Journal of Natural Sciences Research www.iiste.org
ISSN 2224-3186 (Paper) ISSN 2225-0921 (Online)
Vol.5, No.13, 2015

Assessment of women's knowledge toward Their Children under (5) year about Phobia from Injection in Baghdad City

Abdulmahdi A. Hasan
*Ph,D, pediatric & Mental Health Nursing ,College of Nursing, Babylon University

Abstract
Objectives: To assess mother`s knowledge upon injection phobia toward their child .
Methodology:
A descriptive study to assessment of women's knowledge toward Their children under 5 year about phobia from injection in Baghdad city,
This study included 200 children as virtual sample were (123) males and (77) females, this study carried at maternal and child Baghdad Teachingl Hospital and parterre AL-canary , from the period of December 2013 to march 2014, The results of the present study showed that the highest percentage of the phobia in child at aged between (2-3) years, were of (40%), while in male is more than female with percentage(61.5%). That poor socio-economic level and low level of education and culture for parents, and also the genetic factor of the most important reasons that Led to the phobia of children in the age of less than five years.
The study concluded that phobia from needle was the most common with the age group between (was the most2 – 3) years most commonly involved. Phobia common in young mothers and in those households having greater than 3 siblings .This study highlights the fact that ignorance, neglect and carelessness on part of the parents for phobia his children from needle leads to cause refrain the child from treatment, and the deterioration in the health .The researcher recommends preparing education program awareness parents and mothers to know the disease phobia of injection and how to treat them and educate them, through the newspapers and television, which can help then to reduce the cases phobia in children
Results: The important of this study is to reduce the reoccurrence of phobia from injection in children at ageless than five years in Babylon City and to appear extent prevalence of phobia from injection in children at age less than five years in Baghdad City .
Conclusions :The study concluded that phobia from needle was the most common with the age group between (was the most2 – 3) years most commonly involved. Phobia common in young mothers and in those households having greater than 3 siblings .Literacy rate of mothers correlated significantly with phobia cases with the highest (58%) phobia cases in children with intermediate mothers. In most of the cases (75%) phobia was within easy reach. This study highlights the fact that ignorance, negative experience, genetic neglect, and carelessness on part of the parents lead to cases of phobia from needle.
Keywords: Women , knowledge , children, Phobia , injection

Introduction

Injection needles, also known as needle phobia (and rarely as trypanophobia), is the extreme fear of medical procedures involving injections or hypodermic needles. It is occasionally referred to as aichmophobia , belonephobia , or enetophobia , although these terms may also refer to a more general fear of sharply pointed objects(1)
The condition was officially recognized in 2007 in the DSM-IV (Diagnostic and Statistical Manual, 4th edition) as a specific phobia of blood/injection/injury type. Phobic level responses to injections cause sufferers to avoid inoculations, blood tests, and in the more severe cases, all medical care.
It is estimated that at least 10% of American child have a fear of needles, and it is likely that the actual number is larger, as the most severe cases are never documented due to the tendency of the sufferer to avoid all medical treatment.[1]

According to Dr. James G. Hamilton, author of the pioneering paper on needle phobia, it is likely that the form of needle phobia that is genetic has some basis in evolution, given that thousands of years ago humans who meticulously avoided stab wounds and other incidences of pierced flesh would have a greater chance of survival.[1]

The discussion of the evolutionary basis of needle phobia in Dr. Hamilton's review article concerns the vasovagal type of needle phobia, which is a sub-type of blood-injection-injury phobia.

This type of needle phobia is uniquely characterized by a two-phase vasovagal response.[2] First, there is a brief acceleration of heart rate and blood pressure. This is followed by a rapid plunge in both heart rate and blood pressure, sometimes leading to unconsciousness.[1][2] The loss of consciousness is sometimes accompanied by convulsions and numerous rapid changes in the levels of many different hormones.[1][3]

Other medical journal articles have discussed additional aspects of this possible link between vasovagal syncope and evolutionary fitness in blood-injection-injury phobias.[4]

An evolutionary psychology theory that explains the association to vasovagal syncope is that some forms of fainting are non-verbal signals that developed in response to increased inter-group aggression during the paleolithic. A non-combatant who has fainted signals that she or he is not a threat. This would explain the association between fainting and stimuli such as bloodletting and injuries as well as the gender differences.[5]

Methodology:

1: Design of the study :Descriptive study.

2: Setting of the study: The study was carried at maternal and child Babylon education hospital and parterre AL-canary

3: Time of the study : The study period extended from December 2013 to march 2014.

4:The sample of study :Anon –probability sample, was selected from hospital in pediatric wards for mothers attending with their children in hospital and children in parterre and mother who attending emergency room ,the study consisted of (200) virtual sample. The tool of the study (questionnaires) which contain the followings information the age, gender, birth order for children, address, education status and occupation for mothers, socioeconomic status, no. of sibling.

Results:

Table (1): Distribution of the study samples according to age, gender, and birth Order

Item		No.	%
Children Age $\bar{x} = 3$ SD = 1.58	1 – 2 years	50	25
	2 – 3 years	78	39
	3 – 4 years	43	21.5
	> 4	29	14.5
Gender	Male	123	61.5
	Female	77	38.5
Birth Order	First	44	22
	Second	82	41
	Third	56	28
	The fourth or more	18	9

Table 1:- shows that the majority of children (39%) were (2 – 3) years. The average age was (3) years. The majority of them ranked as the second, the third, and the first (41%, 28%, and 22% respectively). One hundred and twenty three of studied children were males (61.5%) compared to (38.5%) who were females.

Table (2): Socio - Demographic Characteristics for Child Families

Variables		No.	%
Mothers Age $\bar{x}$ = 31 SD = 9.09	16 - 25	70	35
	26 - 35	54	27
	36 - 45	51	25.5
	46 and more	25	12.5
Educational level of mother	Illiterate	58	29
	Primary	48	24
	Intermediates	33	16.5
	Secondary	33	16.5
	Institutes or above	28	14
Occupation of mother	Housewife	164	82
	Worker	36	18
Socioeconomic Status	Poor	110	55
	Satisfactory	54	27
	Good	36	18
No. of Sibling $\bar{x}$ = 4 SD = 2	1 - 3	93	46.5
	4 - 6	81	40.5
	7 and above	26	13
Address	Rural	30	15
	Urban	170	85

***SD: Stander Deviation**

Table 2 :- shows that the socioeconomic background of the studied children's families. According to the age, (35%) of the mothers age were (16 – 25) years old. Fifty eight (16.5%) of the mother were illiterate educational level. In relation to mother's occupation, most of them were housewife (82%) and (18%) of them were workers. Majority of the patients (55%) belonged to poor class followed by satisfactory (27%) and good (18%). Eighty one (40.5) child were having greater than 3 siblings followed by (46.5%) who had less than (3) sibling. Majority of the (80%) were living in urban area compared of those (15%) were living in rural.

Discussion:

Needle phobia is most commonly observed at (1 – 5) years of age and these children constitute (80%) of all phobia cases (8). In the (1-3)year of life the main causes of phobia are genetic, immunization procedures (9), at 3-5 (Life events) child with needle phobias have often had a negative experience getting a needle (or close relative has had a negative experience), Needle phobias can also develop after seeing or hearing about the negative experience of others (8). In several studies, it has been reported that (51.4% - 73.3%) of all phobia cases observed in Iraq involved children (< 5) years of age (8, 9, 10). Similar finding has been reported in developed and developing countries (11). The present study showed that approximately more than half of the patients were less than four years old. In this age group, males were predominant.

Ozdogan et al (2008) found that the highest incidence of needle phopia was in age group (2) to (5) years (9). Apart from these factors education of mother, their knowledge about phobia, with number of siblings and negative experience also contribute to accidental phobia events. In a multi variant study it was demonstrated that

children of young mothers (12, 13).

Similar findings have also been noted in our study. In the same Swedish study, Hjern et al (2001) noted that children with more than (2) siblings had a greater chance of all injuries as they got neglected (12), similar findings were also noted in our study with (45%) of the patients having (1-3) siblings. Children belonging to urban areas were more exposed (85%) compared to those in rural areas(15%) this could be due to the advent of careers for mothers due to inflation leading to neglect of child (12).

Recommendations

1- The researcher recommends preparing education program awareness parents and mothers to know the disease phobia of injection and how to treat them and educate them, through the newspapers and television, which can help reduce the cases phobia in children

2- The researcher recommends mothers to learn steps to support her child has a phobia of the needle :

2-1 - Don't make promises for "no shots" any time going to the clinic. You never know what plan will be recommended and what shots you've missed. If you make and break that promise, trust is broken. Don't joke about the doctor or nurse giving a shot as punishment either.(14)

NO SINGLE shot is ever given to make a child uncomfortable–don't create that myth as it sets your child up to believe the doctor may harm them.

2-2- Fear of needles is real. Validate your child when they state they are terrified. And then talk directly with the clinician about ways to support your child during the shots.

2-3- Consider using an anti-anxiety medication (something like Ativan, Valium, or Xanax) when true needle phobia is present. I've worked with a pediatric psychiatrist for numerous patients in my clinic to develop a plan for anxiolysis (breaking anxiety) to support them getting recommended care.

2-4 - Consider using a numbing cream (something like EMLA or vapocoolant spray) to numb the skin prior to the vaccination. You'll need a prescription from your clinician to do so but often the cream provides a bit of comfort, a sense of control, and boosts confidence for anxious or fearful children/teens.

2-5 -Consider deep breathing and other behavioral modifications including distraction at the time of injections to support your child. Consider seeing a behavioral health clinician as well.

2-6 -Consider the "cough trick." I offer the cough trick to all of my patients and teens nervous about shots. Studies (and reports from my patients) confirm it works brilliantly!

References:

1-James G. Hamilton (August 1995). "Needle Phobia - A Neglected Diagnosis". Journal of Family Practice 41 (2): 169–175 REVIEW. "Oxford Textbook of Psychopathology" by Theodore Millon, Paul H. Blaney, Roger D. Davis (1999) -6, p. 82

2- Ellinwood, Everett H.; Hamilton, James G. (April 1991). "Case report of a discussion: needle phobia". Journal of Family Practice 32 (4): 420–422.

3-Rolf R. Diehl (April 2005). "Vasovagal syncope and Darwinian fitness". Clinical Autonomic Research 15 (2): 126–129.

4-Bracha, H. (2006). "Human brain evolution and the "Neuroevolutionary Time-depth Principle:" Implications for the Reclassification of fear-circuitry-related traits in DSM-V and for studying resilience to warzone-related posttraumatic stress disorder". Progress in Neuro-Psychopharmacology and Biological Psychiatry

5- Hamilton, J. (1995). Needle phobia: a neglected diagnosis. Journal of Family Practice, 41(2), 169- Diagnostic and statistical manual of mental disorders. (2000) (DSM-IV-TR) (4th ed.). Washington DC: American Psychiatric Association.

6- Ellinwood, E. H. (1991). Case-report of needle phobia. Journal of Family Practice, 32(4), 420-422.

8- Duff, A. (2003). Incorporating psychological approaches into routine paediatric venepunctur .Archives of Disease in Childhood, 88(10), 931-937

9- Deacon, B., & Abramowitz, J. (2006). Fear of needles and vasovagal reactions among phlebotomy patients. Journal of Anxiety Disorders, 20(7), 946-960

10- Holloway, I. (2005a). Qualitative Writing. In I. Holloway (Ed.), Qualitative Research in Healthcare(pp. 270-286). Berkshire, England: Open University Press.

Holloway, I. (Ed.). (2005b). Qualitative Research in Healthcare. Maidenhead, England: Open University Press.

11- Iphofen, R. (2005). Ethical issues in qualitative health research. In I. Holloway (Ed.), Qualitative Research in Health Care (pp. 17-35). Berkshire, England: Open University Press.

12- Joanna Briggs Institute. (2008). Management of peripheral vascular devices. Best Practice; Evidence based information sheets for health professionals from www.joannabriggs.edu.au/pdf/BPISEng_2_1.pdf

13-Pyett, P. (2003). Validation of qualitative research in the "real world". Qualitative Health Research, 13(8), 1170-1179.

14-Rapport, F. (2005). Hermeneutic phenomenology:the science of interpretation of texts. In I. Hollaway (Ed.), Qualitative Research in Health Care (pp. 125146). Maidenhead, England: Open University Press.

The IISTE is a pioneer in the Open-Access hosting service and academic event management. The aim of the firm is Accelerating Global Knowledge Sharing.

More information about the firm can be found on the homepage:
http://www.iiste.org

CALL FOR JOURNAL PAPERS

There are more than 30 peer-reviewed academic journals hosted under the hosting platform.

Prospective authors of journals can find the submission instruction on the following page: http://www.iiste.org/journals/ All the journals articles are available online to the readers all over the world without financial, legal, or technical barriers other than those inseparable from gaining access to the internet itself. Paper version of the journals is also available upon request of readers and authors.

MORE RESOURCES

Book publication information: http://www.iiste.org/book/

Academic conference: http://www.iiste.org/conference/upcoming-conferences-call-for-paper/

IISTE Knowledge Sharing Partners

EBSCO, Index Copernicus, Ulrich's Periodicals Directory, JournalTOCS, PKP Open Archives Harvester, Bielefeld Academic Search Engine, Elektronische Zeitschriftenbibliothek EZB, Open J-Gate, OCLC WorldCat, Universe Digtial Library , NewJour, Google Scholar