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A Study to Assess The Level Of Knowledge Regarding Measles-Rubella Vaccine Among Mothers of under 15 years Children In Rural Area, Bhucho Mandi, Bathinda, Punjab.

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Abstract: *The existing study was conducted to evaluate the level of knowledge regarding Measles -Rubella vaccine among mothers of under 15 years children in Rural Area, Bhucho Mandi, Punjab. The objectives of study were to assess the level of knowledge regarding measles-rubella vaccine of under 15 years children and to find out the association between knowledge of mothers with their selected demographic variables. A quantitative research approach and non-experimental research design was used for the study. Sample size 150 mothers and sampling technique used was non probability purposive. A structured questionnaire was prepared and administered to assess the level of knowledge regarding measles rubella vaccine among mothers of under 15 years of children in rural area. Descriptive and inferential statistics was used to analyze the data. Different diagrams were used to depict the findings and to interpret the data. Final findings of present study were 53.33% had moderately adequate knowledge, 45.33% had inadequate knowledge and 1.33% had adequate knowledge. There was association between occupation, family income, religion with the knowledge of measles -rubella vaccine among mothers of under 15 years of children.*

Keywords: *Measles-Rubella Vaccine*

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I. Introduction

The health of the youngsters has traditionally been of crucial importance to all societies due to the fact youngsters is the fundamental assets of the future mankind. Mothers and kids in any country represent approximately 60% of the populace.[1] In India, women of baby bearing age constitute 19% of the population and the kids under 15 years of age represent approximately 59% of the total population. By virtue of this large numbers as well as because of being prone to ailment, mothers and the kids are the main costumers of the health offerings.[2]

Immunization is the method by means of which an man or woman's immune system turns into fortified in opposition to an agent .When this system is exposed to molecules which are foreign to the frame (non-self), it'll orchestrate an immune response, but it can additionally broaden the potential to speedy respond to a next come upon via immunological memory.[3]

Measles and Rubella are surprisingly contagious viral diseases that are spread by touch with an infected individual through coughing and sneezing. The measles and rubella (MR) marketing campaign is an ambitious public fitness initiative of the Government of India to eliminate measles by means of 2020. The motive of the Measles-Rubella campaign is to shield the child and eliminate transmission of Measles and Rubella from the community by vaccinating 100% goal kids with MR vaccine.[4]

The National Technical Advisory Group on Immunization (NTAGI) in June, 2014, had recommended the advent of Measles-Rubella vaccine in routine immunization program, following a nationwide Measles-Rubella campaign. Both doses of measles vaccine furnished at 9-12 months and 16-24 months, will be replaced through Measles-Rubella vaccine under recurring immunization, immediately after the campaign. Measles Rubella vaccine introduction marketing campaign is being rolled out in a phased way, targeting youngsters aged 9 months to <15 years no matter their previous vaccination status with MCV or history of illness. The phased MR campaigns will goal to vaccinate about 410 million (forty one crores) children throughout the country and can be a massive public fitness mission.[5]

Measles and rubella are the various maximum infectious illnesses of human beings. High level of herd immunity is required for its elimination.[6] Seroprevalence research endorse that insurance in the variety of 90–95 % is needed.[7] Measles and rubella are vaccine-preventable diseases with similar symptoms and are frequently pressured with each other. Each viruses reason rash and fever.[8] Measles may be lethal for youngsters

with terrible nutrition and weakened immune systems. Rubella is likewise very contagious however reasons highly slight sickness in children; in pregnant women, rubella can result in miscarriage or intense delivery defects (congenital rubella syndrome), including blindness, deafness and coronary heart issues.[9]

1.1 Statement of the problem

A study to assess the level of knowledge regarding Measles- Rubella vaccine among mothers of under 15 years children in rural area, Bhucho Mandi, Bathinda, Punjab.

1.2 Objectives

1. To assess the level of knowledge regarding Measles-Rubella vaccine among mothers of under 15 years children.
2. To find out the association between knowledge of mothers with their selected demographic variables.

1.3 Assumptions:

The mothers will have some knowledge regarding measles-rubella vaccine.

1.4 Operational definitions:

1. Knowledge: It refers to the level of understanding of mothers regarding Measles- Rubella vaccine of under 15 years children.

2. Measles-Rubella Vaccine: It refers to vaccine which is given to prevent measles and rubella in children.
3. Mothers of under 15 years children: It refers to mothers who have children between the age group of 0-15years.

II. Methodology

2.1. Research design:

The research design chosen for the study was non-experimental descriptive research design.

2.2. Settings and Participants

The participants were selected by using a non-probability purposive sampling technique with 150 mothers who were living in Rural Area, Bhucho Mandi, Bathinda.

2.3. Data collection

Data were collected using structured questionnaire, which consist of Demographic variables age, area of residence, educational status, occupation, family, income, religion, type of family and source of information., knowledge questionnaire 30 items regarding measles- rubella vaccine of under 15 years children.

2.4. Data Analysis

Data was entered in Microsoft excel sheet and contingency tables were prepared and $\chi 2$ was calculated to find out association.

III. Results

3.1. Demographic Characteristics of Mothers

Table 1 results revealed that Maximum 48(32%) mothers were in age group of 31-35years, Regarding educational status majority were 46(30.66%) belongs middle education, occupational status maximum 113(75.33%)were housewives, family income (in rupees) 61(40.66%) mothers having ≤ 5000 monthly income with 96(64%) mothers were living in nuclear family. According to religion 85(56.66%) were belongs to Sikh family and got source of health information 69(46%) through mass media.

N=150

S .No.	Demographic Variables	Frequency (n)	Percentage (%)
1.	**Age (in years):**		
	a) 18-22	19	12.66
	b) 23-25	40	26.66
	c) 26-30	43	28.66
	d) 31-35	48	32
2.	**Area of residence:**		
	a) Rural	150	100
	b) Urban	0	0

	c)	Semi urban	0	0
3.	**Educational status:**			
	a)	No formal education	8	5.33
	b)	Primary	32	21.33
	c)	Middle	46	30.66
	d)	Secondary	13	8.66
	e)	Senior secondary	15	10
	f)	Graduate or above	36	24
4.	**Occupation :**			
	a)	Government employee	9	6
	b)	Private employee	12	8
	c)	Self employee	6	4
	d)	Laborer	10	6.66
	e)	Home maker	113	75.33
5.	**Family income:(in rupees)**			
	a)	≤5000	61	40.66
	b)	5001-10,000	53	35.33
	c)	10,001-15000	21	14
	d)	≥15,001	15	10
6.	**Religion:**			
	a)	Sikh	85	56.66
	b)	Hindu	60	40
	c)	Muslim	4	2.66
	d)	Christian	1	0.66
	Type of family:			
7.	a)	Nuclear	96	64
	b)	Joint	43	28.66
	c)	Extended	11	7.33
	Source of health information:			
8.	a)	Family members		
	b)	Mass media	54	36
	c)	Friends & relatives	69	46
	d)	Health workers	10	6.66
			17	11.33

3.2. Knowledge score of mothers regarding measles-rubella vaccine among mothers of under 15 year children.

The results of Table 2 showed frequency and percentage distribution of mothers according to their level of knowledge. Majority of mothers 80 (53.33%) had moderately adequate knowledge, 68(45.33%) had inadequate knowledge and 2 (1.33%) had adequate knowledge.

TABLE 2

Frequency and Percentage distribution of mothers according to their level of knowledge.

N=150

Level of Knowledge	Score	Frequency (n)	Percentage (%)
Inadequate Knowledge	0-10	68	45.33
Moderately Adequate Knowledge	11-20	80	53.33
Adequate Knowledge	21-30	2	1.33

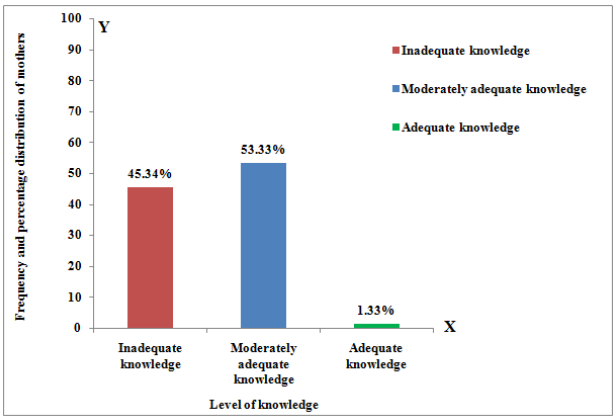

Fig. 1: Bar diagram shows the frequency and percentage distribution of mothers according to their level of knowledge.

3.3 Association between the knowledge regarding measles-rubella vaccine among mothers of under 15 years children with selected demographic variables.

TABLE-3

N-150

S.No	Demographic variables	Level of Knowledge			(χ^2)	df	p value
		Inadequate	Moderately Adequate	Adequate			
1.	**Age(in years):**						
	a) 18-22	10	9	0			
	b) 23-25	20	19	1	3.0248	6	0.8057
	c) 26-30	17	25	1			**NS**
	d) 31-35	21	27	0			
2.	**Educational status:**						
	a) No formal education	4	4	0			
	b) Primary	19	13	0	10.5041	10	0.3974
	c) Middle	21	24	1			**NS**
	d) Secondary	7	6	0			
	e) Senior secondary	8	7	0			
	f) Graduate /above	9	26	1			
3.	**Occupation:**						
	a) Government employee	2	6	1			
	b) Private employee	12	12	0	22.5619	8	0.0039
	c) Self employee	6	4	0			**S**
	d) Laborer	10	3	0			
	e) Homemaker	113	55	1			
4.	**Family income (in rupees):**						
	a) ≤5000	38	23	0			
	b) 5001-10,000	22	30	1	18.8089	6	0.0044
	c) 10,001-15,000	5	16	0			**S**
	d) ≥15001	3	11	1			
5.	**Religion :**						
	a) Sikh	35	49	1			
	b) Hindu	30	29	1	25.9003	6	0.0001
	c) Muslim	2	2	0			**S**
	d) Christian	1	0	0			
6.	**Type of family**:						
	a) Nuclear	41	53	2			
	b) Joint	24	19	0	4.6179	4	0.3287
	c) Extended	3	8	0			**NS**
7.	**Source of health information:**						
	a) Family members	31	22	1			
	b) Mass media	27	42	0	9.0833	6	0.1688
	c) Friends & relatives	4	6	0			**NS**
	d) Health workers	6	10	1			

Table 3 showed that there was significant association between Knowledge and their socio-demographic variables such as occupation, family income and religion at ($p<0.05$).

IV. Discussion

The discussion of findings of the study interpreted from statistical analysis. The findings are discussed in relation to objectives, need for the study, related literature of study and conceptual frame work. It was presented in line with the objectives of the study. The problem statement was **"A descriptive study to assess the level the knowledge regarding measles-rubella vaccine among mothers of under 15 years of children in Rural Area, Bhucho Mandi, Bathinda, Punjab."** The present study revealed that 53.33% of mothers were having moderately adequate knowledge, 45.33% were having inadequate knowledge and 1.33% was having adequate knowledge and occupation, family income, religion was statistically associated with the knowledge of measles rubella vaccine among mothers of under 15 years of children.

But Jayshree D Naik et.al conducted a study on awareness of Measles among Mothers of under Five Children and the study results revealed that out of 219 mothers, 115(52.51%) were having good knowledge about measles. Primary source of knowledge became Television in approximately 71(32.42%) of mothers.

V. Conclusion

In the present study 150 mothers have been selected by using questionnaire schedule. The study found out that 53.33% were having moderately adequate knowledge, 45.33% were having inadequate knowledge and 1.33% was having adequate knowledge.

NURSING IMPLICATIONS:
The implications of findings have been discussed in relation to nursing education, nursing research and nursing administration.

Nursing education:
1. Nursing education need to be strengthened to enable mothers of under 15years children in rural region to know regarding Measles-Rubella vaccine.
2. Nursing curriculum ought to offer schooling concerning measles rubella vaccine to mothers of under 15 years children in rural areas.

Nursing research:
1. The findings of study have a look at serve a foundation for nursing expertl and the students to conduct in addition studies approximately measles rubella vaccine.
2. The knowledge, attitude and practice study can be conducted on measles rubella vaccine among mothers in rural area.
3. The study can be conducted to assess the perspectives on health data acquired and its application by nursing students.

Nursing administration:
1. The nurse administrators in community need to broaden pointers for instructing the network humans for prevention of measles and rubella amongst children.
2. Continuous quality assessment can be done by the quality assurance team on quality of health education provided to the nursing students.

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