Original Research Paper

Nursing

IMPACT OF AWARENESS PROGRAM ON "CAUSES AND PREVENTION OF WATER BORNE DISEASES" AMONG HOUSEWIVES AT SELECTED VILLAGES OF WAGHODIA TALUKA

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ABSTRACT **BACKGROUND:** The burden of waterborne diseases is paramount in the global. About 4% of the global burden of diseases is attributable to water, sanitation and hygiene. Nearly 2.2 million people die every year due to diarrheal diseases globally. Of these, 1.8 million deaths occur alone in low-income countries. Further, in low and middle-income countries one of the tenth leading causes of death is attributable to diarrhoea-related diseases.
AIM & OBJECTIVES: The aim of study was to assess the impact of awareness program on causes and prevention of water borne diseases among housewives.
METHODS: An evaluative research approach with pre-experimental one group pre-test post-test design was used. Sample was selected by using purposive sampling technique. Data was collected by using structured knowledge questionnaire. The data was tabulated and analyzed in term of objectives of the study, using descriptive and inferential statistics. RESULTS: the mean post-test knowledge score (19.43) also was higher than the mean pre-test score (6.87). It was found that calculated value 57.48 was much higher than the tabulated' value-1.98 at 0.05% level of significance. The chi-square value shows that there is a significant association between knowledge of housewives with selected demographic variables such as age and education. There is no significant association between sources of water, drainage system, previous knowledge and types of family.
CONCLUSION: The study finding revealed that awareness program was highly effective in improving knowledge of housewives.

KEYWORDS : Evaluate, Effectiveness, Awareness program, Water borne diseases

INTRODUCTION
Children are one of the most valuable groups of the society, social, political and environmental any changes in have maximum impact on children. Their development and wellbeing is influenced by a variety of factor including economic condition of family, education status of parents especially the mother, availability of safe drinking water and sanitary facilities, approachability to health care services and availability of education[1]. According to the World Health Organization (WHO), such diseases accounts for an estimated 4.1% of the total daily global burden of disease, and cause about 1.8 million human deaths every year[2] Water borne diseases are any illness caused by water, people drink that is contaminated by micro-organisms, which contain pathogenic micro-organisms[3]. The complete picture of water borne disease is complex for some different reasons. Over a period of years, the picture of water related human issues has become more and more comprehensive with the emergence of new water related infection diseases. Proper diet and sufficient nutrition is one way of drastically reducing the chances of acquiring or spreading water borne illness[4] Poor health among school going children is resulted from the lack of awareness of the health benefits of personal diet. Diarroheal diseases, skin diseases, worm infestations and dental diseases are most commonly associated with poor personal hygiene. One of the major problems faced by school children are infections. The main causes of infections are contaminated water and poor sanitation, as well as poor hygienic practices. Due to poor sanitation favour person to person transmission of infection.[5]

AIM OF THE STUDY:
To assess the impact of awareness program on causes and prevention of water borne diseases among housewives.

OBJECTIVES OF THE STUDY
- To Assess pre-test level of knowledge regarding causes and prevention of water borne diseases among housewives.
- To assess the impact of awareness program through pre-test and post test scores.
- To find out association between pre-test knowledge scores on causes and prevention of water borne diseases with selected demographic variables.

MATERIALS & METHODS:
An evaluative research approach with pre-experimental one group pre-test post-test design was used. 100 Sample was selected by using purposive sampling technique. The study was conducted in Indiranagari, Navinagri and Bhuritalvadi of Waghodia Taluka.

Inclusion criteria
Housewives who drinks unsafe water either from ponds or any reservoir.
Housewives who know to read and write Gujarati.

Exclusion criteria
Housewives who are sick at the time of data collection.
Housewives who are not available at the time of data collection.

Instrument used for the study
Section 1: Consists of selected demographic variables such as age, education, occupation, type of family, family income, previous knowledge regarding causes and prevention of water borne diseases.
Section 2: Structured knowledge questionnaire consists of 25 questions to assess the knowledge regarding causes and prevention of water borne diseases. The scores range from minimum of '0' and maximum of '25'.

Data collection process
Data for the main study was collected from 3rd October to 14th October by using self-administered structured knowledge questionnaire. Total of 100 housewives were selected for the main study. The researchers have selected 30:30:40 samples from 3 villages respectively. Purpose of study was explained and confidentially of their responses was assured. Written informed consent from all the samples was taken and subjects were given necessary instruction before administering the tool. The researcher along with two research assistants (total 3 members) selected 10-14 housewives each for the data collection process. Likewise pre-test data was collected on 3rd, 4th and 5th October 2017 followed by administration of awareness program. Post-test data was collected on 12th, 13th and 14th October 2017 to find out the effectiveness of awareness program on causes and prevention of water borne diseases.

RESULTS
Section A: description of the demographic variables of the housewives
Demographical variables including age, education, types of family, occupation, sources of water, drainage system and previous knowledge. It was observed that among 100 participants majority belongs to the age group of 15-20 years, 42(42%),74% housewives have primary education, majority of housewives (61%) belongs to

joint family, (82%) were unemployed, 59% respondent's sources of water was bore well,(74%) use open drainage system and 46% of housewives will gain knowledge through media.

Section B:
Table 1: Comparison of pre-test and post-test knowledge scores of housewives regarding causes and prevention of water borne diseases

N=100

KNOWLEDGE ASPECTS	PRE-TEST			POST-TEST			T TEST	SIG. 0.05 %
	Mean	SD	Mean %	Mean	SD	Mean %		
Knowledge related to the introduction of water borne diseases	0.63	0.580	31.5%	1.68	0.566	84%	14.66	S
Causes of water borne diseases	1.55	0.988	25.83%	4.73	0.851	78.83 %	24.65	S
Types of water borne diseases	1.28	0.975	25.6%	3.97	0.834	79.4%	21.47	S
Prevention and treatment of water borne diseases	3.41	1.231	28.41%	9.05	1.095	75.41 %	33.59	S
OVER ALL SCORE	6.87	1.72	27.48%	19.43	1.52	57.72 %	57.48	S

t (99, 0.05)=1.98

Section C:

Table 2: Association between pre-test knowledge scores of housewives with selected demographic variables

N=100

Sr.No	VARIABLES	KNOWLEDGE SCORE		Chi-Square Value	df	Inference
		Inadequate	Moderate			
1	AGE			8.24	3	S
	15-20 years	36	1			
	21-40 years	32	10			
	41-60 years	13	1			
	>61 years	6	1			
2	EDUCATION			6.06	2	S
	Primary	67	7			
	Secondary	15	6			
	Graduate	5	0			
	Post graduate	0	0			
3	TYPES OF FAMILY			0.02	1	NS
	Joint	53	8			
	Nuclear	34	5			
4	OCCUPATION			0.06	1	NS
	Employed	16	2			
	Unemployed	7	11			
5	SOURCES OF WATER			1.98	2	NS
	Panchayat	12	1			
	Bore well	49	10			
	River/stream/Pond	26	2			
6	DRAINAGE SYSTEM			0.06	1	NS
	Open	64	10			
	Closed	23	3			
7	PREVIOUS KNOWLEDGE			0.42	2	NS
	Newspaper	15	3			
	Media(TV, Radio, Books)	41	5			
	Friends/Families	31	5			

DISCUSSION:
The aim of study was to assess the impact of awareness program on causes and prevention of water borne diseases among housewives. It was found that the housewives had inadequate knowledge related to water borne diseases after the awareness program there was significant improvement in the knowledge of housewives. Different study shows that Mother creates a healthy environment at home to enable the child to grow in a secure and safe atmosphere. She has to ensure that the foundation needed for health and growth of the children in early water borne diseases.[6]

CONCLUSION
The present study assessed the knowledge regarding causes and prevention of water borne diseases among housewives and found that the housewives had inadequate knowledge related to water borne diseases in the pre-test. After the awareness program there was significant improvement in the knowledge of housewives.

REFERENCES
1. Piyush Gupta,"Essential pediatric nursing", 2nd edition, published by: jaypee brothers Page no: 516.
2. Sharma BBN and sherin Raj, T.P. (2006). Drinking water and sanitation, publishers 'health action. (vol 6), page no: 5-10.
3. https://www.disabled-world.com/health/water-diseases.php
4. Flood TJ. Water-related incidents in Maricopa County, AZ, 2014. Arizona Department of Health Services, Bureau of Public Health Statistics. Phoenix, AZ. February 2016.
5. Henshaw Ashley. Types of water borne disease.2016 May 7.https:// www. symptomfind.com/health/waterborne-diseases/
6. K Park. Textbook of preventive and social medicine. 19th ed. Jabalpur: Banarsidas Bhanot, Publishers; 2007.314-317