International Journal of Research Available at https://edupediapublications.org/journals

e-ISSN: 2348-6848 p-ISSN: 2348-795X Volume 04 Issue 09 August 2017

The Knowledge, Attitude & Practices of Rural Mothers Of Infants about Diarrhea in Dera Ghazi Khan.

¹Dr.Tayyaba Gul, ²Dr.Muhammad Zamil, ³Dr.Mudasir Abbas, ⁴Dr.Muhammad Ramzan Aziz.

Department of Cardiology, Dera Ghazi Khan Medical College/Teaching Hospital, Dera Ghazi Khan, University of Health Sciences Lahore, Pakistan.

Email; ramxan574@gmail.com

Abstract:

Background:

Diarrhea is leading cause of death in infants. 60% of Pakistan's population lives in rural areas.

Objective:

To Assess Knowledge, Attitude & Practices Of Rural Mothers Of Infants About Diarrhea

Study Design:

Cross-sectional

Place and Duration:

This study was conducted at EPI center, in OPD and Diarrheal Unit of Pediatrics ward of Teaching Hospital Dera Ghazi Khan, over a 4 months period i.e. duration from 10-04-2017 to 10-08-2017. A sample of 112 was collected by interviewing rural mothers of infants using a standard questionnaire.

Methodology:

Informed verbal consent was taken from all subjects under study before commencing data collection. The Performa contained different variables like age, no. of infants, mother's education, Knowledge about causes of diarrhea, the signs of dehydration, Consequences of diarrhea, knowledge about preparation of ORS.

Results:

Out of 112 subjects, 58.9% of Mothers were between 20-29 years of age,

46.4% had knowledge that diarrhea was loose watery stools, 24.1% told that diarrhea was caused by contaminated water, 29.5% were of the view that signs of dehydration were combination of any of two of the Sunken eyes, Dry skin, Dec. Urine output, Thirst, Weight loss. 69.6% mothers had knowledge that consequences of diarrhea were being weak & lethargic, 92.9% told that they consulted the doctor in case of diarrhea, 43.8% said that they took their child to doctor when the child was dehydrated. 37.5% started selfprevious medication because of consultation of same child, 72.3% knew how to prepare ORS, 33% used the combination of any two things in diet of child in diarrhea; ORS, Khichri, Milk, Banana, Yogurt, Rice.

Conclusion:

Majority of the mothers had a good understanding of diarrhea, knowledge about ORS and got doctor's advice when the child had severe diarrhea. More than 70% of the mothers had knowledge how to prepare ORS and knowledge about prevention of diarrhea.

What is diarrhea?

Diarrhea is the passage of loose, watery stools and/or having bowel movements more frequently than usual.

Types:

There are three clinical types of diarrhea:

International Journal of Research



Available at https://edupediapublications.org/journals

e-ISSN: 2348-6848 p-ISSN: 2348-795X Volume 04 Issue 09 August 2017

- 1. Acute watery diarrhea lasts several hours or days, and includes cholera;
- 2. Acute bloody diarrhea also called dysentery; and
- 3. Persistent diarrhea lasts 14 days or longer.

Acute diarrhea is defined as sudden onset excessively loose stools of>10ml/kg/day in infants and >200gm/24hrs in older children which lasts <14 days. In chronic diarrhea the episode lasts >14 days1.

Causes of diarrhea in infants:

An infection caused by a virus, bacteria or parasite; babies can pick up the bacteria and viruses that cause diarrhea through contact contaminated food or water, or by touching contaminated surfaces and then placing hands into mouths.

Symptoms:

- o Abdominal cramping or pain
- o Abdominal swelling, bloating or distention
- o Fecal incontinence
- Indigestion
- o Mucus or undigested food in feces
- Nausea and vomiting

Signs of dehydration in infant:

- Urinating less often than usual (fewer wet diapers).
- Irritability.

- Dry mouth.
- No tears when crying.
- Unusual drowsiness or lethargy.
- Sunken soft spot on the top of the baby's head.
- Skin that isn't as elastic as usual (doesn't spring back when gently pinched and released).
- Sunken eyes.

Breast feeding during diarrhea:

Breastfeeding reduces exposure to contaminated fluids and foods, contributes to ensuring adequate nutrition and thus non-specific immunity.

Objectives

- 1. Improve knowledge about causes & management of diarrhea in infants.
- 2. Improve mother's knowledge about feeding her infant during diarrhea.
- 3. To assess the knowledge of mothers about management of diarrhea.

METHODOLOGY

RESEARCH DESIGN:

Cross-sectional

Setting:

The Research was conducted at EPI center of OPD and Diarrheal Unit of Pediatrics ward of Teaching Hospital, Dera Ghazi Khan.

Duration:

Research was conducted for duration of 4 months i.e. from 10-04-2017 to 10-08-2017.



Population:

Rural Mothers of infants of age 15-49 years of Dera Ghazi Khan.

Sampling Technique:

Consecutive Sampling Technique.

Sampling Size:

Sample size was 112.

Inclusion Criteria:

- Mothers who belonged to rural union councils of Dera Ghazi Khan.
- II. Who had given the consent.
- III. Women who had an Infant.

Exclusion Criteria:

Statistics Of Age (Years) Distribution

Table-1

N	112
Mean	27.2768
Median	26.0000
Mode	25.00
Standard Deviation	5.37798
Variance	28.923
Range	27.00

- I. Mothers of infants who did not give the consent.
- II. Mothers having no Infant.
- III. Mothers who belonged to the urban areas.

Data Collection:

The Performa contained different variables like age, no. of infants, mother's education, Knowledge about causes of diarrhea, signs of dehydration, Consequences of diarrhea.

Data Analysis:

The data was entered on computer program SPSS version 14.

Results:

Minimum	15.00
Maximum	42.00

Table-1 shows that in this study the total number of rural mothers was 112, the mean of their age was 27.2768, median 26.00, mode 25.00, standard deviation 5.37798, variance 28.923, range 27.00, minimum age of mother 15 years & the maximum age 42 years.

What Is Diarrhea?

Table-2

Variable	Frequency	Percent	
Loose watery stool	52	46.4%	
Increased frequency	4	3.6%	
Both	41	36.6%	
Blood in stool	2	1.8%	
All three	4	3.6%	
Don't know	9	8.0%	
Total	112	100.0%	

Table-2 shows that 46.4% mothers know that diarrhea is loose watery stools.

Knowledge about Signs of Dehydration

Table-3

Variable	Frequency	Percent	
Sunken eyes	11	9.8%	
Dry skin	5	4.5%	
Dec. urine output	2	1.8%	
Thirst	10	8.9%	
Weight loss	18	16.1%	
Comb. of any two	33	29.5%	
Any three	12	10.7%	
Any four	10	8.9%	
All	1	0.9%	
Don't know	10	8.9%	
Total	112	100.0%	

Table-3 shows that 29.5% mothers know that signs of dehydration are combination of any of two of the following;

Sunken eyes, Dry skin, Dec. Urine output, Thirst, Weight loss.

When You Will Take Your Child To Doctor?

Table-4

Variable	Frequency	Percent

Immediately	5	4.5%
When condition is not improving	46	41.1%
When child is dehydrated	49	43.8%
When Self-medication fails	3	2.7%
NO	9	8.0%
Total	112	100.0%

Table-4 shows that 43.8% mothers said that they will take their child to doctor when the child is dehydrated.

Preparation Of ORS

Table-5

Variable	Frequency	Percent
Yes	81	72.3%



No	31	27.7%
Total	112	100.0%

Table-5 shows that 72.3% mothers know how to prepare ORS.

Diet Prefrences

Table-6

Variable	Frequency	Percent	
ORS	6	5.4%	
Khichri	9	8.0%	
Milk	30	26.8%	
Banana	1	0.9%	
Yogurt	1	0.9%	
Rice	2	1.8%	
Comb.of any two	37	33.0%	
Any three	16	14.0%	
Any four	8	7.1%	



International Journal of Research

Available at https://edupediapublications.org/journals

e-ISSN: 2348-6848 p-ISSN: 2348-795X Volume 04 Issue 09 August 2017

All	2	1.8%
TOTAL	112	100.0%

Table-6 shows that 33% mothers use the combination of any two of following in diet of child in diarrhea;

ORS, Khichri, Milk, Banana, Yogurt.

Discussion

Diarrhea is a major cause of illness and death among young children in developing countries. The present Cross-sectional study **Knowledge, Attitude & Practices Of Rural Mothers Of Infants About DIARRHEA** In our study a total of 112 rural mothers were interviewed.

In this study, nearly about 6.3% mothers were less than 20 years of age, 58.9% were between 20-29 years of age, 32.1% were between the ages of 30-39, 2.7% mothers were above 39 of age.

In the present study, 46.4% of mothers had knowledge that diarrhea was loose watery stools, 3.6% said that it was increased frequency, while 36.6% told that it was both of these causes, increased frequency as well as watery stools. According to 1.8% women diarrhea was bloody stool, 3.6% said that it was all of the three. While the remaining 8.0 % didn't know about it. When asked about the causes of diarrhea 24.1% of mothers had knowledge that diarrhea was caused by contaminated water.

In Present study when asked about the signs and symptoms of diarrhea in infants 9.8 % of mothers told that their

infants had sunken eyes, 4.5% said dry skin, 1.8% will have Dec. urine output. 8.9% will have thirst problem. 16.1 % will have weight loss. 8.9% don't know the exact signs of the diarrhea. Nearly about 69.6% of mothers know that consequences of diarrhea are weakness & lethargic state of body.

When mothers were asked when will you take your child to the doctors, 92.9% of mothers said that they consult doctor in case of diarrhea while 7.1% do not consult a doctor. Nearly about 43.8% of mothers said that they always take their child to doctor immediately, while 41.1% mothers said that they take their child to doctor when the child is dehydrated, 2.7% mothers take their child to doctor when self-medication fails. 8% do not take their child to doctor. In another similar study regarding health seeking practices, 52.5% mothers consulted doctor after two days while 30% mothers opted for selfmedication.

According to this study when mothers were asked about the diet during diarrhea in infants, we came to know that 33% of mothers used the combination of any two of following in diet ORS, Khichri, Milk, Banana, Yogurt, and Rice. Other study explained that 73% of mothers believed that decreasing food /drink frequency at the time of diarrhea is beneficial for the child. While 26.8% mothers think that drinking milk is a good diet during diarrhea, 0.9% think bananas and yogurt is an essential diet, 8.4% think that eating Khichri is important while

International Journal of Research



Available at https://edupediapublications.org/journals

e-ISSN: 2348-6848 p-ISSN: 2348-795X Volume 04 Issue 09 August 2017

1.8% take only rice as diet during diarrhea, 5.4% take ORS as an essential diet. When the mothers asked about how to make ORS, 72.3% of mothers know how to prepare ORS while 23% don't know.

In this study when the mothers were asked about how they can prevent their infants from diarrhea, 25% of mothers told about boiling the water, covering the food, washing hand, protection of food from flies, keep environment & child clean. While others had no idea of preventive measures.

Conclusion

- Research showed that most of the mothers lack health seeking behavior about infant's diarrhea due to illiteracy.
- 2. Most of the mothers had awareness about importance of ORS in diarrhea.
- 3. Most of the mothers had knowledge about danger signs of diarrhea i.e. sunken eyes, jaundice, lethargy & weakness.
- 4. Most of the mothers consulted doctor in case of severe diarrhea.
- 5.Burden of diarrheal diseases had solid association with mother's education.

References

- 1. Sreedharan R, Liacouras CA. Major Symptoms and Signs of Digestive Tract Disorders. In: Kilegman RM, Stanton B, Geme J St, Schor NF, Behrman RE et al; Nelson textbook of Pediatrics. 19th ed, Elsevier Health Sciences; 2015; 4449-62.
- **2.** Nasir Shah, Ishaq Lohar, Shazia Shaikh, Yaseen Usman, Jawaid Usman et al;

Perception of community regarding common diseases prevailing in a squatter settlement of Karachi, Pakistan. J Pak Med Assoc 2010; 60: 562-565.

- **3.** Liu L, Johnson HL, Cousens S, Perin J, Scott S, Lawn JE, et al; Child Health Epidemiology Reference Group of WHO and UNICEF. Global, regional, and national causes of child mortality: an updated systematic analysis for 2010 with time trends since 2000. Lancet. 2012; 379(9832):2151–61.
- **4.** Global Health Observatory (GHO): Causes of child mortality, 2012 Geneva: World Health Organization; 2014.
- **5.** Liu L, Johnson HL, Scott S, Lawn JE, , Campbell H, , Li M, Black RE et al; Child Health Epidemiology Reference Group of WHO, Unicef. (2012). Global, regional, and national causes of child mortality: an updated systematic analysis for 2010 with time trends since 2000. Lancet 379:2151-2161.
- **6.** Fischer Walker CL, Perin J, Aryee MJ, Boschi-Pinto C, Black RE et al; (2012). Diarrhea incidence in low- and middle-income countries in 1990 and 2010: a systematic review. BMC public health 12:220.
- **7.** UNICEF. UNICEF celebrates Global Hand-washing Day. 2012. Oct, 2012.
- **8.** Javed Z. Inadequate Health Facilities In Rural Areas. 2013 [cited 2013 Aug 12].
- **9.** Pakistan. Unicef.2013(cited 2013 Aug 12)
- **10.** Goldman N, Pebleyb AR, Gragnolatic M. Choices about treatment for ARI and diarrhea in rural Guatemala. Soc Sci Med 2002; 55: 1693–1712.
- 11. Catafesta F, Zagonel IP, Martins M, Venturi KK. A amamentacao na transicao

International Journal of Research Available at https://edupediapublications.org/journals



e-ISSN: 2348-6848 p-ISSN: 2348-795X Volume 04 Issue 09 August 2017

puerperal: o desvelamento pelo metodo de pesquisa- cuidado. Esc Anna Nery rev Enferm. 2009;13(3):609-16.

- **12.** Stuebe A. The risks of not breastfeeding for mothers and infants. Rev Obstet Gynecol. 2009; 2 (4):222-31._
- 13. C. Ku and S. K. Y. Chow, "Factors influencing the practice of exclusive breastfeeding among Hong Kong Chinese women: a questionnaire survey," Journal of Clinical Nursing, vol. 19, no. 17-18; 2434-2445, 2010.
- Seyal T, Hanif A. Knowledge, **14.** Attitude and Practices of Mothers and **Doctors** Regarding Feeding. Rehydration Solution (ORS) and Use of Drugs in Children during Acute Diarrhea. Annals 2009; 1:38-41.
- 15. Ansari MS, Manzoor R, Siddique N, Prevalence of 8 key family practices regarding neonatal health in Sindh. Pak J Pub Health 2012; 1:46-52.
- 16. World Health Organization. Diarrheal diseases. World Health Organization; 2013. Accessed on April 20th, 2015.
- 17. Ogunrinde OG, Raji T, Owolabi OA, Anigo KM. Knowledge, Attitude and practice of Home Management Childhood Diarrhea among Caregivers of Under-5 Children with Diarrheal Disease in Northwestern Nigeria. J Trop Pediatr 2011. [Cited 2011 Jul 20].
- World Health Organization. WHO 18. Model List of Essential Medicine.World Health Organization; 2013.
- 19. Zahid SS, Zehra N, Ullah S, Khan N, Jawaid MH. Khan M. Mother's Awareness **Practices** Regarding Management of Childhood Diarrhea in a Squatter Settlement of Karachi. Pak J Med

and Dent 2014; 2. Accessed on March 8, 2015.