A STUDY TO ASSESS THE KNOWLEDGE ON SHAKEN BABY SYNDROME AMONG CARE GIVERS OF YOUNG CHILD IN MCH CENTRE, TIRUPATHI

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ABSTRACT

Introduction: Shaken baby syndrome is a serious brain injury caused by forcefully and violently shaking a baby. The National Center on Shaken Baby Syndrome reported that > 500 shaken baby syndrome cases, either fatal or nonfatal, occurred in the U.S., the District of Columbia, 2013-2014. Objective: To assess the level of knowledge on shaken baby syndrome and its prevention among care givers of young child. Design: Descriptive research design was used. Participants: 100 care givers of young child were selected using Convenient sampling technique in Para area of MCH centre Tirupathi. Tool: Structured Questionnaire with 10 questions was used to assess the level of Knowledge of care givers of young child regarding shaken baby syndrome. 10 dichotomous questions used to assess the level of Knowledge on prevention of Shaken baby syndrome among care givers of young child. Results: The findings of the study revealed that 45%(45) had inadequate knowledge, 26%(26) had moderate knowledge and 29% (29) had adequate knowledge on shaken baby syndrome, 14%(14) care givers of young child had inadequate knowledge, 36%(36) had moderate knowledge and 50% (50) care givers adequate knowledge on prevention of shaken baby syndrome. Conclusion: The care givers of young child having moderate knowledge on shaken baby syndrome and its prevention. The nurses in the hospital should work out a plan for educational programmes based on their level of knowledge. A wide spread network should be provided, which should focus on the improving the knowledge of shaken baby syndrome. The study will help the health care personnel to conduct health education session for care givers of a child on shaken baby syndrome and its prevention.

INTRODUCTION

Shaken baby syndrome (SBS) is defined as vigorous manual shaking of a child who is being held by the extremities or shoulders, leading to whiplash-induced intracranial and intraocular bleeding with no external signs of head trauma. Shaken baby syndrome should be suspected in child with a wide spectrum of clinical signs and symptoms. The classic findings of SBS are retinal hemorrhages, usually bilateral, and intracranial injury. One third of the victims of SBS survive with few or no sequelae, one third suffer permanent injury, and one third die. Parental behaviours, environmental factors, and child characteristics all may contribute to a shaking event. Shaken baby syndrome is preventable. Help is available for parents who are at risk of harming a child. Parents also can educate other caregivers about the dangers of shaken baby syndrome.

Need for the study: Shaken baby syndrome is the medical term used to describe the injuries resulting from shaking an young child. Introduced in medical literature in 1972, shaken baby syndrome occurs when a child is shaken violently as part of an adult or caregiver’s pattern of abuse or because an adult or caregiver momentarily succumbs to the frustration of having to respond to a crying baby. Shaken baby syndrome is a clearly definable medical condition. A proper response requires integration of specific clinical management and community intervention in an interdisciplinary fashion. It is likely that most children with Shaken Baby Syndrome will require special services for the duration of their lives. These services may include health and mental health care, speech and language, infant stimulation, rehabilitation and special education. Additional supports such as residential placement, adapted housing and employment advocacy may also be needed. Long-term effects are experienced by birth, adoptive and foster families of children affected by Shaken Baby Syndrome. Non-abusing parents may require additional support from health, social and legal services. According to the National Center on Shaken Baby Syndrome, doctors often fail to recognize the causes of head trauma in children who were victims of shaken baby syndrome because the children usually do not exhibit external signs of injury. In a study done by the National Center, researchers found that if a child had normal respiration, no seizures, no facial or scalp injury, and came from an intact family, the probability that abusive head trauma would be recognized was less than one in five (2015).

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MATERIALS AND METHODS

A Descriptive research design was used to assess the knowledge regarding Shaken baby syndrome among care givers of young child in MCH centre, Tirupathi. 100 care givers of young child were selected using Convenient sampling technique. Structured Questionnaire with 10 questions was used to assess the level of Knowledge of care givers of young child regarding shaken baby syndrome. 10 dichotomous questions used to assess the level of Knowledge on prevention of Shaken baby syndrome among care givers of young child in MCH centre, Tirupathi.

RESULTS

Findings revealed that the Mean and standard deviation scores on Knowledge on Shaken Baby Syndrome among care givers of young child were 5.58 and 2.63 and Knowledge on prevention of Shaken Baby syndrome were 7.37 and 2.97

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