

A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge of Mothers Regarding Prevention of Accidents among Preschoolers in Selected Anganwadi at Karad

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Abstract: *Introduction:* **Objective:** To assess the existing knowledge of mothers and to determine the effectiveness of structured teaching programme on prevention of accidents among preschoolers in selected Anganwadi's **Methodology:** Evaluatory approach with Non-probability simple convenient sampling technique one group Pre-test – Post-test design was used in selected Anganwadi's at Karad. **Result :** The overall mean pre-test knowledge score was 13.34(SD-2.379) and Post-test knowledge score was 22.66(SD-2.430). Calculated paired 't' value was 25.762 (df - 99) which is greater than tabulated 't' value (1.982). This indicates that gain in knowledge is statistically significant at $p < 0.05$ level, also this result revealed significant association between knowledge of mother and selected socio-demographic variables including age of child, Mothers Education and occupation and ways of health information. **Conclusion:** Mothers were lacking knowledge about accidents and its prevention. The designed health education and training program led to significant improvement in knowledge about prevention of accidents.

Keywords: Effectiveness, structured teaching programme, accidents, prevention, preschoolers

1. Introduction

“The children of today are the adults of tomorrow. They deserve to inherit a safer, fairer and healthier world. There is no task more important than safeguarding their environment”.

- Dr. Gro Harlem Brundtland, Director General, WHO (2003)⁽¹⁾

A child's world centers around the home, school and the community. Every child has right to grow up in a healthy environment. Developmentally, gross motor skills enables the Preschooler's not only to move farther more quickly by walking, running, climbing, and riding a tricycle but also to pull objects around and to explore areas like pools and ponds without the immediate supervision of an adult. Accidents are undoubtedly among the chief causes of morbidity and mortality in childhood. ⁽²⁾In today's world, in the developed as well as the developing countries like India, danger ,prevails not only on the roads, but it also exists in the home & near home⁽³⁾

In 1992-93, India's under-five mortality rate was 109 deaths per 1,000 live births, according to the National Family Health Survey-1. By 2005-06, this dropped to 74, and by 2015-16 to 50-12 more than the world average. India's under-five mortality rate is higher than poorer countries such as Nepal, Bangladesh and Rwanda, **IndiaSpend** reported in March 2017. In 1990, 11.2 million children died globally before age five, with an under five-mortality rate of 83 deaths per 1,000 live births. By 2016, the number of deaths

reduced by more than 50% to 5 million, and the mortality rate to 38. The SDGs have set a target of 25 deaths per 1,000 live births by 2030. India's National Health Profile sets itself a target of 23 by 2025. At the present rate, global under-five mortality rate will drop to 23 by 2030, and can potentially drop to 19 with better healthcare ⁽⁴⁾

Accidental injuries to infants and young children are often serious, but are largely preventable with appropriate information and safe practices. Young children are particularly vulnerable to accidents due to their innate desire to explore their world and the inability to perceive the dangers of their actions. As children learn through experience, minor injuries are inevitable but providing a safe environment can reduce the risks, coupled with close supervision and setting the limits of safety. Parents should remember that they need to maintain a constant balance between overprotecting the child on one hand and giving him freedom in his process of learning the hazards of his environment. ⁽⁵⁾

In 2004, a study was conducted on mother's home safety practices for preventing six common types of childhood injuries. To identify determinants of mothers home safety injuries to children (burns, poisoning, drowning, cuts, strangulation/suffocation/choking and falls). Home interviews were conducted on home safety practices. The results revealed unique determinants of mother's home safety practices to prevent these six common types of childhood injuries. The factors that motivated mothers to engage in precautionary measures at home varied depending on the type of injury. Intervention programs to enhance

maternal home safety practices will need to target different factors depending on the type of injury. ⁽⁶⁾

The common causes of home accidents include burn injury which is a leading cause of unintentional injuries in children; falls as fall from bed, sofa or crib on stairs, slippery floors, from high windows, or from tipping furniture; choking; poisoning and toxic substances that may be found under the kitchen sink, in the medicine cabinet, in the garage or garden shed, or even in a purse or other place where medications are stored; suffocation; some home accidents occur where there's water in the bathroom, kitchen, swimming pools, or hot tubs; and less commonly firearms. ⁽⁷⁾

All children are at risk for injury because of their normal curiosity, impulsiveness and desire to master new skills and children imitate adult behavior from an early age (Ashwill & Droske, 2010). Young children are particularly vulnerable to accidents due to their innate desire to explore their world and the inability to perceive the dangers of their actions. ⁽⁸⁾ It's not possible – or even a good idea – to protect your child from all the bumps, bruises, scrapes and falls of childhood. These are just part of growing up for an active, curious child. But with some practical steps and planning, these incidents are more likely to be the kind that a kiss, cuddle or band aid will fix, rather than one of the many serious accidents that happen in each year. ⁽⁹⁾ As children learn through experience, minor injuries are inevitable but providing a safe environment can reduce the risks, coupled with close supervision and setting the limits of safety. ⁽⁸⁾

The most important risk factors reported for home injury include living in unsafe homes, low socioeconomic status, and mothers' low knowledge and inappropriate attitude ⁽¹⁰⁾ Most of the minor accidents are unavoidable but major and serious accidents can be prevented by adults caring for their children. Every parent think that they are good parents and take great care in protecting children from any harm or dangers yet there is one place where the child is more a risk than anywhere else, and that is their own home. No matter how careful parents are, there will be time when child is unsupervised. It only takes a split Second for a child to swallow something and choke. ⁽¹¹⁾

Based on the review of literature and Researchers personal experience during community field visits in urban and rural area and Clinical posting in Pediatric Intensive care unit, Medical Intensive care unit and Pediatric Orthopedic unit was found that many children affected with accidents and there was less awareness among mothers on prevention of accidents in preschoolers.

Hence felt the need to assess the knowledge on prevention of accidents among mothers of Preschooler's, with a view to Introduce Structured Teaching program which will be useful for the mothers to Increase the knowledge for prevention of accidents among Preschooler's.

2. Review of Literature

Janki Patel (2014) . An evaluative research approach with pre-experimental design was used. The sampling technique used was non - probability convenient sampling. Data was collected from 50 mothers, from Pipariavillage, Vadodara..

The tool consist of Demographic profile and knowledge component of Childhood accident consisting 30 items. The reliability of the tool was established by using split half and karl pearson method. the post-test knowledge score was in the range of (20-29) which was higher than the pre-test knowledge score range (11-17).The mean post-test knowledge score (24.14) also was higher than the mean pre-test knowledge score(13.84).The comparison of pre-test and post-test knowledge score showed that there was a significant gain in knowledge scores of mothers after STP .The study findings revealed that structured teaching programme was highly effective in improving knowledge of mothers regarding childhood accident ⁽¹¹⁾

Mohammed Al. M (2016): A survey was conducted regarding caregiver's perception about the risk and preventive factors and its relation to various home injuries in children , Riyadh . A validated self-report questionnaire with 55 close ended questions A validated self-report questionnaire with 55 close ended questions was distributed to the 579 caregivers, who visited the pediatric emergency department. Results shows that Caregivers are well aware about the mortality and morbidity related home injuries in children. Though their knowledge about home injuries in children is considered to be adequate, their attitude towards injury prevention needs to be addressed. The perceptions about incidents like falls at home (33.9%), toxin ingestion (5.7%), burns (15.7%), drowning (8.1%), baby walker (19.5%) and television (TV) fall injuries (6.9%) are found to be statistically significant with related preventable and risk factors. ⁽¹²⁾

3. Research Methodology

Research Approach and Design

Evaluatory approach with Pre- experimental, one group pre-test post-test design was selected.

Setting of the Study

This study has been conducted in selected Anganwadi's at Karad

Population

The population of the present study comprises of the mothers of pre-scholars attending selected Anganwadi's at Karad. The accessible populations are those available at the time of conducting the study.

Sample and Sampling Technique

In the present study, 4 Anganwadi's were selected by the lottery method, from that 100 mothers of preschooler's attending selected Anganwadi's were selected by non probability simple convenient sampling technique by the investigator

Inclusion Criteria

- Mothers of children who are attending selected Anganwadi.
- Mothers who can comprehend Marathi language.
- Mothers who are willing to participate in study.
- Mothers who are present at the time of data collection.

Exclusion Criteria

- Mothers who are not available at time of data collection

Description of Tool

Section ‘A’ – Demographic Performa:-

A Performa for selected personal information was used to collect the sample characteristics. The characteristics included are age of child, gender of child, education of mother, occupation of mother, Family type, Monthly income of family, Residence, House type, Ways of health information, No. of children’s in home, Birth order of child.

Section ‘B’- Structured Knowledge Questionnaire

It consists of 10 items related to causes of selected commonly occurring accidents among preschooler’s.(Falls, Traffic Accidents, poisoning, Burns, Asphyxia, drowning)

Section ‘C’- Structured Knowledge Questionnaire

It consists of 15 items related to prevention of selected commonly occurring accidents among preschooler’s.(Falls, Traffic Accidents, poisoning, Burns, Asphyxia, drowning) All the items from section ‘B’ and ‘C’ were multiple choice questions, which have three alternative responses. A score value of 1 was allotted to each correct response. The total knowledge score was 25. The subjects who got a score of 16 and above were considered as Good knowledge’, scores of 9 – 15 were considered as Average knowledge’ and subjects who scores 8 and below were considered as Poor knowledge’.

Description of Structured Teaching Programme (STP)

The structured teaching programme is an educational programme from which the mothers were helped to increase knowledge and to prevent accidents among preschooler’s. It aids mothers to enrich their knowledge regarding the causes and prevention of accidents among preschooler’s. Structured teaching programme consist of information regarding causes and prevention of commonly occurring accidents among preschooler’s. STP was intervened on causes and prevention of accidents by using charts, flash cards and posters

Scoring Plan for Knowledge

The 36 multiple choice questions are prepared, in that first 11 are related to Socio-demographic information. Next 10 questions are related to causes of accidents and remaining 15 questions for the prevention of accidents among preschooler’s. 1 question is having 1 mark for correct answer.

The score ranges from 0 to maximum of 25.

The level of knowledge have been classified as -

- Good 16 – 25
- Average 9 – 15
- Poor 0 – 8

Method of Data Collection

Data collection is the gathering of information needed to address the research problem. The formal prior permission from the authorities like Child Development Officer was sought and obtained. The investigator also obtained permission from mothers of preschoolers. The investigator

has collected data for one month (8/10/2012 to 17/11/2012). Conduction of pre-test and post-test was done after 7 days gap of structured teaching programme on mothers regarding prevention of accidents among preschooler’s.

4. Results

Section I: Findings related to Socio-demographic variables of mothers of preschoolers.

Table 1: Frequency, percentage Distribution of mothers of preschooler’s according to their Socio-demographic variables

Sr. No.	Demographic variable	Frequency	Percentage
1	Childs Age (in years)		
	3-4	53	53%
	4-5	26	26%
	5-6	21	21%
2	Childs Gender		
	Male	56	56%
	Female	44	44%
3	Mothers Education		
	Illiterate	0	0
	Primary	49	49%
	Higher-secondary	47	47%
	Graduate and post graduate	4	4%
4	Mothers Occupation		
	Housewife	90	90%
	Employee	7	7%
	Daily wage	2	2%
	Business	1	1%
5	Family Type		
	Nuclear	35	35%
	Joint	65	65%
6	Monthly income		
	Below 4000 Rs.	18	18%
	Rs. 4001 to 8000	27	27%
	Rs. 8001 to 12 000	45	45%
	Rs. 12 000 and above	10	10%
7	Residence		
	Urban	100	100%
	Rural	0	0
8	House Type		
	Kaccha	12	12%
	Pakka	88	88%
9	Ways of Health Information		
	News papers, Magazines	60	60%
	Radio, Television	7	7%
	Relative, Health institute	3	3%
	Health care worker	30	30%
10	Number of children’s in family		
	One	18	18%
	Two	69	69%
	Three	10	10%
	Four and more	3	3%
11	Birth order of child		
	One	65	65%
	Two	26	26%
	Three	7	7%
	Four and more	2	2%

Majority of participants (Mothers), 53 (53%) having child in the age group of 3-4 years , 69 (69%) samples having one child with 65 (65%) having birth order of child with

first, majority 56 (56%) were having male child's , most of them 49 (49%) samples had primary education, 90 (90%) belonged to Housewife , 65 (65%) belonged to joint family, majority 45 (45%) were having monthly income between Rs. 8001 to 12 000, All the subjects 100 (100%) were living in urban area. 88 (88%) samples were living in pakka house, majority of subjects 60 (60%) were getting health information from Newspapers .

Section- II: Findings related to knowledge of mothers regarding prevention of accidents among preschooler's

Table 2: Knowledge of mothers regarding prevention of accidents among preschooler's

Sr. No	Item	Total score	Mean % of knowledge scores of subjects		
			Pre test (X)	Post test (Y)	Gain in knowledge (Y- X)
1	Knowledge of mothers regarding prevention of accidents among preschooler's	25	52%	92%	40%

n=100

Table No.- 2 indicates that the percentage of gain in knowledge of mothers regarding prevention of accidents among preschooler's. Pre-test knowledge score was 52% and Post-test knowledge score was 92% and its difference i.e. gain in knowledge was 40%.

Table 3: Mean, Median, Standard deviation and range of knowledge score of mothers regarding prevention of accidents among preschooler's.

Sr.no	Area of analysis	Mean	Median	Standard deviation	Range (H – L)
1	Pre-test	13.34	13	2.379	12
2	Post-test	22.66	23	2.430	9
3	Difference	9.32	10	0.05	3

n=100

Table No - 3 depicts that overall pre-test Mean knowledge score was 13.34 and Standard Deviation 2.379, whereas post-test Mean knowledge score was 22.66 and Standard Deviation 2.430 with difference of Mean 9.32 and Standard Deviation 0.05 respectively.

Table 4: Frequency and percentage distribution of Pre-test knowledge score of mothers regarding prevention of accidents among preschooler's

Sr. no	Knowledge Score	Pre-test		Post-test	
		Frequency	Percentage	Frequency	Percentage
1	Good (16–25)	14	14%	100	100%
2	Average (9–15)	75	75%	0	0
3	Poor (0–8)	11	11%	0	0

Table No – 4 reveals that in pre-test majority of mothers 75 (75%) had average knowledge, 14 (14%) had good knowledge and 11 (11%) had poor knowledge, whereas in post-test indicated a marked increase in knowledge level, that all the mothers 100(100%) had good knowledge regarding prevention of accidents among preschooler's.

From this it was inferred that structured teaching programme (STP) was effective in improving the knowledge of mothers regarding prevention of accidents among preschooler's.

Knowledge of mothers	Mean Difference (Pre and post-test)	Standard Deviation Difference (Pre and post-test)	Standard Error Difference (Pre and post-test)	Calculated Paired 't' value	Tabulated 't' value
	9.320	3.618	0.3618	25.762*	1.982

Section-III: Testing for evaluation of effectiveness of structured teaching program (STP) on knowledge of mothers regarding prevention of accidents among preschooler's * (p<0.05)

Table 5 describe the effectiveness of structured teaching programme (STP) on knowledge of mothers regarding prevention of accidents among preschooler's.

Table no. – 5 reveals that calculated paired _t-value (t=25.762) is greater than tabulated t'value (t=1.982). Hence H1 is accepted. This indicates that the gain in knowledge score is statistically significant at p < 0.05 level. Hence there is significant effectiveness of structured teaching programme (STP) on mother's knowledge regarding prevention of accidents among preschooler's.

Section IV: Association between selected demographic variables and pre-test knowledge score of mothers regarding prevention of accidents among preschooler's.

Table 6: Depicts that the association between pretest knowledge score and selected demographic variables regarding prevention of accidents among preschooler's

Variables	Pre –Test Knowledge					
	Good	Average	Poor	Chi-square	P value	DF
Childs Age (in years)						
3-4	8	41	4	81.89	9.49	4
4-5	4	18	4			
5-6	2	16	3			
Childs Gender						
Male	7	44	5	0.92	5.99	2
Female	7	31	6			
Mothers Education						
Illiterate	0	0	0	26.25	12.59	6
Primary	4	39	6			
Higher-secondary	6	36	5			
Graduate and post graduate	4	0	0			
Mothers Occupation						
Housewife	10	71	9	15.75	12.59	6
Employee	3	2	2			
Daily wage	0	2	0			
Business	1	0	0			
Family Type						
Nuclear	6	23	6	3.31	5.99	2
Joint	7	53	5			
Monthly income						
Below 4000 Rs.	2	14	2	5.13	12.59	6
Rs. 4001 to 8000	6	19	2			
Rs. 8001 to 12 000	4	34	7			
Rs. 12 000 and above	1	9	0			

Residence						
Urban	14	75	11	0.00	5.99	2
Rural	0	0	0			
House Type						
Kaccha	2	9	11	0.17	5.99	2
Pakka	12	66	10			
Ways of Health Information						
News papers, Magazines	5	49	6	26.68	12.59	6
Radio, Television	2	5	0			
Relative, Health institute	3	0	0			
Health care worker	2	23	5			
Number of children's in family						
One	4	10	4	6.83	12.59	6
Two	9	53	7			
Three	1	9	0			
Four and more	0	2	1			
Birth order of child						
One	11	50	4	4.37	12.59	6
Two	2	20	4			
Three	1	6	0			
Four and more	0	3	0			

Significant relationship was found between the pre-test knowledge score regarding prevention of accidents among preschooler's and age of children ($\chi^2 = 81.89$), Mothers education ($\chi^2 = 26.05$), Mothers occupation ($\chi^2 = 15.74$), ways of Health information ($\chi^2 = 26.88$). at 5% level of significance. No significant relationship was found between the pre-test knowledge score regarding prevention of accidents among preschooler's and child's gender ($\chi^2 = 0.92$), Family type ($\chi^2 = 3.31$), Families monthly income ($\chi^2 = 5.13$), Residence ($\chi^2 = 0.00$), House type ($\chi^2 = 0.17$), Number of children in family ($\chi^2 = 6.83$), and Birth order of child ($\chi^2 = 4.37$).

5. Discussion

Mother's education along with firm guidance is the key to prevent accidents and safe living. The education to parents through primary health team is at forefront of promoting safety of the under 6 year's children as how to avoid potential dangers for young children in the home and surrounding to home. Mother's knowledge and practice plays very important role in preventing childhood accidents.

In the present study, pre-test majority of mothers 75 (75%) had average knowledge, 14 (14%) had good knowledge and 11 (11%) had poor knowledge, whereas in post-test indicated a marked increase in knowledge level, that all the mothers 100(100%) had good knowledge regarding prevention of accidents among preschooler's. This findings are comparable with the study findings of Janki Patel (2014) mean post-test knowledge score (24.14±2.01) was higher than the mean pre-test knowledge score (10.33±2.06)⁽¹¹⁾, another study by Silva EC (2016) conducted in 155 mothers in a Basic Health Unit in northeastern of Brazil the results revealed a significant increase in knowledge about prevention of accidents in childhood in all the self-applied questions ($p < 0.05$). After the educational intervention, there seemed to be a significant difference with the questions regarding the knowledge on preventing fall ($p = 0.000$), drowning ($p = 0.000$), and intoxication ($p = 0.007$)⁽¹²⁾. Study by Awale pratiksha (2018)

in rural areas of Nagpur in which t-test was found to be 19.72 at the degree of freedom 60 and level of significance 0.05⁽¹³⁾ the findings of the study from Kaur Jagjeet (2013) also found that mean post test knowledge (18.25) were significantly higher than pre test knowledge score (14.53).⁽¹⁴⁾

6. Conclusion

The aim of study was to assess the effectiveness of structured teaching programme on knowledge of mothers regarding prevention of accidents among preschooler's. the nature of study was experimental study and was conducted at Karad. there is significant effectiveness of structured teaching programme (STP) on mother's knowledge regarding prevention of accidents among preschooler's. Hence concluded that structured teaching programme was effective strategy to make a difference among parents of under five years children.. Thereby mothers can apply the knowledge effectively which in turn to promote children's wellbeing.

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