



Research Article

A DESCRIPTIVE STUDY TO ASSESS THE KNOWLEDGE REGARDING O.R.S &O.R.S PREPARATION FOR DIARRHOEA AMONG MOTHERS OF UNDER FIVE CHILDREN AT NIZAR VILLAGE, SURAT, GUJARAT

Divya Chaudhari

Maniba Bhula Nursing College, Maliba Campus, UKA Tarsadia University, Bardoli, Surat

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ABSTRACT

A descriptive study to assess the knowledge regarding O.R.S &O.R.S Preparation for diarrhoea among mother of under five children at Nizar village, Surat **Methods:** An evaluative research approach with descriptive survey and the study was conducted at Nizar village, sample comprised of 50 mothers of under five children sample was selected by convenient. Data was analysed using descriptive and inferential statistics. **Result:** In demographic data Majority among 50 out of 32(64%) of samples belongs to 2.5years of age group. Majority among 50 out of 49(98%) of the sample were hindu,31(62%) samples education of mother,37(74%) of samples were joint family, 28(56%) samples were above 3000rs, 42(84%)of sample were for source of information. The result of mothers showed 05 (10%) mothers having poor knowledge and 28 (56%) having an average knowledge and 17(34%) mothers having good knowledge. The knowledge score was 21.34, median was 19, mode was 20 and standard deviation 3.35.**Conclusion:** The result of the study concluded that majority of mothers of under five average knowledge about ORS and its ill effects. There is no association between knowledge scores and the selected demographic variables like age, religion education of mothers, monthly income, type of family, source of knowledge.

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INTRODUCTION

Diarrhoea is a leading killer of children, accounting for approximately 8 per cent of all deaths among children under age 5 worldwide in 2016. This translates to over 1,300 young children dying each day, or about 480,000 children a year, despite the availability of simple effective treatment. Most deaths from diarrhoea occur among children less than 2 years of age living in South Asia and sub-Saharan Africa. Despite this heavy toll, progress is being made. From 2000 to 2016, the total annual number of deaths from diarrhoea among children under 5 decreased by 60 per cent. Many more children could be saved through basic interventions. and for that we can provide ORS for treatment of childhood diarrhoea . These data given by Unicef.¹

According to W.H.O (2017) Diarrhoeal disease is the second leading cause of death in children under five years old. It is both preventable and treatable. Each year diarrhoea kills around 525 000 children under five. A significant proportion of diarrhoeal disease can be prevented through safe drinking-water and adequate sanitation and hygiene. Globally, there are nearly 1.7 billion cases of childhood diarrhoeal disease every year.

Diarrhoea can last several days, and can leave the body without the water and salts that are necessary for survival. In the past, for most people, severe dehydration and fluid loss were the main causes of diarrhoea deaths.²

According to diarrhoea progress report 2018 ,India's vaccination coverage to prevent rotavirus infection, a leading cause of severe diarrhoea in young children, was the lowest among the 15 countries which introduced it last year, a new report said. It also pointed out that India lost over 2.6 lakh children under five years from diarrhoea in 2016. The report found health systems falling "woefully short" in ensuring that the most vulnerable children have access to prevention and treatment services in the 15 countries. including India, that account for 70 per cent of global diarrhoea deaths in children under five. Despite significant reductions in disease in recent years because of improvements in access and use of health interventions, nearly half a million diarrhoea deaths still occurred in two countries - India and Nigeria, it said. The number of deaths of children under five years due to diarrhoea deaths were 1,02,813.³

Statement of the Problem

A descriptive study to assess the knowledge regarding O.R.S &O.R.S Preparation for diarrhoea among mothers of under five children at Nizar village, Surat, Gujarat.

*Corresponding author: **Divya Chaudhari**

Maniba Bhula Nursing College, Maliba Campus, UKA Tarsadia University, Bardoli, Surat

Objectives

1. To determine the level of knowledge regarding ORS&ORS preparation for diarrhoea among mothers of under- five children.
2. To determine the significant association between level of knowledge among mothers of under- five children regarding ORS & ORS preparation for diarrhoea with their selected demographic variables.

Hypothesis

H₀₁: There will be no significant association between level of knowledge regarding ORS & ORS preparation for diarrhea among mothers of under- five children and selected demographic variables.

METHODOLOGY

- **Research approach:-**descriptive study.
- **Research design:-** descriptive design.
- **Setting of study:-** Nizar village
- **Population:-** mothers of under five children.
- **Sampling techniques:-**convenient sampling technique
- **Sample size:-** 50 mothers of under five children.
- **Inclusive criteria:-** Those who are willing to participate in this study.
 - mothers of under five children who are able to read and write Gujarati and English.
 - mothers of under five children who are residing at Nizar village.
- **Exclusive criteria:-** Mothers of under five children who are not willing to participate
- **Tool for data collection:** Structured Interview Schedule.
- **Data Analysis:** Descriptive and Inferential statistics.

RESULTS OF THE STUDY

Table 1 Frequency and percentage distribution of selected demographic variables among Mother of under five children

SR.NO	Variables	Frequency (F)	Percentage (%)
1	Age of Mothers		
	a.<20 Years	00	00
	b. 20-30 Years	18	36%
	c. 31-40Years	32	64%
2	d. >40 Years	00	00
	Religion		
	a. Hindu	49	98%
	b. Muslim	01	2%
3	c. Christian	00	00
	d. Other	00	00
	Education of mother		
	a.Illiterate	04	8%
4	b. Primary	31	62%
	c. Secondary	12	24%
	d. Graduate	03	6%
	Types of family		
5	a.Joint	37	74%
	b. Nuclear	11	22%
	c. Extended	2	4%
6	Family income per month		
	a.<1500/-	6	12%
	b. 1600-3000/-	16	32%
	c.> 3000	28	56%
6	Sources of information		
	a.Television & Radio	07	14%
	b. Newspaper & Magazine	00	00
		01	2%

c. Older family member 42 84%
d. Asha Worker

The above table depicts that 32(64%) mothers of under five children were in 31-40 years .Majority of 49(98%)mothers were Hindu, Majority of 31(62%) mothers had primary education, Majority of 37(74%)mothers from joint family, Majority of 28(56%)mothers of monthly income above 3000rs. Majority of 42(84%) mothers got information from Asha worker.

Table 2 Distribution of level of knowledge on ORS and ORS Preparation among Mothers of under five children

Sr. No	Level of Knowledge	Knowledge on ORS and ORS Preparation	
1	Poor	5	10%
2	Average	28	56%
3	Good	17	34%

The above table depicts that 05(10%)mothers having poor knowledge and 28(56%)having an average knowledge and 17(34%)mothers having good knowledge.

Table 3 Mean, Median, and Standard deviation of knowledge on ORS among Mother of under five Children

Sr. No	Categories	Mean	Median	Standard Deviation
1.	Knowledge on ORS and ORS Preparation	21.34	19	3.35

The above table depicts that knowledge score was 21.34,median was 19 and standard deviation3.35.

Association between Knowledge Score And Selected Demographic Variable

There is no association between knowledge scores and the selected demographic variables like age ,religion education of mothers, monthly income, type of family, source of knowledge, an where calculated chi square values were more than the table Value.

DISCUSSION

Majority of 32(64%) mothers of under five children were in 31-40 years .Majority of 49(98%)mothers were Hindu, Majority of 31(62%) mothers had primary education , Majority of 37(74%)mothers from joint family, Majority of 28(56%)mothers of monthly income above 3000rs. Majority of 42(84%)mothers got information from Asha worker .

The investigator found the majority that out of 0.5 (10%) mother having poor knowledge. that out of 28(56%) mother having average knowledge and that out of 17(34%)mother having good knowledge.

It was founded that, there is no association between knowledge scores and the selected demographic variables like age , religion education of mothers, monthly income, type of family, source of knowledge.

CONCLUSION

Based on the study finding, the investigators dealt with the various nursing implication of the study and the limitation of the study. The finding helped to give suggestion and recommendation for further studies.

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