

A STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE REGARDING PREVENTION OF DENGUE FEVER AMONG MOTHERS OF UNDER FIVE CHILDREN

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Abstract

Aim of the study to assess the effectiveness of structured teaching programme on knowledge regarding prevention of dengue fever among mothers of under five children in selected villages of Moga, Punjab. A quasi experimental Non-randomized control group research design was used to conduct study on 60 among mothers of under five children (30 in experimental and 30 in control group) fulfilling the inclusion criteria by using convenient sampling techniques under non probability sampling. The results showed that the (77%) mothers of under five children had good knowledge score and (23%) mothers of under five children had average knowledge after structured teaching programme. In this study the post-test mean knowledge score of mothers of under five children regarding prevention of dengue fever of experimental group was higher than the post-test mean knowledge score of control group at $p < 0.001$ level. The formulated hypothesis H_1 was retained at $p < 0.001$. Hence, it was concluded that structured teaching programme had impact on increasing the knowledge among mothers of under five children

Keywords : Effectiveness, Structured Teaching Programme, Knowledge, Prevention, Dengue Fever, Mothers of under five children

INTRODUCTION:

Dengue fever is a disease caused by a family of viruses that are transmitted by mosquitoes. It is an acute illness of sudden onset that usually follows a benign course with symptoms such as headache, fever, exhaustion, severe muscle and joint pain, with swollen lymph nodes and rash. Others signs of dengue fever include bleeding gums, severe pain behind the eyes and red palms and soles.

Dengue fever is endemic throughout the tropics and subtropics. Also called break bone fever, dandy fever and dengue. Victims of dengue fever often suffer temporary contortions due to intense joint and muscle pain. Dengue can affect anyone but tends to be more severe in people with compromised immune systems. Because it is caused by one of five serotypes of virus, it is possible to get dengue fever multiple times. However, an attack of dengue produces immunity.

A number of tests are available to confirm the diagnosis including detecting antibodies to the virus or it's RNA. A vaccine for dengue fever has been approved and is commercially available in

a number of countries. The vaccine is only recommended in individuals who have been

previously

infected. Other methods of prevention include reducing mosquito habitat and limiting exposure to bites. This may do by getting rid of or covering standing water and wearing clothing that covers much of the body.

NEED FOR THE STUDY

Dengue fever is one of the most life threatening disease which can be prevented before it occurs so research plan to take this topic for research project and to provide the knowledge to mothers of under five children by effective structured teaching programme and to reduce mortality and morbidity among under five children as children's are our future nation.

According to WHO, an estimated 500,000 people including under five children require hospitalization each year. Most cases occur in tropical areas of the world, with the population in the Indian subcontinent, Southeast Asia, Mexico, Africa, parts of central and South America Most susceptible to the disease. As per the data released by the National Vector Borne Disease Control Programme, there have been 67000 cases of dengue fever as of 13th October 2019 in India.

OBJECTIVES

1. To assess the pretest knowledge regarding prevention of dengue fever among mothers of under five year children.
2. To assess the posttest knowledge regarding prevention of dengue fever among mothers of under five year children.
3. To compare the pretest and posttest knowledge regarding prevention of dengue fever among mothers of under five year children.
4. To find out the relationship between knowledge and selected demographic variables such as age in years, religion, education of mother, education of husband, occupation of mother, occupation of husband, source of information and type of drainage system.

HYPOTHESIS

H1: The mean post test knowledge score of mother of under five children will be significantly higher than pre test knowledge score in experimental group.

MATERIAL AND METHOD

Research design: Non-randomized control group design

Research setting: Study was conducted in two selected villages (one for experimental group

and

another for

control group)

Sample size: 60 mothers of under five children (30 in each group)

Sampling technique: Convenient sampling techniques

Dependent variable: Dependent variable was knowledge of mothers of under five children regarding dengue fever

Independent variable: Independent variable was structured teaching programme regarding prevention of dengue fever

Demographic variables: Age in years, religion, education of mother, education of husband, occupation of mother, occupation of husband, source of information and type of drainage system.

Description of the tool:

Part I: Sample characteristics such as age in years, religion, education of mother, education of husband, occupation of mother, occupation of husband, source of information and type of drainage system.

Part II: Structured questionnaire to assess the knowledge regarding prevention of dengue fever among mothers of under five children.

ETHICAL CONSIDERATIONS

Permission was taken from research and ethical committee of Dr. Shyam Lal Thapar College of Nursing, Moga. Written permission was obtained from Sarpanch of both villages. Written consent was taken from the mothers of under five children for their participation in the study. They were also informed about right to refuse from participation in the study. The mothers of under five children were assured that the information given by them will be kept confidential and will be used only for research purpose.

DATA ANALYSIS AND INTERPRETATION

Section I:

Table no.1 Percentage distribution of sample characteristics (N=60)

S. No.	Characteristics	Experimental		Control		df	χ^2
		n	%	n	%		
1.	Age in years						
	a) 18-24	9	30	9	30	2	0.000 ^{NS}
	b) 25-31	7	23	7	23		
	c) 32-38	14	47	14	47		

	d) 39-45	-	-	-	-		
2.	Religion						
	a) Hindu	-	-	-	-	-	-
	b) Sikh	30	100	30	100		
	c) Muslim	-	-	-	-		
	d) Christian	-	-	-	-		
	e) Others	-	-	-	-		
3.	Education of mother						
	a) Illiterate	8	27	8	27	2	0.000 ^{NS}
	b) Primary	12	40	12	40		
	c) Secondary	-	-	-	-		
	d) Higher sec.	10	33	10	33		
	e) Graduate and above	-	-	-	-		
4.	Education of husband						
	a) Illiterate	9	30	6	20	2	4.356 ^{**}
	b) Primary	10	33	18	60		
	c) Secondary	-	-	-	-		
	d) Higher sec.	11	37	6	20		
	e) Graduate and above	-	-	-	-		
5.	Occupation of mother						
	a) Home maker	3	10	3	10	1	0.000 ^{NS}
	b) Laborer	-	-	-	-		
	c) Govt. Job	-	-	-	-		
	d) Private job	27	90	27	90		
	e) Business	-	-	-	-		
6.	Occupation of husband						
	a) Laborer	-	-	-	-	1	0.800 ^{NS}
	b) Govt. Job	21	70	24	80		
	c) Private job	-	-	-	-		
	d) Business	9	30	6	20		
	e) Farmer	-	-	-	-		
7.	Source of information						
	a) Mass media	8	27	6	20	3	2.286 [*]
	b) Relatives	-	-	2	6		

	c) Neighbor	-	-	-	-		
	d) Friends	22	73	22	74		
	e) Any health personnel	-	-	-	-		
8.	Type of drainage system						
	a) Open	3	10	3	10	1	0.000 ^{NS}
	b) Close	27	90	27	90		

The above table shows that in experimental group 14 (47%) mothers of under five children were in the age group 32-38 years, 30(100%) mothers belongs to Sikh religion, 12(40%) of mothers of under five children had primary level of education, 11(37%) husband had their higher secondary level education, occupation of mother 27(90%) were in private job, 21(70%) husbands were in Govt. job, 22 (73%) mothers of under five children were getting information from their friends and 27 (90%) mothers of under five children had close drainage system at their house.

In control group, 14 (47%) mothers of under five children were in the age group 32-38 years, 30 (100%) mothers belongs to Sikh religion, 12 (40%) of mothers of under five children had primary level of education, 18 (60%) husband had their primary level education, occupation of mother 27 (90%) were in private job, 24 (80%) husbands were in Govt. job, 22 (74%) mothers of under five children were getting information from their friends and 27 (90%) mothers of under five children had close drainage system at their house.

Section II:

Table no. 2 Frequency and percentage distribution of pretest and posttest knowledge score regarding prevention of dengue fever among mothers of under five children in experimental and control group according to level of knowledge.

Group	Experimental				Control			
	Pretest		Posttest		Pretest		Posttest	
	n	%	n	%	n	%	n	%
Level of knowledge score								
Good	-	-	23	77%	-	-	-	-
Average	5	17%	7	23%	3	10%	2	7%
Below average	25	83%	-	-	27	90%	28	93%

Table no. 2 shows that in experimental group the maximum number 25 (83%) mothers of under five children had below average knowledge and minimum number 5 (17%) mothers of under five children had average knowledge regarding prevention of dengue fever in pretest. In posttest maximum number 23 (77%) mothers of under five children had good knowledge and

minimum number 7 (23%) mothers of under five children had average knowledge regarding prevention of dengue fever.

In the control group the maximum number 27 (90%) mothers of under five children had average knowledge and minimum number 3 (10%) mothers of under five children had below average knowledge regarding prevention of dengue fever in pretest. In posttest maximum number 28 (93%) mothers of under five children had below average knowledge and minimum number 2 (7%) mothers of under five children had average knowledge score.

Table no. 3 Comparison of mean pretest and posttest knowledge score regarding prevention of dengue fever in experimental and control group

S. No.	Group	Pretest		Posttest		“t” Value	df
		Mean	SD	Mean	SD		
1.	Experimental	14.23	2.223	24	2.101	18.170***	29
2.	Control	12.53	2.713	12.80	1.955	0.502 ^{NS}	29

***Significant at $p < 0.001$ level

NS= Non Significant

The table no. 3 shows that in the experimental group pretest mean knowledge score (14.23) and posttest mean knowledge score (24). In control group pretest mean knowledge score (12.53) and posttest mean knowledge score (12.80). The t value is 18.170 which show the structured teaching programme was effective among mothers of under five children in experimental group. Hence the formulated hypothesis H_1 was retained at $P < 0.001$. Hence, it was concluded that structured teaching programme regarding prevention of dengue fever had impact on increasing the knowledge of mothers of under five children.

SECTION III:

Table no. 4 Finding related to the relationship between knowledge and selected socio demographic variables

Demographic Variable	Experimental		Control		df
	Pretest	Posttest	Pretest	Posttest	
	F value	F value	F value	F value	
Age in years	2.13 ^{NS}	0.74 ^{NS}	0.34 ^{NS}	0.00 ^{NS}	27
Education of mother	0.80 ^{NS}	0.31 ^{NS}	1.27 ^{NS}	0.54 ^{NS}	27
Education of husband	0.59 ^{NS}	2.50 ^{NS}	0.23 ^{NS}	0.00 ^{NS}	27

Occupation of mother	2.19 ^{NS}	0.00 ^{NS}	0.00 ^{NS}	0.55 ^{NS}	28
Occupation of husband	0.02 ^{NS}	0.14 ^{NS}	0.01 ^{NS}	0.00 ^{NS}	28
Source of information	0.58 ^{NS}	0.34 ^{NS}	0.93 ^{NS}	2.34 ^{NS}	28
Type of drainage system	0.03 ^{NS}	0.74 ^{NS}	0.64 ^{NS}	0.03 ^{NS}	28

NS= Non-significant

Table 4 shows that no any demographic variable was found to have significant relationship with knowledge score regarding prevention of dengue fever in experimental and control group

CONCLUSIONS

From all the above mentioned findings, it can be concluded that the administration of structured teaching program on prevention of dengue fever was definite increase the knowledge of mothers of under five children. This clearly indicates that the structured teaching program on prevention of dengue fever was effective in improving the knowledge of mothers of under five children.

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