

TO ASSESS THE AWARENESS OF MOTHERS REGARDING PREVENTION OF HOME ACCIDENTS AMONG UNDER FIVE CHILDREN

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Abstract: Injury is related as a chaotic, random event” an accident is an event, independent of human will, caused by an outside force acting rapidly and resulting in bodily or mental injury . the occurrence of injury is unlimited. An accident can occur as an unexpected unplanned occurrence of an event which usually procedures, death or a property damage. In toddlers accidents are unavoidable and major accidents are preventable. It Is a leading cause of death and disability among children. Accidents were the fifth leading cause of death in children under the age group of five. The objective of the study was to assess the awareness of mothers of under Five children regarding prevention of home accidents. The demographic variables were shown that 37.5% mothers were in the age group of 25-29, more than half (58.2%) of the mothers living in nuclear family, 65% of the toddlers were in the age group of one and 83.3% were having past childhood accident by fall and 13.3% mothers having inadequate level of awareness 49.1% mother having moderate level of awareness regarding home accidents . The conclusion of study was most of the mothers having moderate level of awareness regarding prevention of home Accidents.

Keywords: Mothers, childhood Accidents, Under-five Children.

1. INTRODUCTION

The child is the most precious possession of mankind, most loved and perfect in its innocence. Children to be cared and protected from environmental hazards.¹ Accidents are the source of common concern in both developed and developing countries as the mortality and morbidity sequence cost and years of potentially life lost, due to accidents each year. Accidents are on of measuring concern developing countries as the traditionally the causes of mortality declines in importance. Highest member of domestic accidents occurrence in 1-3 yrs age group. Drowning is a common, preventable problems especially in childhood where it is the second most cause of death by accidents with 0-3 yrs old and comprising percent of drowning. It occurs while in bath tubs, pools, or wadding pools or near irrigation ditches or other open standing water. It is impotent that a small child can drown in a matter of seconds and in a just few inches of water.²

Developmentally children at 1-3 yrs can run, jump, climb, stairs, rides a tricycle, throw a ball and play with toys that may have many small intricate parts. In today’s high-tech world there are dangers for children in every where example on road, at home, at school, or in a play ground, injury is the number one cause of death and life loss for children, in children injury mortality is greater than other childhood disease combined.³ One of the fundamental right of every child is to grow up in a healthy home, school and community accidents preventions and safety, awareness are skills that need practice it a sort of a sixth sense for danger most children learn safety concerns from their mothers. Ordinary house hold items can be

very hazardous to young children at home few safeguards and good supervision are necessary.⁴ According to the national road transport council and trauma cases association at least 25.000 lives are lost every year due to road accidents in India and nearly 6% of the total cases were unintentional injuries. Children from birth to four years old account for nearly 60% of death in house fires.⁵ In most countries including India, unintentional injuries rank as the number- one cause of death and a leading cause of hospitalization for children older than 1 year. The number of unintentional injury deaths to children in India is greater than the next nine causes of Estimates indicate that one in four children in India experience a medically attended injury each year. In 1999, for example, unintentional injuries were the second leading cause of hospitalization among youths under 15 years of age (National Center for Health Statistics, 1999). Not surprisingly, because injuries pose such a significant threat to the health of children, there have been numerous calls for research to identify factors that contribute to injury risk during childhood.⁶

A descriptive study was conducted to examine parental strategies for managing child injury risk in selected areas of Bangalore. A sample of 150 mothers were used in study and collected data by multi method strategies over a 3 months period to identify anticipatory prevention strategies implementation by parents on a room- by room basis. Results revealed that use of supervision and rule – base teaching doing so too early age clearly elevates children’s risk of injury in the home.⁷

An experimental study was conducted to assess mothers knowledge on safety hazards in households with young children sample of 230 mothers was selected and data collected by telephone survey and parental observations. The findings of study showed safety hazards related to burns example poisoning, falls and self reported measures of risk perceptions, the child’s previous injury experiences were observed. Results of study were suggested that residential injury prevention strategies for young children should stress active as well as passive counter measures.⁸

A retrospective study was conducted to assess mother’s knowledge on childhood poisoning from eight regional hospitals in India. The retrospective data showed 50 – 90 % were below 5 years. A sample of 2009 cases assessed for incidence of poisoning in random sampling method.⁹

A descriptive study was conducted in home injury prevention practices for infants and toddlers, the role of parental beliefs and housing quality from selected urban areas of Bangalore. a sample of 150 mothers were selected and interviewed about their living environment when they brought their children[6-36 months] to hospital based. findings of study showed 59% of mothers did not use stair gates, 37% of mothers knew hot water temperature¹⁰. The observed factor of injury associated with family income, housing quality and environmental barriers. Results revealed that to persuade parents about value of injury in substandard housing and very limited financial resources. Results showed that the combination of health beliefs, social influence, demographic and experimental variables accounted for 51% of variance in hazards acceptability and 44% of variance in hazard frequency, age, the birth position of children were significant predictors of home safety practices.¹¹

2. METHODOLOGY

A descriptive research design were used and a sample of 120 mothers of under five children were taken whose children were admitted in pediatric ward of MMIMS&R Hospital and able to understand Hindi, willing to participate in study. Total enumerative sampling were used for data collection. Data were collected through a semi structured tool that consist of general awareness on childhood Accident. Reliability of the tool will be specified by test re-test method.

3. RESULTS AND DISCUSSION

Table 1: Frequency & percentage of demographic variables of mothers

N=120

s.no	Demographic variables	Frequency	Percentage
1	Age of mother		
	<20	3	2.5
	20-24	32	27
	25-29	45	37.5
	>30	40	33.3

2	Size of family a) <4 b) 5-7 c) 8-10 d) >10	15 42 38 25	12.5 35 32 21
3	type of family a. Nuclear b. Joint	70 50	58.3 42
4	no. of toddlers in family a. 1 b. 2 c >3	78 10 11	65 8.3 9.2
5	occupation a. housewife b. teaching c. business d. others	80 15 0 25	67 12.5 0 21
6	Education a. illiterate b. primary level c. secondary level d. graduate or above	36 40 34 10	30 33.3 28.3 8.3
7	Income a. <10000 b. 10000-15000 c. >15000	75 25 20	62.5 21 16.6
8.	Past childhood accidents a. Yes b. No	30 90	25 75
	if yes, then specify a. Age 2 3 4 b. Type Fall Road side accident	15 10 5 25 5	50 33.3 17 83.3 16.6

TABLE 1 depicts that majority 37.5% of the mothers were in the age group of 25-29 years, 35% mothers were having a family size of 5-7 members, more than half of the mothers were living in nuclear family, 65% of mothers having one toddler in their family, more than half 67% of the mothers were housewife, 33.3% of the mothers having primary level of education and more than half 62.5% of the mothers have their family income <10000.

Table 2: Frequency and Percentage Distribution of Awareness of Mothers regarding Prevention of Home Accidents

N=120			
S.No	Variables	f	%age
1	Meaning of childhood accident		
1.1	unexpected event that lead to childhood injury	20	17
1.2	Expected event that lead to injury	50	41.6
1.3	Separation of child from mother	25	21
1.4	Injury of any type	25	21
2	Common type of childhood Accident		
2.1	Home accident	75	62.5
2.2	Road side accident	25	21
2.3	Both a & b	10	8.3
2.4	Don't know	10	8.3
3	Commonest type of accident in 1-3 years child		
3.1	Sport injury	35	29.1
3.2	Fall injury	65	54.1
3.3	Road side injury	17	14.1
3.5	Drowning	3	2.5
4	Commonest type of accident in 3-5 years child		
4.1	Road side injury	48	40
4.2	Sport injury*	47	39.1
4.3	Foreign body aspiration	15	12.5
4.4	Suffocation	10	8.3
5	Child more prone for Accident		
5.1	Unsupervised child	79	66
5.2	Supervised child	25	21
5.3	Don't know	16	13.3
6	Home should be located at		
6.1	1 meter away from road	55	46
6.2	2 meter away from road	32	27
6.3	5 meter away from road	25	21
6.4	Don't know	8	7

TABLE 2 depict that frequency and percentage of awareness of mothers regarding home accidents in which nearly half 41.6% of mother understand that childhood accident is expected event that leads to injury, more than half 62.5% of the mother understand common type of Accident is Home Accidents, 54.1% of accidents of age group between 1-3year were by fall injury, 40% of accidents of age group between 3-5years were by sport injury, 66% of the child were unsupervised that are prone for accidents and home of 46% children were located at 1meter away from road.

Table 3: Distribution of mothers according to the level of Awareness

S.No	Level of awareness	f	%
1	Mild	16	13.3
2	Moderate	59	49.1
3	Good	45	37.5

Table 3 depict the level of Awareness among mothers that 13.3% of mother were having mild awareness, 49.1% mother having moderate level of awareness and 37.5% of mothers having good level of awareness regarding prevention of home accidents.

Findings of this study consistence with the study done by Garling, A., & Garling, T. to assess mothers knowledge on safety hazards in households with young children sample of 230 mothers was selected and data collected by telephone survey and parental observations. The findings of study showed safety hazards related to burns example poisoning, falls and self reported measures of risk perceptions, the child's pervious injury experiences were observed. Results of study were suggested that residential injury prevention strategies for young children should stress active as well as passive counter measures.²²

4. CONCLUSION

The present study assess the awareness among mothers of under five children regarding prevention of home accidents. The result shows that there is moderate level of awareness among mothers regarding prevention of home accidents.

REFERENCES

- [1] Adenine ,A.E. and Okanogan. (2005) Prevention of toddler injury. Australian journal of rural health .13(2):97-101.
- [2] D'souza, J. (2001) .A study of effectiveness of an intensive health education program me on prevention of childhood accidents .Unpublished theses submitted to MAHE Deemed University .(M.Phil).
- [3] Ghai,O.P. (2000).Accidents and injuries in toddlers Essentials of pediatrics. 5th Edition. Interpret publishers. Delhi.
- [4] Grace, Lee.(2003).Misconceptions of families on toddler accidents in Massachusetts. Journal of pediatric health, 16(4).
- [5] Gupta, S.K., Gupta, R.C., Seth, A.K., Basin, J.K., &Gupta, A. (2000) recurrent toddler accidents. CD-ROM, Abstract from silver platter file.
- [6] Irwin Rosen stock, Historical origin of the health belief model, health education monograph 2(4) 1974: 334.
- [7] Garbarino, J. (1988). Preventing childhood injury: Developmental and mental health issues. American Journal of Orthopsychiatry, 58, 25–45.
- [8] Garling, A., & Garling, T. (1991). The ability of mothers of young children to anticipate potential home accidents. Children's Environment Quarterly, 8, 24–30.
- [9] Garling, A., & Garling, T. (1993). Mothers' supervision and perception of young children's risk of injury in the home. Journal of Pediatric Psychology, 18, 105–114.
- [10] Greaves, P., Glik, D. C., Kronenfeld, J. J., & Jackson, K. (1994). Determinants of controllable in-home child safety hazards. Health Education Research, 9, 307–315.
- [11] Greensher, J. (1984). How anticipatory guidance can improve control of childhood "accidents." Pediatric Counselling, 3, 1–8.
- [12] Irwin Rosen stock, Historical origin of the health belief model, health education monograph 2(4) 1974: 334.
- [13] Kabir,Z.,Long,J.(2002).Child mortality rates in rural India from Ballargh childhood accidents .Journal of Pediatrics. 48,178.
- [14] Kapoor.S.K., and Reddish, V.P.(2000), Knowledge, and practices regarding child hood accident prevention . 57 (4) : 533-535.