



## SUMMARY

Schistosomiasis is one of the most important biological problems which spread in almost countries in the world especially in the areas which follow perennial irrigation. In Egypt it is the most frequent endemic parasitic disease and the impact of schistosomiasis on public health can be assessed in terms of frequency and severity of schistosomiasis in addition to its impact on the economic and social consequences for community development.

Education is an essential component of nursing attendance in the field of community health. Experience from attending schistosomiasis out patients has shown that the greater the knowledge of the disease were the greater the adherence to treatment might be.

The aim of the present study was to assess the knowledge, attitude and practice of farmers who exposed to schistosomiasis and explore the nursing role among nurses in health centres.

The present study was carried out at 4 health centres., Batamda, Elshmout, Met Elsebah and Marsafa health centres at Kaluobia Governorate.

Asystematic random sample of one hundred patients were selected equally and all nurses who are working in the selected health centres were included (80 nurses), except 8 nurses who are included in the pilot study.

The following tools were designed by the researcher to collect data needed for the study:



I- A structured interviewing questionnaire for farmers was constructed to cover the following items:

- 1- Sociodemographic data as (age, educational level and income).
  - Home status as (source of water, bath room, and sewage disposal system).
  - Family history of Bilharziasis infection.
  - Health status of the client as (frequency of infection, complications and recovery).
- 2- Knowledge of farmers about schistosomiasis.
- 3- Likert scale was modified to measure the attitude of the sample toward schistosomiasis.
- 4- Practice of the farmers toward Bilharziasis.

II- A structured interviewing questionnaire for nurses was constructed to cover the following items:

- 1- Sociodemographic data as (age, social status, educational level and nursing Job).
- 2- Knowledge of nurses about the disease.
- 3- Nursing role toward bilharziasis.

The actual work of the current study started by an initial pilot study that was carried out for ten farmers and eight nurses to test the research feasibility, clarity and objectivity of the tools and accordingly some changes were done in the tools to be suitable for the subjects and those who shared in the pilot study were excluded from the whole sample. Data collected through a period of 3 months where the time needed to fill each questionnaire sheet ranged from 25-35 minutes.



**The main findings of this study can be summarized as the following:**

The farmers' age ranged between 15-55 years old and 32% of them aged from 35 to less than 45 years old and more than two thirds (68%) of the sample were males and 32% were females.

Regarding the education, 48% of the sample were illiterate. Farmers' monthly income ranged between 100-700 pound / month and 36.5% of them had 600-700 pound / month. Regarding home condition, (80%) of farmer's houses didn't served with sewage disposal system.

The farmers whose family members had Bilharziasis infection were 43% and more than three quarters of the sample (77%) was infected with bilharziasis twice and it was observed that 18% of farmers had liver cirrhosis and more than half of the farmers (56%) was affected by the disease.

The present study revealed that more than there quarters of farmers (84%) had incomplete knowledge about types, ways of spread, life cycle of bilharziasls, signs and symptoms and ways of prevention of bilharziasis.

It was found that three quarters of the sarmers had positive attitude (75%) while only (16%) of them had negative attitude and 9% no respond while more than half of the farmers (56%) did incorrect practice.

The study showed that nurses' age ranged from 19 to 53 years old and 23.8% of them aged from 19 to less than 24 years old. Majority of nurses (95%) were married and 87.4% have got nursing diploma and most of nurses (92.5%) are working as a staff nurses.

It was noticed that nurses who had experience from 6 to less than 26 years constituted 53.8% while nurses who had experience from (26 to less



than 31 year) and (31-35 year) were 7.5% respectively, also it was observed that all nurses didn't had any training courses about bilharziasis. As regards knowledge of nurses about bilharziasis, it was observed that more than half of nurses (56.3%) had incomplete knowledge about the disease.

Regarding nurses, practical role, majority of the sample don't give drug of bilharziasis to client, didn't make registration and didn't follow up the client except calculation of the total dose of bilharziasis drug that were known by (85%) of the nurses.

The study also reflects that there is Avery limited preventive role for the nurses in health centres as Majority of them (97.5%) didn't participate in health education to patients with bilharziasis.

Significant relation was detected between farmers' knowledge and their age, sex, education, family history of bilharziasis infection, also significant relation was detected between farmers' practice and their age sex, family history of bilharziasis infection also there is a significant relation between farmers' attitude and their sex, education, bilharziasis infection of a family member.

Findings of the current study showed that there is statistical significant relation between farmers' knowledge and their attitudes also significant relation was detected between farmers' knowledge and their practice.

There also significant relation between sociodemographic data of nurses and their knowledge except social status, training courses and their knowledge.



In the light of the findings of the current study the following recommendation are suggested.

Upgrading the standard of living of rural population, through suitable sewage disposal system and efficient irrigation techniques to decrease transmission of schistosomiasis in rural areas also training courses about schistosomiasis should be conducted regularly to nurses in all health centres to raise awareness about their role toward schistosomiasis control through availability of suitable health education place in each health center.