

# MOTHER'S KNOWLEDGE ABOUT DIARRHEA AMONG CHILDREN UNDER 5 YEARS AND ITS MANAGEMENT IN RURAL COMMUNITY LAHORE

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## ABSTRACT

**INTRODUCTION:** This cross-sectional research conducted and assess mother knowledge about diarrhea among children under 5. What's more, its administration in rustic group of Lahore? The runs in kids is one of the fundamental reason of death and maternal passing in creating nations. Diarrhea is also a major public health issue in Pakistan with 51 % prevalence. Diarrhea is one of the communicable diseases which are both treatable and preventable. In community level diarrhea in children is common due to unhygienic condition and contaminated food. This study was carried out to generate data that can help mothers in the community to manage diarrhea in home.

**METHODOLOGY:** This cross-sectional study was conducted at Husain Abad community Lahore. Self-administer questions were filled from 109 participants through Non-probability convenience sampling technique. All those mothers will be included in the study whose children have occurred at least one time diarrhea and willing to participate and have no any disease and mentally stable. Data were analyzed using SPSS-21 calculate relative frequencies and means.

**RESULTS:** Finding of this study likewise demonstrate that the greater part of the members reply about Diarrhea to DO NOT KNOW which maximum score were 74 (67.9%) and minimum score are 35 (32.1%). Most of the participants answered to another question about causes of diarrhea in which 64 (58.7%) were response to DO NOT KNOW, 15 (13.8%) were response to YES and 30 (27.5%) were

response to NO. The overall result shows that Mothers knowledge about diarrhea and their management was poor.

**Conclusion:** Finding of the study show that mothers have very poor knowledge about diarrhea and even they do not know about diarrhea. Management of diarrhea was also very poor and they do not know what to do when their child is suffering from diarrhea. Over result shows that the mothers knowledge about diarrhea in their management in children is unsatisfactory in that rural area.

**KEYWORDS:** *Diarrhea, Mothers knowledge Management*  
**INTRODUCTION**

Diarrhea in children is one of the primary driver of horribleness and mortality in creating nations. As per World Health Organization (WHO) Diarrhea can be characterize as "the section of free or watery stools more often than not no less than three times in a 24 hour time span". World wellbeing report demonstrates that in creating nations every year around 1.6 million kids bites the dust because of looseness of the bowels sicknesses, showing 15.2 % of all demise for youngsters under-five years of age. The main causes due to which diarrhea occurs are inadequate sanitation, poverty, female illiteracy, lack of breast feeding, hygiene and unsafe water supply (Appel, 2013). Diarrhea is also a major public health issue in Pakistan with 51 % prevalence. Diarrhea is one of the communicable diseases which are both treatable and preventable. In community level diarrhea in children is common due to unhygienic condition and contaminated food. Timely identification and early starting of management is essential in reducing

diarrhea related mortality (Murakami H, 2014). Continuous fluid intake and feeding by caregivers particularly by mothers are important measures that prevent diarrhea related child mortality. Obstacles and practices regarding childhood diarrhea, traditional beliefs and its management by mother are different among different communities. Treatments selection and health seeking behavior are affected only by traditional beliefs, but also by distance health care facilities, types of health care providers and socio-demographics factors (Charles, 2012). Knowledge about home management of diarrhea in childhood is very important for communities and caregivers for the reduction of diarrhea-related morbidity and mortality are present unacceptably high. To diminish the weight and increment the appropriateness, numerous nations recommend blending home solutions for oral rehydration other than to buy from drug stores or restorative stores. Offering attention to moms about home solutions for ORS and on chance factor for ailments may likewise diminish the dreariness and seriousness of diarrheal infection in children and consider a control measures through educational programs. Knowledge of the mothers about diarrhea depends on various factors such as their educational status, previous experience of managing diarrheal disease and ethnicity (Seyal, 2014). Majority of the mothers do not notice the sign of dehydration due to diarrhea which may lead to further complication. A lot of foods are present which are useful to give during diarrhea but most of the mothers in a rural area are unaware of these. Knowledge of mothers about diarrhea is important.

#### **PROBLEM STATEMENT**

In Pakistan childhood mortality is very high and it is the a major concern as every year 400,00 infants dies in the first year of their life out of which every 10 children dies before the age of five (Hinno, 2011). Diarrhea is the common cause of child death in Pakistan. It is also observed that in rural areas the education level of mother is poor due to which they do not know about the diarrhea disease, their prevention and home management as result the morbidity due to diarrhea increase. This gap will be explore with the help of this study and therefore the present study is driven to identify the mother knowledge and home management about diarrhea in this rural community of , Lahore.

#### **AIM OF THE STUDY**

The current study has purpose to identify the effect of mother knowledge on childhood diarrhea and its management in rural Community of Lahore

#### **HYPOTHESIS**

H0: There is no effect of mother knowledge on management of diarrhea in children

Ha: There is effect of mother knowledge on management of diarrhea in children

#### **SIGNIFICANCE OF THE STUDY**

This study is identify the gap exist between Mother Knowledge, and management of diarrhea in children in Husain Abad Community, Lahore. Health education session

will be arrange to educate the people of the community especially about diarrhea and their home management prevention to reduce the incidence of diarrhea cases in future. Knowing about diarrhea is essential especially for parents to reduce the diarrhea related morbidity and mortality and promotion of health and prevention of diseases. The finding of the study will be helpful for the stakeholder to overcome the hurdles which causes diarrhea. Currently cases of diarrhea in children are increase in rural areas and in developing countries like Pakistan. So awareness and home management about diarrhea is very important to minimize the prevalence in future.

#### **CONCEPTUAL FRAME WORK**

Conceptual framework for understanding the dynamics of social contexts for childhood diarrhea and its underlying causes is discussed. The framework is grounded in social norms theory. The most important thing is the mother condition like age, education, house condition and crowding like number of children under 5. If the mothers have good knowledge about diarrhea disease, their causes, prevention and management then their children will be safe from diarrhea. The second thing is the nutrition because those children who are deficit in weight are more prone to diarrhea. Demographic characteristic is also play important role in childhood diarrhea like if the children who live in rural area where mother have less educated and also their financial condition is poor due to which they do not able to treat their children is also the factor which lead to diarrhea. Household characteristics like source of drinking water and toilet facilities also have contribution in childhood diarrhea because if the drinking water is not purified then it may cause diarrhea, poor hygienic condition also lead to diarrhea. If the socio-economic condition of the family is good then they will be able treat their child at a time and give proper treatment which will be fruitful for child health (Quinn, 2013).

#### **RESEARCH QUESTION**

- 1) What is the relation of mother knowledge on management of diarrhoea?

#### **I. LITERATURE REVIEW**

A study conducted by (Yasmin, 2014) in Karachi in which she found that 47 % of the mother did not know about the causes of diarrhea. They reflected that falling from height, teething, eating pulses or hot food and weather changes as the main causes of diarrhea. Knowledge about the sign of dehydration most of the mother 40 % were not able to specify them and only 34 % of the mother know little about the sign like sunken eyes with increase thirst or dry hair and decreased in salivation. The overall result of the study show that the mother knowledge about diarrhea is not satisfactory (WHO, 2013). A study carries out by (Ngnie, 2007) in Nepal stated that childhood diarrhea is huge problem in developing countries and the common public health concern and the incidence is increase in under-five year children. Due to these increasing cases of diarrhea there are several

discrepancies about knowledge about knowledge and management of diarrhea among the mothers. Mostly socio-demographics factors such as mother education and occupation, employment of husband status, income of the family and family size are inter-related with mother knowledge regarding diarrhea and its management apart from mother personal attitude and behavior (Ngnie, 2007).

According to (Avita, 2013) highlighted in his study about the management of diarrhoea which show that 30 % of the mother did self-medication and the widespread usage of medication by mothers in treating diarrhoea. These misuse of medication increase not only the cost of the therapy but also lead children and infants to toxic effect, giving maximum awareness should be focus, early identification and the preparation of ORS and the causes of diarrhoea. The result of this study predicted that the management of diarrhoea in the home was poor and mother knowledge should be enhance through proper education to reduce the morbidity rate of the disease in childhood (Avita, 2013). According to (Barros, 2012) Greater part of the respondents 807(87.1%) announced that their kids had experienced loose bowels inside the most recent 2 weeks before initiation of the examination. Loose bowels was found to add to 48% of tyke mortality in the investigation region.

Seen reasons for the runs were: unclean water 524(55.6%), debased nourishment 508(54.9%), awful eye 464 (50.0%), false teeth 423(45.6%) and milk 331(35.8%). Over 70% of moms diminished liquid admission amid the runs scenes. The moms saw wheat flour, rice water and chose herbs as hostile to diarrheal specialists. Amid ailment, 239(27.8%) of the kids were accounted for not to have flushed any liquids whatsoever, 487(52.5%) alcoholic considerably less and just 93(10.0%) were accounted for to have smashed more than expected. A critical 831(89.6%) withheld drain incorporating bosom drain with the thought to improve looseness of the bowels. In view of these discoveries, there is have to create and actualize intuitive correspondence methodologies for the wellbeing labourers and moms to address discernments and misinterpretations and encourage positive change in the family unit hone on administration of looseness of the bowels among under-fives (Barros, 2012).

This investigation was completed in the southern Punjab, Pakistan to diagram the reasons for the youth the runs as apparent by moms and, particularly, to survey impression of moms on youth loose bowels in connection to cleanliness practices and drinking water and sanitation offices. Two hundred Households in ten towns were haphazardly chosen. Data was gotten from moms, through a survey, inside and out meetings, and direct perceptions. The attention was on acquiring Information from moms of youngsters that were underneath five years old. Reasons for the runs detailed by moms were arranged in seven unique areas. Causes identifying with the stomach related framework, Especially utilization of an excess of sustenance were the most imperative, trailed by influences relating To tainting and those relating to the humeral hypothesis of 'hot' and 'cool'.

The mother's Health status was seen as deciding the strength of her kid through her breast milk. The examination attracts the thoughtfulness regarding the multifaceted nature and heterogeneity of convictions, demeanours and works on concerning loose bowels and cleanliness. This makes it hard to think of general principles for wellbeing training efforts (Khan, 2014)

### III. METHODOLOGY

#### STUDY DESIGN

This was a community based cross-sectional descriptive study conducting in to assess Mothers Knowledge and Management about diarrhea in children under-five in rural areas of Lahore, Pakistan.

#### TARGETED POPULATION

The targeted population of this Study will be the Mothers and Children of Husain Abad Community, Lahore.

#### SAMPLING TECHNIQUE:

Data was collected from 114 participants of rural areas Lahore who are willingly to participate in the study. The data will be collected through convenient sampling techniques. Those who meet the inclusion criteria will be included in the study and those who don't meet the criteria was not be the part of the study.

#### Simple size:

Sample size was calculated by using "Solving formula".

$$n = N / 1 + (N) (e)^2$$

In the event that total population is 300

In the event that N=Population, n=Sample estimate, e = 5%

Margin of mistake Confidence interim 95%

$$n = N / 1 + (N) (e)^2$$

$$n = 300 / 1 + (300) (0.05)^2$$

$$n = 300 / 1 + (300) (0.0025)$$

$$n = 300 / 1 + 0.75$$

$$n = 300 / 1.75$$

$$n = 114$$

My sample size will be 114

#### RESEARCH TOOL

A well-constructed close ended questionnaire was distributed among people of Husain Abad Community, Lahore. In this community base project tool will be questionnaire for collecting information. Questionnaire will be adopted from article title "A survey of Mother Knowledge about childhood diarrhea and its management in community of Nepal" which has been published in 2011.

#### ETHICAL CONSIDERATIONS

Ethical principle was performed amid during research. Authorization will be taken from the Ethical board of trustees of LSN division in University of Lahore. I had taken permission from the stockholder of the community. Give finish data to the member identified with explore. It ensures that no damage was given to the member. Study will be gainful. All members was have open chance to take an interest in look into. Nobody will be compelled to partake in inquire about. Educated assent will be marked from the members. Before marking assent members was

educated about reason, philosophy, hazard and advantages of examination.

**DATA COLLECTION PLAN**

Data was collected from the people of rural community of Lahore. The data was collected with the help of other colleagues within a specified timeframe. Data collection was done via an adopted comprehensive, pre-tested and structured questionnaire which sought such information as age, marital status, educational status, occupation, and knowledge, attitude and barriers toward polio immunization.

**DATA ANALYSIS:**

Statistical analysis utilized by SPSS for Windows version 21. The information was compressed by engaging measurements utilizing the recurrence, rate and tables for categorical variables. The relationship between the three variables scores and socio-demographic variables was tested by using correlation and t-tests. The significance level for all statistical analysis was set at 0.05.

**TIME FRAMEWORK:**

This study approximately will take in 4 months (Sep, 2017 to Jan, 2018)

**IV .RESULTS**

*Table No.1: Demographic Data(Age,Type of Family,Occupation,Number of Children,Classification of income,Education)*

Variables	Frequency (f)	Percentage (%)
<b>Age</b>		
18-25	26	23.9 %
26-33	35	32.1%
34-41	24	22%
42-50	24	22%
<b>Type of family</b>		
Single	50	45.9%
Joint	59	54.1%
<b>Occupation</b>		
Housekeeper	19	17.4 %
Student	24	22 %
Government Job	9	8.3 %
Private Job	18	16.5 %
Self-employee	39	35.8%
<b>Number of Children</b>		
1-5 years	46	42.2 %
6-10 years	63	57.8 %
<b>Classification of Income</b>		
5000-10000	34	31.2 %
11000-15000	46	42.2 %
16000-20000	29	26.6 %
Other		

Education		
Secondary or Higher	34	31.2%
Middle	28	25.7%
Primary	25	22.9 %
Illiterate	22	20.2 %

*Demographic Data analysis & results:*

This chapter includes 2 portions of analysis. First analysis was demographic analysis. It gives us details of 6 Demographic questions Clear examination was utilized for two factors. One was free factor (Management of diarrhea) and one was needy variable (Mother learning). It lets us know about mother knowledge about management of diarrhea in children under 5 year's.

*Table No.2: Frequency and Percentage of the Participant's response on each items.(Yes,No,Do NOT Know)*

Item	yes	No	Do not Know	Percentage	Percentage
Do you know about 35 diarrhoea?	67.1%	74	32.1%	67.1%	
Do you know about the 30 causes of diarrhoea?	15	64	27.5%	13.8%	
Do you know that 01 diarrhoea can be cause due to the contaminated food?	94	15	86.2 %	13.8%	
Do you know that 54 diarrhoea can be cause due to the contaminated water?	55	00	50.5%	49.5%	
Did you know that diarrhoea can be caused due the eating of food with 59 contaminated hand	44	5	41.3%	58.7%	
Did you know the 40 symptoms of diarrhoea?	00	69	36.7%	63.3%	
Do you know that abdominal cramping occur in diarrhoea?					
Do you know that 70 weakness occur in diarrhoea?	5	34	65.5%	41.5%	
Do you know that watery 31 stool pass out in diarrhoea more than three times in a day?	18	60	57.6%	42.4%	

Did you know that maximum amount of should drink in diarrhoea?	00	91	18	83.5 %	16.5 %
Did you boiled water before drinking	60	49	00	45%	55%
Did you know about ORS?	53	6	41	55.1%	44.9%
Do you know about the preparation of ORS in home?	60	43	6	43.2%	56.8%
Poliomyelitis is curable.	36	00	73	58.5%	41.5%
Do you know about the prevention of diarrhoea?	29	18	64	55.1%	44.9%
Do you know quantity of ORS solution to be given for child below 5Years?	98	16	00	43.2%	55.1%
Do you know about Role of ORS solution in diarrhea?	60	49	00	43.2%	55.1%

#### V. DISCUSSION

This cross sectional study examines the mother knowledge about childhood diarrhea in their management in rural community of Lahore. A cross-sectional analytical study design find out that mother knowledge is poor regarding management of diarrhea in children. Finding of this study also show that most of the participants answer about Diarrhea to DO NOT KNOW which maximum score were 74 (67.9%) and minimum score are 35 (32.1%). Most of the participants answered to another question about causes of diarrhea in which 64 (58.7%) were response to DO NOT KNOW, 15 (13.8%) were response to YES and 30 (27.5%) were response to NO. Most of the participant answered about Symptoms of diarrhea in which 45 (41.3%) were response to YES, 59 (54.1%) were response to NO and 5 (4.6%) were response to DO NOT KNOW. The overall results of this study show that mother knowledge about management of diarrhea in children was poor in that community. Another study which is related to my study has done by (Lee and Yom2012) which show that 35% mother have some knowledge about management of diarrhea in children. In regarding management of diarrhea some respondents response to YES which maximum score were 91 (83.5%) and minimum score 18 (16.5%). some respondents response to YES 6 (5.5%) which maximum score are 42.1 % (n=96) and minimum score are 25.9% (n=59). Some respondents response to YES which maximum score are 33.8 % (n=77) and minimum score are 11.4% (n=26).The response of the participant about Management of diarrhea is 42.1% (n=96) were response to YES and 14.9% (n=34) were response to NO. This study shows that most of the participants have negative management about diarrhea in children. The result of my

study linear 100% another study conducted by (Cuban and Kasikci2008) in Turkey it is observed that most of the mothers answered NO which result was 48% and YES result was 42% which show that there most of the participants have negative management about diarrhea in children (Cuban and Kasich 2010).

#### 100% VI. CONCLUSION

The purpose of is to examines the mother knowledge about childhood diarrhea in their management in rural community of Lahore. Finding of the study show that mothers have very poor knowledge about diarrhea and even they do not know about diarrhea Management of diarrhea was also very poor and they do not know what to do when their child is suffering from diarrhea. Over result shows that the mothers knowledge about diarrhea in their management in children is unsatisfactory in that rural area.

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