampling technique after obtaining informed consent. Ethical committee clearance and setting permission was obtained prior to the study. Data was collected using two tools; the investigator reviewed research and non-research literature related to respiratory tract infection. The investigator reviewed several tools used for assessment of knowledge of mothers regarding respiratory tract infection. After the formal discussion with guide and tool try out, the tool was finalized. **Section A** :- Socio- personal variables of the mother which includes mothers age, religion, education, occupation, type of family, family income, total number of children, residence, and source of health related information. **Section B**:-Tool to assess the awareness

of mothers regarding respiratory tract infection. The data collection period was on 17/7/15. After explaining the purpose and nature of the study, informed written consent was obtained for the participation in the study from mothers.

Results:

Socio demographic characteristics

Out of 50 mothers surveyed, majority of subjects (32%) were in age group 26-30yrs. Majority of the mothers (62%) were Hindus, 70% were unemployed. More than half of the subjects belong to nuclear family (66%), had completed higher secondary education (46%) and have single child (54%). Majority of the mothers (84%) were from rural area and nearly one third of the mothers (36%) gets the health related information from hospitals.

Awareness of mothers regarding respiratory tract infection among children

Table 1: Frequency and percentage distribution of knowledge score of mothers regarding respiratory tract infection

(n = 50)

Score range	Frequency (n)	Percentage (%)
Adequate knowledge (11 - 15)	27	54%
Average knowledge(6 - 10)	21	42%
Poor knowledge(1 - 5)	2	4%

The data presented in the table 1 displays the frequency and percentage distribution of mothers according to level of knowledge score. The data shows that 54% (27) had adequate knowledge, 42% (21) had average knowledge and 4% (2) had poor knowledge.

Association between level of awareness and selected socio demographic variables

The present study found that the awareness on worm infestation has no significant association with age of the mother ($p = 0.475$), education of mother ($p = .211$), occupation of mother ($p = 0.849$), type the family ($p = 0.163$), religion of mother ($p = 0$), no: of children ($p = 0.7705$), place of living ($p = 0.404$), and source of health related information ($p = 0.45$).

Discussion:

The present study found that more than half of the subjects (54%) have adequate awareness regarding respiratory tract infection in children. The finding of the present study was consistent with the findings of **Vasumathi K** (2010) who reported that knowledge of urban mother's was 62.08% and the knowledge of rural mother's regarding prevention of respiratory infections was 53.6% and found that the urban mothers of children have more knowledge than rural mothers on prevention of respiratory infections in Coimbatore. It was not consistent with findings of **Sharma R et al** (2014) among Rural mothers, maximum 21(42%) mothers had average knowledge, 19 (38%) had below average knowledge, 7 (14%) had good and 3(6%) had excellent knowledge regarding respiratory infection in children. The result was also contradictory to the findings of **Traub R J et al** (2004) who reported that more than 85% of the mothers have high knowledge on respiratory tract infections in tea growing community of Assam.

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The findings in the study are not consistent with the result of **Traub R J et al** (2004) who reported that more than 85% of the mothers with high knowledge, socio economic status and good hygienic practices.

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