

Knowledge about diarrhoea and its prevention among the urban working and non-working women in Varanasi district

■ ANITA SINGH AND SHIVANI SRIVASTAVA

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See end of the paper for authors' affiliations

Correspondence to :

ANITA SINGH

Faculty of Home Science,
Agrasen Kanya Autonomous
P.G. College, VARANASI (U.P.)
INDIA

■ **ABSTRACT** : Nearly two third working mothers (68.00%) had knowledge of diarrhoea, but 64.00 per cent of these mothers had knowledge of providing food during diarrhoea, knowledge of ORS, its' method of preparation in the house and preventive measures of diarrhoea. On the other hand less than three fifth non-working mothers (56.67%) had knowledge of diarrhoea, 56.0 per cent had knowledge of providing food during diarrhoea; 48.67 per cent had knowledge of ORS and 42.67 per cent had knowledge of the method of its' preparation in the house alongwith its preventive measures. The statistical analysis envisaged that the knowledge of working mothers was significantly better than their counter parts in non-working category regarding various aspects of diarrhoea such as knowledge of ORS ($\chi^2=7.168$, $P<0.01$), its preparation in the house ($\chi^2=13.714$, $p<0.001$); while giving food during diarrhoea was similarly known to working and non-working mothers ($P>0.05$; NS). The difference occurred due to high educational and awareness status of the working mothers.

■ **KEY WORDS** : Diarrhoea, Non working mothers, Awareness, ORS

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Acute diarrhoeal disease, with its accompanying dehydration has still remained a challenging problem to the medical profession and the community in the third world countries specially in the pediatric cross section under the age of five years. It is a major preventable factor standing on the way towards obtainment of matching figure for infant mortality and morbidity as compared to the developed world. On a rough estimate, every year around 100 million children under five years of age suffer from 300 million episodes of diarrhoea of which about 10 per cent develop dehydration and 1 per cent (3 million) children require hospitalization imbalancing the bed and patient demand ratio. The diarrhoeal diseases on the other hand claim around 1.5 million lives in this age group.

■ RESEARCH METHODS

The methodology of the present study consists of the following components:

- Selection of the area of study.
- Tools and techniques

- Sampling
- Designing of the questionnaire consisting
- Presenting of the questionnaire.
- Recording of the Data.

Selection of the area of study:

The basis of the selection for area of study was mainly the consideration of distance which had to be covered in travel easily from the Faculty of Home Science, Agrasen Kanya P.G. Autonomous College at Parmanandpur, Shivpur and Orderly Bazar are approximately within 6 km radius from the centre.

Family structure:

Nuclear / Joint

Religion:

As stated by the respondents.

Occupation of the family:

Broadly four occupation categories were mentioned:

Agriculture, Business, Service and Labour class

Occupation of the mother:

Working: Gainfully employed in government or private sector.

Non-working: Exclusively house wife engaged in house keeping and child rearing.

Social status (Determined on the basis of per-capita monthly income and current price index): On the present value of CPI the updated PCI = 26 as such per capita income group during 2005.

Upper	≥Rs.2600
Middle	Rs. 400 – 2599
Lower	≥Rs. 399

(Source: Kumar, P. (1993), Social classification–Need for continuous updating. *Indian J. Com. Med.*, **18** (2): 60-61).

Tools and techniques:

The information of the present study was collected with the help of interview cum questionnaire technique. Due to non-availability of any sampling frame, the sampling method employed was considered purposive sampling. According to these criteria, the samples were selected to fulfill the desired purpose of the study. In this regard, door-to-door survey of the area namely, Shivpur and Orderly Bazar was conducted and the samples were surveyed.

Sampling:

The sample consists of 150 each working and non-working women with at least one live child under the age of 3 years. In case of more than one child to a woman, only youngest child was selected for the study. The aim of the present study was to find out the feeding practices adopted by the mother of the birth group and other factors in relation to the growth and development of normal children of working and non-working group. These women were chosen for the study, as we need women experiencing live childbirth and followed feeding and child rearing practices as present in the community, Adhering to these criteria overall 300 women along with 300 children aged below 3 years were purposely selected.

Designing of the questionnaire:

For designing of the questionnaire preliminary information was collected by personally meeting several persons like Doctors, Researchers, Professors and some other persons involved in day to day care of the children. In order to get some general idea about the existing feeding patterns, the researcher also met some mothers and grand ones. The designed data was filled up by interview-cum-questionnaire technique.

An effort was made to include all the possible questions relevant to the study, and also to make it simple and easy to fill up the questionnaire in minimum time in a systematic manner.

Subsequently the questionnaire was checked by the statistician and the supervisor and proper modifications were made. The average time elapsed with one respondent to fill a questionnaire is 40 minutes including their measurement. It took 4 months from March 2004 to July 2004 to carry out survey completely.

Pre-testing of the questionnaire:

Pretesting was done by a pilot survey. In this regard 30 mothers representing 10 per cent of the total sample were surveyed in the same area. It was observed that respondents were not able to give appropriate answers for some of the questions like colour of urine, endemic disease and dilution of milk which had to be eliminated and some modifications were made and finally the questionnaire was prepared for the usual survey of the present study.

Recording of data:

As soon as survey was over, the questionnaires were scrutinized and in case of any fallacy, the same was again verified by contacting the desired mother of the surveyed area. After due verification of the information, the data was transferred on a master sheet. This tool is known as master chart. On the basis of this master chart the data were analyzed to get the informations in desired manner.

Analysis of the data:

The analysis was performed manually. The data were presented in tables showing number and percentage. In case of frequency distribution of quantitative data mean and standard deviation (SD) were also worked out. Finally the results were inferred with the help of suitable statistical tools.

RESEARCH FINDINGS AND DISCUSSION

Table 1 indicates that more than two third working mothers (68.0%) had knowledge of diarrhoea, and 64.0 per cent of these mothers had knowledge of providing food during diarrhoea, knowledge of ORS, its method of preparation in the house and preventional measures of diarrhoea. On the other hand in non-working women, less than three-fifth non-working mothers (56.67%) had knowledge of diarrhoea; 56.0 per cent had knowledge of providing food during diarrhoea; 48.67 per cent had knowledge of ORS and 42.67 per cent had knowledge of the methods of its preparation and preventive measures. The statistical analysis envisaged that the knowledge of working mothers was significantly better than their counterparts in non-working category regarding various aspects of diarrhoea, such as knowledge of ORS ($\chi^2 = 7.168$; $p < 0.01$); its preparation in the house and preventive measures of diarrhoea ($\chi^2 = 13.714$; $p < 0.01$), while giving food during diarrhoea was similarly known to working and non-working mothers ($\chi^2 = 2.0$; $p > 0.05$; NS). This difference was found significant due to high educational and awareness status of

Table 1: Knowledge of diarrhoea and working status of the mother

Information regarding diarrhoea	Working status of the mother				Total		Statistical significance χ^2 value at DF=1
	Working		Non-working		No.	%	
	No.	%	No.	%			
Knowledge regarding diarrhoea							
Have knowledge of diarrhoea	102	68.0	85	56.67	187	62.33	$\chi^2 = 4.102$ p<0.05*
No knowledge	48	32.0	65	43.33	113	37.67	
Feeding practices during diarrhoea							
Food is given during diarrhoea	96	64.0	84	56.00	180	60.00	$\chi^2 = 2.00$; p>0.05, NS
Food is not given	54	36.0	66	44.00	120	40.00	
Having knowledge regarding diarrhoea prevention							
Yes	96	64.0	64	42.67	160	53.33	$\chi^2 = 13.714$ p<0.001***
No	54	36.0	86	57.33	140	46.67	
Knowledge regarding ORS							
Yes	96	64.0	73	48.67	169	56.33	$\chi^2 = 7.168$ p<0.01**
No	54	36.0	77	51.33	131	43.67	
Knowledge regarding ORS preparation at home							
Yes	96	64.0	64	42.67	160	53.33	$\chi^2 = 13.714$ p<0.001***
No	54	36.0	86	57.33	140	46.67	

the working mothers. In an earlier study of Varanasi (U.P.) Mohapatra *et al.* (1991) observed that all the under five children suffered from diarrhoea. Nearly three fifth of the children belonging to periurban area (56.1%); followed by rural (39.6%) combat at least with one episode of diarrhoea. Similarly in a study conducted at Varodara (Gujarat) Sheth and Obrah (2004) mentioned that about 93 per cent children suffered from one or more episodes of diarrhoea.

Authors' affiliations:
SHIVANI SRIVASTAVA, Department of Home Science, Shivangi Mahavidyalaya, JAUNPUR (U.P.) INDIA

REFERENCES

Mohapatra, P., Gupta, J.N.P., Mohapatra, S.C. and Jena, D. (1991). Diarrhoea: a raid on underfive children. *Indian J. Prev. Soc. Med.*, **2** (3-4) : 48-50.

Mondal, S.K., Sen Gupta P.G., Gupta, D.N., Ghosh, S., Sikder, S.N., Rajendran, K., Saha, M.R., Sircar, B.K., Bhattacharya, S.K. (1996). Occurrences of diarrheal diseases in relation to infant feeding practices in a rural community in West Bengal, *India. Acta Paediatr.*, **85** (10) : 1159-1162.

Park, K. (2002). Textbook of preventive and social medicine. Jabalpur, Banarasi Das Bhonot (Pub.).

Sheth, M. and Obrah, M. (2004). Diarrhoea prevention through food safety education. *Indian J. Paediatr.*, **71** (10) : 879-82.
