# EFFECTIVENESS OF STRUCTURED TEACHING PROGRAMME ON KNOWLEDGE ON PRACTICES REGARDING HOME CARE MANAGEMENT OF CHILDREN WITH FEBRILE SEIZURE AMONG MOTHERS OF UNDER FIVE CHILDREN

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Abstract: A Quasi - experimental design with pre and post test without control group was used to assess the effectiveness of structured teaching programme on knowledge on practices regarding home care management of children with febrile seizure among mothers of under five children admitted in pediatric ward at selected hospital at Puducherry. Methods: Data was collected from 30 mothers by convenient sampling technique by using Pretest questionnaire which was distributed and collected after which structured teaching program me was given with pamphlet then they were requested to fill posttest questionnaire after seven days structured knowledge on practice questionnaire. Results: The analysis of study showed that post-test mean percentage of knowledge regarding home care management (59%) was higher than the pretest mean score (18%). Findings of the overall post test knowledge on practice regarding home care management of the subjects were significantly higher than the pre-test knowledge score (p < 0.05).

Key words: Febrile seizure, Mothers of under five Children.

A child is precious not only to the parents, family, community and nation but also to the world at large. In fact child is a citizen of world and thus becomes the responsibility of the wide population of the whole universe to look after the interest of children all over.

Many children with long term serious health problems require frequent and or prolonged hospitalizations that separate them from their home environment. Home care of children can interfere with the ability to form the normal interpersonal family and community relationships that are important for normal growth and development of the child. Caring for a child at home may be a desirable alternative to hospital-based care. This child care at home, with all the necessary assistance are more supportive to the family's traditional care taking and nurturing role, provided home care is initiated with the best interests of the child and family and adequate resources and support are available.

Febrile seizure contributes to a significant burden of disease in children under five year of age in developing countries. A study in Nigeria found that 20% of pediatrics admissions during 9month observation period were for febrile seizures. Common causes for fever included malaria (32%) and pneumonia (16%). Although febrile seizures are mostly benign with excellent outcome but parents experiences are frightening and stressful situations leading to development of high level of anxiety when children suffer from febrile seizure. Therefore, it is felt that raising awareness about recurrence and long term consequences of febrile seizures will be useful to the parents while caring for their children with febrile seizure.

Febrile seizures are one of the commonest disorders of the childhood and of works and accounts almost 50% of the convulsive disorders and according to American Academy of Pediatrics (AAP), febrile seizure affects 3% of children aged from 6 month to 6 years. The risk factor of epilepsy in children who have prolonged febrile seizure is approximately 1.5% still with 98.5% chance that the child will not develop epilepsy.

Education is threefold process of imparting knowledge developing skills and interests, attitudes and life values in human life. As health problems depends upon the geographical area and demographical aspect, health education of the mothers is an important part of prevention of health problems.

Teaching programmes may improve related knowledge on prevention of febrile seizures and reduce misconceptions about febrile seizure. They can sometime also reduce recurrent episodes of febrile seizure and improve compliance with anticonvulsant drug.

# II. OBJECTIVES OF THE STUDY:

- 1. To assess the pre-test level of knowledge on practice regarding home care management of children with febrile seizure among mothers of under five children.
- To evaluate the effectiveness of structured teaching programme on knowledge and practice regarding home care management of children with febrile seizure among mothers of under five children.

3. To find out the association between the pre test level of knowledge on practice of mothers and selected socio demographic variables.

## III. RESEARCH METHOD

#### 3.1 DESIGN AND SAMPLING:

The research design selected for this study was quasi-experimental one group pre test and post test only design. The study was conducted at medical pediatric ward in Rajiv Gandhi Maternal and Children Hospital, Puducherry which is 250 bedded hospital. The sample size of the present study was 30 mother of under five children admitted in medical pediatric ward.

# 3.2 SAMPLING TECHNIQUE:

Mothers who fulfill the inclusive criteria were selected by simple random technique.

#### 3.3 INCLUSION CRITERIA:

Mothers of under five children

- Admitted in medical paediatric ward.
- Diagnosed to have febrile seizure.
- Can understand Tamil language.
- Willing to participate in the study.

# 3.4 EXCLUSION CRITERIA:

- Mothers of under five whose children were critically ill.
- Not available during data collection period.

# 3.5 DEVELOPMENT OF THE TOOL:

In the process of development of the tool, the investigator reviewed other related studies, obtained suggestions from experts and discussed it with the guide which helped in the ultimate construction of the tool. The structured knowledge on practice questionnaire on home care management of febrile seizure consists of two parts.

- **3.5.1 Part A:** It consists of demographic variables such as age of mothers, educational status of mothers, religion, occupation of the mothers, age of the child, educational status of father, monthly income of the family, type of family, number of the child in the family, previous experience of the child admitted in hospital and episode of febrile seizure per day.
- **3.5.2 Part B:**Structured knowledge on practice questionnaire regarding home care management with febrile seizure. The questionnaire has 3 sections
  - 1. General Information 6 items
  - 2. Management of fever 8 items
  - 3. Management of febrile seizure 7 items

# 3.6 SCORING TECHNIQUE:

**3.6.1 Part A:** Demographic variables were given coding.

**3.6.2 Part B:** The 3 sections comprise of 21 multiple choice questions with one correct answer which carries one mark and zero mark for wrong answer. The maximum score is 21.

# 3.7 PROCEDURE FOR DATA COLLECTION:

The permission was obtained from the Head of the Department of Medical Pediatric Ward in Rajiv Gandhi Maternal and Children Hospital, Puducherry. The data collection period was two weeks. The study was conducted in medical pediatric ward in Rajiv Gandhi Maternal and Children Hospital, Puducherry. A self introduction was given to the mothers of under five children. Pre test questionnaire was distributed and collected after which structured teaching programme was given with pamphlet. After that, they were requested to fill post test questionnaire after seven days.

# IV. RESULTS

Table 4.1: Mean, SD and mean % for pretest Knowledge on Practices regarding Home Care management of Children with Febrile seizure among mothers of under five children.

n=30

Pre test	Max. score	Mean	SD	Mean %
Overall	21	3.8	1.73	18

**Table-4,1**: shows that pretest score of overall Mean was 3.8, SD was 1.73 and mean % was 18% of Knowledge on Practices regarding Home Care management of Children with Febrile seizure among mothers of under five children.

Table-4.2: Mean, SD and mean% for post test Knowledge on Practices regarding Home Care management of Children with Febrile seizure among mothers of under five children

n=30

Post test	Max. score	Mean	SD	Mean%
Overall	21	12.4	0.42	59

**Table-4.2:** illustrates that posttest score of overall Mean was 12.4, SD was 0.42 and mean % was 59 % of Knowledge on Practices regarding Home Care management of Children with Febrile seizure among mothers of under five children admitted in pediatric ward.

Table-4.3: Frequency and percentage wise distribution of pre test and post test level of Knowledge on Practices regarding Home Care management of Children with Febrile seizure among mothers of under five children

n=30

	Pre test	Post test	
Level of knowledge	f %	f	%
Inadequate	30 100	11	36
Moderate adequate		17	57
Adequate		2	7

**Table-4.3** statistically predicts, that 100 % mothers of under five children had inadequate level of Knowledge on Practices regarding Home Care management of Children with Febrile seizure in pretest. In post test, 57% mothers gained moderate knowledge, 7% gained adequate knowledge and only 36% of samples had inadequate knowledge on Practices regarding Home Care management of Children with Febrile seizure.

Table-4.4: Mean, SD and mean% the effectiveness Knowledge on Practices regarding Home Care management of Children with Febrile seizure among mothers of under five children

n=30

Knowledge on		Pre test		Post test			Tigg. 4	
Knowledge on practice	Mean	SD	Mean%	Mean	SD	Mean%	Effectiveness in mean %	
Overall	3.8	1.73	18	12.4	0.42	59	41	

**Table-4.4** shows the comparison of pre and post test level of knowledge on practice regarding home care management of febrile seizures. It was illustrated that the post test mean score of knowledge on practice regarding home care management of febrile seizures was 59% which was comparatively higher than pre-test mean score (18%).

Table-4.5 Paired "t"-test was found to assess the effectiveness of Knowledge on Practices regarding Home Care management of Children with Febrile seizure among mothers of under five children

n=30

	Post	Post test		etest		
Knowledge on Practice	Mean	SD	Mean	SD	t'-value	P-value
Overall	12.4	0.42	3.8	1.73	16.34	0.000***

<sup>\*-</sup>P<0.05, significant and \*\*-P<0.01 &\*\*\*-P<0.001, highly significant

Table 4.5 portrays that the mean post test level of mother's knowledge on practices regarding home care management of children with febrile seizure among mothers of under five children (12.4) was greater than the mean pretest level of knowledge (3.8). The obtained t -value 16.34 was statistically highly significant at 0.01 level. This illustrates that the mean difference of 8.6 is a true difference and has not occurred by chance.

#### V. DISCUSSION:

# 5.1 Effectiveness of Structured Teaching Programme:-

Effectiveness of Structured Teaching Programme on Knowledge on Practices regarding Home Care management of Children with Febrile seizure among mothers of under five children. Findings showed that 57% mothers gained moderate knowledge, 7% gained adequate knowledge and only 36% of samples had inadequate knowledge on Practices regarding Home Care management of Children with Febrile seizure

The analysis of study showed that post-test mean percentage of knowledge regarding home care management (59%) was higher than the pretest mean score (18%). It indicates that the structured teaching programme was effective in improving the knowledge of the mothers regarding home care management of febrile seizure. Findings of the overall post test knowledge on practice regarding home care management of the subjects were significantly higher than the pre-test knowledge score (p < 0.05). It indicates that the Structured Teaching Programme was effective in improving the level of knowledge on practice regarding home care management of febrile seizure.

# 5.2 Relationship between the pre-test level of knowledge with selected demographic variables

The study revealed that the demographic variables such as age, education, occupation, religion, monthly income of parents, age of the child, type of family, previous experience of hospitalization and also episodes of febrile seizures per day in which there is association between the level of knowledge

#### VI. IMPLICATIONS:

The findings of the study has implications in various aspects of nursing profession i.e, nursing service, nursing education and nursing research by assessing the knowledge on practice regarding home care management of febrile seizure among mothers of under five children.

#### **6.1 Nursing Service**

- Nurses can play a major role in giving health education on practice of home care management by means of identifying the high risk children and educating mothers to practice the home remedies thereby reducing the risk.
- Structured teaching programme can be implemented in subcentres were the rural people could reach for immediate measures to prevent complications.
- Community participation, health awareness programme and mass education campaign can be arranged.

#### **6.2 Nursing Education:**

- Nurses who work in hospitals and health centers to be give adequate training of first aid management regarding febrile seizure and knowledge can be imparted through inservice education.
- Various developmental programmes such as conferences, seminars, workshops have to be organized.

# **6.3 Nursing Administration:**

As a nurse administrator role, organize and plan to conduct in-service education, continuing education and staff developmental programme for the staff nurses and make them involve in the community participation and mass education campaign makes more effective.

# **6.4 Nursing Research:**

- Research provides more opportunity to participate in community activities and independent decision making during
- This study brings about the fact that more studies need to be done at different settings especially in all primary and sub centres

#### CONCLUSION

The study concluded that structured teaching programme was found to be very effective method in terms of improving the overall level of knowledge on practice of home care management of febrile seizure among mothers of under five children.

#### REFERENCES

- Allen, G. (2004). A Text book of children and young people's nursing, China Churchill Livingston Publication.
- Anthono. & Jalario. (1997). The care of the pediatric patient, St Louis: Mosby Publications.
- Alligard, M. R. (2002). Nursing Theorist and their Work, Philadelphia: Mosby Publication.
- Anne, W. & Allison, G. (2002). Ross and Wilson Anatomy and Physiology in Health and Illness: Churchill Livingstone publication.
- Barbara, F. Weller.(1997). Pediatric Nursing, London: ELBS Publications.
- Ball, J. W. & Bindler, R. C. (2003). Pediatric Nursing Caring for Children, North America: Lippincott Company.
- Beverly, W.& Gas, E. (2002). Introduction to Patient Care, Saunders Publications.
- Behrman, K. A. (1999). Nelson Text Book of Pediatrics, Harcourt Asia: W.A Saunders Company Publications.
- Denise, F. (2000). Nursing Research, Principles and Method, Philadelphia: Lippincott Company.
- Eni, G. & Barners, R. (2003). Clinical Use of Diagnostic tests, New Delhi: Jaypee Publications.
- Ghai, O. P. (1996). Essential Pediatrics, New Delhi: Inter print.
- Hungler B. & Polit. D.F. (1999). Nursing Research, Philadelphia: Lippincott.
- John Slroobant, & David field, (2002). Hand book of Pediatric Investigations, London: Churchill Livingston Publications.

