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EFFECT OF A PLANNED TEACHING PROGRAMME ON LEVEL OF KNOWLEDGE REGARDING HOME REMEDIES FOR ADENOTONSILLITIS AMONG MOTHERS OF UNDER-FIVE CHILDREN

Nursing

Mrs Gayathri A Msc (N) Assistant Professor, Malik Deenar college of nursing, Kerala.

ABSTRACT

Adenotonsillitis is a common disease occurring in children, which can be easily managed in home care setup. The aim of the study was to assess the effectiveness of a planned teaching programme on level of knowledge regarding home remedies for adenotonsillitis among mothers of under five children in selected urban areas of Mangalore. An evaluatory approach with a pre-experimental one group pre-test – post-test design was adopted in the present study to accomplish the objectives. Non-Probability Purposive sampling technique was used to select a sample of 60 mothers from the selected area. The findings showed that the mean post-test knowledge score (20.52±3.14 using structured knowledge questionnaire, 14.05±1.79 using checklist) was higher than the mean pre-test knowledge score (9.52±2.43 using structured knowledge questionnaire, 6.42±1.79 using checklist). The mean difference between the post-test and pre-test knowledge score was highly significant at 0.05 level. It also found that there was no significant association between pre-test knowledge score with selected baseline variables at 0.05 level of significance.

KEYWORDS

Planned teaching programme; adenotonsillitis; home remedies; mothers.

INTRODUCTION

Children are the future of every country and all societies strive to ensure their health and safety. Since India's independence, continuous efforts have been made to improve the status of children. The large burden of communicable, infectious, and nutritional disorders is gradually on the decline due to massive efforts and investments by successive Indian governments, even though it is an unfinished agenda. Parallel to these changes, it has also becoming apparent that children saved from disease of yesterday are becoming the victims of infectious diseases, at home and in public, recreational places.

About 30 million people develop tonsillitis. 1 out of 10 children visit the doctor for tonsillitis each year. Around 2,00,000 tonsillectomies are done annually in India. Recurrent sore throat or tonsillitis has an incidence in general practice in UK of 100 per 1000 population a year. Acute tonsillitis is more common in childhood. Some of these patients will undergo tonsillectomy. Tonsillectomy is the commonest surgical procedure in children. About 8000 tonsillectomies were done per annum in India, USA about 66,350.

A descriptive study was conducted in Udupi among group of 110 mothers having infants above three months of age to find out the occurrence of sore throat among infants and knowledge of mothers regarding acute respiratory infections and determine the association between sore throat and selected demographic variables. It was observed that majority of children (60.9%) had sore throat 4-6 times in past 3 months. The findings of the study showed that majority of mothers (71.2%) had an average knowledge about sore throat.

There are many home remedies for tonsillitis which give relief from the various symptoms of tonsillitis which is easily accessible in the home care situations Some of the effective natural cure includes lime juice with honey, milk mixed with a pinch of turmeric powder and pepper powder, juices of carrot, beetroot, and cucumber, taken individually or in combination are especially beneficial. Banafsha flower boiled in milk, fenugreek seed gargle ,saline gargle , chamomile tea along with honey and lemon, purified alum can be used gargling or powdered alum can be applied over the tonsils to reduce the inflammation or fruit diet, water and orange juice combination is recommended. One can also try to get rid of tonsil stones naturally with home remedies.

Surgical removal of the tonsils should however be reserved as last resort when there is no other treatment option available as the tonsils are an important part of our immune system. In the past, removal of the tonsils through surgery was quite a common practice, but this is not so common any more. Tonsil removal surgery is now only performed in individuals who suffer recurrent and frequent infections of tonsillitis or tonsil stones and when the condition does not respond to any form of tonsillitis treatment or if there is any kind of serious risk of complications developing. This becomes a strong reason for the health care system to move towards home care, early detection and prevention. The investigator assumes that mothers of under-five are far more likely to be managing their children than health care professionals. Most of the mothers are having less knowledge on home remedies for tonsillitis and hence the investigator felt a need to assess the effectiveness of structured teaching programme on level of knowledge regarding home remedies for adenotonsillitis among mothers of under-five children.

MATERIALS AND METHODS

This study used an evaluatory approach with a pre-experimental one group pre-test – post-test design was adopted in the present study to accomplish the objectives. The researcher developed a knowledge questionnaire and planned teaching programme on home remedies of adenotonsillitis. The reliability of the tool was tested by using split half method. The knowledge questionnaire was found reliable ($r=0.76$; $p<0.05$). Non-Probability Purposive sampling technique was used to select a sample of 60 mothers from the selected area. A formal written permission was obtained from the concerned authority to conduct the research study. The purpose of the study, method of data collection and time duration were explained to the samples for getting good response. They were also given assurance regarding confidentiality of the information. An informed consent was obtained from the respondents indicating their willingness to participate in the study. The pre-test was conducted among the selected samples. After the pre-test, on the same day planned teaching programme was administered. Planned teaching programme on home remedies for adenotonsillitis is developed after reviewing the literature and seeking opinion of the experts. The planned teaching programme is prepared in the form of a detailed lesson plan, the session lasted for about minutes. All the subjects who attended the pre-test were given post-test with the same questionnaire on the seventh day. The collected data was complied for analysis.

RESULTS

a. Socio-demographic data

- Majority (43.33%) of the participants are in the age group of 22-25 years. Among participants most (31.67%) of the mothers had primary school education.
- Majority (41.67%) of the samples were homemakers. Majority of the participants (66.67%) had the income level between Rs. 5001 to 8000.
- Most of them (88.33%) were from nuclear family. Highest percentages (48.33%) were Hindus. Most of the fathers (88.33%) had no previous history of adenotonsillitis.
- Majority (93.33%) of the mothers had no previous history of adenotonsillitis. 71.43% of fathers had adenotonsillitis during childhood. 100% of the mothers had adenotonsillitis during childhood. Majority (88.3%) had no knowledge about adenotonsillitis.
- Majority (57.14) had information about adenotonsillitis through health care professionals.
- Highest (86.67%) of the mothers had 2 number of under-five children. Highest (45.45%) of the children among first order were in the age group of 1-3 years.
- Highest (52.63%) of children among second order were in the age group of 4-5 years.
- Highest (54.55%) of the children in the first order were boys.

Highest 52.63% of children in second order were girls.

b. Effect of planned teaching programme on home remedies for adenotonsillitis

Table 1: Pre and post-test frequency and percentage distribution of knowledge score of mothers

(n=60)

Level of Knowledge	Pre-test		Post-test	
	Frequency	Percentage	Frequency	Percentage
Poor	21	35.00	0	0.00
Moderate	39	65.00	5	8.33
Good	0	0.00	49	81.67
Very good	0	0.00	6	10.00

The pre-test knowledge level of all the mothers was Moderate 65%, poor 35% and in the post-test knowledge 81.67% of the sample had good level of knowledge, moderate 8.33% and very good 10%. None of the samples had poor knowledge score on interpretation in the post-test.

Table 2: Mean, standard deviation, mean difference, mean of pre-test and post-test knowledge score

(n=60)

Level of knowledge	Mean	Standard deviation	Mean difference	t-test
Pre-test	9.52	2.43	11	26.034*
Post-test	20.52	3.14		

$p < 0.05$ * = Significant

c. Association between Pre-test knowledge scores with selected demographic variables

Calculated chi-Square value of age (8.15) and is greater than that of table value (7.81) at 0.05 level of significance, where as there was no significance found when compared with other baseline variables.

DISCUSSION

The data collected after the administration of structured teaching programme reflected that majority (81.67% using structured teaching programme and 78.33% using checklist) of the samples had good knowledge home remedies, the remaining mothers of under-five children had very good knowledge score (10% using structured knowledge questionnaire and 18.33% using checklist). None of the sample had poor knowledge on home remedies for adenotonsillitis.

The above findings are consistent with a study conducted in selected paediatric hospitals of Trichy about the effects of planned teaching programme (PTP) on knowledge, attitude, and practice regarding upper respiratory tract infection including tonsillitis on mothers of under-five children with URI found that there was a gross inadequacy (100%) of knowledge regarding URI on mothers of under-five children and planned teaching programme was found to be effective in improving the knowledge about 65.56%, attitude about 23.56% and knowledge on practice about 26.66% of mothers regarding URI.

Another pre-experimental study on 'the effectiveness of a planned teaching programme on management of adenotonsillitis to mothers of under-five children in selected day care centres at Punjab. The samples were 60 mothers having children. The data was collected using structured questionnaire .The results shows that 95% of mothers have good knowledge score that is 70-100% in the post-test as compared to average knowledge score that is 50-69% obtained among 73.33% of samples in the pre-test. The researcher reaches the conclusion that a planned teaching programme helps to improve the knowledge of mothers regarding management of adenotonsillitis.

Learning to use the management of adenotonsillitis is a big event in a mother's life. Most of the mothers are eager to know the proper care of children and to promote a good growth and development of the growing children. Mothers should know the proper remedies to manage a adenotonsillitis case.

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