ORIGINAL RESEARCH PAPER

Volume-8 | Issue-2 | February-2019 | PRINT ISSN No 2277 - 8179

INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

A STUDY TO DETERMINE THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON BRONCO PNEUMONIA AMONG MOTHERS OF UNDER FIVE CHILDREN IN A SELECTED PEDIATRIC HOSPITAL AT GUNTUR DISTRICT

Nursing

Mr. Palagani Naga Raju* Assistant professor, Hind School And College Of Nursing, Ataria ,mau.
*Corresponding Author

ABSTRACT

Background: Bronco pneumonia is an illness usually caused by infection, in which the lungs become inflamed and congested, reducing oxygen exchange and leading to cough and breathlessness. It affects individuals of all ages, but occurs most frequently in children. Among children pneumonia is the most common cause of death worldwide. Every year 1.9 million children under five years of age die from bronco pneumonia Indeed, it is the leading cause of child death in the world. **Objectives:** (1) to assess the existing knowledge of under five mothers on bronco pneumonia.(2) To study the effectiveness of knowledge of under five mothers after Structured teaching programme on bronco pneumonia.(3) To compare pretest and post test knowledge of under five mothers. **Materials and methods:** research design is pre experimental design was used in this study. Data collected from 50 mothers of under five children In selected pediatric hospital at Guntur district. Purposive sampling was used for selecting the sample in the investigator developed structured questionnaire on bronco pneumonia used for data collection.

KEYWORDS

Effectiveness, Structured Teaching Programme, Knowledge, Mothers.

INTRODUCTION:

'Natural forces within us are the true healers of disease'

Bronchopneumonia is a type of pneumonia characterized by multiple foci of isolated, acute consolidation, affecting one or more pulmonary lobes. It is one of two types of bacterial pneumonia as classified by gross anatomic distribution of consolidation (solidification), the other being lobar pneumonia.

The United Nations Children's Fund (UNICEF) estimates that pediatric pneumonia kills 3 million children worldwide each year. These deaths occur almost exclusively in children with underlying conditions, such as chronic lung disease of prematurity, congenital heart disease, and immunosuppressant. Although most fatalities occur in developing countries.

Every year 1.9 million children under five years of age die from bronco pneumonia. Indeed, it is the leading cause of child death in the world. The millennium development goal target of reducing the less than five mortality rate by two-third by 2015 has renewed interest in accurate assessment of the number of children affected and underlying causes. A paper in the world health organization bulletin reviews the history and current status of knowledge on pneumonia in children's among under fives.

Bronchopneumonia is less likely than lobar pneumonia to be associated with streptococcus. The bronchopneumonia pattern has been associated with hospital acquired pneumonia and with specific organisms such as Staphylococcus aureus, Streptococcus pneumonia, Escherichia coli, and pseudomonas. In bacterial pneumonia, invasion of the lung parenchyma by bacteria produces an inflammatory immune response. This response leads to a filling of the alveolar sacs with exudates. The loss of air space and its replacement with fluid is called consolidation.

NEED FOR THE STUDY:

WHO established child health epidemiology reference group (CHERG) in 2001 to review epidemiological data on the main causes of death for the year 2000.Globally there were 156 million new episodes of childhood clinical bronco pneumonia, occur 95% in developing countries. The incidence of clinical bronco pneumonia –the risk of developing it within a specified period of time –in children under five in developing countries is almost 29%.In developing countries 8.7% of childhood bronchi pneumonia cases (13.1 million are life threatening and requires hospitalization.

While most healthy children can fight the infection with their natural defenses, children whose immune systems are compromised are at higher risk of developing pneumonia," according to the WHO. "A child's immune system may be weakened by malnutrition or undernourishment, especially in infants who are not exclusively breast-fed.

Recently WHO has decided to launch an annual "World pneumonia day" on November 2nd,2009.This day will mobilize effects to fight pneumonia tightly called a 'neglected' or 'forgotten' disease, that kills more than 2 million children under the age of five each year worldwide. World over pneumonia kills more than any other illness – AIDS, Malaria and Measles. About 156 million new episodes occur each year worldwide, of which 151 million episodes are in the developing countries. Of all community cases,7-13% are severe enough to be life threatening and requires hospitalization.

In India also 410,000 children under five years of age die of bronco pneumonia each year." Millennium development goals (MDG)"- to reduce under five mortality by two-third by 2015 are to be achieved

Statement of the problem:

A Study To Determine The Effectiveness Of Structured Teaching Programme On Bronco Pneumonia Among Mothers Of Under Five Children In A Selected Pediatric Hospital At Guntur District.

OBJECTIVES OF THE STUDY:

- To assess the existing knowledge of under five mothers on bronchi pneumonia.
- To study the effectiveness of knowledge of under five mothers after Structured Teaching programme on bronco pneumonia.
- To compare pretest and post test knowledge of under five mothers.

HYPOTHESIS:

- H 1: There will be significant difference in the pre test and post test knowledge scores of under five mothers on bronco pneumonia.
- H 2: There will be significant association between knowledge of under five Mothers and selected demographic variables.

MATERIALS AND METHODS

Research design
Pre experimental design.
Target population
It refers Mothers of under Five Children in Guntur district.
Accessible population
It refers Mothers of under Five Children in Guntur district.

VARIABLES

Independent variables
Knowledge of bronco pneumonia.
Dependent variables
Knowledge of Mothers of under Five Children regarding bronco pneumonia.
Sampling technique

Purposive sampling

INCLUSION CRITERIA:
The criteria for sample selection are mothers of under five who

- Have children aged between 1 to 5 years
- willing to participate in the study
- know telugu or English language

EXCLUSION CRITERIA
- Children above 5 years of age
- under five children who are affected with diseases other than bronco pneumonia

Tools and technique
Part-I
Demographic variables consist of age, sex, education, religion, educational status of the father, type of family, area at residence, method of drainage system, past experience regarding knowledge of bronco pneumonia, exposure to knowledge regarding bronco pneumonia.

Part – II
Structured questionnaire was used to assess the knowledge on bronco pneumonia. Thirty multiple choice questions were used to assess the knowledge on bronco pneumonia among mothers of under five children. The tool was prepared by reviewing the literature and by consulting experts.

Data collection procedure:
The researcher initially established rapport with the mothers of under five children and the purpose of the study was explained. The informed consent was obtained from the participants. The investigator selected 50 samples who met the inclusion criteria by purposive sampling technique after the brief self introduction; demographic data was collected for 15 samples for each batch by using structured multiple choice questionnaires for assessing the knowledge on bronco pneumonia among mothers of under five children.

CONCLUSION
The study findings that the structured questionnaire on bronco pneumonia were effective among mothers of under five children. The investigator conducted the study with a great satisfaction in teaching of bronco pneumonia to the mothers of under five children.

REFERENCES:

1. A.Parthasarathy ,P.S.N Menon ,Piyush Gupta, M.K.C Nayar ."Text book of Pediatrics" 4th edition.New Delhi:Jaypee brother's Publishers;2009;pno 578.
2. Cotran, Ramzi S,Kumar, Vinay, Nelso Fausto, Robbins." Pathologic basis of disease" 6th edition . St. Louis: Elsevier Saunders; (2005) ; pno 749.
3. International child disease and developmental research." Health and Science Bulletin"; 4(2); June 2006.
4 WHO Bulletin"Global estimate of clinical incidence of clinical pneumonia among children under five years of age";2004.
5. Agnihotrao, V.Ramana kumar, etal."Respiratory disease burden in rural India":2005.
6. Vipin m vasighte, et al. "fight against pneumonia". Indian paediatri journal;2009 july 17(46):59.
7. Chisti MJ, Tebruegge M, La Vincente S, Graham SM, Duke T. "Pneumonia in severely malnourished children in developing countries". Tropical medicine and international health : 2009 Oct;14(10):1173-89.
8. Simmerman JM, Chittaganpitch M et al.".Incidence, seasonality and mortality associated with influenza pneumonia".American journal on pediatrics: 2009 Nov; 11;4(11):e7776.