



Assessing the Knowledge and Attitude of Mothers Regarding the Importance of Playing among Children at a Selected Hospital in Thrissur with a View to Develop an Information Booklet

Christy Joy¹, Donamol.P.Jolly², Greeshma Radhakrishnan³, Jainy George⁴, Jesni Jose⁵, Jincy Paulose⁶, Kavya Biju.K^{7*}, Saranya S⁸

¹⁻⁸Aswini College of Nursing, Thrissur, Kerala, India

ABSTRACT

The present study aims to assess the knowledge and attitude of mothers regarding the importance of play among children at a selected hospital in Thrissur, with a view to develop an information booklet. The objectives of the study is to assess , to correlate , to associate the level of knowledge and attitude of mothers regarding the importance of play with selected demographic variables and to develop an information booklet on the importance of play. A descriptive study was conducted on 50 mothers of infants at Aswini Hospital Thrissur and samples were selected by using purposive sampling technique. The tool used for the study was structured knowledge questionnaire to assess the knowledge and attitude of mothers regarding importance of play among children. The study revealed that 24(48%) mothers have moderate knowledge whereas 26 (52%) mothers have poor knowledge, none of them have adequate knowledge and majority of mothers 36 (72%) have favorable attitude regarding the importance of play and remaining 14 (28%) have unfavorable attitude regarding importance of play. The analysis shows there is a significant association between knowledge of mothers regarding importance of play among children with selected demographic variables such as age and religion and no association between knowledge with other demographic variables. There is no significant association between attitude with demographic variables and correlation between knowledge and attitude of mothers regarding importance of play among children.

KEYWORDS

Importance; Play; Knowledge; Attitude

Date Received: 31/10/2018

Date Revised: 10/03/19
© Greentree Group Publishers

Date Published: 15/03/2019



INTRODUCTION

The newborn opens their eyes to the beautiful world with their cry. It is the one and only time when we will be happy when seeing them cry. As the days progress they will show their acceptance of this world through a social smile.

Gradually children will try to conquer the world or will show their presence by holding our hands with their little fingers and will show their love by holding our hands tightly. After one year they will consider their home as their own world. It is clearly evident that the babies will start playing from their birth itself. Each milestone of their growth and development clearly show their own play behavior.

Play is one of the many ways in which children learn. It helps to build self-worth by giving a sense of his or her own abilities and to feel good about them. In turn, play helps children to develop the ability to concentrate¹.

Through play children learn about their world and how to deal with this environment of objects, time, space, structures and people. From the developmental point of view, pattern of children's play can be categorized according to the content and social character².

Activities of playing serve to exercise the muscles, result in motor coordination and control of strong muscles. Play brings many emotional values to the child; through play child can relieve emotional tension as it offers an outlet to express his natural instincts and emotions. Development of moral values takes place as children interact with other children at play and it is an important medium for the moral education of the child².

Newborns (birth to 28 days) try to learn about the world around them. They love to look at faces, recognize the voice, especially their mothers'. They are onlooker players, in which babies watch others at play but do not engage in it³.

Solitary play starts in infancy (29 days to 1 year) when children start to play on their own. They enjoy the presence of other children but make no effort to get close or speak to them and their interest is centered on their own activity³.

Parallel play is important as a transitory stage for the development of social maturity which is a key to later stages of play. This stage really starts to lay the ground work for the more complex social stages of play. It is clearly evident in toddlers (1 to 3 years) that they will play side by side from one another with a lack of group involvement. The preschool age (3-6 years) is a time for rapidly growing independence. Associative play is a form of play



commonly seen in preschoolers in which they participate in similar activities without formal organization, group direction and interaction or a definite goal³.

In Schoolers (6 to 12 years) the play is cooperative, team play or group play. It is an organized play in children. The cooperative play fosters an important skill that the child will use their entire life such as sharing, following instructions and taking turns. Adolescence is transitional phase of physical and psychological development. In adolescents (12-19 years) the type of play is competitive play³.

Play is an important aspect of children's development and its value to education has been widely explored. Growth and development become increasingly differentiated and increasingly integrated. Around the age of 3, boys become more proficient than girls at play that requires strength, such as throwing a ball at a distance. But 3 year old girls are more skilled in most activities that do not require power⁴.

During play with others, children learn leadership skills by directing the action or by following a leader. Each child's behavior in play develops in stages. It starts as onlooker behavior, solitary play, parallel activity, associative play and cooperative play. Play is a cherished part of childhood that offers important developmental benefits.

Through play muscular and sensory abilities are developed. Infants and young children develop their sensory abilities through the tactile, visual and auditory sensations derived from playing with rattles, balls and other toys. Play helps to understand the special relationships, to do abstract thinking and to engage in problem solving activities. Playful behavior appears to have positive effects on the brain and on a child's ability to learn⁵.

A study conducted on play, stresses that play comes naturally to all children and through play the children learn best. It is invaluable in promoting their all-round development. Play provides opportunities to express their ideas and feelings easily to explore the world around them as well as to build social relations and learn socially desirable behavior⁵.

A study was conducted on the need of play, revealed that play is widely regarded as essential part of childhood and its significance has been idealized. It is a mode of learning. Even though mother is aware of her child's play, she is not fully aware about the developmental milestones attained through her child's play. From our clinical experiences we understood that mothers are not aware of play needs of their children, as we have seen that mothers will not allow their children to play during illness. Only through play a child can attain age appropriate milestones. We identified that



the mothers are not fully efficient to identify the milestones which are achieved through play. The best method to identify the characteristic play behavior in children is free play. Through free play the child only shows age appropriate characteristics of play⁶.

Play allows children to create and explore a world they can master, conquering their fears while practicing adult role. As they master their world play helps the children to develop new competition that lead to enhanced confidence and resiliency to face future challenge. Early play behaviors may provide important information regarding later diagnosed developmental delays.

MATERIALS AND METHODS

A quantitative approach was used in this study, since the investigator aimed to describe the knowledge and attitude of mothers regarding importance of play among children.

Research design can be defined as a blue print to conduct a research study which involves the description of research approach, study setting, sample size, sampling techniques, tools and methods of data collection and analysis to answer specific research questions for testing research hypothesis. For the present study, descriptive survey research design was adopted in this study. The investigator tends to assess the knowledge and attitude of mothers regarding importance of play among children.

Variables are the qualities, properties or characteristics of person, things or situation that change or vary. The variables in the study are research variables and demographic variables⁸.

The research variables are:

- Knowledge of mothers regarding importance of play among children
- Attitude of mothers regarding importance of play among children.

The demographic variables are

Age, religion, education, occupation, monthly income of family, area of residence, number of children and previous source of information.

Setting of the study

Setting refers to the physical location for conducting research. It can be natural, partially controlled or highly controlled⁸. The study was conducted in Aswini hospital Pvt. Ltd. It is a 300 bedded multi speciality hospital.

The setting of the study was conducted at pediatric out-patient departments and pediatric wards of Aswini hospital, Thrissur. 50 mothers were selected for the present study.



Population of the study

Population includes all possible elements that could be included in research¹¹.

Target population –Total number of people or objects which are meeting the designated set of criteria.

For the present study- all mothers of infants in Thrissur

Accessible population-It is the aggregate of cases that conform to designated criteria and are also accessible as subjects for a study.

For the present study - all mothers of infants in Aswini hospital, Thrissur.

Criteria for sample collection

The mothers of infants at Aswini hospital, Thrissur were treated as the samples for present study.

The samples were selected by purposive sampling technique.

Inclusion criteria

- Mothers of infants
- Those who are willing to participate in the study
- Available at the time of data collection.

Exclusion criteria

- Mothers who are not willing to participate in the study
- Mothers who cannot read Malayalam
- Mothers who had psychiatric problems.

Sample size of the study

“Sampling is a subset of population selected to participate in a research study¹¹”. The sample size of the present study was mothers of infants in Aswini Hospital, Thrissur and the sample size was 50.

Sampling technique

“Sampling is the process of selecting a portion of the population to represent the entire population¹¹”. The sample was purposefully selected such as mothers of infants. Hence purposive sampling technique was adopted for the study.

Tool

Nursing studies require the availability of an extensive array of measurement tools. For the present study following tools are used:

Section A: Socio demographic variables of mothers.



Section B: Structured knowledge questionnaire on importance of play among children.

Section C: Five point Likert Attitude scale on importance of play among children.

Section D: Information booklet on importance of play among children.

Description of the tool

The study was aimed to assess the level of knowledge; attitude of mothers regarding importance of play among children. The tool used for the present study was structured knowledge questionnaire to assess the knowledge and five point Likert attitude scale to assess the attitude of mothers regarding importance of play among children at a selected hospital.

It consists of two sections:

Section A- Socio demographic variables of mothers

It includes age, education, occupation, monthly income, area of residence, number of children and previous source of information. Description on association between levels of knowledge of mothers regarding importance play among children with selected demographic variables.

Table 1 Description of association on level of knowledge regarding importance of play among children with their selected demographic variables
N=50

S.No.	Demographic Variables	χ^2	TV Value	Level of significance
1.	Age of mothers	11.81*	3.84	Significant
2.	Religion of mothers	9.33*	3.84	Significant
3.	Education of mothers	0.27	3.84	Non- significant
4.	Occupation of mothers	0.26	3.84	Non-significant
5.	Monthly income of mothers	0.21	3.84	Non-significant
6.	Area of residence of mothers	1.01	3.84	Non-significant
7.	Number of children	1.92	3.84	Non-significant
8.	Previous source of information	0.93	3.84	Non-significant

*Significant at 0.05 level

The above table (1) illustrates that, there was a significant association between knowledge of mothers regarding importance of play with demographic variables such age and religion of mothers. Hence research hypothesis is accepted whereas null hypothesis is rejected. And also the above table depicts that, there was no significant association between knowledge of mothers regarding importance of play with demographic variables such as education, occupation, monthly income, area of residence, number of children and previous source of information. Hence research hypothesis is rejected and null hypothesis is accepted

Section B –Structured knowledge questionnaire on importance of play

It consists of structured knowledge questionnaire on importance of play. The structured knowledge questionnaire contains 30 multiple choice questions which is having 4 alternatives and 5 parts.



Description on association between attitudes of mothers regarding importance play among children with selected demographic variables.

Table 2 Association of level of attitude regarding importance of play among children with their selected demographic variables **N=50**

S. No.	Demographic Variables	χ^2	TV Value	Level of significance
1.	Age of mothers	0.890	3.84	Non-significant
2.	Religion of mothers	0.017	3.84	Non-significant
3.	Education of mothers	1.586	3.84	Non-significant
4.	Occupation of mothers	0.004	3.84	Non-significant
5.	Monthly income of mothers	0.283	3.84	Non-significant
6.	Area of residence of mothers	0.029	3.84	Non-significant
7.	Number of children	2.008	3.84	Non-significant
8.	Previous source of information	1.761	3.84	Non-significant

*Significant at 0.05 level

The tables (2) illustrate that, there was no association between attitude of mothers regarding importance of play with selected demographic variables such as age, religion, education, occupation, monthly income, area of residence, number of children and previous source of information. Hence the null hypothesis is accepted and research hypothesis is rejected.

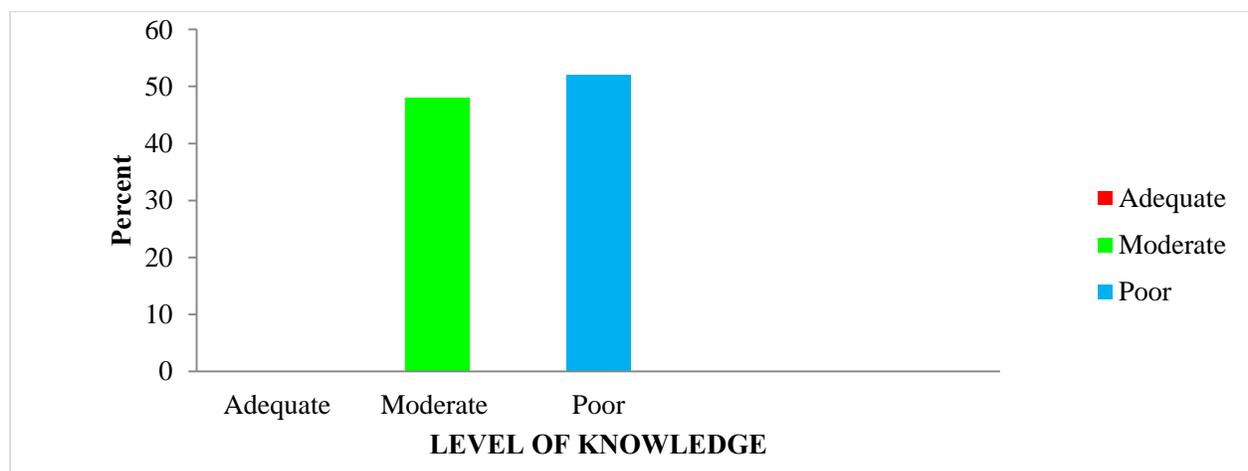


Fig.6 Percent distribution of level of knowledge of mothers regarding importance of play among children

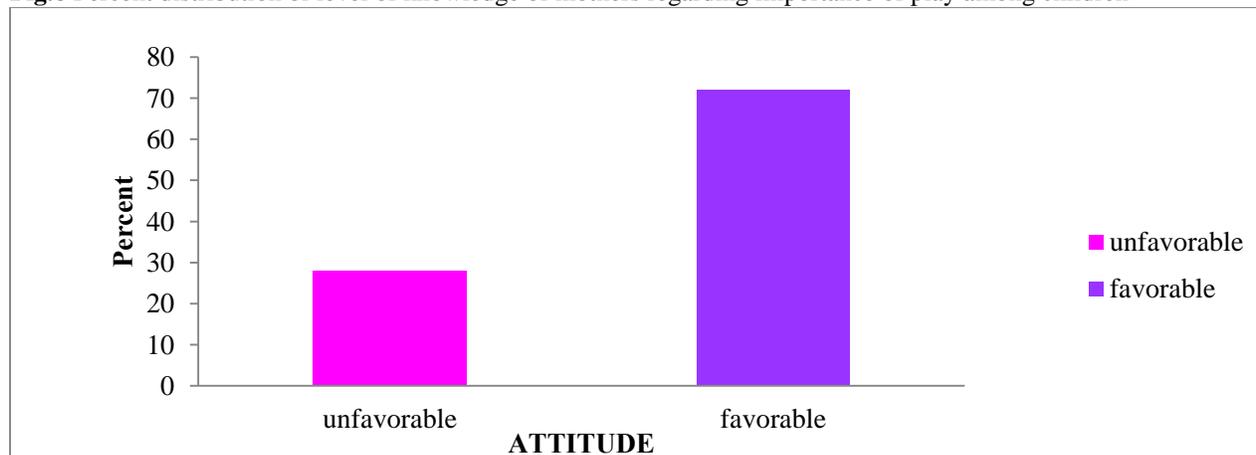


Fig 7 Frequency and percent distribution of attitude of mothers regarding importance of play



Part A contains 7 questions related to general information on play

Part B contains 3 questions related to play in infants

Part C contains 5 questions related to play in toddlers

Part D contains 11 questions related to play in pre-schoolers, schoolers and adolescents.

Part E contains 4 questions which include questions related to precautions during play.

A score value of 1 is allotted for each correct response and 0 for wrong response. The maximum score is 30 and minimum is 0. The score categories as follows:

Scoring key

Scores	category	Percent
0-10	Inadequate level knowledge	52%
11-20	Moderate level knowledge	48%
21-30	Adequate level of knowledge	0%

Section C – Five point Likert attitude scale on importance of play among children

This consists of 10 statements to assess the attitude of mothers regarding importance of play among children. It is a 5 point Likert attitude scale consists of 4 negative responses and 6 positive responses. The scoring varies from strongly agree to strongly disagree. Negative statements were scored in reverse order. The maximum and minimum score was 10 and 50 respectively. The score is categorized as follows:

Scoring key

Scores	category	Percent
10-30	Unfavourable attitude	28%
31-50	Favourable attitude	72%

Validity of tool

Validity refers whether an instrument accurately measures what it is supposed to measure or to evaluate the accuracy of the content⁷. The tool was submitted to experts from the nursing field. They validated its adequacy, sequence of scoring of item based on their suggestion, the tool was modified.

Procedure for data collection

A formal written permission was taken from the authority of Aswini hospital, Thrissur in order to proceed for data collection. The same information was informed to pediatricians and nursing staff of pediatric wards and OPDs. The investigator obtained the informed consent from the mothers.



The mothers were given permission to withdraw at any time along with the assurance that human rights were protected. First the investigator made a good rapport with the mothers of infants and suggested to gather data from all mothers who meet inclusion criteria in the wards of Aswini hospital. A total of 50 samples were selected through purposive sampling technique. Demographic data was collected initially then structured knowledge questionnaire and attitude scale was given to the samples. An average of 80-100 samples obtained per week. Samples took around 20-30 minutes for completion of questionnaire followed by the investigator provided an information booklet to the mothers. After data collection, the investigator cleared the doubts of mothers for complete information on importance of play among children.

Plan for data analysis

Data analysis is the systematic organization and synthesis of research data and the testing of hypothesis using that data. Data obtained was analyzed in term of achieving the objective of the study using suitable statistical methods such as descriptive and inferential statistics. The data was organized, tabulated and analyzed based on the objective of the study.

The plan of statistical analysis of data was as follows:

- The data on demographic variables was analyzed by using frequency and percentage distribution.

Inferential statistics for testing the hypothesis.

The data would be represented in the form of tables, bar diagram, pie diagram and cone diagrams.

RESULTS AND DISCUSSION

Discussion

The findings of the study were discussed based on the relation to the observations made by other studies which the investigator had reviewed. The present study was undertaken to assess the knowledge and attitude of mothers regarding importance of play among children at a selected hospital Thrissur, with a view to develop an information booklet. The study includes 50 samples at selected hospital.

Objective 1: To assess the knowledge of mothers regarding importance of play among children.



The present study revealed that 26 (52%) have poor knowledge whereas 24 (48%) have moderate knowledge and none of them have adequate knowledge regarding importance of play.

A similar study which supports our study was found to be conducted to determine mothers knowledge about children's play and language development conducted in mothers of children with the age of 6 to 58 months. Study findings show that mother's knowledge about language development was stronger and unrelated to their knowledge about play suggesting that maternal knowledge about developmental domains is differentiated and specific⁸.

Objective 2: To assess the attitude of mothers regarding importance of play among children.

The analysis of the present study shows that the majority of the samples 36 (72%) have favorable attitude regarding importance of play among children and remaining samples have 14 (28%) unfavorable attitude regarding importance of play among children.

A similar study which supports our study was found to be conducted to determine mothers' attitude on play therapy for children in selected Anganwadi centers in Dehradun. This study suggests that use of cognitive behavioral therapy approach have a great importance in child's behavioral changes.

Objective 3: To correlate the level of knowledge and attitude of mothers regarding the importance of play among children.

The study described that a negative correlation exists between knowledge and attitude regarding the importance of play among children with r value of 0.261 and which is not significant at 0.05 level (p value = 0.261;TV= 3.84)

Objective 4: To associate the level of knowledge of mothers regarding the importance of play among children with their selected demographic variables.

There is an association between knowledge with selected demographic variables such as previous source of information whereas there is no association with other demographic variables.

Objective 5: To associate the level of attitude of mothers regarding the importance of play among children with their selected demographic variables.

There is no association between attitude of mothers regarding the importance of play among children with their selected demographic variables so null hypothesis (H_3) is accepted whereas research hypothesis is rejected.

SUMMARY



A study was undertaken to assess the knowledge and attitude of mothers regarding importance play among children at a selected hospital, Thrissur with a view to develop an information booklet.

The following objectives are formulated.

- To assess the knowledge of mothers regarding importance of play among children
- To assess the attitude of mothers regarding importance of play among children.
- To correlate the level of knowledge and attitude of mothers regarding the importance of play among children.
- To associate the level of knowledge of mothers regarding importance of play with selected demographic variables.
- To associate the attitude of mothers regarding the importance of play with selected demographic variables.
- To develop an information booklet on importance of play among children.

This was a descriptive study with a sample size of 50 mothers of infants from Aswini Hospital Thrissur, selected using purposive sampling technique. After obtaining guidance from experts, the study was conducted over a period of 9-4-2018 to 12-4-2018.

The tool used for data collection consists of three sections. They are demographic variables, structured knowledge questionnaire and attitude scale on importance of play.

On 9-4-2018 data collection was started and the data were collected and an information booklet was provided regarding importance of play. Based on objectives the data were analyzed using both descriptive and inferential statistical methods.

Major finding of the study includes:

- The study shows that out of 50 samples 26 (52%) have poor knowledge whereas 24 (48%) have moderate knowledge and none of them have adequate knowledge.
- Out of 50 samples majority of samples with 29 (58%) belongs to the age group 31-35 years. 18 (36%) of samples belongs to the age group of > 35 years and only 3 (6%) of samples belongs to the age group of <20 years.
- Regarding the religion of the samples 29 (58%) were Hindus, 20 (40%) were Christians and 1 (2%) belongs to Muslim community. Considering the educational status, 3 (6%) completed secondary education, 23 (46%) completed Higher education and graduation respectively whereas minor proportion with 1 (2%) has acquired their Post graduation.



- Considering the monthly income of samples 14 (28%) belongs to Rs. <10000, 14 (28%) belongs to Rs.10001 to 20000, 13 (26%) belongs to Rs.> 30000, and 9 (18%) samples belongs to Rs.20001 to 30000.
- Considering the area of residence majority of samples with 26 (52%) living in rural area and 24 (48%) of samples living in urban area.
- Considering the number of children major proportion of samples with 39 (78%) have one child 9 (18%) of the samples have two children whereas 2 (4%) of samples have 3 children and none of them have >3 children.
- Major proportion of the samples 18 (36%) obtained information from mass media, 10 (20%) from family members and 10 (20%) did not get any information whereas 7 (14%) from teachers and friends and only 5 (10%) from health personals.

CONCLUSION

Play has an important role in growth and development of each child. With this concept, the present study aimed to assess the knowledge and attitude of mothers regarding importance of play among children at a selected hospital, Thrissur.

The study revealed that mothers have inadequate 26 (52%) knowledge regarding play and majority of the mothers have favorable attitude 36 (72%) towards importance of play. The correlation of knowledge and attitude has negative correlation and not significant at 0.05 level. There is no association between level of knowledge and attitude of mothers regarding importance of play with their selected demographic variables.



REFERENCES

1. How children learn through play – family site by: totally communication. Available from:<https://www.familylives.org.uk.advice/toddler-preschool/learning-play/how-children-learn-through-play>.
2. Hockenberry M J, Wilson D. Wong's Essential of Pediatric Nursing , 18th edition, volume 1 :India Elsevier publishers 2005, p. no. 59-60,83-84.
3. How kids learn to play: 6 stages of play development. Jan 2015 .available from:<https://pathway.org/blog/kids.learns-play-6-stagesplaydevelopment/>
4. Dorothy R. Marlow, Barabara A. Redding 6th edition, Text book of pediatric nursing, Elsevier publications, New Delhi 1988, p. no: 189.
5. Christian, Evangelisia, Marianne.play-slideshare, 19.july2013, Available from: <https://www.slideshare.net>.
6. Park and Hetherington .[citeseerx.ist.psu.edu/view doc/download? Doi=10.1.1.915.4666&rep=rep 1](https://citeseerx.ist.psu.edu/viewdoc/download?doi=10.1.1.915.4666&rep=rep1), by NM Glenn-2012 cited by 80.
7. Ahamadabad, child hood stress makes your brain much faster. updated june16, 2018. Available from: <https://Indian express.com>lifestyle>health>.
8. Gupta Mohan Madan. Study to assess the knowledge and attitude regarding play needs of children among parents of various economic groups.2017(2017 jun).Available from:[https://www.scribd.com/document/35424097/STUDY-TO-ASSESS-THE-KNOWLEDGE-AND-ATTITUDE-REGARDING –PLAY-NEEDS-OF-CHILDREN](https://www.scribd.com/document/35424097/STUDY-TO-ASSESS-THE-KNOWLEDGE-AND-ATTITUDE-REGARDING-PLAY-NEEDS-OF-CHILDREN)