



A STUDY TO ASSESS KNOWLEDGE REGARDING CONGENITAL ANOMALIES OF NEWBORN BABIES AMONG HOUSEWIVES AT SELECTED COMMUNITY AREA, KOLLAM

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ABSTRACT

The research project undertaken was “A study to assess the knowledge regarding congenital anomalies of new born babies among housewives at selected community area, Kollam”. The objective of the study was to assess the knowledge regarding congenital anomalies of newborn babies among housewives, to find the association between knowledge regarding congenital anomalies of new born and selected socio demographic variables among housewives and socio demographic variables such as age(in years), education, number of children, family income per month, Consanguineous marriage, type of family, religion, source of information, family history of congenital anomalies. Non experimental research design was adopted for this study. The study sample was selected by convenience sampling technique. The tool used for the data collection consisted of demographic proforma, and structured knowledge questionnaires. Basic introduction of the study was given to the subjects and data was collected from 100 samples using self administrated tool. The analysis of the data was based on the objectives of the study using descriptive and inferential statistics. The findings of the present study revealed that among housewives, 23% had poor knowledge, 73% had average knowledge and only 4% had good knowledge regarding congenital anomalies of newborn babies. A significant association was present between knowledge regarding congenital anomalies of newborn babies among housewives and socio-demographic variable, ‘number of children’ and there was no significant association between knowledge regarding congenital anomalies of newborn babies among housewives and socio-demographic variables such as age, education, family income per month, Consanguineous marriage, type of family, religion, source of information, and family history of congenital anomalies

Keywords: assess, knowledge, congenital anomalies, newborn babies, housewives.

INTRODUCTION

Congenital disorders can be defined as structural or functional anomalies that occur during intrauterine life. Also called birth defects, congenital anomalies or congenital malformations, these conditions develop prenatally and may be identified before or at birth, or later in life.¹

An estimated 6% of babies worldwide are born with a congenital disorder, resulting in hundreds of thousands of associated deaths. However, the true number of cases may be much higher because statistics do not often consider terminated pregnancies and stillbirths. Some congenital disorders can be treated with surgical and non-surgical options, such as cleft lip and palate, clubfoot and hernias. Others, including heart defects, neural tube defects, and down syndrome, can cause lifelong impacts.

Congenital disorders are one of the main causes of the global burden of disease, and low- and middle-income countries are disproportionately affected. These areas are also less likely to have facilities to treat reversible conditions such as clubfoot, leading to more pronounced and long-lasting effects. Congenital disorders can contribute to long-term disability, which takes a significant toll on individuals, families, health care systems and societies. Nine of ten children born with a serious congenital disorder are in low- and middle-income countries. As neonatal and under-5 mortality rates decline, congenital disorders become a larger proportion of the cause of neonatal and under-5 deaths.

The most common severe congenital disorders are heart defects, neural tube defects and Down syndrome. Although congenital disorders may be the result of one or more genetic, infectious, nutritional or environmental factors, it is often difficult to identify the exact causes. Some congenital disorders can be prevented. Vaccinations, adequate intake of folic acid or iodine through fortification of staple foods or supplementation, and adequate care before and during a pregnancy are examples of prevention methods.²

OBJECTIVES OF THE STUDY

1. To assess the knowledge regarding congenital anomalies of new born babies among housewives.
2. To find the association between knowledge regarding congenital anomalies of new born babies among housewives and selected socio demographic variables.

RESEARCH METHODOLOGY

Quantitative approach with non-experimental descriptive research design was used in this study. The study was conducted at selected areas in Pallithottam, Kollam, Kerala. The target population was housewives who are residing in the Pallithottam area. Non-probability purposive sampling technique was used to collect data. Formal permission was taken by Institutional ethics committee and consent from the housewives and data were collected through a knowledge questionnaire. The tool consisted of Demographic Proforma and knowledge questionnaire related to alcoholism and its management. The collected data were analyzed using descriptive and inferential statistics.

Approach: quantitative approach

Design: Non experimental descriptive research design

Population: In this study target population comprised of housewives in selected areas of Pallithottam at Kollam.

Sample: A sample is the subset of population. The sample size was 100 housewives in selected areas of Pallithottam at Kollam.

Sampling technique : Non-probability purposive sampling technique

Setting: Selected areas at Pallithottam, Kollam

Data collection method : Structured knowledge questionnaire

Inclusion criteria

- Housewives who belonged to the age group of 20 to 40 years.
- Housewives who reside at Pallithottam Community area, Kollam.

Exclusion criteria

- Housewives who were not willing to participate in this study.
- Working women residing at Pallithottam Community area, Kollam

Data collection process:

We communicated the purpose and significance of the study with the Participants through direct communication. Data were collected through Structured knowledge questionnaire.

Ethical approval and informed consent

Ethical Clearance and approval were obtained from the Institutional Ethics Committee of Bishop Benziger College of Nursing, Kollam. Informed Consent was obtained from the participants. The respondents were assured the anonymity and confidentiality of the information provided by them. The privacy of the research participants was maintained. The ethical Principles in research which included beneficence, justice, maleficence, honesty, confidentiality, and non-discrimination was strictly followed in the Study. The participants were given the right to withdraw from the research Study at any time.

Tool

Section A

Demographic proforma

Section B

Structured knowledge questionnaire regarding congenital anomalies of newborn babies

Reliability

After obtaining legal permission from the Director, Community Health Centre Pallithottam, Kollam, the tool was administered to 10 housewives. Reliability coefficient was calculated using Karl Pearson Correlation Coefficient Method. The reliability coefficient of tool was 0.9. This Indicates that the tool was highly reliable.

ANALYSIS

Descriptive analysis

Descriptive and inferential statistics were used for analysis of data.

Inferential analysis

- Association between knowledge regarding congenital anomalies of newborn babies among housewives in selected areas of Pallithottam and selected demographic variables was analyzed using chi-square test.

Result

The present study revealed that 4% of participants had very good Knowledge, 73% of participants had average knowledge and 23% of participants had poor knowledge. There was no significant association between knowledge regarding congenital anomalies of newborn babies among housewives and socio-demographic variables such as age, education, family income per month, consanguineous marriage, type of family, religion, source of information, family history of congenital anomalies and there was significant association between knowledge regarding congenital anomalies of newborn babies among housewives and the socio-demographic variable 'number of children'.

(Calculated values were less than the table value at 0.05 level of significance).

Section A

Description of demographic variables

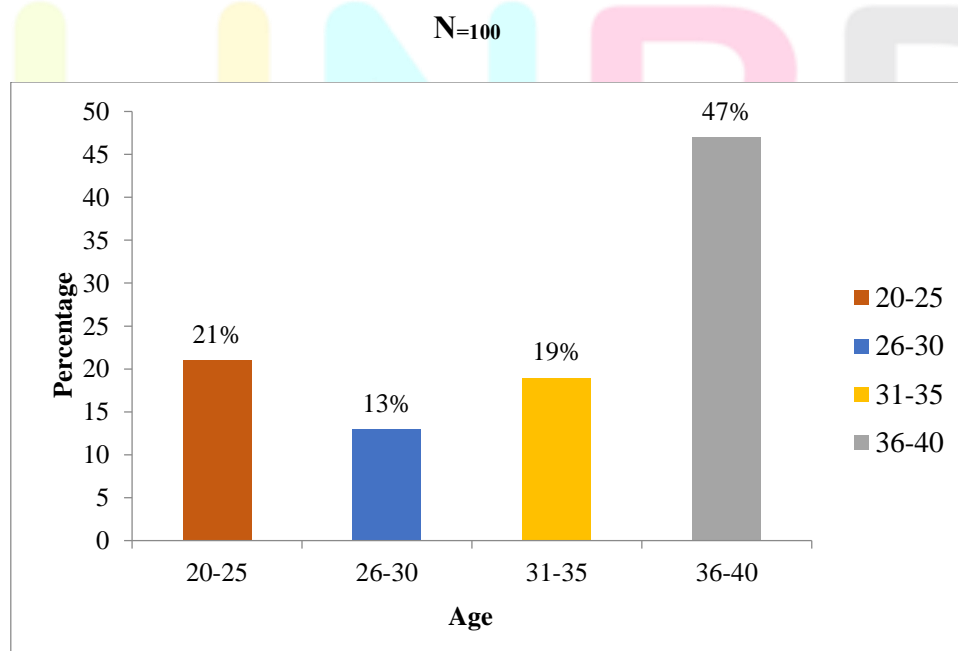


Figure 1: Percentage wise distribution of sample according to age.

Fig 1 shows that out of 100 samples, 47% were under the age group of 36-40 years, 21% were under the age group of 20-25 years, 19% were under the age group of 31-35 years and 13% were under the group of 26-30 years.

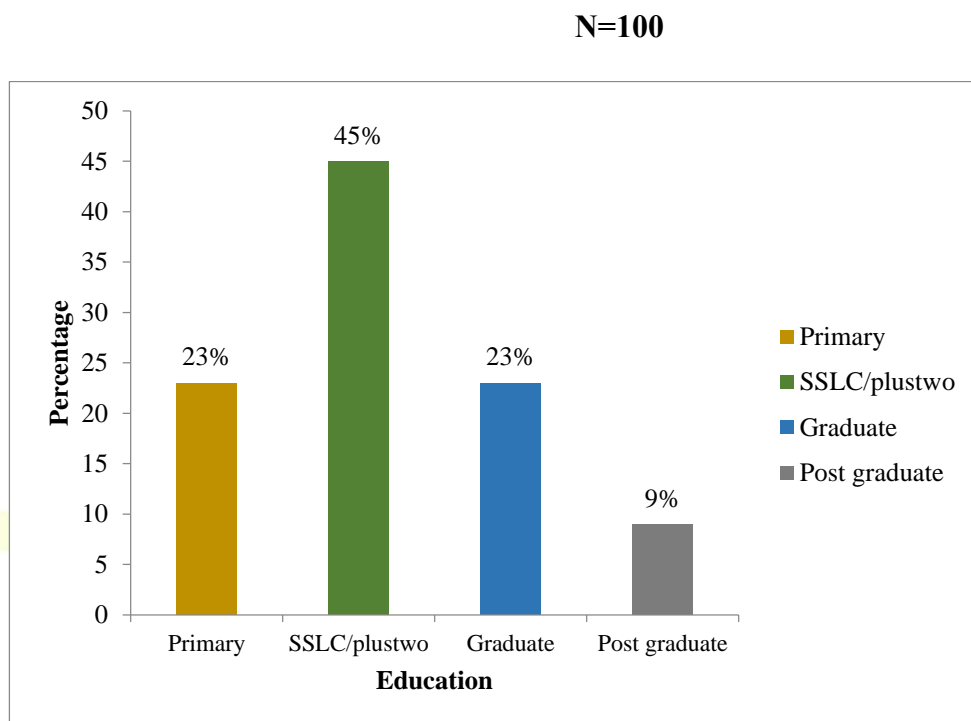
**Figure 2: Percentage wise distribution of sample according to Educational Qualification**

Fig 2 shows that out of 100 samples 45% had SSLC/Plus two qualifications, 23% were graduates, 23% had done primary education, 9% were post graduates.

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N=100

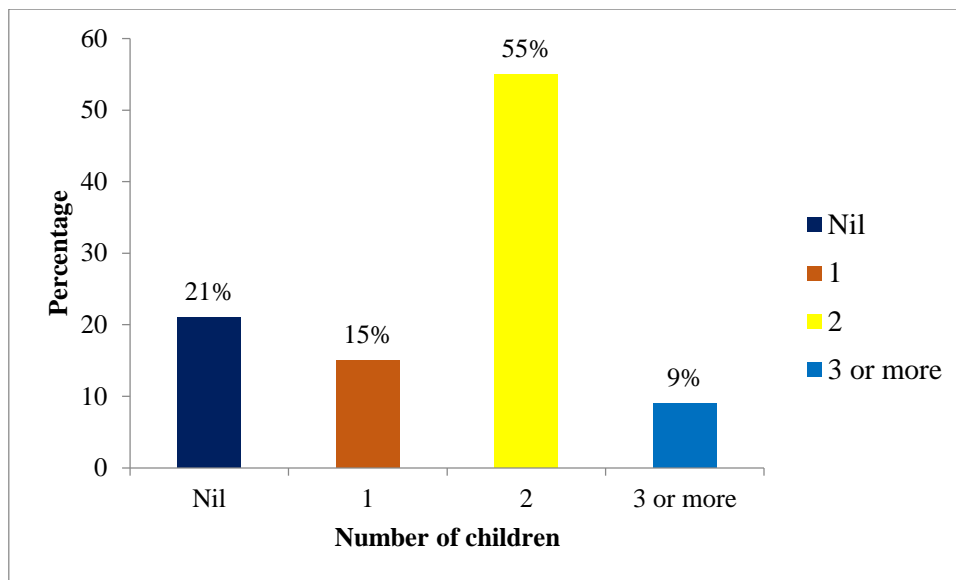


Fig 3 : Percentage wise distribution of sample according to Number of children

Figure 3 shows that out of 100 samples, 55% had two children, 21% had no child, 15% had one child and 9% had three or more children.

N=100

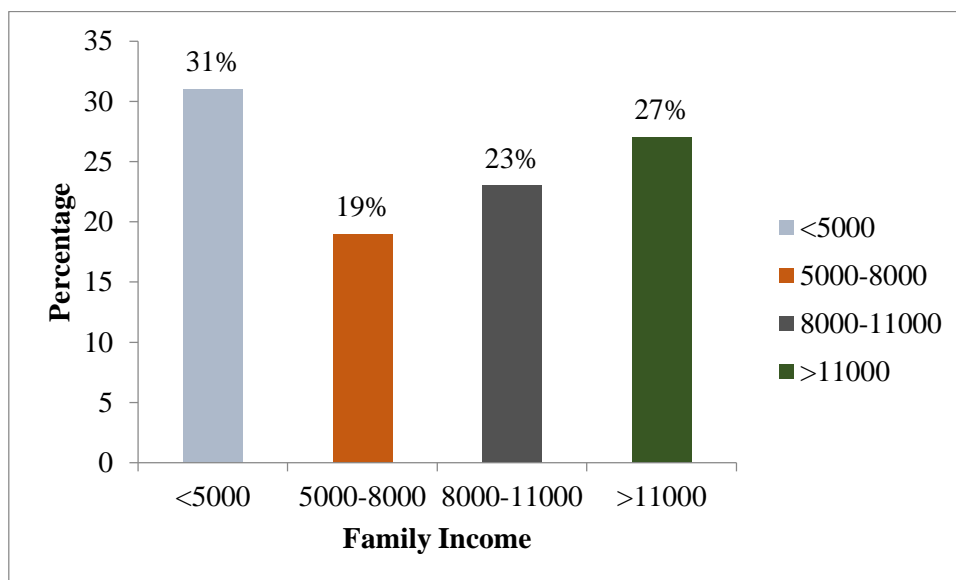


Figure 4 : Percentage wise distribution of sample according to Monthly Income of Family

Fig 4 shows that out of 100 sample, 31% had monthly income below Rs 5000, 27% had income above Rs 11000, 23% had income between Rs 8000-11000 and 19% had income between Rs 5000-8000.

N=100

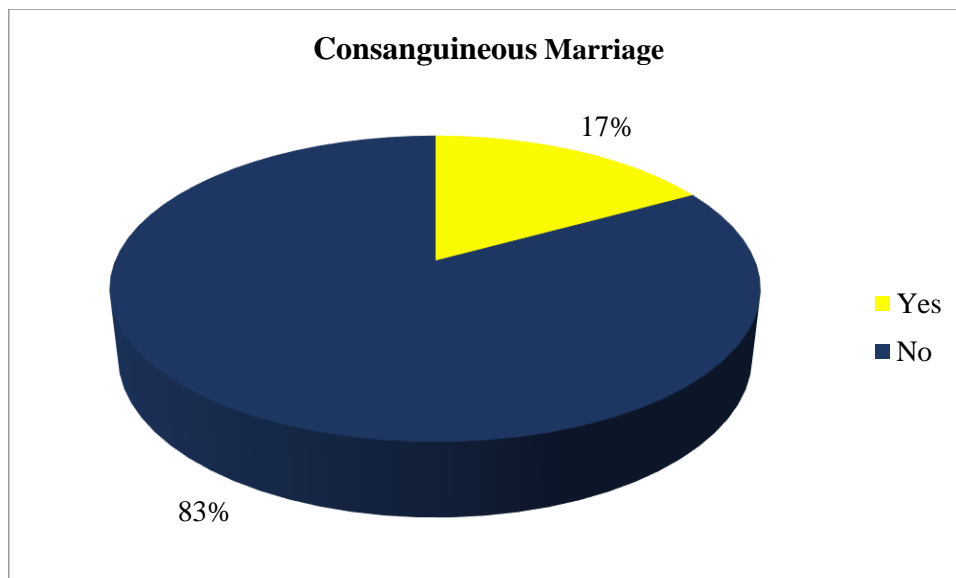


Figure 5 : Percentage wise distribution of sample according to consanguineous marriage

Fig 5 shows that out of 100 samples, 83% did not belong to the category, 17% belonged to the category of consanguineous marriage.

N=100

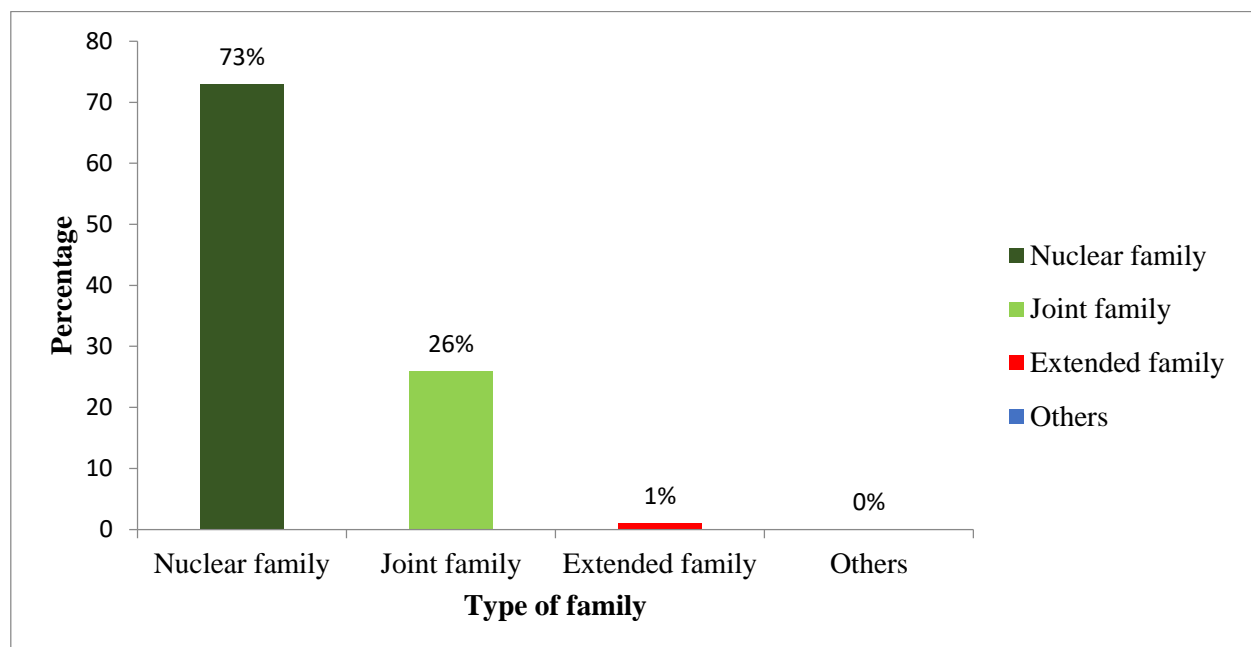


Figure 6 : Percentage wise distribution of sample according to Type of Family

Fig 6 shows that out of 100 samples, 73% were from nuclear family, 26% were from joint family and 1% were from extended family

N=100

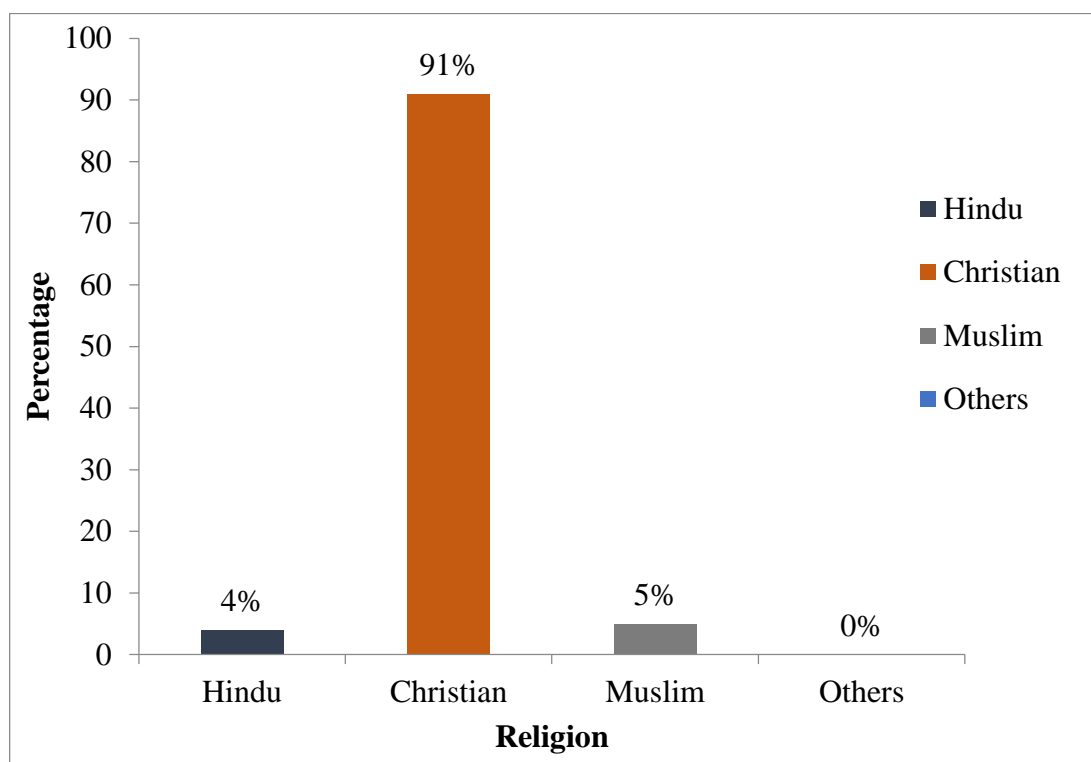
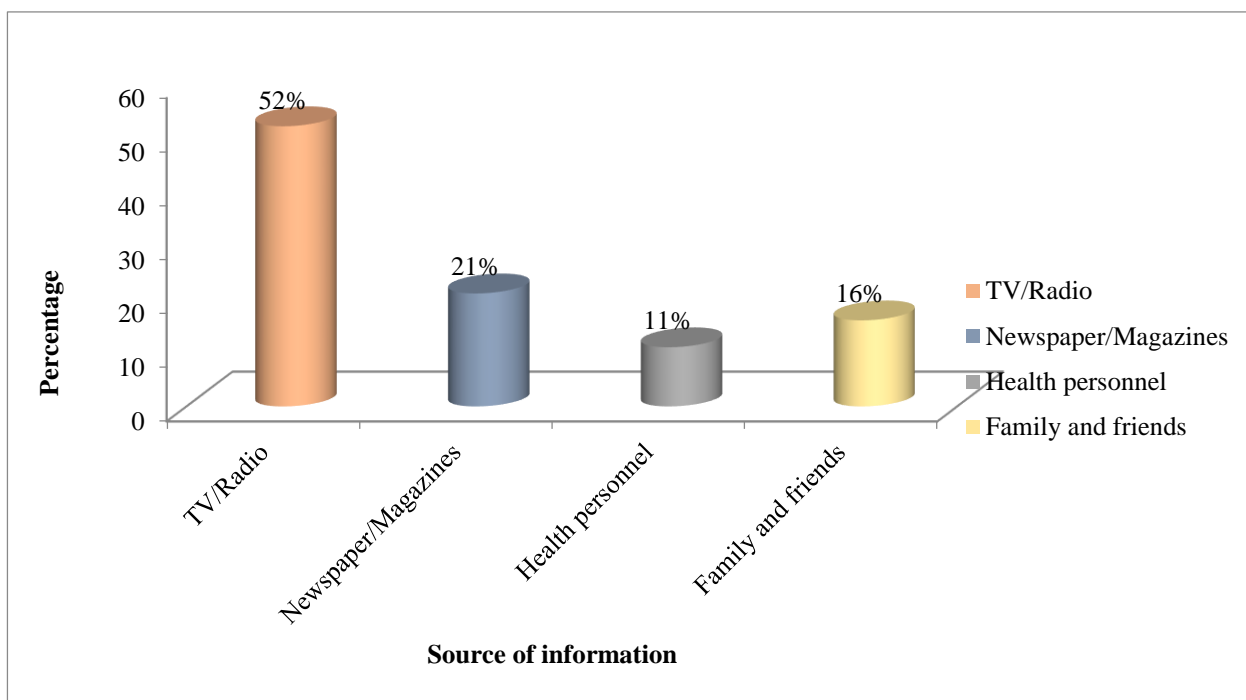


Figure 7: Percentage wise distribution of sample according to Religion

Fig 7 shows that out of 100 samples,91% were Christians, 4% were Hindus and 5% were Muslims.





N=100

Figure 8 : Percentage wise distribution of sample according to Source of Information

Fig 8 shows that out of 100 samples, 52% got information from TV / radio, 21% found information from newspaper or magazine, 16% found information from family and friends, and 11% found information from health personnels

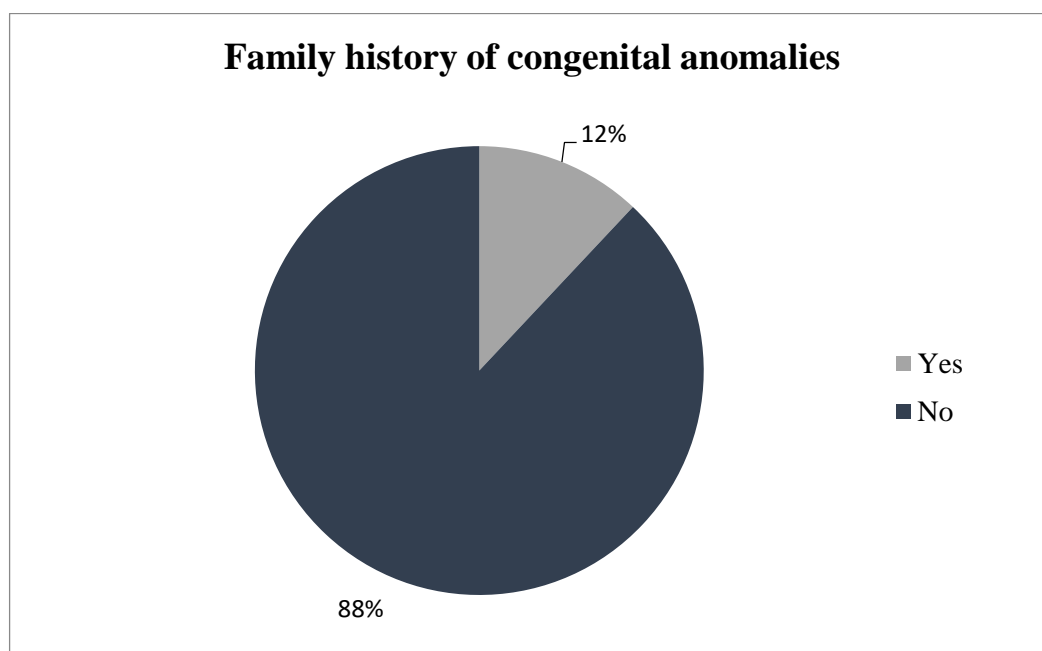


Figure 9 : Percentage wise distribution of sample according to family history of congenital anomalies

Fig 9 shows that out of 100 samples, 12% had family history of congenital anomalies and 88% had no history of congenital anomalies.

DATA ANALYSIS AND INTERPRETATION: Frequency and percentage distribution of score on knowledge regarding congenital anomalies of new born babies.

SCORE RANGE	RATING	FREQUENCY	PERCENTAGE
0-7	Poor knowledge	23	23%
8-13	Average knowledge	73	73%
14-20	Good knowledge	4	4%

Table(1) shows that Out of 100 samples (housewives) 4% had good knowledge,73% had average knowledge and 23 % had poor knowledge.

Table 2: Association between knowledge of housewives regarding congenital anomalies of newborn babies with selected demographic variables.

SI No.	Variables	Level of knowledge			Chi square value	Table value	df	Level of Significance
		Good	Average	Poor				
1. Age (in years)								
	20-25	1	14	6				
	26-30	0	11	2	4.04	12.59	6	NS
	31-35	2	13	4				
	36-40	1	35	11				
2. Education								
	Primary	1	14	8				
	SSLC/Plus two	1	34	10				
	Graduate	1	19	3	4.74	12.59	6	NS
	Post graduate and above	1	6	2				
3. Number of children								
	Nil	3	11	7				
	One	0	13	2	13.42	12.59	6	S
	Two	1	44	10				
	Three/more	0	5	4				

4. Family Income per month

<5000	1	20	10				
5000-8000	1	16	2				
8000-11000	1	17	5	3.27	12.59	6	NS
>11000	1	20	6				

5. Consanguineous marriage

Yes	2	12	3	3.42	5.99	2	NS
No	2	61	20				

6. Type of Family

Nuclear family	3	55	15				
Joint family	1	17	8				
Extended family	0	1	0	1.47	12.59	6	NS
Others	0	0	0				

7. Religion

Hindu	0	4	0				
Christian	4	64	23	3.58	12.59	6	NS
Muslim	0	5	0				
Others	0	0	0				

8. Source of Information

TV/Radio	1	37	14				
Newspaper/magazines	2	15	4	7.20	12.59	6	NS

Health personnel	0	11	0
Family and friends	1	10	5

9. Family history of congenital anomalies

Yes	0	9	3	0.58	5.99	2	NS
No	4	64	20				

Table-2: The association was computed by using Chi square test. Regarding age of housewives, the calculated value 4.047 is less than table value 12.592 at 0.05 level of significance. About education qualification of housewives the calculated value 4.74 is less than the table value 12.592 at 0.05 level of significance. In case of number of children the calculated value 13.42 is greater than table value 12.59 at 0.05 level of significance.

In this study regarding income of family the calculated value 3.275 is less than the table value 12.592 at 0.05 level of significance. About consanguineous marriage, the calculated value 3.42 is less than the table value 5.991 at 0.05 level of significance. In relation to type of family the calculated value 1.473 is less than table value 12.592 at 0.05 level of significance.

In this study regarding religion the calculated value 3.589 is less than table value 12.592 at 0.05 level of significance. Concerning source of information the calculated value 7.207 is less than table value 12.592 at 0.05 level of significance. In this study regarding family history of congenital anomalies, the calculated value 0.583 less than the table value 5.991 at 0.05 level of significance.

In short there was no significant association between knowledge regarding congenital anomalies of newborn babies among housewives and socio-demographic variables such as age, education, family income per month, consanguineous marriage, type of family, religion, source of information, family history of congenital anomalies and there was significant association between knowledge regarding congenital anomalies of newborn babies among housewives and the socio-demographic variable 'number of children'.

DISCUSSION

The present study was conducted to assess the knowledge regarding congenital anomalies of newborn babies among housewives at selected community area, Kollam. In order to achieve the objectives of the study non-experimental survey design was adopted. These subjects were selected by the non-probability convenient sampling. The sample consisted of 100 housewives who met the inclusion criteria. The findings of the study has been discussed in relation to objectives and other similar studies.

- **Discussion of findings with other studies based on objectives**
To assess the knowledge regarding congenital anomalies among housewives.

The present study revealed that 73% had average knowledge, 23% had poor knowledge and 4% had good knowledge.

The above findings are supported by a non – experimental descriptive study conducted at rural area of Ludhiana, Punjab to assess the knowledge and attitude regarding congenital anomalies. A sample of 200 married women of age 21 – 45 years were included in the study. The results revealed that 63% of the married women had average knowledge regarding congenital anomalies, 32.5% had poor knowledge and 4.5% had good knowledge regarding congenital anomalies.

- **To find the association between knowledge regarding congenital anomalies of newborn babies among housewives and selected Socio-demographic variables.**

The association was found out by using Chi-square test. It was inferred that the present study showed association between knowledge regarding congenital anomalies of newborn babies among housewives and the socio-demographic variable ‘number of children’. (Calculated value was greater than table value at 0.05 level of significance) and there was no association between knowledge regarding congenital anomalies of newborn babies among housewives and the demographic variables like age, education, family income per month, consanguineous marriage, type of family, religion, source of information, family history of congenital anomalies.

Above findings were supported by a descriptive study was conducted to assess the knowledge and attitude regarding congenital malformations among married women in selected rural areas of Ludhiana, Punjab. The study was Conducted on 200 married women of age 21-45 years. The study concluded that, there was no association between knowledge regarding congenital anomalies among married women and the demographic variables like age, education, religion and there was significant association between knowledge and demographic variable ‘source of information

Conclusion

The present study was aimed to assess the knowledge regarding congenital anomalies of newborn babies among housewives at selected community area, Kollam. The study concluded that 73% had average knowledge, 23% had poor knowledge and 4% had good knowledge. There was significant association between knowledge regarding congenital anomalies of newborn babies among housewives and the socio-demographic variable number of children at 0.05 level of significance. There was no significant association between knowledge regarding congenital anomalies of newborn babies among housewives and the demographic variables like age, education, family income per month, consanguineous marriage, type of family, religion, source of information, family history of congenital anomalies.

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Nil

Conflict of interest

There are no conflicts of interest

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