

Knowledge and Attitude of Women of Reproductive Age toward Clubfoot: A Rural Community Dwelling

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Abstract

Background: Clubfoot is a congenital anomaly in which the ankle is twisted outward from the normal position. Clubfoot is one of the most common birth defect in the world that can cause disability. Approximately 150.000 – 200.000 babies are born with clubfoot every year. Clubfoot is a neglected disease. Immediate intervention is needed to treat the patient with Clubfoot. One of the most common barriers of the treatment is the knowledge and attitude of the society about Clubfoot. This study aimed to identify the knowledge and attitude of the society especially women of reproductive age toward clubfoot in Cikeruh village Jatinangor sub-district in 2014.

Methods: This study was conducted to 100 women of reproductive age with age interval 15–49 years obtained by using the purposive sampling method, and who live in Cikeruh village Jatinangor. A questionnaire was used as instrument to collect data which was later categorized as good, fair, and low for the knowledge and positive and negative for attitude.

Results: Out of 100 samples of women of reproductive age in Cikeruh village, who were asked about clubfoot, 39% had a good knowledge and 61% had a fair knowledge. There were 42% of respondent who had a negative attitude toward clubfoot and 58% had positive attitude.

Conclusions: The majority sample of women of reproductive age in Cikeruh village in 2014 have a fair knowledge about clubfoot. The ratio between positive and negative attitude toward clubfoot is almost 1:1.

Keywords: Attitude, clubfoot, knowledge

Introduction

Clubfoot or congenital talipes equinovarus is one of the most common serious birth defects–caused by congenital anomaly which is likely to occur in the world.¹ At least 150.000–200.000 babies are born with clubfoot every year. Approximately 80% of the cases occur in developing countries.² In Indonesia the frequency of congenital clubfoot is 1 in 1000 births. Amniocentesis process and smoking habit on childbearing women can increase the ratio of giving birth child with clubfoot. Some studies showed that variation on PITX1–PITX4 gen has a major role in mechanism of clubfoot.^{3–5}

Congenital anomaly like clubfoot is an abnormality that should be treated at an earlier age. However, clubfoot is still categorized as

a neglected disease nowadays.⁶ Some of the barriers on treating congenital anomaly like clubfoot are knowledge and attitude of the society toward clubfoot itself. Bedford in his study stated that there are four main barriers in society in treating clubfoot: knowledge on the condition of his body related to disease and how to treat it, attitude of the family, way of thinking, and socio-cultural stress.⁷ Therefore, the purpose of this study was to identify the knowledge and attitude toward clubfoot among women in their reproductive age who would bear a child in the rural area.

Methods

This descriptive study was conducted in July–November in Cikeruh Village, Jatinangor Sub-district as one of the rural areas in West Java,

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Table 1 Characteristic of Sample Women with Reproductive Age in Cikeruh Village, Jatinangor Sub-district toward Clubfoot in 2014

	Frequency	Percentage
Age		
15-19	0	0%
20-24	13	13%
25-29	19	19%
30-34	22	22%
35-39	18	18%
40-44	13	13%
45-49	15	15%
Marriage		
Yes	99	99%
No	1	1%
Education level		
Elementary school	20	20%
Junior high school	36	36%
Senior high school	40	40%
College	4	4%
Willing to have a child or more children		
Yes	45	45%
No	55	55%

Indonesia. This study was approved by the Health Research Ethics Committee, Faculty of Medicine, Universitas Padjadjaran.

This study used the purposive sampling method. There were 100 women of reproductive age between 15 to 49 years who lived in Cikeruh Village. In order to measure the knowledge and attitude of the respondent toward the clubfoot, this study used the questionnaire which had been through validity and reliability process. The collected data were then processed and grouped based on percentage of the total score from the respondent answer. Knowledge was categorized into 3 groups: good ($\geq 76\%$), fair

(56%–75%), and low ($\leq 55\%$). The category of attitude was grouped based on the position of the total score toward the median result from scores that were obtained from every respondent. The group obtaining results more than or the same as the median was categorized as having a positive attitude. The group which had results below the median was categorized as having a negative attitude.

Results

This study discovered that there was no woman under 19 years of age. Most of the respondents were 30–34 years old and had

Table 2 Distribution of Knowledge Level of Women of Reproductive Age in Cikeruh Village Jatinangor Sub-district toward Clubfoot in 2014

Knowledge level	Category of score	Frequency n=100	Percentage
Good	$\geq 76\%$	39	39%
Fair	56%–75%	61	61%
Low	$\leq 55\%$	0	0

Table 3 Distribution of Attitude Level of Women with Reproductive Age in Cikeruh Village Jatiningor Sub-district toward Clubfoot in 2014

Attitude	Category of score	Frequency	Percentage
Positive	≥Median	58	58%
Negative	< Median	42	42%

a low level of education. Regarding marital status, only one respondent was single. The number of respondents who would have more children was less compared to respondents who would have a child or more children.

Based on the distribution of knowledge level of women of reproductive age, 61% of sample had fair knowledge about clubfoot. The rest or 39% of sample had good knowledge. (Table 2)

Furthermore, this study discovered that more than half of the respondents or 58% had positive knowledge toward clubfoot. (Table 3)

Discussion

As much as 61% reproductive-age women who were interviewed had fair knowledge toward clubfoot. This finding differed from the results stated by Aziza et al. in her study about knowledge of the family with clubfoot toward clubfoot in Karachi, Pakistan⁸ which indicated that the majority of the respondent have low knowledge toward it. Some respondents even believe that a child with clubfoot would maintain their condition live long that way. The minimum level of knowledge of course will impact to the treatment-seeking behavior. Boardman et al.¹ in his study stated that the minimum level of knowledge will delay the treatment.^{1,9}

Most of the respondents had a positive attitude toward clubfoot. This findings was different from research findings which is claimed by Lemacks et al.¹⁰ that parents of the child with congenital anomaly tend to get negative implication physically and mentally. It certainly can have a negative influence on the attitude of society, especially in women of reproductive age. Furthermore, Lemacks et al.¹⁰ revealed that parents who have children with congenital abnormalities tend to close themselves off from social life which is likely to exacerbate the stress levels of parents. The stress level is an indicator of a negative attitude.¹⁰

The limitation of this study was that not every hamlet in Cikeruh village was represented since not all population members

had the same opportunity to be the sample of this study as it used the purposive sampling.

It can be concluded that the majority of women of reproductive age have fair knowledge (61%) toward clubfoot in Cikeruh Village in 2014. The majority of respondents (58%) have positive attitude toward clubfoot. It is quite surprising that there are no single respondent who have low knowledge about clubfoot.

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