

Mothers' Awareness regarding Home Accident Prevention among their Mentally Retarded Children in Benha City

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Abstract

Background: Mothers of mentally retarded children have excessive burdens in caring for the children. Ensuring information for mothers about safety measures in home accidents is important in reducing incidence of injuries among their mentally retarded children. **Aim:** This study was conducted to assess mothers' awareness regarding prevention of home accidents among their mentally retarded children in Benha City. **Design:** Descriptive design was utilized in carrying out this study. **Sample:** Convenient sample of all mothers of mentally retarded children was taken. The total sample included 140 mothers. **Tools:** Two tools were used for data collection. I) structured interviewing questionnaire consisted of three parts. The first part included: A: Socio-demographic characteristics of mothers. B): Personal characteristics of children. Part 2: Knowledge of mothers regarding mental retardation and home accident prevention, Part 3: Reported practices of mothers regarding first aid of home accidents. II): Mother's attitude regarding their mentally retarded children and prevention of home accident. **Results:** 40.8% of the studied mothers had average knowledge about mental retardation, prevention of home accidents and first aid of home accidents for their mentally retarded children. 63.6% of the studied mothers had satisfactory practice level about first aid of home accidents for their children with mental retardation. 75% of the studied mother had positive attitude about mental retardation and prevention of home accident. **Conclusion:** There was highly statistically significant relation between mother's total knowledge, practices and attitude about mental retardation, prevention of home accidents and first aid of home accidents for their mentally retarded children. **Recommendations:** Health educational programs for mothers about mental retardation, prevention of home accidents and first aid of home accidents for their mental retarded children.

Keywords: Mothers' Awareness, Mental retardation, Home accidents

Introduction:

According to the American Association for Mental Retardation (AAMR), Mental Retardation (MR) refers to substantial limitation in present function. It is characterized by significantly sub-average intellectual functioning existing concurrently with related limitations in two or more of the following applicable adaptive skill areas; communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academics, leisure, and work (Turnbull, 2018).

Mental Retardation is caused by several factors like genetic reasons, prenatal conditions, medication of mother during the period of pregnancy. Mental retardation has been a social stigma and it is indicative of the illiteracy and the lack of scientific knowledge among the individuals in the society. In developing countries, the proportions and numbers may be significantly higher and on the rise (Vijay & Balamurugan, 2020).

According to American Psychiatric Association (APA), mental retardation affects

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about 1% of the population, and of those 1% about 85% have mild intellectual disability (APA, 2022). Globally, the prevalence of mental retardation has been estimated to be approximately 16/1,000 persons in low-income countries, approximately 15/1,000 for middle-income countries, and approximately 9.21/1,000 in high-income countries. Overall, mental retardation occurs more in boys than in girls: 2: 1 in mild mental retardation (Elmasry et al., 2020).

Children with MR do not have developmental abilities to protect themselves from injuries. Therefore, it is the responsibility of adults to provide a safe environment for these children to take protective measures and to control the safety of their living areas. It is known that the people who care for children with MR in the family are mostly mothers. Also, mothers of such mentally retarded children play a critical role because children face lot of stress from society and as well as in handling these children in practical day-today life. For this reason, it is important to include mothers in the educational programs for more effective results (Kahriman et al., 2018).

Childhood injuries are a major public health problem, cause death or disability as well as cost problem. Studies indicate that children with MR have a higher risk of injury due to cognitive limitations. In children with MR, injuries are more common in areas where child control is limited, such as home, school and traffic areas. Most of these injuries include falling, drowning, burning that occur at home or around the home where children with MR are thought to be safe. The most important factor in protecting children from accidents is taking necessary safety precautions (Kilinc et al., 2022).

Mental Retardation manifests before age 18. A child who is mentally challenged requires emotional strength and flexibility. The child has

special needs in addition to the regular needs of all children, and parents can find themselves overwhelmed by various medical care giving and educational responsibilities. Such parents face issues like emotional issues, physical exhaustion and stress, school related issues, and financial concerns (Satir, 2018).

Globally, home accidents are a leading cause of preventable disabilities and death among children and young people. There are many definitions of accidents found in the literatures. The World Health Organization (WHO) define an accident as an event "that occurs unwillingly and causes physical and mental damage by sudden external force". The unintentional home accidents were defined as any event occurring inside the home or in the immediate vicinity of the home that resulted in injury which was not done deliberately but happened by accident (Al Rumhi et al., 2020).

The attitude of the mothers is very essential. The parental attitude is very imperative for the life of the children with intellectual disability; hence, the required measures such as education of the Mothers and creation of awareness among the Mothers need to be undertaken to promote the unfavorable attitude toward the favorable attitude. Families with children with intellectual disabilities should also have the awareness, expertise, and resources available to meet and advocate for their children's needs and rights (Vijay & Balamurugan, 2020).

Community Health Nurse (CHN) should first, teach the mother to cope and accept the disability and second, to help the her to achieve the highest possible level of education, in spite of intellectual disability also, support the family and help parents to understand that mental retardation is not a result of "bad parenting" providing mother with information that will help to understand of the child's behavior and need, offer resources, support and training that enable parent to protect and safe

the child more effectively. The family should also provide social support to help the child handle and adapt to stress as emotional support from family member allow open expression of feeling and meets love (**Beighton & Wills, 2017**).

Significant of the study:

Children with disabilities had a significantly increased risk for injury. It is estimated that 10% of children globally suffer from some kind of disability, and most of whom live in low- and middle-income countries. Children with disabilities had more than doubled the rate of injury reported than children without disabilities (**Mohamed et al ., 2021**).

Problem of childhood accidents in Egypt has a major importance which given its magnitude and seriousness. The incidence of home accident is 33%, it is even higher among mentally disable children and this category involves 13.1% of those aged 5 to 14 years. Protection of children with disabilities represents the major concern that given to protect themselves and the responsibility is on their parents and care giver (**Ibrahim et al., 2018**).

So, this study is very important to assess mothers' awareness regarding prevention of home accident among their mentally retarded children.

Aim of the study:

The aim of this study was to assess mothers' awareness regarding prevention of home accidents among their mentally retarded children in Benha City.

Research questions:

- 1- What is Mothers' knowledge, practices and attitude regarding home accidents prevention.
- 2- Is there a relation between knowledge, attitude of mothers and their reported practices about prevention of home accidents for their mentally retarded children for their mental retarded children?

Subjects and method:

Research design:

Descriptive research design was utilized to carry out this study.

Setting:

The study was conducted Al-Fikria Educational School for mental retardation students in Benha City. This school serves mentally retarded students for boys and girls.

Sampling:

Convenient sample of all mothers of mentally retarded children was taken. The total sample will include 140 mothers. With the following criteria: Children` age ranged from 6 to 18 years, mentally retarded children free from other physical or neurological handicaps

Tools for Data Collection:

The tools used for data collection in this study were two tools.

First tool: A structured interviewing questionnaire was used in this study and was consist of three parts. The first part included 2 sections.

First part: Section A: Socio-demographic characteristics of mothers included 6 questions about (age of mother, level of education, occupation, residence, income & social status).

Section B: Was concerned with the personal characteristics of children included 3 questions as (age of child, gender of the child and sibling order).

The second part: Knowledge of mothers regarding mental retardation and home accident and first aid: Which contained two sections and included 29 questions:

Section A: Was concerned with knowledge of mothers regarding mental retardation included 7 questions as (meaning, causes, types, degrees, symptoms, treatment & ways to prevent mental retardation).

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Section B: Was concerned with knowledge of mothers about home accidents which included 22 questions.

Scoring system of knowledge was done as the following:

The scoring system of knowledge was calculated as follows 2 score for complete correct answer, while 1 score for incomplete correct answer and 0 score for don't know. For each question of knowledge, the score of the items was summed-up and the total divided by the number of items. These scores were converted into a percent point and the total knowledge score (58) was classified as the following:

- Good when total score is between 66% : 100% (38 - 58)
- Average when total score is between 33% : <66% (19 - <38)

Poor when the total score is between 0% : <33% (0 - <19)

The third part: Which was concerned with reported practices of mothers, this tool included 50 items regarding first aid of mentally retarded children's injuries.

Scoring system:

Each step of the reported practices has 1 score for done, while 0 score for not done. The score of each question of reported practices was summed-up and the total divided by the number of items. These scores were converted into a percent score and the total reported practice score was classified as the following:

- Satisfactory practice when the total score is more than 50 percent (from 25 - 50)
- Unsatisfactory practice when the total score is less than 50 percent (from 0 - <25)

The second tool: Mother's attitude regarding their mentally retarded children and prevention of home accident. This tool was adopted from (**Nour et al., 2018**); **Sackitey, 2018** and **El Seifi et al., 2018**) and the required modification was done by the researcher. This tool was designed to evaluate

the mother's attitude regarding their mentally retarded children through 22 items.

Scoring system:

Each step of mother's attitude has 3 levels of answers: agree, uncertain and disagree. These were respectively calculated as follow 2 score for agree, while 1 score for uncertain, and 0 score for disagree. For each item of attitude, the score of the items was summed-up and the total divided by the number of items. These scores were converted into a percent score and the total attitude score was classified as the following:

- Positive attitude when total score more than 50 percent (from 22 - 44)
- Negative attitude when total score is less than 50 percent (from 0 - <22)

Content validity of tools:

Tools validity test was done through five expertise of Faculty members of the Community Health Nursing Department-Faculty of Nursing, Benha University who reviewed the tools for clarity, relevance, comprehensiveness, and applicability.

Reliability of tools:

Reliability of the tools was applied by researchers for testing the internal consistency of the tool, by administration of the same tools to the same subjects under similar condition on one or more occasion. Answers from repeated testing were compared (Cronbach Alpha reliability) equal 0.820 % for knowledge, 0.720 % for practice, and 0.755% for mothers attitude.

Ethical considerations:

The researchers introduced him-self and explained the aim of the study to the mothers. Approval and formal consent obtained from the participants' mothers at the school before interviewing them. Confidentiality of the information was assured through the study process where the personal data were disclosed and used only for the study purpose. Each participant was informed that participation is

voluntary and the right to withdraw from study without rational.

Pilot study:

The pilot study was carried out on 14 of studied mother who represented 10% of the studied sample size of total number and chosen randomly before embarking on the data collection and they were excluded from the study sample to test the tool feasibility according to the results obtained from data. The pilot study was aimed to assess the tool clarity and time needed to fill each sheet as well as to identify any possible obstacles that may hinder the data collection. No any modification done to this number of studied mothers in this study sample.

Field of work:

The study was carried out through a period of three months from the beginning of Dec 2021 up to the end of Feb 2022. The researchers visited the Al-Fikria Educational School for mental retardation students in Benha City two days weekly (Mondays and Wednesdays) from 9 am to 1pm. The researchers met (6-7 mothers) per visit for data collection. The researchers interviewed the participants in the selected school at Benha City, after introducing herself and took their consent to be recruited in the study after explaining the aim of the study and then distributed the questionnaire sheet after clear explanations of the way to fill out and in the presence of the researchers. Each sheet took about (30-40 minutes) to answer from each participant. During the interview the researchers read each item/ question on data collection sheet and explains its meaning to the participants.

Results:

Table (1): Showed that; 51.4% of the studied women were in the age group between 20 - < 30 years old with the mean \pm SD 29.24 \pm 5.16 years. 53.6% of the studied

mothers had university education, while, 65.7% of them were employee. Moreover, 78.6% of the studied sample was married, and 73.5% of them had enough income. Also, 62.9% of the studied women were living in rural area.

Table (2): Revealed that; 47.1% of the studied children between 6 – <10 years, with the mean \pm SD 8.65 \pm 2.74 years. Regarding gender, 55.0% of the studied children were male, while, 45.0% of them were female. 51.4% of the studied children were the third ranking

Figure (1): Showed that 40.8% of the studied mothers had average knowledge about mental retardation, the prevention of home accidents for mental retarded children, and first aid for their mental retarded children, and 32.1% of them had good knowledge, while, 27.1% of the studied mothers had poor knowledge about mental retardation, the prevention of home accidents for mental retarded children, and first aid for their mental retarded children.

Figure (2): Revealed that 63.6% of the studied mothers had satisfactory total reported practice level about first aid of home accidents for their children with mental retardation, compared to 36.4% of them who reported unsatisfactory total reported practice level about first aid of home accidents for their children with mental retardation.

Table (3): Showed that 88.6% of studied mothers had satisfactory reported practice regarding subtotal first degree burn, while, 55.0% of them had unsatisfactory practices about subtotal fall practice.

Table (4): Explained that 82.2% of the studied mothers agreed that first aid kit is important at home, and 21.5% of them were uncertain that a quick response when emergency services are called is important to prevent complications from home accidents,

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while 28.5% disagreed on keeping nails out of child's reach prevents accidents in the home.

Figure (3): Showed that; 75.0% of the studied mother had positive total attitude level about mental retardation and prevention of home accident and 25.0% of them had negative total attitude level about mental retardation and prevention of home accident.

Table (5): Shows that, there was highly statistically significant relation between

mother's total knowledge level about mental retardation, and prevention of home accidents, with total practices level ($P<0.001^{**}$), and there was significant relation between mother's total knowledge level about first aid of home accidents, and total attitude level about mental retardation and prevention of home accidents ($P<0.05^*$).

Table (1): Frequency distribution of studied women according to their socio-demographic characteristics (n=140).

Socio demographic characteristics	No.	%
Mother's age (years)		
< 20	25	17.9
20<30	72	51.4
30 < 40	43	30.7
Mother's age (years) -Mean \pm SD	29.24 \pm 5.16	
Mother's education		
Read and write	9	6.4
Basic education	17	12.3
Secondary	39	27.7
University	75	53.6
Mother's occupation		
Housewife	48	34.3
Employee	92	65.7
Marital status		
married	110	78.6
widow	17	12.1
Divorced	13	9.3
Family income		
Enough and can save	5	3.6
Enough	103	73.5
Not enough	32	22.9
Residence		
urban	52	37.1
rural	88	62.9

Table (2): Frequency distribution of studied children regarding their personal characteristics (n=140).

personal characteristics	No.	%
Child's age(years)		
10 years old<6	66	47.1
12 years old<10	40	28.6
18 years old<12	34	24.3
Child's age (years) Mean ±SD	8.65±2.74	
Gender		
Male	77	55.0
Female	63	45.0
Child ranking		
First	27	19.3
Second	41	29.3
Third	72	51.4

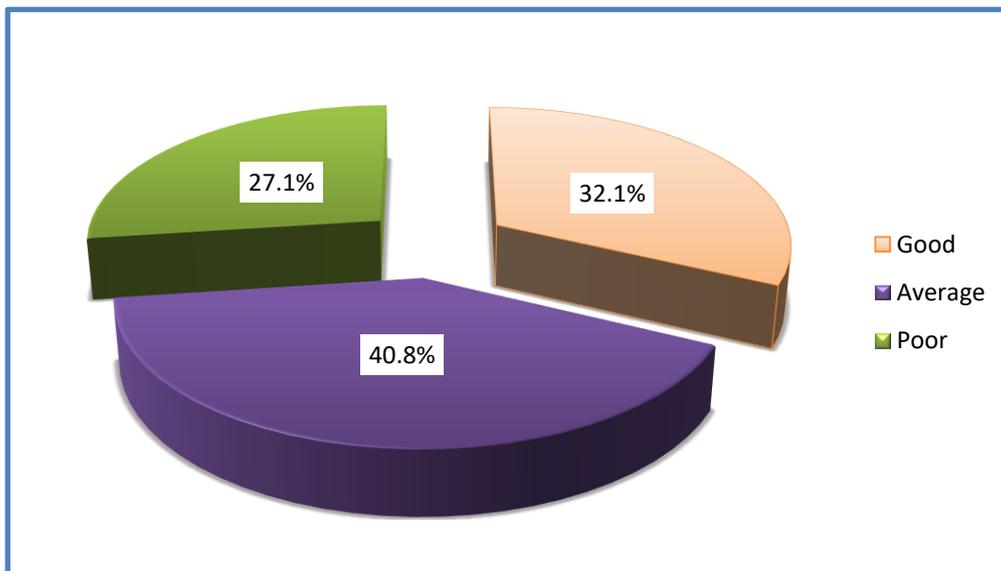


Figure (1): Distribution of studied mothers regarding their total knowledge level about mental retardation, the prevention of home accidents for mental retarded children, and first aid for their mental retarded children (n=140).

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Table (3): Frequency distribution of studied mothers regarding their subtotal reported practices about first aid (n=140).

Mother's subtotal practices	Satisfactory		Unsatisfactory	
	No.	%	No.	%
Fall practice	63	45.0	77	55.0
Cut wound	113	80.7	27	19.3
Hot water burn	94	67.1	46	32.9
First degree burn	124	88.6	16	11.4
Second degree burn	71	50.7	69	49.3
Third degree burn	72	51.4	68	48.6
Burn practices	75	53.6	65	46.4
Food poisoning	109	77.9	31	22.1
Chemical poisoning	94	67.1	46	32.9
Inhaled poisoning	122	87.1	18	12.9
Drug poisoning	123	87.9	17	12.1
All Poisoning	107	76.4	33	23.6
Chokes practices	110	78.6	30	21.4

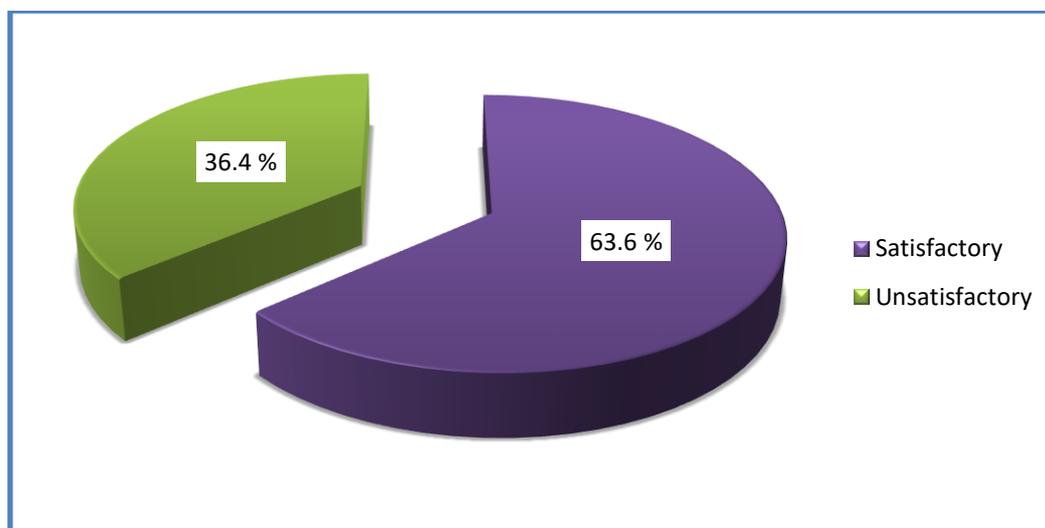


Figure (2): Distribution of studied mothers regarding their total reported practices level about first aid of home accidents for their children with mental retardation (n=140).

Table (4): Frequency distribution of studied mothers regarding their attitude about prevention of home accidents (n=140).

Mother's attitude level about prevention of home accidents	Agree		Uncertain		Dis agree	
	No.	%	No.	%	No	%
-Putting incisors out of child's reach prevents accidents .	102	72.8	28	20.0	10	7.2
-Keeping nails out of child's reach prevents accidents in the home	90	64.4	10	7.1	40	28.5
-Putting hot water and dishes out of child's reach prevents household accidents.	105	75.0	20	14.3	15	10.7
-Putting chemicals out of child's reach prevents accidents.	110	78.5	10	7.1	20	14.2
-Not letting child play alone on the balcony prevents accidents in the home.	104	74.4	16	11.4	20	14.2
-Not giving child a leash to play with prevents accidents in the home	102	73.0	20	14.2	18	12,8
-Putting the lighter out of child's reach prevent accidents	102	72.7	28	20.2	10	7.1
-Drying the floor in the bathroom after cleaning prevents accidents for child.	110	78.7	20	14.2	10	7.1
-Putting pan handles out of child's reach prevents household accidents.	100	71.5	15	10.7	25	17.8
-Using an electric stove instead of a gas stove can prevent home accidents for child.	95	67.9	16	11.4	29	20.7
-A quick response when emergency services are called is important to prevent complications from home accidents	90	64.3	30	21.5	20	14.2
-It is important for to attend training sessions to learn more about how to deal with home injuries.	96	70.0	15	11.3	29	20.7
-Realizing that first aid kit is important at home	115	82.2	10	7.1	15	10.7

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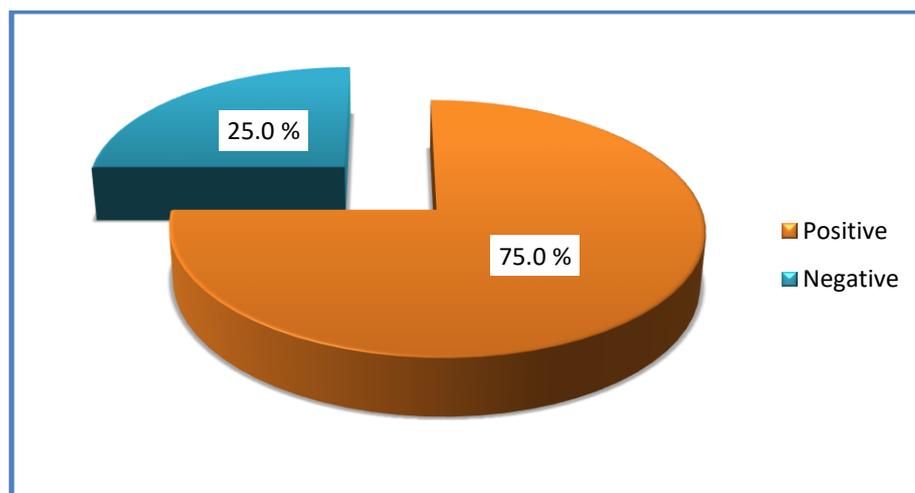


Figure (3): Distribution of studied mothers regarding their total attitude level about mental retardation and prevention of home accident (n=140).

Table (5): Relation between total knowledge level about mental retardation, and prevention of home accidents, total practices about first aid of home accidents and total attitude of studied mothers about mental retardation and prevention of home accidents (n=140).

Total practice & attitude	Total knowledge						X ²	p-value
	Poor (n=38)		Average (n=57)		Good (n=45)			
	No.	%	No.	%	No.	%		
Total practices								
Unsatisfactory (n=51)	24	63.2	20	35.1	7	15.6	20.23	.000**
Satisfactory (n=89)	14	36.8	37	64.9	38	84.4		
Total attitude								
Negative (n=35)	17	44.7	13	22.8	5	11.1	12.76	0.002*
Positive (n=105)	21	55.3	44	77.2	40	88.9		

**Highly statistical significance

*Statistical significance

Discussion:

Regarding to socio-demographic characteristics of the studied mothers, the present study showed that; more than half of the studied mothers were in the age group between 20 - < 30 years old, and more than half of them had university education. Also, more than three fourths of the studied mothers were married,

and less than three fourths of them had enough income. These results were in the same line with **Sackitey et al., (2018)**, who studied knowledge, attitude and perception on prevention of home accidents among mothers in Ghana (N=30) and revealed that; more than three thirds (61.9%) of the studied mothers' age ranged between 25 to 34 years old, and less than

half (46.7%) of them had high school education level. Less than three fourths (73.3%) of the studied mothers were married, and two fifth (40%) of them had enough income while this finding disagree with, **Aktürk, (2016)** studied the determination of knowledge, attitudes and behaviors regarding factors causing home accidents and prevention in mothers with a child aged 0-5 years in Turkey (N= 340), and said that; the majority (98.6%) of the studied mothers were married, and the minority (7.8%) of them had university education.

Concerning the personal characteristics of the studied children, the current study revealed that; less than half of the studied children had age ranged between 6 - <10 years. This result disagreed with **Nageh et al., (2020)**, Who studied mothers' knowledge and subjective practice toward most common domestic injury among under five children in. Mansoura, Egypt (N=100) and found that; less than one third (31.0%) of the studied children' age ranged between 2 to less than 3 years, and more than two fifth (43.2%) of them were in the second rank of their siblings.

Regarding gender of the studied children, the present study revealed that; more than half of the studied children were male, while, less than half of them were female. More than half of the studied children were the third ranking. This results were in the same line with **Aktürk, (2016)** who said that; more than half (57.7%) of the studied children were male, while, less than half (42.3%) of them were female. This variation may be due to the selection criteria of the studied children.

Concerning the studied mothers' total knowledge level about the prevention of home accidents for mental retarded children, the present study demonstrated that; about one third of the studied mothers had good knowledge about the prevention of home accidents for mental retarded children. On the same with, **El**

Seifi et al., (2018) studied the effect of community-based intervention on knowledge, attitude, and self-efficacy toward home injuries among Egyptian rural mothers having preschool children (N=244), and reported that; about two fifth (40.8%) of the studied mothers had good knowledge about the prevention of home injuries and basic first aid measures. While disagree with, **Thenmozhi et al., (2020)** conducted a study on knowledge and practice on prevention of domestic accident among mothers of under five year children in India (N=60) and found that; more than half (53%) of the studied mothers had adequate knowledge towards the prevention of home accident. In another study done by **Gholap, (2017)** to assessed mothers' knowledge and their practices in prevention of home accidents among children in India (N=51) and stated that; more than half (55.6%) of the studied mothers had good knowledge about prevention of home accident. This may be due to the availability of knowledge sources about prevention of home accident.

As regards studied mothers' subtotal reported practices about first aid, the contemporary study realized that; most of studied mothers had satisfactory reported practice regarding subtotal first degree burn, while, more than half of them had unsatisfactory practices about subtotal fall practice. These findings are similar to a study done by **Debnath et al., (2014)** to assess home-safety measures adopted by mothers in India (N=230) which indicated that the majority of mothers had satisfactory level of first aid measures' practice regarding first aid of burn, and about three fifth (59%) of them had unsatisfactory practices regarding first aid of fall. On the contrary, **Nageh et al., (2020)** found that; all the studied mothers had improper experience in case of burns and falls. This may be due to the high education level of the studied

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mothers.

Concerning of studied mothers' total reported practices level about first aid of home accidents for their children with mental retardation, the existing study exposed that; less than two thirds of the studied mothers had satisfactory total reported practice level about first aid of home accidents for their children with mental retardation, compared to more than one third of them who reported unsatisfactory total reported practice level about first aid of home accidents for their children with mental retardation. This findings were not parallel to the findings of **Nour et al., (2018)**, Who did a study to assess the knowledge, attitude, and practices of mothers towards home accidents among children in Makka, Saudia Arabia, and reported that; less than one third (29%) of the studied participants reported proper practices about first aid of home accidents toward their children, compared to less than three fourths (71%) of them reported improper practices about first aid of home accidents toward their children.

Concerning studied mothers' attitude about prevention of home accidents, the current study supposed that; most of the studied mothers agreed that first aid kit is important at home, and more than one fifth of them were uncertain that a quick response when emergency services are called is important to prevent complications from home accidents, while, more than one fourth of them disagreed on keeping nails out of child's reach prevents accidents in the home. Likewise, **Nour et al., (2018)**, reported that; all participants (100%) agreed on the importance of existence of first aid kit in every home, and less than one third (30%) of them were uncertain regarding the rapid response when calling the ambulance/emergency services. this result agree with, **Sackitey et al., (2018)**, found that; less than one fourth (23.0%) of the studied

mothers disagreed on keeping nails out of home to prevent accidents. This indicates the good knowledge level among the studied mothers.

As regards to studied mothers total attitude level about mental retardation and prevention of home accident, the present study revealed that; three fourths of the studied mother had positive total attitude level about mental retardation and prevention of home accident, and one fourth of them had negative total attitude level about mental retardation and prevention of home accident. This results were dissimilar with the result of **Das & Biswas, (2018)** who conducted a study on attitude of parents toward their mentally retarded children: an analytical study in Tripura, India, (N=50) and found that; more than half (54 %) of the parents have shown favorable attitude towards their MR children and less than half (46%) of them have shown un favorable towards their mental retarded children. Also, **Nour et al., (2018)** declared that; less than two fifth (38%) of the studied mothers had positive attitude toward prevention of home accident, and (62%) of them had negative and fair attitude level toward prevention of home accident. In my opinion, this reflects the high awareness level among the studied mothers.

Regarding the relation between total knowledge level about mental retardation, and prevention of home accidents, total practices about first aid of home accidents and total attitude of studied mothers about mental retardation and prevention of home accidents, the existing study ascertained that; there was highly statistically significant relation between mother's total knowledge level about mental retardation, and prevention of home accidents, with total practices and attitude level ($P < 0.001^{**}$). In the same way, **Thenmozhi et al., (2020)** found that there was a statistically significant positive correlation between the level of knowledge, practices and attitude of

studied mothers about mental retardation and prevention of home accidents. From my view, this reflects the affection of knowledge level on practices and attitude of the studied mothers.

Conclusion:

One third of the studied mothers had good knowledge about the prevention of home accidents for mentally retarded children. Less than two thirds of the studied mothers had satisfactory total reported practice level about first aid of home accidents for their children with mental retardation, compared to more than one third of them who reported unsatisfactory total reported practice level about first aid of home accidents for their children with mental retardation. Three fourths of the studied mother had positive total attitude level about mental retardation and prevention of home accident, and one fourth of them had negative total attitude level about mental retardation and prevention of home accident. There was highly statistically significant relation between mother's total knowledge level about mental retardation, and prevention of home accidents, with total practices level ($P < 0.001^{**}$), and there was significant relation between mother's total knowledge level about first aid of home accidents, and total attitude level about mental retardation and prevention of home accidents ($P < 0.05^*$).

Recommendations:

- 1- Health educational programs to improve parents' knowledge and practices about accidents, prevention and first aids for all mentally retarded children.
- 2- Enhancing mother's awareness about safety measures and first aid to ensure a safe home environment for mentally retarded children.
- 3- programs for large sample and more settings about prevention of home accidents
- 4- Further studies should be done to assess the effect of applying training programs on children`s and parents to reduce the rates and

severity of accidents among mentally disabled children.

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وعى الأمهات عن الوقاية من الحوادث المنزلية لدى أطفالهن ذوي الإعاقة الذهنية في مدينة بنها

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تشير الدراسات الحديثة إلى أن الأطفال الذين يعانون من الإعاقة الذهنية هم أكثر عرضة للإصابة حيث يعاني الأطفال ذوي الإعاقات العقلية من إصابات تزيد مرتين إلى ثلاث مرات عن الأطفال ذوي الإعاقات الأخرى. وصفت الجمعية الأمريكية للإعاقات الفكرية والتنموية أن الإعاقة الذهنية هي إعاقة تتميز بحدود كبيرة في كل من الأداء الفكري (التفكير والتعلم وحل المشكلات) والسلوك التكيفي ، والذي يغطي مجموعة من المهارات الاجتماعية والعملية اليومية. لذا هدفت هذه الدراسة الي تقييم وعى الأمهات فيما يتعلق بالوقاية من الحوادث المنزلية بين أطفالهن ذوي الإعاقة الذهنية في مدينة بنها. وقد أجريت هذه الدراسة في المدرسة الفكرية التربوية لطلاب الإعاقة الذهنية للبنين والبنات في مدينة بنها. وتم إستخدام العينة المتاحة فى هذه الدراسة وتم تطبيقها على 140 ام. وأظهرت النتائج أن 97.4 كان لدى حوالي خمس الأمهات معرفة متوسطة عن الإعاقة الذهنية ، والوقاية من الحوادث المنزلية للأطفال ذوي الإعاقة الذهنية ، وكان أقل من ثلثهم لديهم معرفة جيدة ، بينما أكثر من الربع من الأمهات لديهن معرفة ضعيفة بالإعاقة الذهنية ، والوقاية من الحوادث المنزلية وأيضا الإسعافات المنزلية للأطفال ذوي الإعاقة الذهنية. أقل من ثلثي الأمهات كان لديهن مستوى ممارسة جيد حول الإسعافات الأولية للحوادث المنزلية لأطفالهن الذين يعانون من الإعاقة الذهنية ، مقارنة بأكثر من ثلثهن أبلغن عن مستوى الممارسة الإجمالي غير المرضي المبلغ عنه حول الإسعافات الأولية للحوادث المنزلية والأطفال الذين يعانون من الإعاقة الذهنية. ثلاثة أرباع الأمهات التي شملتهم الدراسة لديهن مستوى إيجابي كلي تجاه الإعاقة الذهنية والوقاية من حوادث المنزل ، وكان لدي ربع الامهات مستوى سلوك كلي سلبي تجاه الإعاقة الذهنية والوقاية من حوادث المنزل. وقد اوصت نتائج الدراسة برنامج توفير التثقيف الصحي للوالدين لتحسين معرفتهم وممارساتهم حول الوقاية من الحوادث والإسعافات الأولية للأطفال ذوي الإعاقة الذهنية وتعزيز وعى الوالدين حول تدابير السلامة والإسعافات الأولية لضمان بيئة منزلية آمنة للأطفال ذوي الإعاقة الذهنية.