

A STUDY TO ASSESS THE KNOWLEDGE OF THE MOTHERS OF INFANTS REGARDING WATER BORNE DISEASES IN A SELECTED AREA OF FEROZPUR, PUNJAB

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DOI: <http://doi.org/10.47211/tg.2020.v07i03.017>

ABSTRACT:

Waterborne diseases are conditions because of pathogenic micro-organisms which can be transmitted in water. Those diseases can be spread while bathing, washing, ingesting water, or with the aid of ingesting food exposed to contaminated water. Even as diarrhea and vomiting are the most commonly stated symptoms of waterborne contamination, other symptoms can include pores and skin, ear, respiration, or eye trouble. Quantitative research approaches was adopted for the study with descriptive survey design. The study was conducted in selected areas of Ferozepur, Punjab. The areas such as Basti Awa, Basti Bhattian Wali, Basti Sheikhan Wali and Basti Bagh Wali were selected for the study. Population consists of mothers of infants in selected area of Ferozepur, Punjab. Cluster sampling technique was adopted to select the 500 mothers of infants. The study was an interesting and enriching novel experience for the investigator in the field of research. The constant encouragement and direction of guide, cooperation, and interest of the subjects to participate in the study contributed to the fruitful and successful completion of the study.

Key Words: *infants, Ferozepur, water borne diseases, mother of infants.*

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INTRODUCTION

Water is the primary want of any living being after air; no person can live without water. A person can continue to exist for numerous weeks without food but no longer number days without water. Earth is the best recognized planet on this universe that has water and life. Approximately seventy one % of the Earth's surface is included with water. But unfortunately, millions do now not have have right of entry to secure water for consuming. Millions die every year due to drinking unsafe water. A Slovakian proverb "Pure Water is the World's First and Foremost Medicine" reminds us about the importance of pure water. Children below five years are common victims of diarrhoeal diseases and deaths related to diarrhoeal illnesses. The microbial infection of floor water is intently associated with the nearby sanitation practices. Sewers in urban areas leak because of incorrect set up, damages and wrong maintenances. Shallow ground water is greater vulnerable to pollutants in comparison to water from deep assets. The presence of microorganism exist in untreated waste water are clean public health situation and every effort have to be made to decrease the possibility of human contact with waste water.

Water has got an influence on the healthful lifestyles of an individual both directly and not directly. It is associated directly because water is vital for digestion, regulation of body temperature, elimination of waste from the frame through urine, feces, tears, perspiration, and lubricating the joints. It additionally acts as a buffer by way of neutralizing acids produced in the body. It's also a vital nutrient for the metabolic method within the body.

LITERATURE REVIEW

A study was conducted by **Abdulkadir N et al (2018)** to investigate the prevalence of waterborne diseases in relation to age groups and gender in Nakaloke sub county Mbale district Eastern Uganda. Water is one of the most important requirements for human health and life. It's the most effective carrier of pathogens causing a number of infectious diseases in developing countries particularly in rural areas. The aim of the study was to investigate the prevalence of waterborne diseases in relation to age groups and gender in Nakaloke sub county Mbale district Eastern Uganda. Retrospective data was obtained from Nakaloke health Centre III and were used to determine the most common waterborne diseases in Nakaloke, Kireka and Nandala Villages for a period of five years. The data were analyzed using SPSS to find the age and gender of the patients and their vulnerability to diseases in the study area. Diarrhoea was found to be the most prevalent waterborne diseases among gastroenteritis, skin infection, typhoid, cholera, and dysentery. Children below 5 years of age and females were more vulnerable to waterborne diseases in the study area. It was also found that these diseases are more prevalent in rainy season than dry season. It was therefore recommended improvement in sanitations, hygiene and access to safe drinking water in the study area.

A study conducted by **Cesa M et al (2016)** aimed to investigate and classify the occurrence of waterborne diseases was done in Florianópolis city, Santa Catarina State, Southern Brazil. The study also correlate these diseases with the subsequent social-environmental indicators of the local population: type of water deliver, adequate collection and sewage remedy, regions of flooding and home water tank cleaning. Reports of outpatients were analyzed for surveillance of waterborne illnesses at some point of the duration of 2002 to 2009. Waterborne illnesses had been categorized into four companies: group A: diarrheal diseases; group B: parasitological diseases; institution C: skin diseases and organization D: eye diseases. The diarrheal, parasitological and pores and skin diseases were the maximum frequently mentioned. Waterborne illnesses belonging to institution A in all websites were correlated with different waterborne diseases businesses, which may be a trademark of the move of other waterborne diseases. Concerning the social-environmental indicators assessed, the most correlated with waterborne diseases were the starting place and exceptional of the water deliver, accompanied by means of inadequate series and remedy of sewage, common flooding, and subsequently the shortage of cleanliness of the water reservoir. The effects spotlight the need for regulations aiming for improvement of the sanitation service inside the upkeep of human, animal and environmental health.

A study was done by **Pirsaheb M et al (2017)** to assess the seasonal variation of waterborne diseases prevalence associated with the microbial quality of drinking water and the comparison between rural and urban areas in Kangavar city, West of Iran. To perform this, the outcomes of the microbial fine of drinking water and instances of simple diarrhea, dysentery, typhoid, and hepatitis A have been acquired from all rural and urban health facilities of the metropolis all through five years (2006–2010). The stronger relationship was observed in rural areas than in urban areas (except easy diarrhea) and in warm seasons than in bloodless seasons. With respect to the effect of the microbial fine of water at the prevalence of dysentery and typhoid diseases, maintaining up the high-quality of drinking water in places and times with high sensitivity (rural regions and warm seasons) should be taken into consideration strongly.

METHODOLOGY:

A quantitative approach was adopted aimed to assess the knowledge of the mothers of infants regarding water borne diseases in a selected area of Ferozepur, Punjab. The selection of the design depends on the purpose and variables of the study. The purpose of a design is to achieve greater control and thus improve the validity of the study in examining the research problem. The research design used in this study is descriptive survey approach. The setting for the present study is selected areas of Ferozepur, Punjab. The areas such as Basti Awa, Basti Bhattian Wali, Basti Sheikhan Wali and Basti Bagh Wali were selected for the study. In the current study, population consists of mothers of infants in selected area of Ferozepur, Punjab. In this study, the sample size was 500 mothers of infants in selected area of Ferozepur, Punjab. In this study, cluster sampling technique was adopted to select the subjects from Ferozepur, Punjab. Ferozepur is a municipality consisting of 32 wards. Out of these 32 wards, four were selected randomly. These were Basti Awa, Basti Bhattian Wali, Basti Sheikhan Wali and Basti Bagh Wali. From these wards 125 samples each were selected by random sampling technique constituting a total of 500 samples. Data were collected from Basti Awa, Basti Bhattian Wali, Basti Sheikhan Wali and Basti Bagh Wali areas of Ferozepur from 06.03.2019 to 31.05.2019. Subjects were selected according to the selection criteria. Cluster sampling technique was used to select 500 mothers of infants. The data obtained was planned to be analysed by both descriptive and inferential statistics on the basis of objectives of the study. To compute the data, a master data sheet was prepared by the investigator. The knowledge and practice scores was analysed using percentage.

DISCUSSION

Quantitative research approaches was adopted for the study with descriptive survey design. The study was conducted in selected areas of Ferozepur, Punjab. The areas such as Basti Awa, Basti Bhattian Wali, Basti Sheikhan Wali and Basti Bagh Wali were selected for the study. Population consists of mothers of infants in selected area of Ferozepur, Punjab. Cluster sampling technique was adopted to select the 500 mothers of infants. The health belief model (HBM) was used to provide the conceptual framework for this study. It was developed in the 1950s by social psychologists, Hochbaum, Rosenstock & Kegels of the U.S. The health belief model (HBM) is a social mental health behavior trade version evolved to describe and predict health-associated behaviors, especially in regard to the uptake of health services.

RESULTS:

The present study revealed that showed that majority of mothers of infants (58.2%) had poor knowledge and only 1.0% of mothers had good knowledge regarding water borne diseases. The mean knowledge score on water borne diseases among mothers of infants was 10.44 (± 3.06) ranging from 5- 23. The mean percentage of knowledge score was 29.83%. The mean value obtained for the area "meaning and characteristics" of waterborne disease was 1.30(± 1.03) and the score ranging from 0- 5. The mean percentage was 26.6%. The mean value obtained for the area "causes and risk factors" of waterborne disease was 3.36(± 1.58) and the score ranging from 0- 9. The mean percentage was 33.6%. The mean value obtained for the area "symptoms" of waterborne disease was 2.27(± 1.34) and the score ranging from 0- 6. The mean percentage was 32.4%. The mean value obtained for the area "prevention and management" of waterborne disease was 3.21(± 1.57) and the score ranging from 0- 11. The mean percentage was 24.7%.

CONCLUSION:

The following conclusions were made on the basis of the findings of the study:

1. Majority of mothers of infants (58.2%) had poor knowledge and only 1.0% of mothers had good knowledge regarding water borne diseases.
2. The mean knowledge score on water borne diseases among mothers of infants was 10.44 (± 3.06) ranging from 5- 23.

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