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EFFECTIVENESS OF VIDEO AWARENESS PROGRAMME ON PREVENTION OF SWINE FLU AMONG UNDER 5 CHILDREN MOTHERS IN SELECTED COMMUNITY

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ABSTRACT

Background: Globally, India was one of the most affected countries for cases and deaths of swine flu (influenza A H1N1) during 2009 influenza pandemic with a lot of public hype and panic. The largest number of raptorial cases and deaths due to the disease occurred in the western and southern parts of India. **Aim:** The present study aimed to assess the effectiveness of the video awareness program about the prevention of swine flu in improving the knowledge of the mothers of under-five children in the community. **Materials and methods:** The study was conducted among 30 mothers of under-five children using a pre-test, post-test, control group design. Subjects were chosen by convenience sampling technique, and the data was collected using a structured questionnaire. **Results:** The study findings revealed that the mean knowledge score in the post-test was 34.4 for the experimental group and 21.3 for the control group and the obtained 't' value was significant at $p < 0.05$ level. **Conclusion:** Video awareness program about the prevention of swine flu improved the knowledge of the mothers of under-five children.

KEYWORDS

Video awareness program, Knowledge, Swine flu and Mothers of under-five children.

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INTRODUCTION

Swine flu, due to the rapid spread was declared as a global pandemic on 11 June 2009 (Hilton, and Hunt, 2011)¹. There has been nearly 30,000, confirmed H1N1 cases across 74 countries, and there was a sharp increase in the number of infections reported in Chile, Japan, and the UK, and other parts of the world. The most dramatic increase was recorded in Australia where more than 1200 cases were reported in a very short duration. The Ministry of Health and Family Welfare, reported the death from swine flu to

reached to 1235 during the epidemic in 2009. Around 12, 3397 people were tested in India as on February 1, 2010, out of which 23.3% suffered from swine flu, and around 4% of people died and could not be saved. *Much effort was made during the period to bring awareness in general and know the consequences of the infection* (Dandagi, and Byahatti, 2011)².

Prasad, S *et al*, (2018) done a study about the clinical profile and outcome of H1N1 influenza patients in a tertiary care hospital and found that a total of 76 confirmed cases of H1N1 influenza were detected, of which 36 required admissions in the intensive care unit and sixty-nine of 76 patients (90.79%) survived the disease. Most participants were between 51 and 60 years (25%) with predominant symptoms of fever (98.7%), dry cough (61.8%), breathlessness (53.9%). The most common finding in the respiratory assessment was bilateral crepitation (64.47%), and bilateral lung infiltrates on X-ray.

The outbreak of the pandemic flu put a major challenge to health services around the world and led to psychological responses in the population (Goodwin *et al*, 2009)³. As the health services worldwide were disturbed by swine flu-related illness during the epidemic, the simple clinical pathways for the management of the disease was a boon to health care (Barlow, 2009)⁴. Individual and national/cultural differences were noted in response to the 2009–2010 influenza pandemic. There were common concerns among the public regarding pandemic and seasonal influenza vaccination, concerning vaccine safety and side effects, and personal risk (Poland, 2010)⁵. Being uncertain about the outbreak and belief of the population about the exaggeration of the outbreak, led to hesitation lower likelihood of change in the population. (Rubin *et al*, 2009)⁶.

During an infectious disease outbreak, it is important to know about the concerns, knowledge, attitudes, and behavior of the public. Such information can serve the purpose and lead to the improvement of communication efforts by public health officials and clinicians. There is a need for frequent communication between physicians and the public to remove the myths about the disease and spread better

information about the role of the public in limiting the spread of the disease (Kamate S K, *et al*, 2010)⁷, John M, *et al*, 2011)⁸.

A study conducted to assess the knowledge, attitude and practice regarding swine flu in the southern part of India indicated that the knowledge regarding swine flu was found average among the population. Lack of awareness regarding key focus areas like hand washing as a preventive measure was of serious concern (Kawanpure, Ugargol, and Padmanabha, 2014)⁹. Another study on the awareness, attitude, myths, and practices regarding swine flu among the public revealed that the knowledge was low among study participants, although the group had health-seeking behavior like hand washing. More strategies on awareness about pandemic through effective mass media are vital for containing the pandemic (Shilpa, K. *et al*, 2014)¹⁰.

It is always important to know about H1N1 knowledge, treatment options, and transmissibility to emphasize the need to build trust and for effective public health mitigation strategies. Communication is important during epidemics to improve risk communication plans moving forward. During a pandemic, information must be provided to the public in a clear, accurate, transparent, and accessible format to effectively deliver public health messages (John M, *et al*, 2011)⁸.

Lower levels of awareness regarding the route of spread and methods of prevention is a key problem area showing lack of clear message and response generation in IEC activities. The government should lay the focus on providing scientific and effective information through the prime media. Monitoring of the communication messages and targeting the information needs of the public by involving public health personnel is important. (Singh S, Kaur P and Singh G. 2013)¹¹. Although there are appropriate knowledge and awareness regarding various aspects of H1N1 flu among the urban adult population, active interventions are required in all areas of H1N1 flu pandemic not only to improve their knowledge and awareness of urban adults but also for rural adults (Rathi, Gandhi, and Francis, 2011)¹².

Children, especially the younger group of fewer than five years, are at high risk for serious flu and related

complications. It is more dangerous in children. It is important that the mothers of the children need to be knowledgeable to take preventive measures and protect the children. Hence the study was initiated.

STATEMENT OF THE PROBLEM

A study to assess the effectiveness of a video awareness program regarding the prevention of swine flu among mothers of under-five children in terms of knowledge in a selected community.

Objectives

1. To assess the pre-test and post-test knowledge of mothers regarding the prevention of swine. Flu among under-five children in the experimental group and control group.
2. To compare the post-test knowledge among the mothers in the experimental and control group.
3. To associate the knowledge with selected demographic variables.

Hypothesis

H1: The mean post-test knowledge of mother regarding prevention of swine flu though who receives the video awareness programme in an experimental group will be significantly higher than the mean pre-test knowledge score.

H2: There will be a significant difference in the post-test knowledge of the mother regarding the prevention of swine flu among under-five children in the post-test in the experimental group and control group.

H3: There will be an association between knowledge and selected demographic variables.

METHODOLOGY

A pre-test-post-test control group design was used to examine knowledge of the mothers regarding the prevention of swine flu and see the effect of Video awareness program in enhancing the knowledge of mothers of under-five children. The participants were chosen by a convenience sampling technique, and the data was collected by a questionnaire after getting consent from the mothers. Video awareness was provided to the mothers in the experimental group, and then the data was collected from both the

groups using the same questionnaire. The researcher adhered to the ethical principles throughout the study. Data were analyzed by descriptive and inferential statistics based on the objectives of this study.

FINDINGS AND DISCUSSION

The demographic variables showed that out of the 15 mothers of under-five children in the experimental group, 10 (66.6%) were in the age group of 18-20 years and 5 (33.3) were in the age group of 20-30 years. Regarding the educational status, 13(86.6%) had higher secondary education and 2(13.3%) had under education. All the mothers were housewives, and all belonged to the Hindu religion.

While in the control group, among the 15 mothers, 13(86.6%) mothers were in the age group of 20-30 years of age and 2(13.3%) belonged to the age group of 30-35 years. Regarding the educational status, 6(40%) had high school education, 8(53.3%) higher secondary education and 1(6.6%) had under education.

Regarding income, none had a regular income, and all were housewives. They all belonged to the Hindu religion.

In the control group, 14 (93.3%) had moderately adequate knowledge, and 1(6.6%) had adequate knowledge. In the post-test out of 15 mothers of under-five children, 1(6.6%) had adequate knowledge, and 14 (93.3%) had moderately adequate knowledge. While the data analysis in the experimental group showed that 10(66.6%) had moderately adequate knowledge, and 5(33.3%) had adequate knowledge in the pre-test. But in the post-test, 14 (93.3%) had Adequate knowledge, and 1(66.6%) had moderately adequate knowledge, which revealed that the video awareness program was effective.

The results revealed that the mean post-test value of experimental group post-test was 34.4 and control group post-test was 21.13. In the experimental group, the post-test value was higher than the control group. The Post-test standard deviation score in the experimental group was 4.17, and the control group was 3.37 and obtained 't' value was significant at $P <$

0.05 level. Hence the stated hypothesis was accepted.

In the control group, there was an association between improvement of knowledge with education, whereas there was no association between variables like age, income, occupation, religion, with knowledge. While in the experimental group, there was an association between improvement of knowledge with education, whereas there was no association between variables like age, income, occupation, religion, and knowledge.

The findings of the present study are consistent with a study finding, which indicated the lack of awareness of the public (Kawanpure, Ugargol, and Padmanabha, 2014)⁹. Another study suggests that as current recommendations are not clear to laypeople and are open to different interpretations, efforts to be made to create public health messages about precautionary behaviors. (Kiviniemi, M. T, *et al*, 2011)¹³. The present study had done education among the community and seen the effect of education in improving knowledge.

Table No.1: Knowledge regarding swine flu in the experimental group

S.No	Level of Knowledge	Pre-test		Post-test	
		F	%	F	%
1	Adequate	5	33	14	93
2	Moderately adequate	10	66	1	66
3	Inadequate	0	0	0	0

Table No.2: Knowledge regarding swine flu in the control group

S.No	Level of Knowledge	Pre-test		Post-test	
		F	%	F	%
1	Adequate	1	6.6	1	6.6
2	Moderately adequate	14	93.3	14	93
3	Inadequate	0	0	0	0

Table No.3: Comparison of post-test knowledge of mothers

S.No	Group	Mean	S.D	M.D	t-value
1	Experimental group post test	34.4	4.17	13.2	1
2	Control group Post test	21.3	3.37		

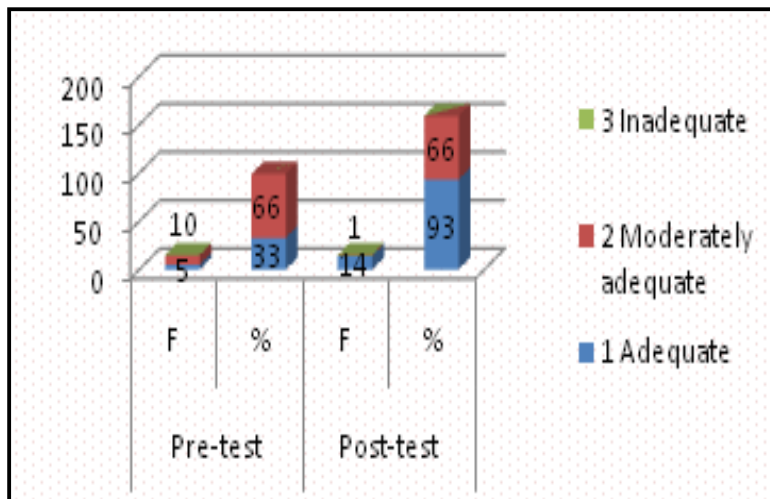


Figure No.1: knowledge regarding prevention of swine flu

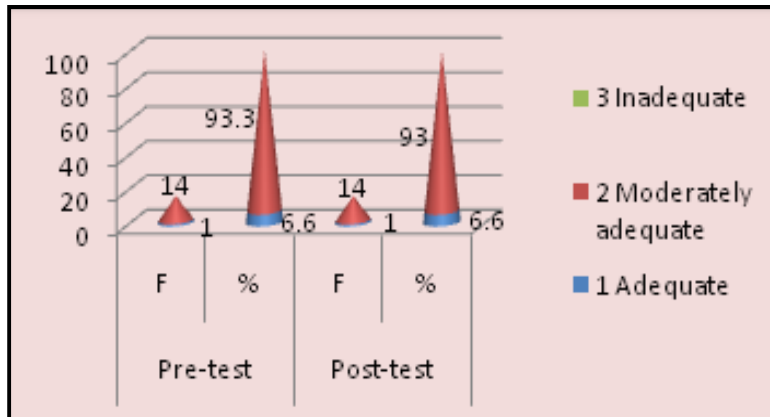


Figure No.2: Knowledge of mothers about swine flu

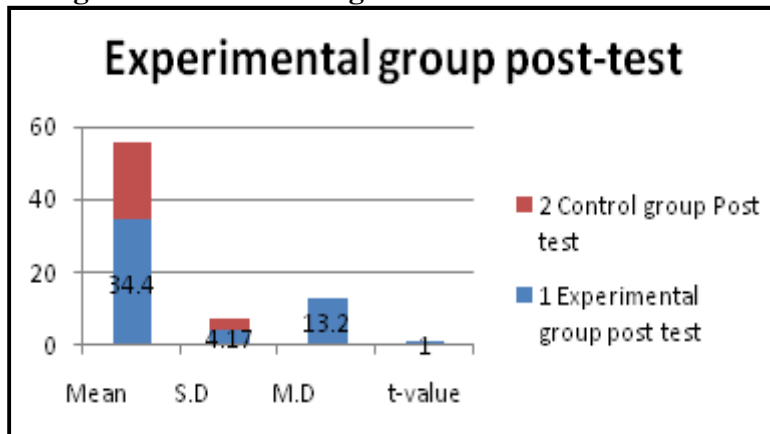


Figure No.3: Knowledge of mothers in post-test

CONCLUSION

The main conclusion drawn from their study was the most mothers of under-five children had inadequate knowledge in the pre-test and video awareness programme regarding the prevention of swine flu among, mother of under-five children improved the knowledge. It is revealed that in spite of the mass awareness programs and the exposure to various sources of information, the people in the community lack the knowledge. Therefore, health professionals should devise appropriate educational strategies and plan frequent education sessions considering the level of education in community settings.

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CONFLICT OF INTEREST

We declare that we have no conflict of interest.

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