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Home Accident Awareness: Education Increased Awareness of Mothers with 0-3 Years Child

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Abstract

Purpose: The aim of this research is to improve the awareness of mothers and evaluate the impact of education, to determine the factors affecting the education of mothers with children of 0-3 age group, to determine the factors affecting the education.

Design and Method: The study was carried out experimentally with pre-test post-test control group, in a Family Health Center between July and October 2019, in Iğdır, in Eastern of Turkey. The universe of the study consisted of mothers (S= 103) who applied to family health center for any reason and who met the study criteria. The data were obtained by Personal Information Form and Mother Home Accident Awareness Rating Scale. Children's Home Accidents Training was carried out with the child home accidents training booklet and presentation. The data were evaluated with descriptive statistics, chi-square and variance. Ethical principles were followed.

Results: The mothers in the experimental group had a significantly higher level of awareness of home accidents than the mothers in the control group (p<.001). The awareness of child home accidents was significantly higher among mothers who were university graduates, living in nuclear families, whose income was higher than their expenses, whose mother was between 20-35 years old and who had a 0-3-year-old child (p<.05).

Conclusion: Training of mothers for 0-3 age group children on home accident awareness can be effective in developing their awareness.

Practice implications: Training of mothers for 0-3 age group children on home accident awareness increases their awareness.

Keywords: Awareness • Child • Education • Home accidents • Mother • Nurse

Introduction

Accidents may happen in various ways [1]. Home accidents are called as accidents that happen indoors or in areas near home such as the yard [2]. The frequency of home accidents varies according to countries and age periods and constitutes one guarter of childhood accidents [3].

Accidents rank third in causes of morbidity and mortality among children aged 1-4 in Turkey [3,4]. While the incidence rate of accidents is lower in the age of two, it increases for a period in the age of three and then decreases again at the same rate [5]. Children are vulnerable and cannot protect themselves until the age of three due to their developmental characteristics [6]. As mothers are the closest to their children [7], they are effective in terms of raising awareness of home accidents that may occur among family members, avoiding behaviors that may lead to accidents, raising awareness about measures to take and minimizing the risk of accidents [3,4]. It is crucial to train mothers on the measures to take for reducing the possibility of children to get hurt. For that purpose, making little arrangements indoors to minimize the accidents and sustaining the training to be provided mothers who spend more time with their children will play a key role for children to continue their life in a healthy way [8,9].

Study hypothesis

H_{1.} Training mothers with children aged 0-3 on home accidents that happen among children raises awareness of child home accidents.

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Research question

 $\mathbf{Q}_{1}\text{:}\ \mathsf{Do}\ \mathsf{the}\ \mathsf{characteristics}\ \mathsf{of}\ \mathsf{mothers}\ \mathsf{with}\ \mathsf{children}\ \mathsf{aged}\ \mathsf{0-3}\ \mathsf{affect}\ \mathsf{the}\ \mathsf{home}\ \mathsf{accidents}\ \mathsf{awareness?}$

Methodology

The study was conducted experimentally with pretest-posttest control group in a family health center in the eastern Turkey between July and October 2010

The population of the study consisted of mothers who applied to the aforementioned family health center for any reason between January and October 2019, had children aged 0-3, reported no health problem for themselves and their children and were in reproductive age. Power analysis was conducted for the sample size. In the relevant literature, no similar study with intervention aimed at determining the home accidents awareness of mothers, was encountered. In the study, it was determined that it was necessary to study with at least 54 mothers and have 27 individuals in the groups at the significance level of 5% and effect size of 0.25, in order to exceed 95% in determining the power (df= 52; F= 4.027).

Personal information form

This 13-item form includes questions about personal, occupational and familial characteristics of parents and was prepared by the researcher in accordance with the literature [1-19].

Home accidents awareness scale for mothers

The Home Accidents Awareness Scale for Mothers was developed to compete the interest of mothers with children aged 0-3 years about their accidents.

The scale comprises fifty-five likert type items by which mothers are expected to state their agreement or disagreement about home accidents awareness by statements rated from one point to five points (1: Strongly Disagree, 2: Disagree, 3: Uncertain, 4: Agree, 5: Strongly Agree). In the scale there are no reverse items. The Alpha coefficient for the Home Accidents Awareness Scale for Mothers was calculated as .968.

Groups: As the study was conducted concurrently in the experimental and control groups, the possibility for the control group mothers to contact with the experimental group mothers and to be informed of the training might pose an ethical problem and thus, it was decided to not perform the group studies in the same period. Due to this condition, the order of the groups worked was determined randomly by lot and the study was first applied to the control group.

In the control group, the pretest and posttest information was collected between July-August 2019. After completing the posttest information, a home accidents training manual and presentation were applied to the control group. This application was performed on 52 mothers.

In the experimental group, the pretest data were collected in July 2019. After collecting the posttest data in the control group in August 2019, home accidents training was provided to the mothers in the experimental group. Their questions were answered and a training manual was distributed to them. A total of four trainings were applied once in every week. The duration of the training was determined as 20 minutes. The posttest data of the mothers in the experimental group were collected on 15 October 2019. This group comprised of 51 mothers.

In the two groups, the pretest data were collected via the Personal Information Form and Home Accidents Awareness Scale for Mothers and the posttest data were collected only via the Home Accidents Awareness Scale for Mothers.

Data assessment: The study data were analyzed via the SPSS for Windows 22.0 program and AMOS 21 program (Table 1).

Participants

It was found that the mothers in the experimental and control groups had similar characteristics (p>.05). It was determined that 52.9% of the mothers in the experimental group had one child, 76.5% became a mother at the age of 20-35, 84.3% had one child aged 0-3, 56.9% experienced home accidents, 52.9% had a child who experienced home accidents, 51% had a child who

was not hospitalized for any reason and 98% was not hospitalized due to home accidents. 50% of the mothers in the control group had one child, 73.1% became a mother at the age of 20-35, 88.5% had one child aged 0-3, 55.8% experienced home accidents, 40.4% had a child who experienced home accidents, 53.8% had a child who was not hospitalized for any reason, and 98.1% were not hospitalized due to home accidents. It was found that the mothers in the experimental and control groups had similar motherhood characteristics (p>.05) (Figure 1) .

Findings

It was determined that the home accidents awareness mean score of the mothers in the experimental and control groups was 4.18 \pm .54. The mean score was found to be 4.09 \pm .65 for the subscale of awareness of falls, 4.31 \pm .55 for the subscale of awareness of burns, 4.11 \pm .65 for the the subscale of awareness of drownings and poisonings and 4.29 \pm .56 for the the subscale of awareness of cutting and drilling tool injuries (Table 2).

It was determined that there was no difference between the pretest home accidents awareness mean scores of the mothers in the experimental and control groups; however, the mean scores in the control group were higher (p>.05). Awareness of the mothers in the experimental group was significantly higher than the control group, compared to the posttest mean scores (p<.001) (Table 3).

It was determined that there was no difference between the pretest home accidents awareness subscale mean scores of the mothers in the experimental and control groups, except for the burns (p>.05) and the posttest awareness mean scores of the mothers in the experimental group were significantly higher compared to the control group (p<.001) (Table 3).

In the intragroup comparison, it was found that there was a significant difference between the home accidents awareness mean scores of the mothers in the experimental group, including the subscales and the scores increased in the posttest. Likewise, there was a significant difference between

Parameters Evaluated

Determining the Demographic Characteristics

Percentage Distribution
Mean

* Chi-square

• z test
• t test

Table 1. Parameters Used and Tests Applied in the Study.

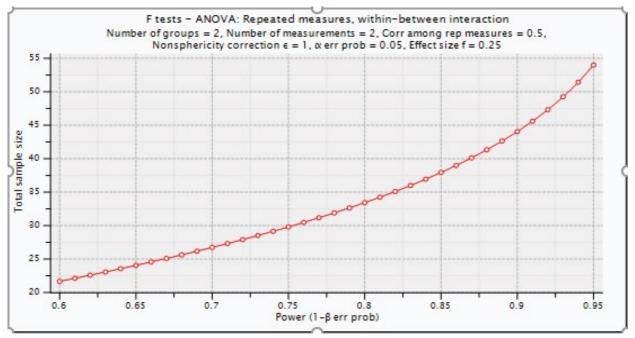


Figure 1. Power analysis diagram (Süt, 2011).

Table 2. Distribution of mothers in terms of their descriptive characteristics (N=103).

			Experimental Group (N=51)		Control Group (N=52)		otal =103)	Test and p	
	Characteristics	S	%	S	%	s	%		
	25 and younger	7	13.7	14	26.9	21	20.4	2 0 000	
Age Group	26-30	17	33.3	19	36.5	36	34.9	χ²=3.826 p=.148	
, 150 Stoub	31 and older	27	52.9	19	36.5	46	44.7		
	Literate and primary school	23	45.1	19	36.5	42	40.8	χ²=1.012	
Anthony - Edward and Lovel	Secondary school and high school	17	33.3	22	42.3	39	37.8	p=.603	
Mother's Education Level	University	11	21.6	11	21.2	22	21.4		
Mother's Employment	Unemployed	44	86.3	41	78.8	85	82.5	χ²=.985	
	Employed	7	13.7	11	21.2	18	17.5	p=.321	
Family Type	Nuclear Family	39	76.5	37	71.2	76	73.8	χ^2 =.376 p=.540	
	Extended Family	12	23.5	15	28.8	27	16.2	μ=.040	
	Income less than expenditure	13	25.5	15	28.8	28	27.2	χ²=3.214	
Income Level	Income equal to expenditure	33	64.7	26	50.0	59	57.3	p=.200	
	Income higher than expenditure	5	9.8	11	21.2	16	15.5		
Casial Casurity	Available	46	90.2	41	78.8	87	84.5	χ ² =2.528 p=.112	
Social Security	N/A	5	9.8	11	21.2	16	15.5	ν112	

Table 3. Home accidents awareness levels of the mothers in the experimental and control groups.

Danie.	Have Novelan	The scale's	The study's		
Scale	Item Number	Min Max.	MinMax.	X ± SD	
Awareness of falls					
	20	1-5	2.05-5	4.09 ± 65	
Awareness of burns					
	13	1-5	2.46-5	4.31 ± .55	
Awareness of drownings and poisonings					
	15	1-5	2.13-5	4.11 ± .65	
Awareness of cutting and drilling tool injuries					
	7	1-5	3-5	4.29 ± .56	
Mothers' home accidents awareness					
Overall	55	1-5	2.60-5	4.18 ± .54	

the mean scores of the mothers in the control group and the scores increased in the posttest (p<.001) (Table 3).

In the study, it was observed that the mean scores of awareness of falls subscale of child home accidents awareness scale were significantly higher in the mothers who were university graduate and living in a nuclear family (p<.05). The mean scores of child home accidents awareness scale and awareness of falls subscale were significantly higher in the mothers who had an income higher than expenditure (p<.05). Mean scores of the awareness of drownings and poisonings subscale of child home accidents awareness scale were significantly higher in the mothers who became a mother at the age of 20-35 (p<.05). The child home accidents awareness scale and awareness of

falls subscale mean scores were significantly higher in the mothers who did not experience home accidents (p<.05). Mean scores of awareness of falls subscale of the child home accidents awareness scale were significantly higher in the mothers whose children did not experience home accidents (p<.05) (Table 4).

It was determined that mean scores of the child home accidents awareness and awareness of falls, awareness of burns, awareness of drownings and poisonings subscales were significantly higher in the mothers whose children were never hospitalized, (p<.05)

(Table 4).

Table 4. Comparison of the intragroup and intergroup pretest-posttest mean scores of the home accidents awareness scale for mothers and its subscales (N=103).

HAASM		Experimental Gr. (N=51)		Control Gr.(N=52)			
		X ± SD	Min-Max.	$\overline{X} \pm SD$	Min-Max.	Test and p	
Scale Total Score	Pretest	4.08 ± .56	2.60-4.87	4.27 ± .50	3.04-5.00	t=1.786 p=.077	
	Posttest	4.77 ± .23	3.93-5.00	4.33 ± .48	3.11-5.00	t=5.836 p=.000	
	Test and p	t=12.600 p	=.000	t=5.33	34 P=.000		
		Falls					
8	Pretest	3.98 ± .68	2.05-4.90	4.21 ± .61	2.85-5.00	t=1.764 p=.081	
	Posttest	4.73 ± .29	3.80-5.00	4.30 ± .58	2.90-5.00	t=4.771 p=.000	
	Test and p	t=11.989 p	=.000	t=5.99	_{90 p} =.000		
		Burns					
	Pretest	4.16 ± .58	2.46-5.00	4.46 ± .47	2.77-5.00	t=2.828 p=.006	
	Posttest	4.83 ± .20	4.00-5.00	4.50 ± .44	3.08-5.00	t=4.722 p=.000	
	Test and p	t=181.406 ¡	p=.000	t=3.30	01 p=.002		
Subscales		Drownings and Poisoning	gs				
Ins .	Pretest	4.08 ± .62	2.67-5.00	4.15 ± .68	2.13-5.00	t=.595 p=.553	
	Posttest	4.75 ± .28	3.80-5.00	4.20 ± .66	2.40-5.00	t=5.444 p=.000	
		t=10.782 p	=.000	t=3.52	21 p=.001		
	(Cutting and Drilling Tool Inju	uries				
	Pretest	4.22 ± .53	3.14-5.00	4.35 ± .58	3.00-5.00	t=1.103 p=.273	
	Posttest	4.80 ± .21	4.29-5.00	4.37 ± .57	3.14-5.00	t=4.905 p=.000	
		t=8.776 p=	=.000	t=1.69	96 p=.096		

Discussion

It is known that among child age groups, children under the age of five are exposed to injuries as a result of home accidents at a higher rate and the incidence of home accidents decreases as a result of applying the programs aimed at reducing home accidents [20].

In the assessment and evaluation literature it is reported that the four-point width in the scale score is divided into five equal parts (4/5=0.8) and 1.00-1.79 points indicate "very low" level, 1.80-2.59 points indicate "low" level, 2.60-3.39 points indicate "medium" level, 3.40-4.19 points indicate "high" level and 4.20-5.00 points indicate "very high" level [21]. In accordance with the literature, it can be asserted that the mothers in the study had knowledge of home accidents and home accidents awareness was high in the subscales of awareness of falls, awareness of drownings and poisonings and very high in the subscales of awareness of awareness of burns and cutting and drilling tool injuries subscales.

In the study, it was determined that the mothers in the experimental group had significantly higher home accidents awareness after the training, compared to the control group (p<.001). Matching results have been obtained in similar studies. In a study, it was found that home visits and training provided to mothers to prevent childhood home accidents improved knowledge, attitudes and applications in the experimental group [22] and the training increased the home accidents safety measure levels of mothers with children aged 1-3 and under the age of five [23-26] . Likewise, in another study it was determined that majority of the mothers of children who experienced home accidents were uninformed or untrained about home accidents [7]. In addition, it was found that after training the mothers of children applying with home accidents on safety measures aimed at preventing home accidents, the possibility for children to experience home accidents again in six months decreased by 7.2% [27].

In the study, it was determined that awareness of falls subscale among the home accidents subscales was significantly higher in the mothers in the experimental group after the training, compared to the control group (p<.001). In the previous studies it was determined that falls ranked first among children [28-34]. Indeed it was determined that children aged 0-5 mostly experienced

home accidents like falls [35] and majority of children having accidents fell in the hall [36]. In another study investigating falls, a positive change was observed in conditions that could be changed easily indoors such as having a mat to prevent slipping on the bathroom floor, the slipping possibility of carpets and putting the child's toys in a different place during home visits before and after the training [37].

Burns rank second among home accidents experienced by children [33,35]. It is a known fact that inflammable matters like lighter are usually left exposed [38] and hot foods and drinks can usually be reached by children [39]. In a study investigating the accident risks awareness of mothers by using kitchen images, keeping the pan handlers in front of the stove ranked second and not keeping electric cables out of reach of children and not wrapping the electric socket ranked fourth [36]. In the study, it was determined that awareness of burns which is among the home accidents subscales, was significantly higher in the mothers in the experimental group after the training, compared to the control group (p<.001). Also in another study it was found that the training provided to mothers to prevent and protect from burns, increased their safety measures In the study, it was determined that awareness of drownings and poisonings which is among the home accidents subscales, was significantly higher in the mothers in the experimental group after the training, compared to the control group (p<.001). As is known, cleaning materials are not usually kept out of reach of children and are kept in plastic bottles [40]. In a study investigating the accident risks awareness of mothers by using kitchen and kid's room images, leaving cleaning materials exposed and available ranked third and leaving batteries exposed ranked first. Among the measures taken by mothers to prevent accident risks in kid's room images, not leaving batteries exposed ranked first [36]. In another study, it was found that there was a significant improvement in the measures taken against situations that might cause drownings, foreign body aspirations and poisonings indoors before and after the training [35]. Among the measures taken by mothers to prevent drug poisonings, hiding the drugs and keeping them out of reach of children ranked first and these behaviors consolidated after the training [18].

In the study, it was found that awareness of cutting and drilling tool injuries subscale among the home accidents subscales was significantly higher in the mothers in the experimental group after the training, compared to the control group (p<.001). In a study, not keeping the knives out of reach of children ranked first [36]. Additionally it is known that kitchen accidents are usually caused by leaving cutting and drilling tools exposed [41]. In a similar study, it was determined that cutting tools in home environment were not kept in a safe place and chemical substances were not kept out of reach of children [42]. In another study, it was found that there was a significant improvement in taking measures against situations that might cause cutting and drilling tool injuries indoors before and after the training [37].

In the study, it was determined that there was a significant difference between the home accidents awareness mean scores of the mothers in the experimental group, including the subscales in the intragroup comparison and the scores increased in the posttest (p<.001). In the studies, it was found that the training provided to mothers to prevent childhood home accidents significantly improved the knowledge, attitudes and applications in the experimental group [43-45] and the training increased the home accidents safety measure levels of mothers with children aged 1-3 and under the age of five [23,24,37]. It was reported that the trainings successfully and effectively raised awareness in mothers to take measures against home accidents [22].

In the study, it was determined that there was a significant difference between the home accidents awareness mean scores of the mothers in the control group, including the subscales in the intragroup comparison and the scores increased in the posttest (p<.001). In similar studies, however, it was found that there was no change or significant difference in the control group in the intragroup pretest-posttest comparison [25]. The difference determined in the present study might have caused from the fact that awareness of the mothers raised in after the pretest application of the scale during the data collection process.

In the study, it was determined that awareness of falls scale was significantly higher in the university graduate mothers (p<.05). Also in some studies it was seen that as the educational level of parents increased, the safety measure levels for home accidents increased [40,45-49]. In some other studies, it was determined that as the educational level increased, home accidents awareness and measure behaviors decreased [50, 51]. and children were exposed to home accidents more often [52].

In the study, it was determined that the mean score of awareness of falls subscale, was significantly higher in the mothers living in a nuclear family (p<.05). Also similar findings were found in the studies and it was determined that children living in extended families had a higher accident risk [15,37,44].

In the study, it was determined that the mean score of awareness of falls subscale was significantly higher in the mothers who had an income higher than expenditure (p<.05). In the literature, there is no result that is specifically compatible with this finding. This result, as is determined in the study, was thought to be due to the fact that the mothers who had an income higher than expenditure had awareness of falls, considering that higher education level might be associated with higher income. Similarly when examining the literature related to home accidents in general, it was determined that children of families with low socioeconomic level experienced home accidents more often [15.44.45.52-54].

In the study, it was determined that the mean score of awareness of drownings and poisonings subscale was significantly higher in the mothers who became a mother at the age of 20-35 (p<.05). In the literature there is no result that is specifically compatible with this finding. In contradistinction to the study finding, the advancing age of mothers was associated with increasing number of children and it was indicated that as their experiences increased, home accidents safety measure levels generally increased [37,50-52,55].

In the study, it was determined that the mean score of awareness of falls subscale was significantly higher in the mothers who did not experience home accidents (p<.05). As there is no study in the literature concerning this finding, this result was thought to be associated with the fact that the mothers had higher home accidents awareness in general.

In the study, it was determined that the mean score of awareness of falls subscale, was significantly higher in the mothers whose children did not

experience home accidents (p<.05). As in the previous finding of the study, this result was thought to be associated with the fact that the mothers had higher home accidents awareness in general. Some studies are supportive and have showed that mothers, whose children have not experienced home accidents, have generally higher home accidents awareness [4,53]. Some studies have found that mothers whose children have experienced home accidents, have higher awareness levels [33,48,56,57]. These results indicate that children's home accident experience increases the awareness of mothers.

Conclusion

In the study, the home accidents training for mothers significantly increased the awareness of the mothers in the experimental group against home accidents and the awareness of falls, awareness of burns, awareness of drownings and poisonings, and awareness of cutting and drilling tool injuries subscales. The hypothesis "Training mothers with children aged 0-3 on home accidents that happen among children raises awareness of child home accidents was supported. Although the home accidents awareness overall and subscale mean scores of the mothers were found to be higher, the awareness of falls subscale was found to be lower, which may necessitate paying a greater attention to the issue of falls in home accidents trainings. The fact that the home accidents awareness posttest mean scores were higher on behalf of the mothers in the experimental group compared to the control group, indicates that mothers need to be trained on home accidents awareness in children aged 0-3.

Regarding the question "Do the characteristics of mothers with children aged 0-3 affect the home accidents awareness?", it was determined that some characteristics of the mothers affected awareness. The fact that the child home accidents awareness was significantly lower in the mothers, who were not university graduate, lived in an extended family, had an income less than expenditure and equal to expenditure, became a mother before the age of 20, and had two and more children aged 0-3, may necessitate paying a greater attention to mothers with these characteristics.

Conflicts of Interest

The authors certify that they have no affiliation with or involvement in any organisation or entity with a non-financial interest or stake in the subject matter of this manuscript. The authors did not receive any specific funding for this work

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