

Maternal Knowledge, Attitudes and Practices About Diarrhoea in Children

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Knowledge of Diarrhoea in Children

ABSTRACT

Objective: The objective of the study is to know the maternal knowledge, attitudes and practices about diarrhoea in children.

Study Design: Descriptive / Cross sectional study

Place and Duration of Study: This study was conducted at the Children Outdoor of Tehsil Hospital Yazman (District Bahawalpur) from September 20, 2016 to October 19, 2016.

Materials and Methods: The mothers carrying their children having diarrhoea were included. The children not carried by their mothers or sick enough to be admitted in the hospital or needed to be referred were excluded from the study.

Results: One hundred mothers were included in the study. Only 4% mothers were having at least Higher Secondary Certificate while 14% were uneducated. 41% mothers defined diarrhoea as 'increase in frequency' while 35% as 'decrease in consistency'. The main causes of diarrhoea as narrated by mothers were unhygienic water or food or both, eruption of teeth and eating earth. 71% mothers answered 'yes' to the question 'Does the fluid intake be increased during diarrhoea?' 65% mothers answered 'yes' to the question 'Is oral rehydration salt useful during diarrhoea?' 61% mothers were in the opinion of stopping or modifying the diet during diarrhoea. The response of mothers to the questions 'Does hand washing help in the prevention of diarrhoea?', 'Does clean water/food help in the prevention of diarrhoea?', 'Does proper disposal of excreta help in the prevention of diarrhoea?' and 'Does breast feeding help in the prevention of diarrhoea?' was 'yes' in 48%, 77%, 38% and 56% cases respectively.

Conclusion: There is need of improvement in the knowledge of mothers about diarrhoea in children.

Key Words: Diarrhoea; Education; Oral rehydration salt; Diet; Breast feeding

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INTRODUCTION

The two most common infectious causes of morbidity and mortality in children under five are diarrhoea and pneumonia. There were about 1.731 billion diarrhoeal episodes; out of which 36 million were severe one in 2010. The diarrhoeal diseases are the second most common infectious cause of mortality after pneumonia in under five children. There were about 700000 episodes of diarrhoea in 2011 that led to mortality¹.

Diarrhoea is defined as the passage of three or more loose or liquid stools per day or more frequent passage than is normal for the individual³. The etiology of diarrhoea include viral [rotavirus, norovirus, astrovirus, adenovirus], bacterial [shigella, enterotoxigenic escherichia coli, campylobacter, aeromonas, vibrio cholera] and protozoal [cryptosporidium, giardia]⁴.

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51% of these deaths occurred among five countries that included Pakistan as well².

The infection spreads through contaminated food or drinking-water, or from person-to-person as a result of poor hygiene. The key measures to prevent diarrhoea include access to safe drinking-water, use of improved sanitation, hand washing, exclusive breastfeeding for the first six months of life, good personal and food hygiene, health education about how infections spread and rotavirus vaccination⁵.

The studies done nationally⁶⁻⁹ and internationally¹⁰⁻¹² showed variable knowledge of caregivers about the appropriate management and prevention of diarrhoea. Since there is very little data available in this part of Pakistan. so it this study was planned to conduct.

The objective of the study is to know the maternal knowledge, attitudes and practices about diarrhoea in children. The study will help us in the future planning about management of diarrhoea at community level.

MATERIALS AND METHODS

This cross-sectional study was carried out in the children outdoor of Tehsil Hospital Yazman (District Bahawalpur) from September 20, 2016 to October 19, 2016. The mothers carrying their children having diarrhoea were included. The children not carried by their mothers or sick enough to be admitted in the

hospital or needed to be referred were excluded from the study. After giving elucidation of the purpose of the study to the mothers, verbal consent was taken from them to be enrolled for the study. The researchers interviewed the mothers (who agreed to take part in the study) by using a structured performa. The interviews were in English, Urdu or in local languages according to the mother's understanding of the language. The data were collected and analyzed with the help of SPSS version 15. The data were presented as percentages or proportions.

RESULTS

There were one hundred mothers included in the study. Only 4% mothers were having at least Higher Secondary Certificate while 14% were uneducated (Table-I).

The table-II showed the response of mothers to various questions asked from them. The response of the mothers to the question on definition of diarrhoea was 'increase in frequency' in 41% cases while 'decrease in consistency' in 35% cases. The main causes of diarrhoea as narrated by mothers were unhygienic water or food or both (35% cases), eruption of teeth (25% cases), eating earth (19% cases) and devil eye (15% cases). There were 71% mothers who answered 'yes' to the question 'Does the fluid intake be increased during diarrhoea?'.

Table No.1: Education level of mothers

Total mothers 100

Education level	No. of mothers	%age
Having at least Higher Secondary Certificate	4	4%
- higher Secondary Certificate	3	3%
- having graduation	1	1%
- having post graduation	0	0%
Does not have Higher Secondary Certificate	96	96%
-having secondary school certificate	10	10%
-Middle pass	24	24%
-Primary Pass	31	27%
-Primary fail	17	17%
-Uneducated	14	14%

There were 65% mothers who answered 'yes' to the question 'Is oral rehydration salt useful during diarrhoea?'. There were 61% mothers who were in the opinion of stopping or modifying the diet during diarrhoea. The response of mothers to questions 'Does hand washing help in the prevention of diarrhoea?', 'Does clean water/food help in the prevention of diarrhoea?', 'Does proper disposal of excreta help in the prevention of diarrhoea?' and 'Does breast feeding help in the prevention of diarrhoea?' was in 'yes' in 48%, 77%, 38% and 56% cases respectively. There

were only 11% mothers who knew that vaccination helped in the prevention of diarrhoea.

Table No.2: Education level of mothers

Question	Number	%age
What is diarrhoea		
Increase in frequency	41	41%
Decrease in consistency	35	35%
Both	19	19%
Do not know	5	5%
What is the cause of diarrhoea		
Unhygienic water/food or both	35	35%
Eating earth	19	19%
Eruption of teeth	25	25%
Devil eye	15	15%
Do not know	6	6%
Does the fluid intake be increased during diarrhoea		
Yes	71	71%
No	20	20%
Do not know	9	9%
Is oral rehydration salt useful during diarrhoea		
Yes	65	65%
No	23	23%
Do not know	12	12%
Will you stop or modify diet during diarrhea		
Yes	61	61%
No	18	18%
Do not know	21	21%
Does hand washing help in the prevention of diarrhoea		
Yes	48	48%
No	31	31%
Do not know	21	21%
Does clean water/food help in the prevention of diarrhoea		
Yes	77	77%
No	17	17%
Do not know	6	6%
Does proper disposal of excreta help in the prevention of diarrhoea		
Yes	38	38%
No	31	31%
Do not know	31	31%
Does vaccination help in the prevention of diarrhoea		
Yes	11	11%
No	43	43%
Do not know	46	46%
Does breast feeding help in the prevention of diarrhoea		
Yes	56	56%
No	23	23%
Do not know	21	21%

DISCUSSION

There were only 4% mothers having at least Higher Secondary Certificate while 14% were uneducated. The study done in Karachi⁹ and Rahim Yar Khan¹³ showed 63.5% and 49.10% mothers were uneducated.

The response of the mothers to the question on definition of diarrhoea was 'increase in frequency' in 41% cases while 'decrease in consistency in 35% cases', the response in the study conducted at Karachi⁹ was 72% and 13.5 % respectively. The mothers in the study conducted at Rahim Yar Khan¹³ described diarrhoea as loose watery stool in 46.43% cases and increased frequency in 3.57% cases. The study done in India⁹ 68% of mothers knew the correct definition of diarrhoea.

The main causes of diarrhoea as narrated by mothers were unhygienic water or food or both (35% cases), eruption of teeth (25% cases), eating earth (19% cases) and devil eye (15% cases), the response in the study conducted at Karachi (9) was 17%, 10%, 14% and 47% respectively and the response in the study conducted at Rahim Yar Khan¹³ was 24.11%, 8.92%, 9.82% and 8.92% respectively.

There were 65% mothers who answered 'yes' to the question 'Is oral rehydration salt useful during diarrhoea?' There were 61% mothers who were in the opinion of stopping or modifying the diet during diarrhoea. The response of mothers to questions 'Does hand washing help in the prevention of diarrhoea?', 'Does clean water/food help in the prevention of diarrhoea?', 'Does proper disposal of excreta help in the prevention of diarrhoea?' and 'Does breast feeding help in the prevention of diarrhoea?' was in 'yes' in 48%, 77%, 38% and 56% cases respectively. The study conducted at Karachi⁸ showed that 62% mothers were aware of preventive measures like hand washing, keeping the child and environment clean. The study conducted at Rahim Yar Khan¹³ showed 92% mothers were aware of one or more than one preventive measures.

CONCLUSION

There is need of improvement in the knowledge of mothers about diarrhoea in children.

Conflict of Interest: The study has no conflict of interest to declare by any author.

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