

University of Khartoum

Faculty of medicine

Department of community medicine

*KAP study in the mothers regarding diarrhea in under 5 children in
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Abstract

In Sudan diarrhea is regarded as the second cause of under 5 children mortality (17%).local attitude and cultural practices of the mothers may influence treatment of childhood diarrhea. This study was a cross sectional survey community based conducted in Dongula locality to identify the knowledge regarding cause, complications and protective measures of diarrhea and dehydration signs, elicit health seeking practices and homecare practices of the mothers in the treatment of childhood acute diarrhea. Three hundred and eighty three households participated in the survey direct questions were put to the mothers regarding their knowledge, attitude and practices (KAP) for acute diarrhea and its management.

A total of 487 under 5 children were present in 383 household.(73.1%) of the mothers knew that the microorganisms were the cause of diarrhea. Most of the mothers knew dehydration and malnutrition as diarrheal complications (64.8%,73.9% respectively) .and (85.1%) of the mothers come across or aware of dehydration signs .the knowledge about the protective measures was very good with hand washing taking the highest percentage (93.7%) ,breast feeding (88.3%),(93.2%) for good cooking and food covering and the least percent for cleaning and good nutrition (12.5%).the relation between mother education and the attitude and practice were tested and found not to be significant (p value 0.8). most of the mothers were give more fluids to their children during diarrheal attack (76.2%) ,108 (28.2 %) of the mothers give self administered drugs . but use of ORS were infrequent (only 6%).educational level had great association with the mother practice (p value 0.03).also mother education were greatly associated with the children diarrheal episodes (p value0.02).KAP of mothers regarding diarrheal

diseases is acceptable but need some modifications regarding the attitude and practice specially use of ORS. health education to the target population regarding early case management of childhood diarrhea, and provision of strong surveillance system may feather decrease morbidity and mortality due to acute childhood diarrhea.