A Study to Assess the Knowledge and Attitude Regarding Storch Infection and Its Prevention Among Married Women with a View to Develop Information Booklet, in a Selected Community Area at Bhilai (Chhattisgarh)

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Abstract

Pregnancy is the most fascinating and delicate experience for a women. Some infections are more common than usual, but all of them need to be prevented at best or at worst nipped in the bud for sure. STORCH infections represent a common cause of birth defects. They can cause stillbirths, the delivery of a dead baby. The main objective of this study was to assess the knowledge and existing attitude among married women regarding STORCH infection and its prevention. Non-experimental research design was adopted. A total of 150 samples were selected using non-probability purposive sampling technique. The tool used for the study comprises two sections. Section A consists of socio-demographic variables such as age, religion, duration of marriage, education, occupation, family income, and family type. Section B consists of study parameter, which comprises 10 questions. Section C comprises self-structured questionnaire to assess the knowledge regarding STORCH infection, which consists of 28 questions. Section D comprises attitude scale to assess the level of attitude towards STORCH infection and its prevention, which consists of 10 questions. The study findings revealed that 0.67% were having adequate knowledge, 12% were having moderate knowledge, and 87.33% were having inadequate knowledge. Regarding attitude, 60.66% were having unfavourable attitude, 33.33% had neutral attitude, and 6% had favourable attitude. There was a significant association between the knowledge score and type of family, ever relapsed in STORCH infection. There was a significant association between attitude score with family monthly income and was also a significant association between the knowledge scores and attitude score. The calculated value, i.e. 47.33, is more than the table value (9.49) at 0.05 level of significance. An information booklet was prepared covering the different aspects of STORCH infection and its prevention and is given the subjects based on their need.

Keywords: *demographic, married women, prevention, STORCH infection*

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INTRODUCTION
STORCH infections can affect people of any age or sex. However, the term STORCH is only used when it applies to pregnant women and their unborn or newborn children [1]. As a group, STORCH infections represent a common cause of birth defects. They can cause stillbirths, the delivery of a dead baby [2]. The infection usually causes few, if any,

symptoms in the pregnant women. On the other hand, babies risk serious birth defects if they catch one of these infections during pregnancy or delivery [3].

OBJECTIVES OF THE STUDY

1. To assess the knowledge among married women regarding STORCH infection and its prevention.
2. To assess the existing attitude among married women regarding STORCH infection and its prevention.
3. To find out association between knowledge and attitude regarding STORCH infection and its prevention among married women with selected demographic variables and study parameter.
4. To find the association between knowledge and attitude regarding STORCH infection and its prevention among married women.
5. To develop and distribute an information booklet regarding STORCH infection and its prevention.

HYPOTHESIS

- **H0:** There will be no significant association between knowledge and attitude regarding STORCH infection and its prevention among married women.
- **H1:** There will be significant association between knowledge and attitude regarding STORCH infection and its prevention among married women.
- **H2:** There will be significant association between knowledge score and selected socio-demographic variables and study parameter.
- **H3:** There will be significant association between attitude score and selected socio-demographic variables and study parameter.

MATERIALS AND METHODS

A non-experimental research design was adopted to conduct the study. Target population was all married women of age group 20–40 years. A purposive sampling technique was utilized for selecting a sample of 150 married women. Accessible population was married women of age group 20–40 years in a selected community area of Hudco, Bhilai. A self-structured questionnaire and attitude scale were used to assess the knowledge and attitude regarding STORCH infection and its prevention among married women with a view to develop information booklet, in a selected community area at Bhilai (Chhattisgarh).

The tool used for the study consisted of four sections:
Section A: Consists of socio-demographic data, which consists of 7 items. The demographic data of the married women are regarding their age, religion, duration of marriage, education, occupation, family income, and family type.
Section B: Consists of study parameters, which consists of 10 questions.
Section C: Consists of self-structured questionnaire to assess the knowledge of married women regarding STORCH infection, which consists of 28 questions. In this section, each correct answer fetched one mark and wrong fetched zero mark.
Section D: Consists of attitude scale. To assess the level of attitude towards STORCH infection and its prevention, which consists of 10 questions and are categorized into unfavourable, neutral, and favourable attitudes.

Expert opinion and content validity of the tools were established by eight experts (Obstetrical and Gynaecological Nursing), one gynaecologist, and two statisticians. Reliability of self-structured questionnaire and attitude scale for assessment of knowledge and attitude regarding STORCH infection and its prevention among married women age group between 20 and 40 years were established by using Karl Pearson formula and 'r' was found to be 0.95. The tool was found valid and reliable.

Data collection was done from 6 to 20 January 2014 for the main study. Formal written permission was taken from the Principal, Shri Shankaracharya College of Nursing, Hudco, Bhilai, and Ward Parshad, Hudco, Bhilai. Consent of the sample was taken.

METHOD OF DATA ANALYSIS
The data obtained from the study were analysed and interpreted in terms of the objective. Descriptive and inferential statistics were used for data analysis.

- Socio-demographic data and profile regarding study parameter were analysed in frequency and percentage.
- Analysis of knowledge and attitude regarding STORCH infection and its prevention was done in frequency and percentage.
- Chi square analysis was used for the association between knowledge and attitude regarding STORCH infection and its prevention.
- Chi square analysis was used for the association between the knowledge with selected demographic variables and study parameter among married women.

RESULTS
In the analysis of assessing the knowledge and attitude among 150 married women regarding STORCH infection and its prevention, it's depicted that 0.67% were having adequate knowledge, 12% were having moderate knowledge, and 87.33% were having inadequate knowledge.

60.66% were having unfavourable attitude, 33.33% were having neutral attitude, and 6% were having favourable attitude.

DISCUSSION
Maximum subjects were belonging to the age group of 21–25 years, i.e. 32%, distribution of the subjects according to the religion, 54.67% belongs to Hindu religion, with reference to duration of marriage depict that majority of 40% were in 6–10 years, with reference to the educational status shows that majority of 50% belong to graduate/post-graduate, the findings regarding the maximum subjects (50.67%) were housewives, monthly income of the family depicts that majority (44.6%) were of monthly income Rs.10,001–20,000, the findings regarding the maximum subjects (54.67%) were in joint family [4, 5].

In the present study, it has been analysed that there is a significant association between levels of knowledge with type of family [6].

There is a significant association between the knowledge score and type of family in which the calculated value is more than the table value at 0.05 level of significance [7, 8].

There is a significant association between the knowledge scores with attitude score. The calculated value, i.e. 47.33, is more than the table value (9.49) at 0.05 level of significance [9].

RECOMMENDATIONS
- A similar study can be replicated in the large sample, thereby finding can be generalized for large population.
- A study may be designed to explore the effectiveness of structured teaching programme on STORCH infection and its prevention.
- A comparative study can be conducted to find out the differences in knowledge level with regards to different demographic variables.
- The same study can be conducted to assess the effectiveness of structured teaching programme using different teaching methods, video cassette methods, etc.

- A follow-up study can be conducted on the basis of assessing knowledge and attitude regarding STORCH infection and its prevention.

CONCLUSION
From the study, it has been analysed that only 0.67% were having adequate knowledge and 6% were having favourable attitude about STORCH infection and its prevention. Information booklet was prepared covering the different aspects of STORCH infection and its prevention and given the subjects based on their needs.

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REFERENCES
[1] Nancy B, Susan K. *Understanding Nursing Research*. 2nd edition. Philadelphia, PA: Harcourt Pvt Ltd; 1999.

[2] Bernadette HP. *Essentials of Nursing Research: Methods, Appraisal and*

[3] *Utilization*. 5th edition. Philadelphia, PA: Lippincott; 2001.

[4] Rubin P. Drug treatment during pregnancy. *Br Med J.* 1998; 317: 1503–1506p.

[5] Aguwa CN, Ogbuokua JE. *Handbook of Pharmacology for Nursing and Allied Health Professions*. Enugu: Africana Publishers Ltd.; 1998.

[6] Dubey JP, Miller NL, Frenkel JK. Toxoplasma gondii life cycle in cats. *J Am Veter Med Assoc*. 1970; 157(11): 1767–1770p.

[7] Ramsey PG, Carline JD, Inui TS, Larson EB, LoGerfo JP, Norcini JJ, Wenrich MD. Changes over time in the knowledge base of practicing internists. *J Am Med Assoc*. 1991; 266(8): 1103–1107p.

[8] Cherry JD, Adachi K. Rubella virus. In: Cherry JD, Harrison GJ, Kaplan SL, et al., editors. *Feigin and Cherry's Textbook of Pediatric Infectious Diseases*. 7th edition. Philadelphia, PA: Elsevier Saunders; 2014, p. 2195.

[9] WHO. *Manuals for the Laboratory Diagnosis of Measles and Rubella Virus Infection.* 2nd edition. Geneva: WHO; 2007.