

CHAPTER VI

ANNOTATED BIBLIOGRAPHY

- 1. Abu Elias P. Knowledge, Perception and Care of the mothers on the occurrence of acute respiratory infection (ARI) among under 5 children in Taksin hospital, Bangkok, Thailand, MPH thesis, Faculty of Graduate Studies, Mahidol University, 1995.**

The objectives of this study was to find out the relationship between mother's knowledge, perception and care on the occurrence of acute respiratory infection (ARI) among the under five children. A hospital based cross sectional study was conducted at Taksin Hospital in Bangkok, Thailand. Using structured questionnaires to interview one hundred and fifty mothers of under five children attacked with acute respiratory infection (ARI), who came to the hospital during the period from 5th May to 21st May 1995. The study did not show any statistically significant association between the occurrence of ARI and (socio-demographic factors, environmental factors, maternal factors or children's factors), but it was shown that there was a significant association between mother's knowledge and care, between mother's knowledge and perception and also between mother's perception and care of the mothers towards their children.

- 2. Harunor Rashid. Knowledge and Self care practice of mothers associating with the acute respiratory infection among under 5 children in Ratchaburi province, Thailand. MPH thesis, Faculty of Graduate Studies, Mahidol University, 1996.**

The aim of this study was to find out the relationship between mothers knowledge and self care practices to their children on ARI and the severity of acute respiratory infections among children under five years of age. A hospital based cross sectional study was conducted in two hospitals (maternal and children hospital and Ratchaburi regional hospital) at Ratchaburi province, Thailand. Total one hundred and eighty mothers of under five children with acute respiratory infections who came to the hospitals during the period from 1st April to 23 April were interviewed by using structured questionnaires. The study results showed that mothers knowledge and self care practice were significantly associated with the severity of acute respiratory infections with (p-value=.03 and p-value=.003).

3. MOH, Department of Planning and Health information. National Health Statistic Report, Phnom Penh, 1999.

This National Health Statistic Report provides a wide range of information such as: utilization of health services (out-patient consultations and number of new cases by province and in national hospital , out-patient consultations and new cases by age group by province and in national hospital, antenatal care activities...) and health problems (main health problems of health center outpatient consultation by age group, frequency and age distribution of main health problems among inpatients, main health problems of in-patients...) to all information users. Health care providers, managers and others at all levels are increasingly using health information obtained through the national health information system not merely for the management of their health service delivery and planning, but also for monitoring and evaluation of their activities and programs.

4. MOH, Cambodia, National Maternal and Child Health Center, Acute Respiratory Infection, Diarrhea and Cholera Prevention and Control Program, December 1998.

This book describes Acute Respiratory Infections (ARI) and diarrhoeal disease, including cholera, are the major causes of morbidity and mortality among children under five years of age in Cambodia. Together, these diseases account for over 50% of deaths among children under five. The program for the control of ARI, Diarrhoea and Cholera will, therefore, be a priority effort for the Ministry of Health. The program objective will be to reduce mortality due to pneumonia and diarrhoea among children under five by one third by the year 2000. The program is founded on an integrated approach to plan, implement and monitor activities for controlling ARI, diarrhoeal disease (CDD) and Cholera. The National ARI/CDD/Cholera Program will be instrumental and provide technical support for the introduction and implementation for the Integrated Management of Childhood Illness (IMCI) approach.

5. Nafstad P. et al. Breast feeding, maternal smoking and lower respiratory tract infection. Eur Respir J 1996, 9(12): 2623-9.

The objectives of the study was to assess the relationship between breast feeding and lower respiratory tract infections (LRTIs) during the first year of life, with special reference to maternal smoking. A cohort of 3,754 children born in 1992-1993 in the city of Oslo, Norway was recruited and data were collected at birth, 6 and 12 months of age. Complete information was obtained from 3,238 children (follow-up rate 86%). The main outcome was an episode of a LRTIs, such as: pneumonia, bronchitis or bronchiolitis, based on a self-administered questionnaires addressed to parents when the child was 6 and 12 months old. The outcome was specified as physician-diagnosed. In logistic regression analysis adjusting for confounding, maternal smoking increased the risk of LRTIs in children breast feed for 0-6 months odds ratio (OR) 1.7; 95% confidence interval (95% CI) 1.2-1.4, but not essentially when the child was breastfed for more than 6 months (OR 1.1, 95% CI 0.7-1.6). Short-term breast feeding (0-6 months) and no maternal smoking was related to an adjusted OR of LRTIs of 1.3 (95% CI 1.0-1.7) and short-term breast feeding combined with maternal smoking was related to an adjusted OR of 2.2 (95% CI 1.6-3.1), as compared with long-term breast feeding and no maternal smoking.