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Effectiveness of Nurse Led Intervention on Knowledge and Practices of Primi Mothers Regarding Febrile Convulsion and Preventive Measures in Infants

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ABSTRACT

Children are vital to the nation's present and its future. Fever is a common presentation in pediatric age groups and is the most common reason for healthcare visits. Parents' knowledge is essential for early presentation to healthcare facilities and to prevent possible complications. Febrile convulsion is one of the most common problems in childhood, typically occurring in 2–5% of the children at 3 months to 5 years of age. Febrile convulsions increase the risk of epilepsy in future. The aim of study is to assess the effectiveness of nurse led intervention on knowledge and practice of primi mothers regarding febrile convulsion and preventive measures in infants.

A quantitative approach with pre experimental one group pre-test-post-test design was used. Primi mothers were chosen from selected community area of Surat district by using non-probability purposive sampling technique. The sample size was 118 primi mothers. The nurse led intervention was done for 55 minutes and it includes structured teaching programme and procedure demonstration. Self-structured interview schedule and Inventory checklist were used to collect data from the samples regarding febrile convulsion and preventive measures. Paired t-test showed significant difference between pre test and post test score of knowledge and practice with t value of 23.81 for knowledge and 16.38 for practice. A moderate positive correlation (r= 0.603) was found between post test score of knowledge and practice. Association between post test knowledge score with selected socio demographic variable it found significant with age of mothers, education level, monthly income, and availability of health care facilities. With respect to association between post test practices score with selected socio demographic variable it found significant with mother's educational level and infant's age. The study concluded that the nurse led intervention was effective in improving both the knowledge and practice of primi mothers regarding febrile convulsion and preventive measures in infants.

Keywords: Knowledge, Practice, Primi Mother, Infant, Nurse Led Intervention**,** Febrile Convulsion**.**

INTRODUCTION

Fever is a common presentation in pediatric age groups and is the most common reason for healthcare

visits. Parents' knowledge is essential for early presentation to healthcare facilities and to prevent possible complications. Studies suggest that febrile convulsions (FCs) often cause stress and anxiety for parents, who often assume it may cause brain damage, future epilepsy attacks, mental retardation, physical injury, and even death. This study aims to assess the knowledge, attitude, and practices of FCs among parents. [1] Febrile seizure is one of the most common problems in childhood, typically occurring in 2–5% of the children at 3 months to 5 years of age. [2]

The World Health Organization (WHO) estimated that there were more than 21.65 million sufferers of febrile seizures and more than 216 thousand of them had died. The prevalence of febrile seizures was estimated to be around 6-15% in children between 6 months and 5 years of age, and about 30% had recurrent seizures. The occurrence of febrile seizures increases in children aged 18 months. [3] The results of a research conducted by Salehi et al. (2016) show that febrile seizures in children increase the risk of developing hyperactive impulsive which is a sign and symptom in children with attention deficit hyperactivity disorder. The increased risk is due to lack of parents' knowledge, family support and ability to handle febrile seizures in children. The results of other studies indicate that children with simple febrile seizures have an increased risk of developing epilepsy by 2.4%; whereas children with complex febrile seizures will increase the risk of epilepsy by 6-8%. [4]

The prevalence of febrile convulsion in Asia is 3-9/1000 population and in India is 5.59/1000 population. The prevalence rate of febrile convulsion in south India is 4.14/1000 population and there is a slight predominance of males (prevalence rate of .1/1000 for boys, 0.02/1000 for girls). [5, 6] The nurse should provide parents with written and verbal information about the causes of febrile convulsion and the risk of subsequent events. It is essential to tell the parents that fever is a sign of infection and not a disease. In addition, the nurse must inform the parents about the prognosis of febrile convulsion, so that, parents are fully aware that their child is likely to outgrow the risk of experiencing febrile convulsions.

PROBLEM STATEMENT

"A study to assess the effectiveness of nurse led intervention on knowledge and practices of primi mothers regarding febrile convulsion and preventive measures in infants at selected community area of Surat district."

OBJECTIVES

- To assess the knowledge and practice of primi mothers regarding febrile convulsions and preventive measures in infants before and after nurse led intervention.
- To compare pre-test and post-test mean scores of knowledge and practice of primi mothers regarding febrile convulsions and preventive measures in infants.
- To find out correlation between mean post test score of knowledge and practice of primi mothers regarding febrile convulsions and preventive measures in infants.
- To find out the association between mean post-test knowledge score and practice score with selected demographic variables among primi mothers.

HYPOTHESIS

1H1: There will be significant difference between pre-test and post-test score of knowledge of primi mothers regarding febrile convulsions and preventive measures in infants at selected community area of Surat district.

2H1: There will be significant difference between pre-test and post-test score of practice of primi mothers regarding febrile convulsion and preventive measures in infants at selected community area of Surat district.
3H1: There will be a significant correlation between post test score of Knowledge and practice of primi mothers regarding febrile convulsion and preventive measures in infants at selected community area of Surat district.
4H1: There will be a significant association between the post-test knowledge and practice score on febrile convulsion and preventive measures in infants with selected demographic variables of primi mothers.

INCLUSION CRITERIA

- Primi Mothers of infant who are willing to participate.
- Primi Mothers of infant who are available at the time of data collection.
- Primi mothers who have one or less than one year old infant.

EXCLUSION CRITERIA

Primi mothers who suffer from any mental illness.

RESEARCH METHODOLOGY

A quantitative approach with pre experimental one group pre-test-post-test design was conducted to assess the effectiveness of nurse led intervention on Knowledge and practices of primi mothers regarding febrile convulsion and preventive measures in infants. Primi mothers were chosen from selected community area of Surat district by using non-probability purposive sampling technique. Formal permission was obtained from the authority before data collection. The researcher first conducted pre test in 118 primi mothers and on the same day nurse led intervention was done for 55 minutes and after 7 days post test was done for 109 primi mothers as 9 primi mothers were not available during post test. Self-structured interview schedule and Inventory checklist were used to collect data from the samples regarding febrile convulsion and preventive measures. The descriptive and inferential statistics which includes mean, median, mode, standard deviation, paired t- test, Karlpearson's correlation coefficient and Chi- square test were used to analyze the data. The conceptual framework selected for this study was based on Ernestine Wiedenbach's "The Helping Art of Clinical Nursing" theory (1969).

DATA ANALYSIS AND INTERPRETATION

The collected data were systematically organized in master sheet and analyzed by using descriptive and inferential statistics.

1. Socio demographic characteristics of primi mothers

The study finding revealed that in terms of age, the majority 58 (49.2%) of primi mothers were in the age group of 18–22 years. Majority 51 (43.2%) mothers had completed secondary education. In terms of religion, the majority samples were Hindu 101 (85.6%), because this area is Hindu dominant area. Regarding mother's occupation, majority of samples 102 (86.4%) was house maker. Regarding monthly income, the highest proportion 60 (50.9%) had an income between Rs.10,001-20,000. Majority of samples were 104 (88.1%) belonged to joint families. Highest 44 (37.3%) infants were in the age group of 7–9 months. 81 (68.6%) infants were female compare to male 37 (31.4%).

N1=118

SOCIO DEMOGRAPHIC VARIABLES	CATEGORY	FREQUENCY	PERCENTAGE
Age (In year)	18-22	58	49.2%
	23-27	42	35.6%
	28-32	15	12.8%
	33 and above	3	2.4%
Mother's education	No formal education	1	0.8%
	Primary	37	31.4%
	Secondary	51	43.2%
	Higher secondary & Above	29	24.6%
Religion	Hindu	101	85.6%
	Muslim	3	2.5%
	Christian	8	6.8%
	Other	6	5.1%
Mother's occupation	House maker	102	86.4%
	Private employee	8	6.8%
	Government employee	3	2.5%
	Business	5	4.3%
Family Income (Per month, In rupee)	5,001- 10,000	16	13.6%
	10,001- 20,000	60	50.8%
	Above 20,000	42	35.6%
Type of family	Joint Family	104	88.1%
	Extended family	5	4.2%
	Nuclear family	9	7.7%
Infant's Age (in month)	1-3 month	21	17.8%
	4-6 month	29	24.6%
	7-9 month	44	37.3%
	10-12 month	24	20.3%
Infant's gender	Female	81	68.6%
	Male	37	31.4%

Table 1: Demographic Characteristics of Primi mothers and infant

2. Distribution of primi mothers and their infant according to their medical data.

The study finding revealed that in terms of age, The highest proportion of infants had no history of illness 78(66.1%), while the lowest 1 or 2 (0.8% each) had convulsion, fever with cold and cough, or fever with vomiting and diarrhea. Regarding hospitalization, the majority 98 (83.1%) had no history of hospitalization, whereas the least 1(0.8% each) were hospitalized for fever with vomiting and diarrhea, MAS with convulsion, RDS with convulsion, LBW with jaundice, or MAS. None of the infants 118 (100%) had a history of febrile convulsions. In terms of health-care facilities, majority 68 (57.6%) of primi mothers were using other health care facilities (like: Private hospital, Private clinics etc.)

N=118

SOCIO DEMOGRAPHIC VARIABLES	CATEGORY	FREQUENCY	PERCENTAGE
History of illness	No	78	66.2%
	Yes (cold and cough)	15	12.7%
	Yes (Convulsion)	1	0.8%
	yes (Fever and vomit, Diarrhea)	1	0.8%
	Yes (fever, cold and cough)	1	0.8%
	Yes (Fever, vomiting)	2	1.7%
	Yes (Fever)	12	10.2%
	Yes (Jaundice)	4	3.4%
	Yes (vomit)	4	3.4%
History of hospitalization	No	98	83.1%
	Yes (Fever, vomiting)	1	0.8%
	Yes (Jaundice)	5	4.5%
	Yes (LBW)	6	5.1%
	Yes (MAS, Convulsion)	1	0.8%
	Yes (MAS)	2	1.7%
	Yes (RDS, convulsion)	1	0.8%
	Yes (RDS)	1	0.8%
	Yes(LBW, Jaundice)	1	0.8%
	Yes(LBW)	1	0.8%
	Yes(Birth Asphyxia)	1	0.8%
History of febrile convulsion	Yes	0	0%
	No	118	100.0%
Health care facilities available	SC	42	35.6%
	PHC	8	6.8%
	Other health care facility	68	57.6%

Table 2: Distribution of Primi mothers and infant according to their medical data.

3. Pre-test and post-test knowledge Score

The pre test knowledge scores of primi mothers regarding febrile convulsion and preventive measures was categorized into good knowledge (80-100%), Average knowledge (60-79%) and poor knowledge (<60%). Primi mother's pre test level of knowledge shows that maximum 104 (88.2%) samples were having poor knowledge, while 13 (11.0%) had average knowledge, and only 1 (0.8%) demonstrated good knowledge. After nurse led intervention in post-test, the number of samples with poor knowledge reduced drastically to 7 (6.4%). At the same time, 55 (50.5%) of the samples showed average knowledge and 47 (43.1%) demonstrated good knowledge.

N1= 118 N2=109

Before and After Level of Knowledge	Pre-test Knowledge		Post-test Knowledge	
	Frequency	Percent	Frequency	Percent
Poor Knowledge	104	88.2%	7	6.4%

Average Knowledge	13	11.0%	55	50.5%
Good Knowledge	1	0.8%	47	43.1%

Table 3: Pre-test and post-test knowledge score

4. Pre-test and post-test practice Score

The pre test practice scores of primi mothers regarding febrile convulsion and preventive measures was categorized into good practice (80-100%), Average practice (60-79%) and poor practice (<60%). During the pretest, majority of primi mothers 70 (59.3%) demonstrated average practice, while 37 (31.4%) samples had poor practice, and only 11 (9.3%) had good practice. After the nurse-led intervention, a remarkable improvement in practice was seen. In the posttest, no mother remained in the poor practice category 0 (0%), 25 (22.9%) demonstrated average practice, and a majority 84 (77.1%) demonstrated good practice.

N1= 118 **N2=109**

Before and After Level of Practice	**Pre-test Practice**		**Post-test Practice**	
	Frequency	**Percent**	**Frequency**	**Percent**
Poor Practice	37	31.4%	0	0%
Average Practice	70	59.3%	25	22.9%
Good Practice	11	9.3%	84	77.1%

Table 4: Pre-test and post-test practice score

5. Comparison between pre test and post test knowledge and practice score

The tool consists of 30 self- structured interview schedules and 15 inventory checklist questions were used to test the knowledge and practice of primi mothers. In terms of knowledge, the mean score rose from 14.1 in pre test to 22.7 in the post test, showing a mean gain of 8.6 with standard deviation of 3.4. The calculated paired t-test value was 23.81which was far greater than the critical table value of 1.98 at 0.05 level of significance with 108 degree of freedom and the p-value of 0.000,which conforms that statistically significant improvement in knowledge was found after the intervention.

N1= 109, N2=109

Level of knowledge	**Mean**	**SD**	**Paired t test Score**	**P value**
Pre test	14.1	3.71	23.81	<0.05
Post test	22.7	3.4		

Table 5: Comparison between pre-test and post-test knowledge score

Regarding practice, the pretest mean score was 9.60 (SD=1.93), which increased to 12.50 (SD=1.41) in the posttest. The mean difference was 2.98, with a paired t-test score of 16.38. Again, the p-value was 0.000, showing a significant improvement in mothers' practices following the nurse-led intervention. Both results confirm that the nurse led intervention was highly effective in improving knowledge and practices related to febrile convulsions and their prevention.

N1= 109, N2=109

Level of practice	Mean	SD	Paired t test Score	P value
Pre test	9.60	1.93	16.38	<0.05
Post test	12.50	1.41		

Table 6: Comparison between pre-test and post-test practice score

6. Correlation between knowledge and practice scores

The correlation between knowledge and practice scores of primi mothers regarding febrile convulsion and preventive measures, the mean knowledge score was 22.7 and the mean practice score was 12.50. The correlation coefficient (r= 0.603) indicates a moderate positive correlation between knowledge and practice. This findings suggest that enhancing knowledge scores through intervention can positively influence primi mother's practice, highlight the importance of nurse led intervention in improving both understanding and application of care measures.

N2=109

Score	Mean Score	Correlation coefficient
Knowledge Score	22.7	0.603
Practice Score	12.50	

Table 7: Correlation between post test knowledge and practice score

7. Association between knowledge and practice score of primi mothers with their socio demographic variables.

The study found that, statistically significant association between knowledge scores and the age of mothers ($\chi^2 = 18.10$, $p = 0.006$), education level ($\chi^2 = 37.45$, $p = 0.000$), and monthly income ($\chi^2 = 18.459$, $p = 0.001$). From the above variables, it could understand that there existed a meaningful impact on the knowledge level after the intervention.

N2=109

Socio demographic Variables	Category	Average	Good	Poor	χ2	df	P-Value	Level of sign.
Age	18-22	35	14	4	**18.10**	**6**	**0.006**	Significant
	23-27	17	19	3				
	28-32	3	11	0				
	33 and above	0	3	0				
Mother's education	No formal education	0	1	0	**37.45**	**6**	**0.000**	Significant
	Primary	23	7	4				
	secondary	30	15	3				
	Higher secondary & Above	2	24	0				

Religion	Hindu	50	37	7	4.544	6	0.603	Not Significant
	Muslim	1	2	0				
	Christian	3	5	0				
	Other	1	3	0				
Mother's occupation	Home maker	51	37	7	8.983	6	0.175	Not Significant
	Private employee	1	6	0				
	Government Employee	0	2	0				
	Business	3	2	0				
Monthly Income	5001-10000	10	3	2	**18.459**	**4**	**0.001**	**Significant**
	10001-20000	19	34	1				
	above 20000	26	10	4				
Type of family	Joint Family	49	40	7	2.508	4	0.643	Not Significant
	Nuclear family	5	4	0				
	Extended family	1	3	0				
Infant's Age	1-3 month	8	10	2	3.304	6	0.770	Not Significant
	4-6 month	16	8	2				
	7-9 month	21	18	2				
	10-12 month	10	11	1				
Infant's gender	Female	37	30	7	3.676	2	0.159	Not Significant
	Male	18	17	0				

Note: S-Significant at 5% level (p<0.05), NS-Not significant at 5% level (p>0.05)

Table 8: Association between post test knowledge score with socio demographic variables

The data presented in the table no 8 show that the computed chi-square values indicate a statistically significant association between the post-test practice scores of samples regarding febrile convulsions and preventive measures with their selected socio demographic variables like, mothers' education level (χ^2 = 15.434, p = 0.001) and the infant's age (χ^2 = 8.826, p = 0.040), indicating that these factors had a meaningful influence on the practical responses of mothers following the nurse-led intervention because P value is less than 0.05.

N2= 109

Socio demographic Variables	Category	Average	Good	$\chi 2$	df	P-Value	Level of signi.
Age	18-22	15	38	2.478	3	0.479	Not Significant
	23-27	8	31				
	28-32	2	12				
	33 and above	0	3				
Mother's education	No formal education	1	0	**15.434**	**3**	**0.001**	**Significant**
	Primary	7	27				
	Secondary	17	31				
	Higher secondary & Above	0	26				
Religion	Hindu	23	71	6.942	3	0.074	Not Significant
	Muslim	2	1				
	Christian	0	8				
	Other	0	4				
Mother's occupation	House maker	25	70	4.781	3	0.189	Not Significant
	Private Employee	0	7				
	Government Employee	0	2				
	Business	0	5				
Monthly Income (in rupee)	5001-10000	6	9	3.768	2	0.152	Not Significant
	10001-20000	9	45				
	above 20000	10	30				
Type of family	Joint Family	25	71	4.393	2	0.111	Not Significant
	Nuclear family	0	9				
	Extended family	0	4				
Infant's Age	1-3 month	5	15	**8.826**	**3**	**0.040**	**Significant**
	4-6 month	10	16				
	7-9 month	9	32				
	10-12 month	1	21				
Infant's gender	Female	19	55	.979	1	0.322	Not Significant
	Male	6	29				

Note: S-Significant at 5% level (p<0.05), NS-Not significant at 5% level (p>0.05)

Table 9: Association between post test practice score with socio demographic variables

DISCUSSION AND CONCLUSION

This study mainly aimed to assess the knowledge and practice of primi mothers regarding febrile convulsion and preventive measures and the effectiveness of nurse led intervention.

Distribution of socio demographic variables of primi mothers.

The study finding revealed that in terms of age, the majority 58 (49.2%) of primi mothers were in the age group of 18–22 years. Majority 51 (43.2%) mothers had completed secondary education. In terms of religion, the majority samples were Hindu 101 (85.6%), because this area is Hindu dominant area. Regarding mother's occupation, majority of samples 102 (86.4%) were home maker. Regarding monthly income, the highest proportion 60 (50.9%) had an income between 10001-20,000. Majority of samples were 104 (88.1%) belonged to joint families. Highest 44 (37.3%) infants were in the age group of 7–9 months. 81 (68.6%) infants were female compare to male 37 (31.4%).

Distribution of primi mothers and infants according to medical data.

The study finding revealed that highest proportion of infants had no history of illness 78(66.1%), while the lowest 1 or 2 (0.8% each) had convulsion, fever with cold and cough, or fever with vomiting and diarrhea. Regarding hospitalization, the majority 98 (83.1%) had no history of hospitalization, whereas the least 1(0.8% each) were hospitalized for fever with vomiting and diarrhea, MAS with convulsion, RDS with convulsion, LBW with jaundice, or MAS. None of the infants 118 (100%) had a history of febrile convulsions. In terms of health-care facilities, majority 68 (57.6%) of primi mothers were using other health care facilities (like: Private hospital, Private clinics etc.)

The present study finding was supported by cross sectional study on parents' knowledge, attitude, and practice regarding febrile convulsion in children in Riyadh, Saudi Arabia Abdulaziz Almousa et.al in 2023. The result shows that 415 recruited parents, 350 (84.3%) were mothers, and 56.4% were government employees. Regarding monthly income, 172 (41.4%) were earning more than 15,000 SAR per month. Regarding medical history 349 (84.1%) were no family history of febrile convulsion and 278(67%) not experience an episode of febrile convulsion. [1]

To assess the knowledge and practice of primi mothers regarding febrile convulsions and preventive measures in infants.

The pretest level of knowledge, it shows that the majority of samples 104 (88.2%) had poor knowledge, 13 (11.0%) had average knowledge, and only 1 (0.8%) had good knowledge regarding febrile convulsions and their preventive measures. After nurse led intervention 55(50.5%) samples had average knowledge and 47(43.1%) had a good knowledge, and 7(6.4%) had a poor knowledge. With regard to the participant's level of practice in the pretest, 37 (31.4%) samples had poor practice, 70 (59.3%) showed average practice, and only 11 (9.3%) had good practice. However, after the nurse-led intervention, a remarkable improvement was seen. In the posttest, no primi mother remained in the poor practice category 0 (0%), 25 (22.9%) showed average practice, and a majority, 84 (77.1%), achieved good practice. This data clearly indicates that the intervention was effective in improving the knowledge and practical responses of mothers regarding febrile convulsions and taking preventive steps for their infants.

The present study finding was supported by quasi experimental study on effect of educational program on mothers' knowledge and practices regarding care for their children with febrile convulsions. The result shows that the, the minority 3.8% of studied mothers has good knowledge during pre- program implementation, while this percentage was improved to 92.5% post- program implementation also the majority 95% of the studied mothers had satisfactory reported practices regarding F.C post-program

implementation. The study concluded that the educational program was effective in improving mother's knowledge & practices level regarding care for their children with febrile convulsion. [7]

To compare pre-test and post-test mean scores of knowledge and practice of primi mothers regarding febrile convulsions and preventive measures in infants.

The study findings suggest that mean pre-test knowledge score was 14.1 (SD=3.71) and mean post test knowledge score was 22.7 (SD= 3.37) and it was higher than pre-test score, respectively with a mean difference of 8.58. The calculated "t" value (23.81) was higher than the table value of 1.98. Mean pre-test practice score was 9.6 (SD= 1.93) and in post test practice score was 12.5(SD= 1.41) which was higher than pre-test score, respectively with a mean difference of 2.98. The calculated "t" value (16.38) was higher than the table value of 1.986 so this findings suggested that research hypothesis was accepted and null hypothesis was rejected. The nurse led intervention was effective in improving the knowledge and practice of primi mothers at 0.05 level of significance.

The Present study finding was supported by a quasi-experimental research study on effect of implementing an educational program on parental knowledge and practice about febrile convulsion in 2021 by Fatma Ahmed, Taghreed Mohamad. This study result found that, pre test mean knowledge score was 3.26± 1.52 and in post test mean score was 5.647± 2.552 so it indicated that there was a statistically significant improvement in the knowledge of the samples in post- intervention. In pre test, mean practice score was 5.646 ± 2.25 and in post test, mean score was 6.55± 2.32 so it indicate that there was a statistically significant improvement in the practice of the samples in post- intervention.[8]

To find out correlation between mean post test score of knowledge and practice of primi mothers regarding febrile convulsions and preventive measures in infants.

In relation to correlation between mean post test score of knowledge and practice of primi mothers regarding febrile convulsion and preventive measure, Karl Pearson co-efficient correlation was used & findings suggested that there was moderate positive correlation r= 0.603** which indicated that as knowledge increased practice also improved.

The present study findings was supported by a descriptive- analytical study which was done on 2014 by Rostmi Ghadi and Azin Chakeri on knowledge, attitude and home management practice of mothers of children with febrile seizures among aged less than 6 year in Iran. The result revealed that a significant positive correlation between mothers knowledge and their home management practices (r=0.62, p<0.01). This study clearly showed that improvement in knowledge was closely lined with improved practice. The Present study finding was also supported by a quasi experimental study on Effect of Bite-Sized Teaching Sessions on Parent's Knowledge, Attitude, and Practice Regarding Febrile Seizures in Children in 2022 by Hanaa I.EI Sayed. The result showed that there was a significant correlation between knowledge and practice about febrile convulsions, ($P < 0.001$). The finding suggested that as knowledge increased, practice also improved. [9]

To find out the association between mean post-test knowledge score and practice score with selected demographic variables among primi mothers.

A statistically significant association was found between knowledge scores and the age of mothers ($\chi^2 = 18.10$, $p = 0.006$), education level ($\chi^2 = 37.45$, $p = 0.000$), monthly income ($\chi^2 = 18.459$, $p = 0.001$), and availability of health care facilities ($\chi^2 = 46.38$, $p = 0.000$). From the above variables, we could understand that there existed a meaningful impact on the knowledge level after the intervention. A statistically significant association was observed with the mothers' education level ($\chi^2 = 15.434$, $p = .001$) and the infant's age ($\chi^2 = 8.826$, $p = .040$), indicating that these factors had a meaningful influence on the practical

responses of mothers following the nurse-led intervention. The Present study finding is supported by descriptive study on Assessment of Mothers' Knowledge about Febrile Convulsions of Children at Ibn-Albalady Hospital in Baghdad City in 2021 by Ali Obaed Shneshil. The result showed that mothers' knowledge regarding febrile seizures was significantly associated with positive history of febrile seizures, urban residence, higher parental education, and working mothers. From the findings of the study, the researcher concluded that the nurse led intervention was effective in improving both the knowledge and practice of primi mothers regarding febrile convulsion and their preventive measures in infants. [10]

IMPLICATIONS OF THE STUDY

The findings of the present study have implication in the field of nursing education, nursing practice, nursing research and nursing administration which are discuss as follows:

Nursing Education:

Nursing students should be provided with a learning experience in planning and organizing health education programme regarding febrile convulsion and preventive measures. Content on early recognition, first aid management and preventive strategy for febrile convulsion can be incorporate into the nursing curriculum. Regular workshops, demonstration and simulation sessions will help students gain confidence in delivering nurse led interventions effectively.

Nursing Practice:

Nurses are key persons for health team, who play a major role in health promotions and maintenance. Nursing is a practicing profession so, the researcher generally integrates findings into practice. Health education improves knowledge and practice regarding febrile convulsion and preventive measures. The result of the study is useful in planning the health care action in different setting. Realizing the health care needs of people. Nurses must incorporate scientific based knowledge.

Nursing Research:

The findings of the present study serve as the basis for the profession and the students to conduct further study. Sharing the study findings through conferences, poster and paper presentations, as well as article publications, will promote effective application of the results and provide valuable guidance to the community in understanding and utilizing research knowledge on febrile convulsion and preventive measures. It will also encourage other researchers to conduct further more similar studies on larger samples.

Nursing Administration:

The findings of the present study suggest that nursing administrators at national, state, district and institutional levels should focus their attention on educating mothers about the prevention and management of febrile convulsion. Nurse administrator can plan and implement regular awareness camping and structured teaching programme in community setting to strengthen mother's knowledge and practical skills. By incorporating these educational activities into routine maternal and child health services, nursing administration can play a key role in reducing complication of febrile convulsion and improving children health outcomes.

LIMITATION:

- Sample size was small hence findings cannot be generalized.
- Dropout of primi mothers during post test was not in the control of the researcher.

RECOMMENDATIONS:

- On the basis of finding from the study that has been conducted certain recommendations have been made for future studies.
- A similar study can be conducted on large samples.
- A similar study can be conducted in different setting.
- Can be conducted by using control group.
- Well organized educational program should be applied for all parents of children.

CONCLUSION

From the findings of the study, the researcher concluded that the nurse led intervention was effective in improving both the knowledge and practice of primi others regarding febrile convulsion and their preventive measures in infants. In addition, the researcher found a moderate positive correlation between knowledge and practice scores, indicating that improved knowledge leads to better preventive practice. These results indicate that nurse led intervention was an effective strategy to strengthen mothers confidence and ability to manage and prevent febrile convulsion and reduced risk of complications. Ongoing community based teaching and periodic reinforcement sessions are recommended to reinforce preventive practice and build upon these positive outcomes.

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