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To determine the prevalence and awareness related to selected health problems among primary school children at Kalaburagi district

[1]Vinodkumar and [2]Dr. Summayya Abareen

[1] M.Sc. Nursing Student, Department of Pediatric Nursing, AL Kareem College of Nursing, Kalaburagi, Karnataka, India
[2] Associate Professor, Department of Pediatric Nursing, Al Kareem College of Nursing, Kalaburagi, Karnataka, India

Corresponding Author: Vinodkumar

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Abstract

Every individual has the inherent entitlement to good health. Good health is essential for both the internal and exterior growth of an individual. Optimal health is crucial for both a fulfilling and prosperous life.

Objective: To determine the prevalence and awareness related to selected health problems among primary school children at Kalaburagi district.

Methodology: A quantitative approach with descriptive survey design was adopted for the study. The samples from the selected primary schools were selected using purposive sampling technique. The samples consisted 60 primary school children. The tools used for data collection was structured knowledge questionnaire.

Data collection procedure*:* Data was collected from 01.03.2024 to 31.03.2024 after obtaining administrative permission from selected primary schools, Kalaburagi.

Results: Respondents mean was 13.96, median was 13, mode was 12 with standard deviation 4.41 and score range was 4-25. With regard to level of knowledge it shows that, maximum 41(68.3%) respondents were having average knowledge, 12(20%) respondents were having poor knowledge and remaining 7(11.7%) of respondents were having good knowledge. The computed Chi-square value for association between level of knowledge of Primary school students regarding selected health problems and their selected demographic variables is found to be statistically significant at 0.05 levels for religion and is not found significant for other selected socio demographic variables.

Conclusion: The findings revealed that, Participants were suffered with various health problems in past one month. Knowledge of Primary school students regarding selected health problems was average. There was significant association found between the knowledge scores of participants and their religion. Since a very few studies have been conducted regarding this topic in India, so the nurse researcher can take further studies on the same topic.

Keywords: Prevalence, determine, health problems, primary school children, knowledge

Introduction

Every individual has the inherent entitlement to good health. Good health is essential for both the internal and exterior growth of an individual. Optimal health is crucial for both a fulfilling and prosperous life. Health is not only an individual obligation, but also a collective duty at the national, international, and global levels.1Survival is possible without sufficient sustenance. Food is an essential requirement for sustaining life. The food we consume undergoes digestion and assimilation in the body, providing the necessary nutrients for maintaining and promoting growth.

However, if the body experiences several harmful issues. From a nutritional perspective, the Indian civilization may be described as having a small group of well-nourished individuals and a significantly larger population of undernourished individuals. Water, being one of the most crucial natural resources, is essential for all forms of life on Earth. The primary factor contributing to the occurrence of issues in youngsters. The morbidity and mortality rates are particularly high among vulnerable groups of children, primarily due to infectious diseases such as pneumonia, HIV, Malaria, Diarrhoea, tuberculosis. Among older children, injuries and some non-communicable diseases also contribute to the overall morbidity and mortality rates.

In order to foster the development of a healthy society, it is imperative that individuals maintain a healthy lifestyle and adhere to behaviours that promote well-being. Failure to do so can result in the onset of various diseases. The age group between 1 and 16 years is a critical time, as it is during this period that lifestyle traits are developed. Microbial risk assessment has traditionally prioritised the evaluation of risks linked to the transmission of microorganisms through water channels. The current focus is on prioritising wellbeing, self-care, disease prevention, and the promotion of health in the existing environment. Behavioural changes in daily life to promote health and prevent sickness. The wealth of a nation is contingent upon the well-being of its population, encompassing individuals of all age groups, including youngsters. The well-being of a nation's children

is of paramount importance to all cultures, as children serve as the fundamental foundation for the future of humanity.
During the clinical experience and community field experience, the investigator saw that school children encounter several health issues as a result of various factors. It is crucial to ensure that school children have a sufficient understanding of common health issues in order to effectively prevent minor health problems. Having sufficient knowledge enables one to engage in suitable measures to prevent diseases and problems. Due to a lack of research in this field, the researcher decided to conduct this study.

Objectives

1. To determine the prevalence and awareness related to selected health problems among Primary school children.
2. To find the association between the levels of awareness scores of school children related to selected health problems and selected demographic variables.

Hypotheses

H_1: There will be statistical association between the levels of awareness of school children related to selected health problems and their selected demographic variables at 0.05 level of significance.

Methodology

- **Research Approach:** Descriptive Survey Approach.
- **Research Design:** Descriptive Survey Design.
- **Sampling technique:** Non-Probability; Purposive Sampling Technique.
- **Sample size:** 60.
- **Setting of study:** Selected Primary Schools, Kalaburagi District, Karnataka.
- **Population:** Primary School Students.

Tool used for data collection

Section I: Demographic data: It consists of 8 items related to demographic data of participants

Section II: Self-administered knowledge questionnaire

Procedure of data collection

Study was approved by the institute ethical committee. Formal administrative permission was obtained (Annexure-H). Data were collected from 01-03-2024 to 30-03-2024. Sample was selected as per the sampling criteria. The purpose of the study was explained and co-operation required from the respondents was explained to them. Confidentiality was assured. Consent to participate in the study was obtained from each subject. Data was collected by distributing the tools to all participants. The post test was administered to participants on 8th day.

Results

Section I: Socio-Demographic Profile

Table 1: Frequency & Percentage Distribution of Respondents according to socio demographic variables n=60

Sl. No.	Demographic variables	Frequency (f)	Percentage (%)
1.	**Age (in years)**		
	9 - 10	16	26.7
	11 -12	29	48.3
	13 -14	15	25
2.	**Gender**		
	Male	35	58.3
	Female	25	41.7
3.	**Year of study**		
	4th std	32	53.3
	5th std	13	21.7
	6th std	6	10
	7th std	9	15
4.	**Religion**		
	Hindu	34	56.7
	Muslim	17	28.3
	Christian	6	10
	other	3	5
5.	**Family income / month**		
	Below 10,000/-	9	15
	10,001- 20,000/-	26	43.3
	20,001- 30,000/-	20	33.3
	30,001 & above	5	8.3
6.	**Type of family**		
	Nuclear	34	56.7
	Joint	22	36.7
	Extended	4	6.7
7.	**Previous knowledge regarding health problems**		
	Yes	35	58.3
	No	25	41.7

Section II
Distribution of Prevalence of Selected Health Problems

Table 2: Frequency and percentage distribution of selected health problems among participants.n = 60

Health problems	Frequency	Percentage
Cold and cough	12	20
Diarrhea	9	15
Ear infections	2	3.33
Parasitic infestation	3	5
Malnutrition	4	6.66
Minor injuries	6	10
Allergies	2	3.33
Eye infections	1	1.66

Table 2 reveals health problems faced by the participants in previous one month of duration, it reveals that.

- **Cold and cough:** 12(20%) of students suffered with cold and cough in previous one month.
- **Diarrhea:** 9(15%) of students suffered with diarrhea in previous one month.
- **Ear infections:** 2(3.33%) of students suffered with ear infections in previous one month.
- **Parasitic infestation:** 3(5%) of students suffered with parasitic infestation in previous one month.
- **Malnutrition:** 4(6.66%) of students suffered with malnutrition in previous one month.
- **Minor injuries:** 6(20%) of students suffered with minor injuries in previous one month.
- **Allergies:** 2(3.33%) of students suffered with allergies in previous one month.
- **Eye infections:** 1(1.66%) of students suffered with eye infection in previous one month.

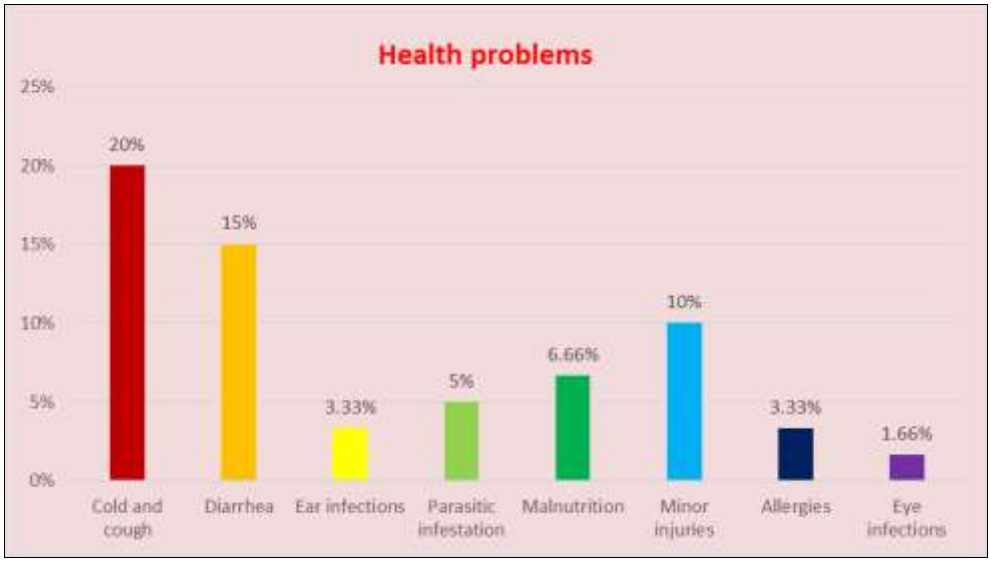

Fig 1: Percentage distribution of selected health problems among participants

Distribution of Knowledge Scores

Table 3: Mean, median, mode, standard deviation and range of knowledge scores of Respondents n = 60

Number of Items	Mean	Median	Mode	Standard deviation	Range
30	13.96	13	12	4.41	4-25

Table 3 reveals knowledge score of respondents regarding selected health problems, it reveals that, respondents mean was 13.96, median was 13, mode was 12 with standard deviation 4.41 and score range was 4-25.

Distribution respondent's scores according to their level of knowledge

Table 4: Frequency and Percentage distribution of respondents according to level of Knowledge n=60

Levels of Knowledge		
Poor f (%)	**Average f (%)**	**Good f (%)**
12 (20%)	41 (68.3%)	7(11.7%)

The data presented in the Table 4 depicts the respondent's level of knowledge regarding selected health problems among respondents, it reveals that; maximum 41(68.3%) respondents were having average knowledge, 12(20%) respondents were having poor knowledge and remaining 7(11.7%) of respondents were having good knowledge.

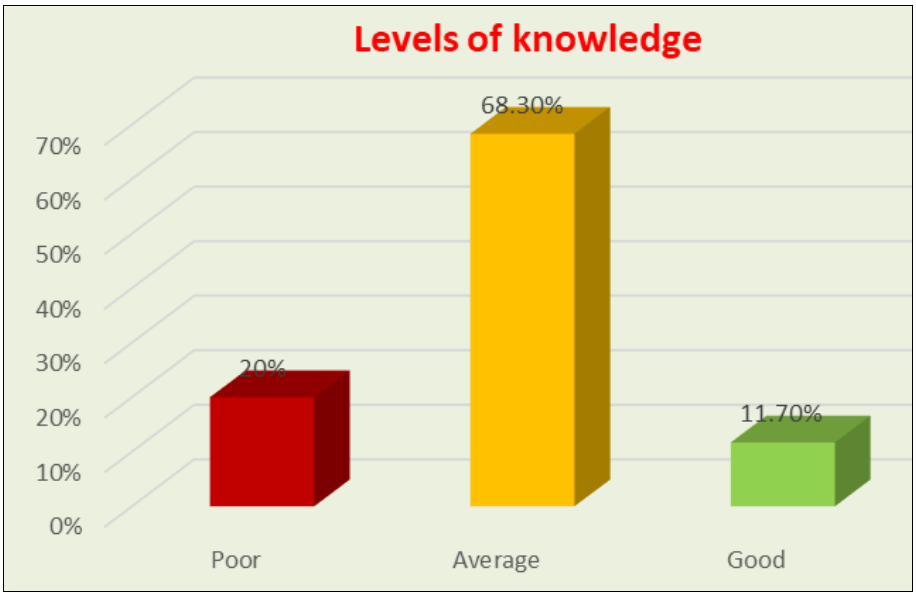

Fig 2: Level of knowledge of respondents

Association between level of knowledge and selected socio demographic variables

The computed Chi-square value for association between level of knowledge of Primary school students regarding health problems and their selected demographic variables is found to be statistically significant at 0.05 levels for religion and is not found significant for other selected socio demographic variables. Therefore, the findings partially support the hypothesis H_1, inferring that participants level of knowledge regarding health problem is significantly associated with religion.

Conclusion

Further, the conclusion drawn on the basis of the findings of the study includes:

- Participants were suffered with various health problems in past one month
- Knowledge of Primary school students regarding selected health problems was average.
- There was significant association found between the knowledge scores of participants and their religion.

Conflict of Interest

Not available.

Financial Support

Not available.

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