

A Descriptive Study To Assess The Knowledge Regarding Malaria Among The Women Living In Kumaramangalam Village At Chidambaram Taluk

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I. INTRODUCTION

One of the most important and vital process in Malaria continues to be a leading cause of morbidity and mortality in many tropical regions of the world, despite global efforts to eradicate the disease. While the disease is easily preventable, curable and treatable, it remains a big health threat to many communities the world over, most especially in Sub-Saharan Africa. Although there have been advances in terms of new drugs and vaccines, eradication is still a way off and many health strategies now focus on malaria prevention and control.

Malaria is a common and life-threatening disease in many tropical and subtropical areas. There are currently over 100 countries and territories where there is a risk of malaria transmission, and these are visited by more than 125 million international travelers every year.

II. OBJECTIVES

1. To assess the knowledge regarding malaria among the women living in Kumaramangalam village.
2. To find out the association between the existing knowledge of the subjects with selected demographic variables such as age, education, type of family, family monthly income, religion, type of house and source of information.

III. RESEARCH METHODOLOGY

Thirty samples were selected using convenience sampling technique and the data was collected after obtaining consent from each participant who fulfilled the inclusion criteria. The demographic data, knowledge on various aspects of malaria such as causes, risk factors, clinical manifestations, diagnosis and management of malaria among the subjects was assessed by using structured interview guide.

IV. RESULTS

The study revealed that out of 30 samples, 20(67%) of them had inadequate knowledge, 10 (33%) of them had moderately adequate knowledge, and none of them had adequate knowledge regarding causes of malaria.

Regarding the risk factors of malaria, 22(73%) of the subjects had inadequate knowledge, 8(27%) of them had moderately adequate knowledge and no one had adequate knowledge.

Regarding clinical manifestations and diagnosis, 20 (67%) of the subjects had inadequate knowledge, 8 (27%) subjects had moderately adequate knowledge and only 2(6%) of the subjects had adequate knowledge.

As for as management of malaria aspect of knowledge is concern, 25 (84%) of the subjects had inadequate knowledge, 3(10%) of them had moderately adequate knowledge and only 2 (6%) of the subjects had adequate knowledge.

Regarding complications of malaria, none of them had either adequate or moderately adequate knowledge.

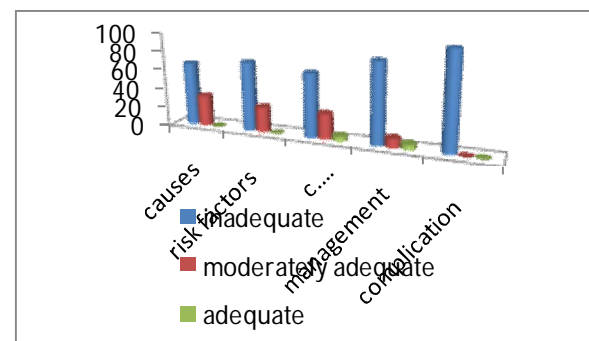


Fig 1: Level of knowledge of the subjects regarding various aspects of malaria

When the overall knowledge of the subjects was assessed, 19 (63%) of the subjects had inadequate knowledge,

6 (20%) of them had moderately adequate knowledge, and only 5 (17%) of the subjects had adequate knowledge.

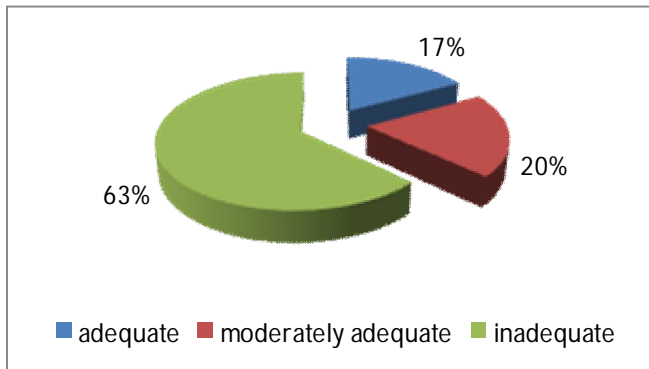


Fig 2: Overall knowledge of the subjects regarding malaria

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[5] www.who.int/malaria

[6] <https://www.cdc.gov/malaria>

V. ASSOCIATION BETWEEN THE MEAN KNOWLEDGE SCORE OF THE SUBJECTS WITH SELECTED DEMOGRAPHIC VARIABLES

N=30

| Sl. No | Demographic Variables | Sub Variables | N | Mean | SD | (F / t) - value | P. Value |
|------------------------|-------------------------|------------------------------|------|-------|------|-----------------|------------|
| 1. | Age | 18-25 years | 12 | 64.38 | 3.34 | 0.605 | 0.617 (NS) |
| | | 26-35 years | 8 | 63.38 | 4.03 | | |
| | | 36-40 years | 10 | 63.13 | 7.92 | | |
| | | Illiterate | 7 | 63.71 | 3.86 | | |
| 2. | Educational status | Primary school | 10 | 62.80 | 6.30 | 0.616 | 0.611 (NS) |
| | | Higher secondary school | 9 | 65.22 | 4.68 | | |
| | | Graduates | 4 | 66.25 | 3.86 | | |
| | | Farmer | 9 | 63.56 | 6.89 | | |
| 3. | Occupation | Cooli | 6 | 63.33 | 2.80 | 0.203 | 0.893(NS) |
| | | Self employee | 7 | 64.86 | 4.81 | | |
| | | Government employee | 8 | 65.00 | 4.47 | | |
| | | Below Rs. 2000 | - | - | - | | |
| 4. | Family Income per month | Rs. 2001 - 4000 | 13 | 63.77 | 5.76 | 0.247 | 0.783 (NS) |
| | | Rs. 4001 - 6000 | 4 | 63.25 | 5.68 | | |
| | | More than Rs. 6000 | 13 | 64.92 | 4.15 | | |
| | | Hindu | 14 | 65.64 | 4.41 | | |
| 5. | Religion | Muslim | 13 | 63.00 | 5.34 | 1.124 | 0.340 (NS) |
| | | Christian | 3 | 62.67 | 5.69 | | |
| | | Others | - | - | - | | |
| | | TV / Daily Newspaper / Radio | 8 | 63.13 | 3.94 | | |
| Relatives / Friends | 19 | 64.53 | 5.61 | | | | |
| Social welfare workers | 3 | 65.00 | 3.61 | | | | |

(NS)- Non significant

When the association was made between the mean knowledge scores of the subjects with selected demographic variables, there was no association found between mean knowledge scores and demographic variables of the subjects such as age, educational status, occupation, type of family, family income, religion and the source of information.

VI. CONCLUSION

The study revealed that the subjects had inadequate knowledge on malaria. Pamphlets were distributed to all the subjects at the end of the study to enhance the knowledge of them regarding malaria.

REFERENCES

[1] Mahajan & Guptha (2013). *Text Book of Preventive and Social Medicine*. 4th Ed New Delhi; Jaypee Brothers.