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EVALUATION OF KNOWLEDGE, ATTITUDES, AND BEHAVIORS OF MOTHERS WITH 0-6 AGE GROUP CHILDREN ABOUT HOME ACCIDENTS

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Abstract

Objectives: This study was performed to investigate home accidents experienced by children aged 0-6 in the last two weeks, the level of security measures taken by mothers towards home accidents, and the affecting factors.

Materials and Methods: The data were collected through a questionnaire form and "The Scale for Diagnosing the Safety Measures of the Mother for Home Accidents in Children 0-6" with 289 mothers with children aged 0-6 who applied to a pediatric clinic.

Results: The mean score of the scale used in the study was 165.56±16.84. The higher the education level of the mother, the higher the scale score and the relationship between them was found to be statistically significant (p=0.033). The scale means score of working mothers was found to be significantly higher than that of non-working mothers (p=0.006). The mean score of mothers whose children had no home accident was higher than those whose children had a home accident, but the difference was insignificant (p=0.694). It was found that children of 9.00% of the mothers had had a home accident in the last two weeks, and the most common type of home accident was a fall. Most children who had a home accident were between 0-2.

Conclusion: It was determined that demographic characteristics of mothers, such as education and working status, were effective in their knowledge and attitudes about home accidents.

Keywords: Home accidents, prevention, child care.

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Introduction

An accident is defined as an event that can be prevented by measures that can be taken that occur in an unplanned and unexpected time, resulting in loss of life and property.[1] Home accidents are defined as accidents that occur inside the home or its surroundings.[2] Home accidents have an important place among public health problems because they are preventable, common, and can cause death or disability.[3] Although the frequency of home accidents varies according to countries and age groups, it constitute 25% of childhood accidents[4] In Turkey, it has been reported that childhood home accidents constitute 18-25% of all accidents.[5] Although home accidents are seen in all age groups, they are an important public health problem, especially for children and the elderly.[6] Children at home, especially in pre-school, are more likely to face home accidents.[7] It has been determined that 45.4% of home accidents in our country are seen in 0-6 age group children. Children in this age group, Since they spend most of their time at home, are curious about exploring and learning about their environment, are constantly moving, are sensitive and open to environmental risks, have the habit of putting everything in their mouth, and their living spaces are not arranged according to the characteristics of children, and they do not have the developmental skills to protect themselves from accidents, they constitute the group with the highest accident rate in the home environment.[8] For children in this age group, the environment they are in should be made safe, and their parents should supervise the safety of their living spaces.[9] Mothers are usually the first to see home accidents and provide first aid to parents. For this reason, the knowledge level of mothers about first aid practices for home accidents is important in reducing the problems that may occur as a result of accidents.[10] Accidents can be prevented with regular training to be given to mothers who spend the most time with their children and make simple arrangements at home.[11]

This study was carried out to determine mothers' knowledge, attitudes, and behaviors about taking safety precautions against home accidents, to evaluate the effects of sociodemographic variables on home accidents in 0-6 age group children, and to determine which subjects mothers need the education to prevent home accidents.

Materials and Methods

This descriptive cross-sectional study was conducted in a training and research hospital pediatrics polyclinics between May 1, 2017, and June 30, 2017, and written permission was obtained from the relevant institution before the research. The universe of the study consisted of mothers with children aged 0-6 years who applied to outpatient clinics. In the study, where the number of individuals in the population is unknown, the sample size was determined as a minimum of 289 people, with a 95% confidence interval, 80% power, and a 5% margin of error resulting from the power analysis. A sample of 289 mothers with children aged 0-6 years who applied to pediatric polyclinics (without emergency medicine and orthopedics and traumatology polyclinics)

between the study dates was formed. During the interview, the mothers were informed about the purpose of the study and the questionnaire and the "Scale for Defining the Safety Precautions of the Mother for Home Accidents in 0-6 Years-Old Children". Questions about the forms were answered by the researcher. The face-to-face interview technique was applied to mothers who had difficulties filling out the forms.

The questionnaire developed in line with the literature included a total of 35 questions questioning the sociodemographic data of the family, the presence of chronic diseases of the child and the mother, the status of the child's home accident, and the characteristics of the accident.[12-15] In the study, the "Scale for Defining the Safety Precautions of the Mother for Home Accidents in Children aged 0-6 years", developed by Çınar, a Turkish validity-reliability study (Cronbach's alpha: 0.8205), was used.[16] The scale, which evaluates the safety measures taken by the mothers to protect their children from falling, burning, poisoning, and drowning, which are the most common home accidents in the home environment, consists of a total of 40 items, including 34 positive and six negative statements. In the five-point Likert-type scale, each item is scored from 1 to 5, and the scores vary according to the answers. In items with positive statements, the answer is always 5 points, most often 4 points, sometimes 3 points, rarely 2 points, never 1 point, whereas in the 6, 9, 23, 26, 30, and 40 items with negative expressions, the scoring is reversed. The minimum score on the scale is 40, and the maximum score is 200. The highest score indicates that the mother takes measures to protect her child from home accidents at the highest level.

Statistical analysis

The data plan to be used in the study was saved in an excel file. Data analysis was performed with the "IBM Statistical Package for the Social Sciences for Windows, Version 24.0 (IBM Corp., Armonk, NY)" program. The nationality, age, birth information, blood parameters of the pregnant women, and sex and birth information of the newborns were summarized using descriptive statistics. A Chi-square test was used to compare qualitative data between groups. The normal distribution suitability of the data was evaluated by analytical methods (Kolmogorov-Smirnov and Shapiro-Wilk tests). Comparisons in two groups with parametric conditions were made using the Student's t-test, and comparisons in groups of three or more were made with the One Way Anova test. Data were presented as arithmetic mean ± standard deviation, minimum and maximum value. The Mann-Whitney-U test determined comparisons in the two groups without parametric conditions; comparisons in groups of three or more were made with the Kruskal-Wallis test. Numerical data are presented as median. For statistical significance, the type-1 error level was determined as 0.05.

Results

It was determined that the mean age of the mothers included in the study was 30.28±5.78. The mean age of the children of the mothers included in the study was 2.54±1.97 years. The distribution of children's home accidents according to the descriptive characteristics of mothers is given in Table 1.

Table 1. Distribution of children's home accidents according to the descriptive characteristics of mothers (n=289)

		Children with home accident, n (%)	Children without home accident, n (%)	Total, n (%)	P Value*
Mother's age group	≤30 years old	18 (11.54)	138 (88.46)	156 (53.98)	0.102
	>30 years old	8 (6.02)	125 (93.98)	133 (46.02)	
Mother's educational status	Primary school and below	11 (8.53)	118 (91.47)	129 (44.64)	0.802
	Above primary school	15 (9.38)	145 (90.63)	160 (55.36)	
Mother's working status	Working	4 (8.33)	44 (91.67)	48 (16.61)	0.860
	Not working	22 (9.13)	219 (90.87)	241 (83.39)	
Economical situation	Good	10 (12.99)	67 (87.01)	77 (26.64)	0.351
	Medium	13 (7.78)	154 (92.22)	167 (57.79)	
	Bad	3 (6.67)	42 (93.33)	45 (15.57)	
Number of children	1	11 (12.50)	77 (87.50)	88 (30.45)	0.125
	2	13 (9.56)	123 (90.44)	136 (47.06)	
	≥3	2 (3.08)	63 (96.92)	65 (22.49)	

(*Chi-square Test)

When the scores of the "Scale for Defining the Safety Measures of Mothers for Home Accidents in Children aged 0-6", which measures the knowledge level of mothers about home accidents, were evaluated, the scale score average was found to be 165.56±16.84, and the median value was 166 (min:86, max:199) (Figure 1). The comparison of scale score averages according to the descriptive characteristics of children and mothers is shown in Table 2. In our study, it was observed that the mean score of the scale increased as the educational

status of the mothers increased, and the relationship was found to be significant (p=0.033). The mean scores of the working mothers were higher than the non-working mothers, and the difference was statistically significant (p=0.006). It was determined that the children of 9.00% (n=26) of the mothers included in the study had a home accident in the last two weeks, and 91.00% (n=263) did not have a home accident. The scale score average of mothers whose children did not have a home accident was 165.63±16.70, and the scale score average of mothers whose child had a home accident was 164.85±18.56, and the difference was not statistically significant (p=0.694).

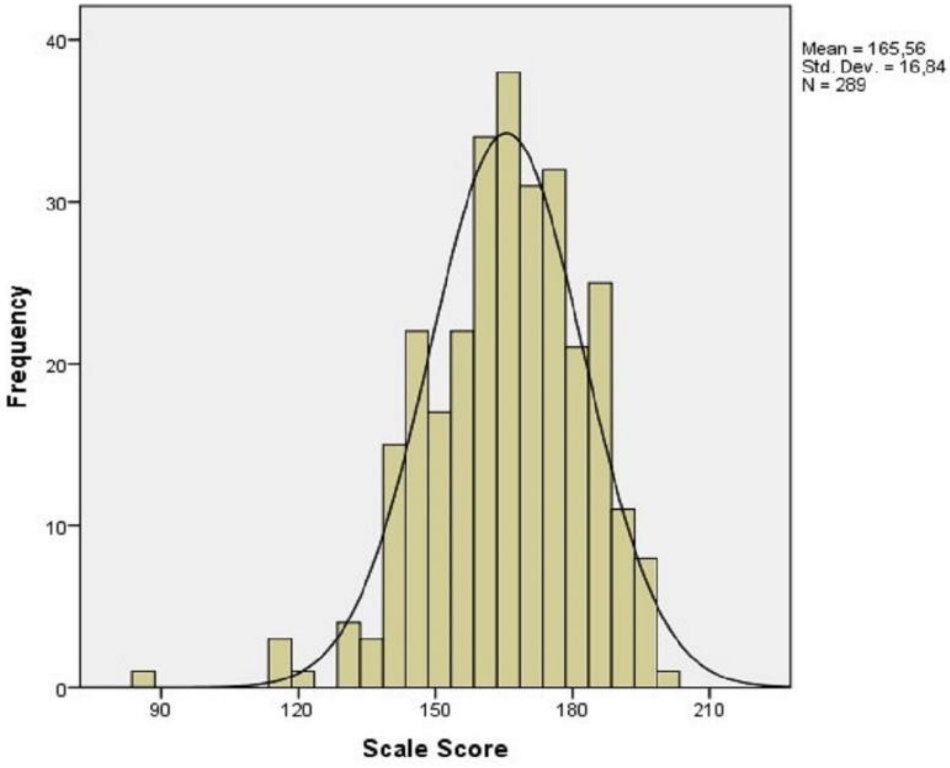

Figure 1. The scale score average for diagnosing safety measures for home accidents

The characteristics of children with home accidents are shown in Table 3. When the types of home accidents experienced by children were examined in the study, they were listed as falls at 65.38%, impacts at 30.77%, and burns at 3.85%. When mothers were asked about the cause of the accidents, 38.46% stated that they were caused by parental neglect and carelessness. When the post-accident health status of the children who had a home accident was examined, it was determined that 88.46% of them showed a full recovery after the injury, and the rest did not have a level of injury that required follow-up.

Table 2. The comparison of scale scores according to the descriptive characteristics of children and mothers (n=289).

		n (%)	Scale Scores, mean±sd	P Value
Gender of the child	Male	148 (51.21)	165.05±17.45	0.601*
	Female	141 (48.79)	166.09±16.27	
Child's age group	0-2	151 (52.25)	165.29±18.31	0.301 †
	3-4	82 (28.37)	164.05±15.85	
	5-6	56 (19.38)	168.50±13.74	
Mother's age group	≤30 years old	156 (53.98)	164.44±15.50	0.219*
	>30 years old	133 (46.02)	166.88±18.26	
Mother's educational status	Illiterate	8 (2.77)	150.00±29.83	**0.033** §
	Literate	11 (3.81)	154.09±13.94	
	Primary school	110 (38.06)	165.43±15.51	
	Middle School	82 (28.37)	165.51±16.98	
	High school	38 (13.15)	166.68±15.46	
	University	40 (13.84)	171.23±16.31	
Mother's working status	Working	48 (16.61)	171.69±16.95	**0.006***
	Not working	241 (83.39)	164.34±16.58	
Economical situation	Very bad	6 (2.08)	169.67±14.35	0.230 §
	Good	71 (24.57)	168.93±18.26	
	Medium	167 (57.79)	164.74±16.78	
	Bad	42 (14.53)	163.07±13.80	
	Very bad	3 (1.04)	158.00±26.00	
Number of children	1	88 (30.45)	167.15±15.58	0.467 †
	2	136 (47.06)	165.39±17.53	
	≥3	65 (22.49)	163.77±17.08	
The person who takes care of the child	Mother own	264 (91.35)	165.02±16.74	0.113 ¶
	Other (caregiver, relative, kindergarten, etc.)	25 (8.65)	171.32±17.15	

(sd: standard deviation, *Student T Test, †One Way ANOVA, §Kruskal Wallis Test, ¶Mann Whitney U Test)

Table 3. Distribution of characteristics related to children's home accidents (n=26)

		n (%)
Gender of the child	Male	11 (42.31)
	Female	15 (57.69)
Child's age group	0-2	16 (61.54)
	3-4	5 (19.23)
	5-6	5 (19.23)
Type of home accident	Fall	17 (65.38)
	Impact	8 (30.77)
	Burning	1 (3.85)
Time of home accident	Morning	5 (19.23)
	Noon	5 (19.23)
	Afternoon	2 (7.69)
	Evening	14 (53.85)
Place of home accident	Kitchen	2 (7.69)
	Living room/Sitting room	10 (38.46)
	Children's room	2 (7.69)
	Balcony/Terrace	3 (11.54)
	Bedroom	2 (7.69)
	Indoor stair	4 (15.38)
	Garden	3 (11.54)
The body area affected by the accident	Head neck	15 (57.69)
	Upper extremity	6 (23.08)
	Lower extremity	5 (19.23)
The person who was with the child during the accident	Friend	5 (19.23)
	Sibling	4 (15.38)
	Mother/Father	15 (57.69)
	Nobody	2 (7.69)
Cause of the accident	Negligence/Carelessness	10 (38.46)
	Lack of protective measures	5 (19.23)
	Play / Mischief	5 (19.23)
	Loss of balance in a child	6 (23.08)
Status of going to the health institution after the accident	Gone, outpatient treatment was given	7 (26.92)
	Gone, hospitalized	1 (3.85)
	Not gone	18 (69.23)
Health status after a home accident	Full recovery	23 (88.46)
	No injuries requiring follow-up	3 (11.54)

Discussion

Home accidents are a public health problem in which society's awareness is important because they are more common among children but because they are preventable. Increasing the awareness of families about the risk factors in home accidents is important to prevent the consequences that may cause disability or death. For this reason, in our study, evaluations were made to question whether the measures against home accidents were taken sufficiently and to understand which measures were preventive in-home accidents.

In the study, the frequency of home accidents in the last two weeks was found to be 9%. In Turkey, the frequency of home accidents in the last two weeks was found to be 14.1% by Kılıç, 18.2% by Boztaş in 0-4 years old, and 19.7% by Karatepe in the 0-6 age group.[17-19] In our study, the incidence of accidents was found to be lower than in other studies. Studies on the subject have shown that essential characteristics of mothers, such as age, educational status, employment status, economic status, and the number of children, affect their children's home accidents.[20-22] In our study, however, no significant difference was found between their children's home accident status according to the mothers' descriptive characteristics (Table 1). In the study of Karatepe, it was shown that the children of mothers who perceived their economic situation as bad had more home accidents.[19] In the study conducted by Kurt, it was determined that the rate of having a home accident was significantly higher for the children of working mothers compared to the children of non-working mothers.[14] The fact that the relationship between the descriptive characteristics of the mothers and the status of their children having a home accident differs in the studies conducted on the subject may be due to the fact that the groups in which the studies were conducted had different socio-cultural and economic characteristics.

In our study, the mean score of the scale for identifying the safety measures of mothers for home accidents was found to be 165.56±16.84. It was found to be 168.00±19.30 in the study of Karatepe, 158.12±1.14 in the study of Erkal, 159.90±14.50 in the study of Altundağ, and it was found be 179.74±12.91 in the study of Gündüz, and this mean scores of the mothers was found to be higher than in our study.[5,15,19,20] When compared with other studies, the scale mean scores of the mothers in our study are similar.

When the mean scale scores of the mothers were compared according to their age groups, it was seen that there was no significant difference between the mean scale scores of the mothers over 30 years of age and the mean scores of the mothers aged 30 years and younger, but it was seen that the mothers over the age of 30 had higher scale mean scores. In the study of Özmen, the mean score of the mothers aged 27 and over was found to be higher than the others.[12] Çiçekler and İnanç also found that the risk of injury in children increased due to the young age of the parents.[23,24] Unlike these studies, in the studies of Erdem and Erkal, a higher mean scale score was observed in young mothers compared to mothers over 30 years of age.[13,20] In our study, when the rates of children who had a home accident in the last two weeks according to the age groups of the mothers were evaluated, it was found that the accident rate was 11.54% in the mothers aged 30 and under, and 6.02% in those over the age of 30. It is known that as the maternal age decreases in childhood accidents, the child's health is at greater risk due to the mother's inexperience.[25] In our study, it was found that mothers whose children had more home accidents were mostly young mothers; At the same time, it was determined that the scale scores were lower.

The study determined that the mean scores of the mothers increased as their education level increased, and the difference was found to be significant. In the study conducted by Boztaş, it was observed that the mean

score of the scale increased as the education level of the mothers increased.[18] In the study of Çiçekler, it was found that mothers who graduated from primary education took more safety precautions for home accidents than mothers who graduated from secondary education and undergraduate education.[23] As the education level of mothers increases, it is expected that children become more conscious about home accidents, predisposing factors for accidents, ways of protection and developmental characteristics of children, and accordingly, their scale score averages are higher than other mothers.

There are different results in studies on the effect of mothers' working status on the scale score averages. In the study of Büyük, it was found that the median score of the mothers who were housewives was higher than that of working mothers, and the difference was significant.[26] In the study of Çiçekler, it was also determined that mothers who are housewives and shopkeepers take more safety precautions against home accidents.[23] In the studies of Karatepe and Şahin, it was found that the working status of the mothers did not affect the mean score of the scale.[19,27] In this study, the scale mean score of working mothers was found to be significantly higher than that of non-working mothers. Similarly, in the study of Gündüz, it is seen that the average scale score of working mothers is higher.[15]

There is no statistically significant difference between the mean score of the mothers whose child is taken care of by persons other than themselves (caregivers, relatives, etc.) and the mean score of the mothers who take care of their child themselves. However, the mean score of the mothers whose children were cared for by persons other than themselves was found to be higher. As it will be remembered, in the study, it was determined that the scale score average of working mothers was significantly higher.

Although the mean score of the mothers whose children did not have a home accident in the last two weeks was higher than the mothers whose children had an accident, the difference was not statistically significant. In the study of Karatepe, the mean score of the mothers of the children who did not have a home accident was found to be higher than that of the mothers of the children who had a home accident.[19] In the study of Özmen, the mean score of the mothers whose children had an accident in the last year was found to be higher.[12] In the studies of Boztaş and Turan, however, no significant difference was found between the status of children having a home accident and the scale mean score of the mothers, as in our study.[9,18] When studies on the subject are evaluated, it can be said that mothers who score higher on the scale take more precautions for accidents and can prevent accidents as a result.

Fall-type accidents are more common in children in this age group due to reasons such as not being mature enough to provide muscle and behavioral coordination despite being active, being open to environmental risks, and not being conscious of dangers.[10,27] When the types of home accidents in children are examined, it has been

found that the most common type of fall accidents is seen in many studies.[4,18,25,28] In our study, it was determined that the most common accident type was falling.

It was determined that the majority of children who had home accidents were in the 0-2 age group. Özmen and Altundağ also found that the incidence of accidents increases as the age of children get younger.[5,12] It is thought that more frequent home accidents in children in this age group may be caused by the fact that they spend more time at home, their curiosity to explore the environment, and their hand skills are not sufficiently developed.

The study found that the head and neck regions and upper extremities of the children who had a home accident were most frequently affected. While the most affected body region was seen as the head region in the studies of Karatepe and Boztaş, it was determined as the hand, arm, and fingers in the study of Kılıç.[17-19] This can be explained by the fact that the most common type of accident in children aged 0-6 years is falling, and the body parts most frequently affected by falls are the head, neck, and upper extremities.[4,18]

In the study, the majority of mothers stated that home accidents were caused by their negligence and carelessness. In their study of Tezcan, it was reported that the cause of the majority of the accidents experienced by the households in the last year was carelessness and inappropriate conditions, respectively; they reported that the most obvious reason for the accidents in the last fifteen days was carelessness.[29] In the studies of Kurt and Karatepe, it was found that accidents often result from parental carelessness.[14,19] It is clear that the risk of home accidents in children will be reduced with the precautions and more attention that families will take at home.[30]

As a conclusion, the study has shown that mothers whose children have not had a home accident have more information about the necessary safety measures to protect their children from home accidents. In addition, it was determined that the awareness of protective measures against home accidents increased with the increase in the education level of the mother. It was determined that the knowledge level of working mothers about the methods of protection from home accidents was higher. It was determined that home accidents were most common in the 0-2 age group. The most frequent home accident was falling, the most common home accident was in the living room, and the head and neck region was most frequently affected by home accidents. Based on this information, considering that the sociodemographic differences of the society affect the risk of home accidents, it is recommended that the child's possible accident probabilities be determined and that the families, especially mothers, play a greater role in the care of their children, should be provided with training that can be given with the relevant professionals about the intervention methods in the face of these situations.

Limitations of the Study

Although we aimed to reduce the limitations related to the recall factor by questioning the home accidents in the last two weeks before the interviews with the mothers, the main limitation of such studies is the collection of information retrospectively, according to the statements of the individuals. In addition, the fact that most of the mothers participating in the study were housewives, so they took care of their children, and the accident status was questioned only on the children brought to the polyclinics may have affected the frequency of accidents.

Ethical Considerations: This study was conducted with the approval of Izmir Katip Çelebi University Non-Interventional Scientific Research Ethics Committee (date:22.02.2017, approval no: 35).

Conflict of Interest: The authors declare no conflict of interest.

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