

A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge Regarding Home Care Remedies of Selected Health Problems among Mothers of Under Five Children at Selected Rural Area, Barabanki, Lucknow

V. R. Verma

Clinical Instructor (KGMU College of Nursing)
Corresponding Author Email: [vermalavi430\[at\]gmail.com](mailto:vermalavi430[at]gmail.com)

Abstract: ***Objectives:** The main objectives of the study- To assess the knowledge level regarding home care remedies of selected health problems among mothers of under five children. To assess the effectiveness of structured teaching program regarding home care remedies of selected problems among mothers of under five children. To find out the association between the level of knowledge regarding home care remedies of selected health problems among mothers of under five children with selected demographic variables. **Research Hypothesis:** The following hypothesis were set for the study- H1: There is a significant difference between level of knowledge regarding home care remedies of selected health problems among mothers of under five children. H2: There is a significant association between level of knowledge regarding home care remedies of selected health problems among mothers of under five children with the selected demographic variables. **Conceptual Framework:** The conceptual frame work has been developed based on Roy's adaptation model and it provides the explanation of the objectives. **Material and Methods:** The study was conducted by using pre experimental one group pre and posttest design. Purposive sampling technique was used to select 60 samples and the study was conducted at rural area, Barabanki, Lucknow. The tools used for data collection was self-structured questionnaire consisting part 1: demographic data, part 2: assessing knowledge level of mothers of under five children. Employing descriptive and inferential statistics the analysis of the data was done. The present study findings revealed that, there is a significant difference between the post test mean score of samples at 0.05 level of significance. Hence it is inferred that, structured teaching programme was effective in improving the knowledge of home care remedies of health problems among mothers of under five children. **Major Findings :** The present study findings revealed that, there was significant association between level of knowledge regarding home care remedies and selected demographic variables such as age of mother ($\chi^2=17.13$), age of child ($\chi^2=9.23$), education of mother ($\chi^2=15.23$), occupation of mother ($\chi^2=17.13$) and religion ($\chi^2=3.3810$). **Conclusion:** The study conducted that the majority of mothers of under five children had inadequate knowledge in pre test score whereas in post term score, majority of mothers of under five children had adequate knowledge after the intervention. Thus, the structured teaching programme was effective to enhance the knowledge regarding prevention of selected health problems among the mothers of under five children.*

Keywords: effectiveness, structured teaching programe, knowledge, home care remedies, mothers, health problem

1. Introduction

“Children are the wealth of tomorrow-take care of them if u wish to have a strong India, ever ready to meet various challenges.” - Jawaharlal Nehru

Kids brighten up our life and home with their soulful laughter, childish talks and unlimited energy. It is difficult to see them sick in bed. But, children up to the age of five have low immunity and hence are prone to many illnesses Home remedies are natural cures or medicines made at home from natural ingredients such as fruits, vegetables, and herbs and have given more attention due to its nature of cure such as simple, no side effects, no chemicals, inexpensive, and the pleasure of being able to cure.¹ In home based remedies, the idea is to use the chemicals naturally present in the herbs, spices and other foods to tackle the offending foreign element in the body that is causing the pain or infection instead of flushing the body with hundreds of milligrams of strong chemicals in the form of antibiotics. Though antibiotics are essential for chronic conditions, it is not always necessary and are best avoided, especially for minor

ailments.² According to The Times of India (11.09.2009), India still accounts for 21% of under-five deaths. Annual deaths of children under-five years as fallen from 12.5 million in 1990 to an estimated 8.8 million in 2008, representing a 28% decline in the under-five mortality rate¹
² When one thinks of traditional home remedies one gets a cosy feeling associated with wise grandmothers and simple, natural ingredients like turmeric, ginger, pepper, and honey. Members of the older generation in India relied heavily on Ayurveda, the traditional Indian system of medicine, as they were not convinced of the efficacy and safety of modern allopathic treatments. It was largely due to their experience and knowledge of the medicinal properties of various herbs that they were able to treat common diseases like diarrhoea, cough, cold, fever, etc. Even today, it is quite common for parents to try to treat common illnesses at home by these methods rather than rush to the doctor at the first sneeze.³ It is well known that the immune systems of babies below the age of one year are immature. Hence, they are very susceptible to fall sick with slight changes in weather, diet, etc. It is for this reason that most Indian households stock up on medicinal herbs to tackle common situations such as

Volume 11 Issue 7, July 2022

www.ijsr.net

Licensed Under Creative Commons Attribution CC BY

vomiting in the middle of the night or a sudden rise in body temperature. Many of the basic, common-sense therapies that mothers and grandmothers have depended on through the years are still valid. For example they told to drink lots of liquids, get plenty of rest. They made steaming chicken soup, which not only helps break up nasal congestion, but also contains garlic, which has antibiotic properties.⁴

2. Literature Survey

A review of literature refers to the activities involved in identifying and searching for information on a topic on developing an understanding of the state of knowledge on that topic. Review of literature is a crucial summary of research on a topic of interest generally prepared to put a research problem in context to identify gaps and weakness in prior studies so as to justify a new investigation. The related literature of the present study has been collected and organized under the following sections. SECTION 1: Literature related to level of knowledge of mothers of under five children regarding health problems SECTION 2: Literature related to level of knowledge of mothers of under five children regarding home care remedies of health problems SECTION 3: Literature related to structured teaching programme on enhancing knowledge of mothers of under five children regarding home care remedies of health problems SECTION 1: Literature related to level of knowledge of mothers of under five children regarding health problems A descriptive study was conducted in a village to assess the knowledge and mistaken beliefs of the mothers with regard to the common home care remedies used for minor injuries. The study had shown that 84.6% rural mothers used turmeric powder as home remedy. 5.95% of the mothers had mentioned the use of mustard oil. 94.05% had mentioned the use of groundnut oil. Easy availability of cooking oil in 22 kitchen may be the reason behind the preference for using oil as a home remedy.¹⁹ A cross sectional study was conducted among the mothers of children to assess the use of home care remedies. The result of the survey showed a relationship between the age of parent and use of home care remedies. Older care givers were more likely to use home care remedies in their children as compared to younger caregivers (P at.05). No statistically significant difference was seen between the use of home care remedies and educational level in the study population. This difference suggested that home care remedy use may not only be related to low income, but may be due to a tradition in the community in which elders use the home remedies. A study was conducted on mother's knowledge attitudes perception regarding viral and intestinal parasites and diarrhea. A total of 659 mothers of children were involved in the study. The result was that children belonging to mother's in the age groups 15 - 25 years and > 35 years old were found infected with viral and intestinal parasites. The study concluded that mother education had a positive effect for the decreasing of infection among children¹⁷ A descriptive study was conducted among two hundred mothers of children under five years of age having lower respiratory tract infection were interviewed with the help of pretested unstructured questionnaire to know the danger signs as perceived by the mother in a child suffering from pneumonia and the home remedies used by the parents before seeking medical help. Palsichalna and refusal to feed were the

common symptoms perceived as dangerous. Palsichalna correlated with retractions in 91.9% and fast breathing in 8.1% cases. Honey (25%) and ginger (27%) were the most common home remedies used for the relief of cough. Self advised medications were used by 24% mothers and majority 58.4% gained knowledge from mass media.²³ A study was conducted on 75 mothers of under-five children to assess the knowledge, attitude, and practices of mothers regarding diarrheal diseases. The result showed that 68% of mothers knew the correct definition of diarrheal but only 53% of them were aware that it leads to dehydration. The study concluded that the maternal knowledge towards diarrhea and ORS was inadequate in the population studied and there was a big gap between actual and desired practice²¹ A study stated in their study that children experienced an average of seven to eight episodes acute respiratory infections (ARI) in the first four years of life. School and home contribute to high incidences of ARI in children, because it provides an environment that facilitates transmission of the agents that cause acute respiratory tract infections among children. Incidence of ARI is higher among pre-school children too. SECTION 2: Literature related to level of knowledge of mothers of under five children regarding home care remedies of health problems A cross sectional study was conducted among the mothers of children to assess the use of home care remedies. The result of the survey showed a relationship between the age of parent and use of home care remedies. Older care givers were more likely to use home care remedies in their children as compared to younger caregivers (P at.05). No statistically significant difference was seen between the use of home care remedies and educational level in the study population. This difference suggested that home care remedy use may not only be related to low income, but may be due to a tradition in the community in which elders use the home remedies. An ethnographic study was conducted to compare the effects of a single nocturnal dose of buckwheat honey or honey flavored dextromethophan (DM) with 24 no treatment on nocturnal cough or sleep difficulty associated with childhood upper respiratory tract infections. Significant differences in symptom were detected between the treatment groups, with honey consistently scoring the best and no treatment scoring the worst. In paired comparison honey was significantly superior to no treatment for cough frequency and the combined score, but DM was not better than any treatment for any outcome. Comparison of honey with DM revealed no significant differences. Honey may be preferable for the treatment for cough and sleep difficulty associated with childhood respiratory tract infection.¹⁵ An experimental study was carried out to find out the effectiveness of Chicken soups for common cold. Chicken soup is very effective against common cold. Medical science is finally catching up with mothers and grandmothers in recognizing the healing properties of chicken soup. Studies conducted at highly respected institutions founded that the heat, the liquid, and the antibiotic activity of garlic common ingredient, can ease symptoms and support the immune system. Honey and lemon, an occasional spoonful can help to relieve a scratchy, tickling or raw throat. Thus Chicken soup proved to be effective.¹⁶ A quasi experimental study was conducted to assess the nature of feeding, home remedy practices and consultation with health care providers during the illnesses of children in India. About 75% of the mothers

initiated home remedies for treating their children. The treatment included pouring water on the head, feeding juice of herbs, using sanctified water and ORT. The type of treatment was based on the nature of illness.¹⁷ A quasi experimental study was organised to evaluate the use of medicinal plants and natural remedies among a convenient sample of 100 mothers. The majority 25 of workers used herbal remedies or other natural products because they believed that natural remedies are more effective than pharmaceuticals and because of tradition. Most learned about herbal remedies from a relative, primarily from their mother, and majority who used herbal remedies believed them to be very helpful in treating specific illnesses. No adverse reactions to any herbal remedy were reported.¹⁸ An experimental study was conducted to show that if repeated small volume of homemade ORS were administered orally at frequent intervals, nearly 91% of diarrhoeal children with moderate dehydration could be successfully hydrated by. It also documented that neonates and young infants could also be safely and effectively hydrated by ORS, provided breast feeding is continued throughout the course of treatment. ORS formula recommended by UNICEF/WHO is also safe and effective in the treatment of dehydrating acute diarrhoea in severely malnourished (marasmic) children.²¹ A comparative study of standard ORS and glycine fortified ORS showed that glycine fortified ORS does not have any therapeutic advantage over standard ORS. Similarly, studies on cereal based ORS formulations (pep rice powder and rice powder ORS) failed to document any significant reduction of duration of diarrhoea.²¹ A quasi experimental study was conducted with 100 parents (27 men, 73 women) enrolled in a prepaid medical health plan to investigate their use of home remedies. A remedy was reported for almost every health problem listed. Substances most frequently used were aloe Vera, honey, peppermint, garlic, eucalyptus, and rose hips; health problems most frequently treated were burns, colds, fever, diarrhoea, vomiting, indigestion, insect bites, insomnia, rashes.²² 26 A cross sectional study on the diagnostic & therapeutic practices of health staff and mothers with regard to fever was carried out in the urban area from the 1st to the 12th of the 20th April 1997. 390 children were included in the sample. Children were aged under Five years had suffered from the fever 15 days prior of the survey & were treated at home or in a health centre C the most currently used drugs against malaria, results of the questionnaire indicated that those symptoms best recognized by 1 mothers are fever (85.8%) asthenis (79.9%) chills (21.1%) vomiting (25.1%) and diarrhoea (10.9%) chlorquine in the most used drug at home (66%) & a modicquine (67.9%) % street vendors (19.1%) management of fever requires proper training of health staff & good communication between health personal & the target population.¹² A descriptive study was conducted in a village to assess the knowledge and mistaken beliefs of the mothers with regard to the common home care remedies used for minor injuries. The study had shown that 84.6% rural mothers used turmeric powder as home remedy. 5.95% of the mothers had mentioned the use of mustard oil. 94.05% had mentioned the use of groundnut oil. Easy availability of cooking oil in kitchen may be the reason behind the preference for using oil as a home remedy.¹⁹ A cross sectional study was conducted among the mothers of children to assess the use of home care remedies. The result

of the survey showed a relationship between the age of parent and use of home care remedies. Older care givers were more likely to use home care remedies in their children as compared to younger caregivers (P at.05). No statistically significant difference was seen between the use of homecare remedies and educational level in the study population. This difference ²⁷ suggested that homecare remedy use may not only be related to low income, but may be due to a tradition in the community in which elders use the home remedies.²⁰ SECTION 3: Literature related to structured teaching programme on enhancing knowledge of mothers of under five children regarding home care remedies of health problems A qualitative study was conducted to gain an in depth understanding of people's perceptions of childhood burns and their prevention in rural community areas. The sample consists of 50 parents of childhood under 5 years of age. The researcher found that home as the most common place for childhood burn injuries and the household members or caregivers responsible because of their lack of supervision and carelessness regarding first aid, the parents reported prevailing harmful practices which are likely to make injuries worse. The researcher concluded that, a safety education programme could be an effective intervention to improve knowledge and practices of parents in the rural area with regard to prevention of burn injuries in children.³⁴ A study was conducted to assess risk factors and to suggest preventive measure for pediatric burn injuries in the Czech Republic. The study included 1064 children aged 0-16 years. The data was collected from the Czech Ministry of Health on national pediatric burn hospitalizations during 1996 to 2006. Personal, equipment and environmental risk factors were identified from hospital records. The researcher found that, the incidence of burn admissions among 0-14 years olds increased from 85 to 96 per 1, 00,000, between 1996 to 2006, mainly 13% increase among 1-4 year olds. Around 31% of all burn hospitalizations were in 1 year-olds, 79% of burns occurred at home, 70% in the kitchen, 14% in the living room or bed room and 11% in the bathroom of the 18% occurring outdoors. Scalds from hot liquids accounted for 70% of all burns. This study reveals that, there is a need for passive preventive measures. Educational programmes should be developed for parents and caregivers.³⁵ Epidemiological study of 500 Paediatric burn patients admitted in Burn and plastic surgery unit of B.J wadia hospital, Mumbai, India over a period of 6 years (2000-2005) was reviewed from medical records. Age, sex, demographic distribution, seasonal variation, TBSA involved, type and place of burn injury. Parental occupation, family size, first aid and mortality rate were studied. The median age group of patients was 3.44 years. The majority of 24% of burns occurred in children between 1 to 2 years of age group. Male to female sex ratio was 1.38%. Burn injury occurred predominantly during winter. Most common type of burn was scalds which occurred mainly are domestic circumstances. Mortality rate was 10.4%. The maximum number of deaths occurred in the age group of 1-2 years. A tense and focused burn prevention campaign to educate the general population about dangerous biological factors will decrease the incidence of Paediatric burns. It is important to educate parents, make them aware of the potential danger of the home environment and how to prevent common burn accidents.³⁷ A study was conducted to determine the causes magnitude and management of burns in children under five

years of age who are admitted in the district hospitals of Dar es Salaam City, In Tanzania. In this study a total of 204 under fives were enrolled. Questionnaires were used to elicit, if the parents/ caretaker had the knowledge of the cause of the burns, what was done immediately after burn injury, first aid given immediately after burn, source of the knowledge of first aid. The researcher found that, (54.9%) were aged between 1-2 years. 78.4% had scalds while 29 21.6% had flame burns. Most of the burns (97.5%) occurred accidentally, 68.6% of these burn injuries occurred in the kitchen ,immediately after burn 87.3% of the children had first aid applied on their wounds ,while 12.7% didn't apply anything, of the agents used, honey was the most used (32.8%) followed by cold water (16.7%). The source of knowledge on these agents was from medical personnel (14%). This study reveals that, causes of childhood burns are largely preventable requiring active social/ medical education and public enlighten campaigns on the various methods of prevention. A descriptive study was conducted among two hundred mothers of children under five years of age having lower respiratory tract infection were interviewed with the help of pretested unstructured questionnaire to know the danger signs as perceived by the mother in a child suffering from pneumonia and the home remedies used by the parents before seeking medical help. Palsichalna and refusal to feed were the common symptoms perceived as dangerous. Palsichalna correlated with retractions in 91.9% and fast breathing in 8.1% cases. Honey (25%) and ginger (27%) were the most common home remedies used for the relief of cough. Self advised medications were used by 24% mothers and majority 58.4% gained knowledge from mass media. A study stated that home health care refers to all the services and products provided to children in their homes, to maintain, restore, or promote their physical, mental, and emotional health. Its purpose is to maximize the level of independence and minimize the effects of existing disabilities through non-institutional services. Home health care is traditionally thought of as care of illness at home. Home care is provided primarily for the sick people, in order to prevent disease to promote health and for early diagnosis. 30 A study stated that each year 500 million episodes of diarrhoea occur in India, - five million of which require treatment in an institution. An individual child suffers 10 to 15 episodes of diarrhoea in the first five years of life. Of these, three to five occur in the first year life. Kamala Gupta also has supported this statement. Who said that diarrhoea is the second important killer disease of children under age of five years in world wide and he found that two percent of all children between the age group of 1 to 35 months had diarrhoea A study was conducted to assess the impact of educational intervention on the knowledge of 225 mothers of under-five children on home management of diarrheal disease in Bangalore. After the educational intervention, the result showed significant improvement on knowledge of mothers regarding definition of diarrhea ($P < 0.001$), signs of dehydration ($P < 0.001$), awareness of ORS solution ($P < 0.001$), correct preparation of ORS solution ($P < 0.001$), shelf-life of ORS solution ($P < 0.001$), seeking health care ($P < 0.001$) and rational drug therapy during diarrhea ($P < 0.001$). This study concluded that though the proportion of mothers retaining the knowledge at the end of 2 years dropped, yet there was significant improvement ($P < 0.001$)

when compared to the baseline study²⁵ . A.K.Sood, et. al 2007 – conducted study on knowledge and practices among rural mothers in Haryana. The conducted study on 108 rural mothers about child hood diarrhoea where determined by using pretested semistructure interview schedules. The common process are diarrhoea reported were eruption of teeth [67.59%], eating of mud [51.85%] worm infestation [47.22%], change of climate [35.18%], poor personal hygiene [34.25%] and changes in diet [25.92%]. Majority [83.33%] of mothers practice food restriction during diarrhoea. 77% consulted their mother – in – 31 laws in the first instance for treatment of diarrhoea. The home remedies tried by mothers were, isabgol husk with curd [30.55%], ghee with tea [28.70%], water boiled with mint leaves [25.92%], local ghutti [22.22%], and unripe mango juice [16.66%]. Majority of mothers [83.33%] believed that oral rehydration therapy alone, cannot treat diarrhoea. This study has conducted in France in this study they reviewed the files of all children admitted to hospital for D+hus between 1988 to 2000 [diarrhoea, haemolytic, uremic, syndrome]. They have tested in 65 children with D+hus cases. In that 16 children develop gastrointestinal complications. In conclusion the research determine the prevalence and severity of diarrhoea, and treatment needs among under five children with gastrointestinal complications of D+hus is rare but they need early surgery. B.P.Das, et. al 2005 – Investigated on knowledge, attitudes and practices [KAP] regarding the management of diarrhoea on drug sellers in eastern Nepal. In Nepal drug sellers often act as the first treaters. About 50 to 60% of them were unaware of uncontrolled diarrhoea and importance of ORS in its management. Only 20% of the drug sellers using along with drugs such as antimotility agents [AMA] or metronidazole. As a result of the above conferring knowledge about the ethical aspects of drugs in the management of diarrhoea. Zhong J, et. al 2005 – Conducted study on prevention of complications in diarrhoea. Study expresses that the source of infection is the consumption of selfish [polluted by sewage] and astroviruses, caliciviruses at reoviruses can cause mini epeidemics, in families, hospital wards are potentially very dangerous to seriously ill hospital patients they also have economic consequences for fishermen and food 32 industry. The conclusion of the study is these viruses contribute the massive mortality caused by infantile diarrhoea in developing countries are responsible for uncounted millions of deaths each year. W.Onyango – ouma, et. al 2004 – Conducted study on changing concepts of health and illness among children of primary school age in Western Kenya, with 40 primary school children aged about 10-15 years of age. Investigation underwent a 2 month intervention and were there after enrolled as health communicators in a longitudinal study for an additional period of 12 months. Data were collected before, during and after the intervention using in-depth interviews technique. More action oriental health concepts were identified and a general change from an external locus on control towards an internal locus of control was found. The study concludes that students can modify and broden their concepts of health and illness through action oriented health education. Jose Solar ZanoGiron, et. al 2004 – to studied on annual burden of diarrhoea and is associated with rotavirus [RV] in children clinics and hospitals in Honduras. The researcher data was collected of all children below 5 years old clinics and

hospitals populated by the secretary of man for the period of 2000 through 2004. The result of this study shows diarrhoea is a major cause of illness among children under five Honduras and Rv is likely than most common causes. Our preliminary estimate needs to be refined so that health planners in decisions on the future use of rotavirus vaccine. A programme of hospital based surveillance for rotavirus in Honduras has been this need. 33 Banerjee B, et. al 2004 – conducted study on prevalence and severity of diarrhoea children under five. The problem of in under five children of with different socio economic status in an urban area of West Bengal overall prevalence of diarrhoea was 31.67% highest in over socio economic class 41% in lower economic class. After several cross sectional studying in conclusion the study suggests that low socio economic status suffer more compared to others. Programme for national health development Ethiopia 2000 – reported that many developing countries children under 15 years of age constitute a very large proportion of its population 44.7% of which around 40% are under five and 8% are made 1 year of age. In 2000 the under five mortality rate was estimated at 166, infant and neonatal mortality rate were estimated 97 and 49 per 1000 live births. The study annual under five mortality current estimated of 146.6. The major causes under five mortality has been pneumonia 28.9% malaria 21.5% diarrhoea 6.7%. Half of ethiopias children under fives are stunded 52% with 11% were reported as wasted in 2000. The government has adopted an integrated management of child hood illnesses as his Key Strategy towards reducing under five mortality and morbidity, and promoting healthy growth and development of children. The government also focuses on key child survival interventions proven to be effect the reducing the child hood mortalit

3. Results

The present study findings revealed that, there was significant association between level of knowledge regarding home care remedies and selected demographic variables such as age of mother ($\chi^2=17.13$), age of child ($\chi^2=9.23$), education of mother ($\chi^2=15.23$), occupation of mother ($\chi^2=17.13$) and religion ($\chi^2=3.3810$).

4. Conclusion

The study conducted that the majority of mothers of under five children had inadequate test score whereas in post term score, majority of mothers of under five children had adequate knowledge after the intervention. Thus, the structured teaching programme was effective to enhance the knowledge regarding prevention of selected health problems among the mothers of under five children.

5. Future Scope

A similar study can be done with a control group and experimental group.

A study can be conducted on the effectiveness of informative educational module on knowledge and practice of mothers of under five children about care of first aid of burns.

6. Limitations

Findings of the study could not be generalized due to selection of single setting. The findings of the study were limited to 60 samples from rural area of Barabanki, Lucknow.

References

- [1] Available from URL:<http://ezine articles.com>
- [2] Important home remedies available from <http://www.lazydesis.com>
- [3] Home remedies available from <http://www home-remedies.com>
- [4] Indian Home Remedies available from <http://www.wonderfulinfo.com>
- [5] AnupKumar.My Nation Home Remedies and Tips. Health Action2005 October 15(4)
- [6] Home Remedies .Home Healthcare Nurse: 1987 January/February 5 (1) - 35-40
- [7] Gardiner and Kemper .Herbs in Paediatrics and Adolescent Medicine;. Philadelphia: Elsevier publications, 2002
- [8] Axelrod.Home Remedies by Axelrod ; California: Cross-Cultural Communications, 2003. 69-72
- [9] Bea Godwin .Layperson's Quick Reference to Home Remedies, Herbal Treatments, Vitamins and Minerals Book Description; Losangeles: Booksurge publications, 2004.211-213
- [10] Doug Dollemore.The doctors book of home remedies; Columbia: Bantam publications, 2008.123-124