



Knowledge Regarding Prevention Of Dengue Fever Among MPHWF (F) Students In Narayana MPHWF (F) Training Institution

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Abstract

Introduction: - Dengue fever is a viral disease transmitted by mosquito usually *aedes aegypti*. Out breaks resembling dengue fever have been reported throughout history the first case reported throughout history. The first case report dates back from 1789 and is attributed to Benjamin rush who coined the term “break bone fever” because of symptoms of myalgia and etiology and the transmission by mosquitoes were only deciphered in the 20th century spread globally.

Objectives: The aim of the present study is to assess the knowledge level regarding dengue fever among Multipurpose Health Workers (M.P.H.W) female students.

Materials & Methods: Quantitative research approach design was adopted for the study which was conducted in Narayana MPHWF (F) Training Institution, 30 students were recruited in the study by non probability convenience sampling technique. Structured questionnaire was used to collect the data. Data was analyzed by using descriptive and inferential statistics. Percentages of categorical variables were computed.

Results: The findings obtained from the demographic variables by the analysis of the data with selected samples are having 93.3% are having moderate knowledge and 3.4% having adequate knowledge. There is significant relationship between the religion and level of knowledge regarding prevention of dengue fever.

Conclusion: Structured teaching programme is necessary to improve the knowledge level among M.P.H.W (F) students.

Key Words: Multipurpose health workers (F) students, dengue fever, knowledge level

Introduction

Dengue fever is a viral disease transmitted by mosquito usually ‘*aedes aegypti*’. Out breaks resembling dengue fever has been reported

throughout history the first case reported throughout history. The first case report dates back from 1789 and is attributed to Benjamin rush who coined the term “break bone fever” because of symptoms of myalgia and etiology and the

transmission by mosquitoes were only deciphered in the 20th century spread globally.

The first impact of the world was 2 resulted in increase spread globally. The first reported epidemics of dengue fever occurred in 1779-1780 in Asia, Africa and North America.

Dengue fever is an acute febrile disease caused by all four serotypes (1,2,3,or 4) of a virus form genus flavivirus called dengue virus from genus flavivirus called dengue virus. It's the most prevalent.

Flavivirus infection of humans with a world distribution in the tropics and warm areas of the temperature zone corresponding to that of principal vector, aedes aegypti.

The dengue is endemic in regions where mosquitoes are present through the year. Epidemic outbreak of dengue fever have become frequent in recent years in India. In 1980 it was found that there were 4601 cases and to death in Uttar Pradesh, Gujarat, Punjab, Delhi. Serotype may present with thrombocytopenia ($<100.000/mm^3$) and hemoconcentration the first usually preceding the second. Hemorrhagic manifestations may not occur: the spleen is not palpable, but hepatic enlargement and tenderness is a bad prognosis. Other manifestations include pleural effusion and hypo albuminemia, encephalopathy with normal cerebrospinal fluid. Dengue fever is the most prevalent arbo viral infection worldwide with up to 40% of the population living in endemic regions. Among traveler to tropical countries. Dengue infection is increasingly reported and it is now a leading cause of postal travel fever. It is affecting at least 50 million people every year and endemic in more than 100 countries. Dengue hemorrhagic fever and dengue shock syndrome are major cause of hospitals, admission up to 5% of people with dengue hemorrhagic fever die of the infection. There is no specific treatment for dengue fever. The main stay of treatment is available.

Recently attenuated candidate vaccine virus has been developed. Efficacy trials in human volunteers have yet to be initiated. Research is

also being conducted to develop second generation recombinant viruses therefore an effective dengue vaccine is for public use with not be available for 5- 10 years.

Objectives

1. To assess the level of knowledge regarding prevention of dengue fever among MPHWS students.
2. To associate the level of knowledge regarding dengue fever with selected demographic variables.

Assumption

The students may have adequate knowledge regarding prevention control of dengue fever.

Materials & Methods

The present study was conducted among 30 students at Narayana M.P.H.W(F) Training school, Nellore. Samples were selected by Non probability convenience sampling technique. Samples who are willing to participate in study and who can read and write Telugu or English were included in the study where students studying in Narayana MPHWS (F) Training Institution for the study

Description of the Tool

A semi structured questionnaire which consists of 20 questions related to dengue fever to assess the knowledge level. one mark carries for correct answer.

The scores were 93.3% having moderate knowledge and 6.7% are having adequate knowledge among 30 MPHWS(F)students.

Data Collection Procedure

The data collection was carried out from March 2012 for 2 weeks. The permission was obtained to conduct the study from Institutional ethical committee, community medicine, principal of M.P.H.W. school. Students were informed About nature and purpose of study and informed consent was obtained. Data was collected by using semi

structured questionnaire it took 15-20 minutes to collect the data from each sample.

Samples who fulfilled the inclusion criteria were recruited for the study.

Data Analysis

The data was analyzed by using Descriptive Statistics that includes mean standard deviation and inferential statistics namely Z test and Chi square.

Results

Table-1 Frequency and percentage distribution of knowledge regarding dengue fever among MPHWS students.

MODERATE		ADEQUATE	
F	%	F	%
28	93.3	2	6.7

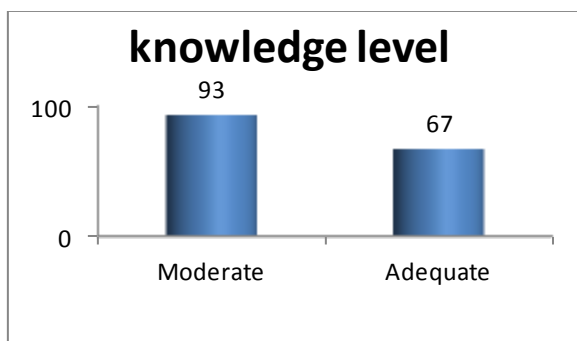


Fig 1. Shows that 93.3% having moderate knowledge and 6.7% are having adequate knowledge among 30 students.

Table 2.

Frequency and percentage Distribution of central values with knowledge regarding prevention of dengue fever.

MEAN	MEDIAN	SD
15.4	15	3.6

TABLE 3. Association between the level of knowledge on prevention of dengue fever among MPHW students in Narayana MPHW (F) Training Institution.

DEMOGRAPHIC VARIABLES	NO.	MODERATE	ADEQUATE	Chi-square
Age :				
16-17	4	4	0	$X^2=14.6$ NS
18-19	15	13	2	
20-21	9	9	0	
22-23	2	9	0	
Religion:				
Hindu	29	27	2	$X^2= 6.2$ S
Christian	1	1	0	
Educational status MPHW	30	28	2	$C(X^2)=0$ S
Health information:				$C(X^2)=30.8$ NS
Health professionals	5	5	0	
Educational institutions	20	18	2	
Neighbor	3	3	0	
Mass media	2	2	0	

level of significance, C: calculated value, NS: No Significant, S*: Significant

Discussion

Findings related to level of knowledge regarding prevention of dengue fever

The findings obtained from the demographic variables by the analysis of the data with selected samples are having 93.3% are having moderate knowledge and 3.4% having adequate knowledge. Findings related to the association between knowledge level with demographic variables. The finding shows that there is significant correlation between demographic variables like religion and knowledge regarding prevention of dengue fever.

Recommendations For Future

Research

- The study can be conducted in different areas like PHC's, CHC's, and in large populations.
- The study is conducted among GNM's students and B.Sc (N) students.

- The study is conducted among staff nurses in clinical set up.

Conclusion

From this study it is found that samples are having 93.3% are having moderate knowledge and 3.4% having adequate knowledge.

Limitations

The study is limited to

1. A sample size of 30 students
2. Who are studying in Narayana MPHW (F) training institutions, Nellore.

Acknowledgement

We are grateful to all samples who participated in the study and all health team members of Narayana MPHW(F) Training institutions, Nellore for the conducting the study.

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