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INTERVENTIONS BY MOTHERS OF 1-6 YEAR OLD CHILDREN AFTER HOME ACCIDENTS

Belkıs KARATAŞ, PhD,* Elife KETTAŞ, MSc, Sabire YURTSEVER, PhD

Department of Nursing, School of Nursing, Mersin University, Mersin,

Turkey

ABSTRACT

Purpose: The purpose of the research was to determine the interventions after home accidents by women with a child between 1-6 years old.

Instrument And Methods: The research was conducted as a descriptive study in the neighborhoods served by Çukurova Health Clinic affiliated with Mersin province center municipality. Using a simple random sampling method 100 women were taken into the sample by numbering the 1-6 year old child monitoring records. Data were collected on a questionnaire. Percentage distribution and Chi square test were used in the analysis of data obtained in the research.

Findings: The children of 66.0% of the women had had at least one home accident and the most frequent of the accidents was falling (66.7%) followed by burns (43.9%). The majority of women, following their child's fall (61.4%) applied a wound ointment and took the child to a health care facility and following a burn to their child 44.8% of the women used a cold application and took the child to a health care facility. The overwhelming majority of the women learned about first aid for childhood accidents from the people close to them, such as a relative or neighbor. There was no statistically significant difference between the women's sociodemographic characteristics and frequency of home accidents and the kind of first aid used for home accidents ($P>0.05$).

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

Results: The frequency of accidents in the homes of children between 1-6 years was high, and the majority of the first aid treatments administered by women following an accident was correct. Although the percentage was small some of the women did use inappropriate procedures.

Keywords: Accident, injury, home accidents, childhood accidents

1.INTRODUCTION

Home accidents are those that occur inside a home or entryway and in areas connected to the home, such as the garden and garage. Every year home accidents are the cause for approximately one third of those who come to the hospital in Turkey. The majority of childhood accidents occur in the home. Home accidents are an important issue for consideration in the world and in our country as a cause for various injuries, disabilities and death for preschool age children between 0-6 years old. When accident is discussed in general what comes to mind is an event that occurs at an unexpected time in an unexpected manner that causes personal or physical loss. However the majority of home accidents, which are increasing in importance among accidents, can be prevented when necessary precautions are taken (Some Recommendations for Preventing Home Accidents, 2005; What is Home Accidents? 2005; Bertan and Çakır 1995).

In the majority of developed and developing countries accidents are the cause of half of the deaths after the first year of life (Kendrick, Marsh, Fielding et al. 1999; Chan, Luis, Chow et al. 2003). In the United States of America (USA), which has done the most extensive research about accidents, 25 million children are injured in accidents every year. In the USA one fourth of children are treated for a home accident (What is Home Accidents? 2005). Every year as well 12,000 children under 14 years of age die and 50,000 children are left disabled from an accident. In England, where regular statistics are kept, 40% of deaths from accidents are home accidents. The British National Health Department (1999) has reported that accidents are one of four health areas that have priority for health care. The Prevention of Child Accidents Trust (2001) in England determined that in 1999 as a result of home accidents, 580,000 children were injured, 86 children died and that the majority of home accidents that were the cause of death and disability in children under 6 years of age could be prevented with basic safety measures (Close, 2002; Watson, Kendrick, Coupland et al. 2005). According to the Office for National Statistics data in the UK accidents are the cause of the death of 400 children every year (Office for National Statistics (ONS), 2003).

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

It is estimated that there are more home accidents than other accidents. However there are insufficient records of home accidents. Hospital records do not accurately reflect the actual percentage of accidents in the community (Güler and Çobanoğlu, 1994). In addition according to the Health Ministry statistics in our country the fourth leading cause of death is accidents. According to the State Statistical Institute data for the year 2001 accidents were also the fourth leading cause of death for children between 1-4 years of age (What is Home Accident? 2005). Forty percent of deaths in the 1-4 year old group are related to accidents (Güler and Çobanoğlu, 1994). According to studies conducted in our country by the Health Ministry in the last 5 years 120,000 children were taken to the hospital as a result of home accidents and 2000 of these children lost their lives. According to various research conducted in Turkey about home accidents, 18-25% of all accidents occur in the home. In a study conducted in 11 hospitals in Istanbul in the year 2001 one third of the emergency cases were a result of home accidents (What is Home Accident? 2005). In Hong Kong approximately 50% of accidents in the under 5 year old age group of children occur in the home (Chow, Chan, Chiv, 1993).

Although there are many different types of accidents in our country and in various other countries the most frequently seen types of home accidents are falls, burns and poisoning (Close, 2002; Güler and Çobanoğlu, 1994). In Hong Kong in children in the 1-4 year old group out of every 100,000 deaths 6.8 are caused by accidents and poisoning (Chan, Luis, Chow et al. 2003). In a research conducted by UNICEF in 2003 the most common types of accidents that occur in children between 0-6 years are falls (63%), burns (16%), car accidents (7%), and poisoning (4.4%) (What is Home Accident? 2005).

The reason why accidents are common particularly in the 0-6 year old children is that this age group children have a narrow field of vision, have undeveloped ability to localize sound well, have few experiences, have not developed a sense of danger and have a curiosity to learn about and investigate everything in their environment (What is Home Accident? 2005; Kılıç, 1993).

The high percentage of home accidents among the causes of injury and death in children gives importance to the interventions that are carried out by those near the child when an accident occurs. Taking into consideration that in the preschool period the person near the child the majority of the time is the child's mother it is necessary for mothers to have information about this subject and interventions by nurses and midwives.

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

Research Purpose: The purpose of the research was to determine the interventions after home accidents by women with a child between 1-6 years old.

2. INSTRUMENT AND METHODS

The research population was the region served by 22 public health clinics affiliated with Mersin province center municipality. For the purpose of determining the knowledge and interventions for home accidents by women of 1-6 year old children, Çukurova Health Clinic was chosen from the 22 public health clinics in the research population with a simple random sampling method. Çukurova Health Clinic serves the two neighborhoods of Çukurova and Çavuşlu and there are a total of 150 streets in these two neighborhoods. Ten percent of these streets (15 streets) were chosen and from every street 6-7 women with a child between 1-6 years of age were chosen by numbering the child monitoring record cards and selecting them with a simple random method to determine 100 women for the sample.

Research data were collected between 15 October 2002 and 15 April 2003 using a questionnaire developed by the investigators. Before using the form required permissions were obtained and verbal permission was obtained from the women after the purpose of the research was explained to them. The data was collected by the investigator using the questionnaire in face to face interviews with mothers of 1-6 year old children in their homes. It took an average of 20-25 minutes to complete the form with the women. Care was taken to put the women at ease during the data collection. After the data that were collected were evaluated and coded by the investigators SPSS for Windows 10.0 (Statistical package for Social Sciences for Windows) packet program was used for evaluation. Distribution of percentages and Chi square test were used in the data analysis.

3. FINDINGS

In the examination of the descriptive characteristics of the women in the research it was determined that their mean age was 29.7 ± 5.6 , and nearly half (45.0%) had a middle school education or higher. Only 4% of the women and all of their spouses were employed, 81.0% had health care insurance and 69.0% were receiving more than minimum wage monthly salaries (226 YTL). The overwhelming majority of the women were in nuclear type families (91.0%), had from three to five people in the family (88.0%), and had one to three children (93.0%).

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

The children of 66.0% of the women had had at least one home accident. It has determined that some of the children have had more than one home accidents (91 home accidents). When we examined the distribution of type of home accidents it could be seen that the most common was falls (66.7%), followed by burns (43.9%).

When we examine the distribution of children having home accidents according to their age it can be seen that there were more accidents for the 0-36 month old children for every type of accident. The examination of the distribution based on gender also shows that there were more falls and burns in the male children and more foreign object aspiration and poisoning with the female children (Table I).

The distribution of the manner of how the home accidents occurred is shown in Table II. According to the table the majority of falls (68.2%) were from furniture such as sofa chair, couch, table and cribs; 58.6% of the burns were from boiling water and 24.1% were burns from heaters. Five of the 8 children who suffered foreign object aspiration (FOA) swallowed inorganic objects like barrettes, buttons and beads. Two of the 6 children who suffered poisoning were from medication, two from rat poisoning, one from bleach and one was the result of food poisoning. The cause of wound injury for all of the children who suffered wounds was from a sharp-cutting object.

When the women were asked what interventions they did after the accident, after a fall, the majority (61.4%) applied a wound ointment and took the child to a health care facility, nearly 40% only applied a wound ointment, applied ice or did nothing. After a burn injury 44.8% used cold application and took the child to a health care facility, 34.5% only applied cold and 20.7% applied ointment, toothpaste or olive oil to the burn site. In four of the 8 children with FOA (50.0%) if the object could be seen the mother tried to remove it with her finger and took the child to a health care facility, and four (50.0%) struck the child on the back or tried to remove the object with their fingers. The mothers of five of the six children who were poisoned (83.3%) had the child drink salty water to induce vomiting and took them to a health care facility, and one only had the child drink salty water to induce vomiting (Table III).

When the women were asked where they learned how to treat home accidents the majority stated that they learned from those near them such as a relative or neighbor (burns 76.8%, falls 94.9%, poisoning 84.5%, FOA 56.1%). No statistically significant difference was found between the women's educational status, age, family type, number of people in family and family monthly

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

income with whether any home accident had occurred or what interventions were given for home accidents ($p>0.05$) (Table IV).

4. DISCUSSION

In our research the majority of women (66%) with 0-6 year old children had children that had had a home accident at least once. The majority of accidents in the 0-6 year old age group occur in the home. Because the children in the 0-6 year age group spend the majority of their time at home, are curious about discovering their environment and learning new things, imitate adults, are constantly moving, put everything in their mouths, and do not yet have the developmental skills necessary to protect themselves from accidents, they are the age group with the highest percentage of home accidents. The most frequently occurring types of accidents are falls, burns, poisoning and asphyxiation (What is Home Accident? 2005; Güler and Çobanoğlu, 1994).

In our study as well according to the data given by women whose children had suffered at least one home accident, the most common accident was falls (66.7%) followed by burns (43.9%). Following falls and burns with much smaller percentages were FOA (12.1%), poisoning (9.1%) and wounds from sharp objects (6.7%). In Erdem and Nazik's study the most frequent reason for children being brought to the hospital from an accident and injury was wounding from a sharp-piercing object (39.3%) followed by falls (30.7%) and poisoning (20.1%). Accidents involving motorized/nonmotorized (bicycle, etc.) vehicles are seen less often than burns and FOA (Erdem and Nazik, 2005). Although falls were the most common accident in our study in Erden and Nazik's study they were second. In the study by Chow et al. (1993) falls were the cause of 53% of the accidents and two thirds of the falls occurred in the living room of the home.

The status of accidents being seen in children varies with the child's physical, social and psychomotor development, is related to their knowledge level, and types of accidents are characteristic of age and gender. Accidents in all age groups are more common in boys than in girls (Kılıç, 1993). In our study as well the distribution of type of accident varied by gender of the child with burns, falls and wounds more common in boys than in girls (Table I). According to Erdem and Nazik's study 60% of the children brought to the hospital because of an accident

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

are boys (Erdem and Nazik, 2005). In addition in studies about burns by Conk (1992) and Aytac et al. (2004) boys suffered more burn related accidents than girls (Conk,1992; Aytac, Özgenel, Akın, 2004). Boys are more active than girls and from birth girls are raised in a more protective manner than boys, and families who provide more opportunities for boys to be active also can be said to be increasing their risk for accidents.

In our study the majority (68.2%) of fall type of home accidents occurred inside the house and in general the children fell from places approximately half a meter in height, such as sofas, beds, and cribs (Table II). Erdem and Nazik's study is parallel with ours as 30.7% of all childhood accidents were falls and that 78.4% of the falls occurred inside the home from places approximately half a meter in height, such as sofas, beds, and cribs (Erdem and Nazik, 2005). Because the children do not have conceptual abilities and have not yet gained body coordination that could prevent danger, their sudden and quick movements can cause falls (What is Home Accident? 2005).

In our study more than half (58.6%) of the burn type of home accidents were from boiling water and 24.1% were burns from heaters (Table II). In the study by Aytac et al. (2004) as well most of the burns were from boiling hot liquids such as milk and water (68.8%) (Aytac, Özgenel, Akın, 2004). Chow et al. (1993) also determined that one third of burns that occur in children are from hot liquids (like soup or water) (Chow, Chan, Chiv, 1993). In the study by Conk (1992) child burns were seen most often in the 0-3 year old age group and were caused by boiling liquids.

In our research five of the 8 children who suffered FOA aspirated objects such as barrettes, buttons and beads and three children aspirated food products such as hazelnuts, pistachios, and sugar cubes (Table II). Altmann and Ozanne-Smith (1997) determined that food products are the most common cause for aspiration in children under 3 years of age.

FOA is one of the most common causes for death in children suffering home accidents who are under 6 years of age. FOA is the cause for the death of more than 300 children per year in the USA (Oliveira, Almeida, Troster et al. 2002). In the study by Yuncu et al.(2002) 74% of the objects aspirated were inorganic such as pins and nails and 26% were organic such as chick peas and nuts. In our study as well the majority of the children aspirated inorganic objects such as barrettes, buttons and beads.

Only six of the women in our study stated that their children had suffered poisoning as a home accident, and the substance ingested was medication (2 children), rat poisoning (2 children), bleach (1 child) and food poisoning (1 child) (Table II). Poisoning in childhood has an important

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

place in accidents. In a study about poisoning in children conducted in the Eskişehir region, 85.8% of the poisoning was the result of an accident, and the most frequently ingested substances were medications, followed by corrosive materials, insecticides and pesticides, foodstuffs and plants (Öntürk and Uçar, 2003). In Erdem and Nazik's study the primary causes for poisoning were medications, insecticides, corrosive materials and foodstuffs (Erdem and Nazik, 2005). These findings are similar to those in our study for poisoning substances.

The moment a home accident occurs there are some actions that need to be taken to avoid unwanted consequences of the accident. In our study more than half (61.4%) of the mothers of children who suffered a fall provided appropriate first interventions. However it is noteworthy that nearly 40% of the mothers did not take their children to a health care facility after a fall (they either did nothing, only applied cold to the site or applied ointment) (Table III). We can assume that these women thought that nothing was necessary after a simple fall and did not see the need to take the child to a health care facility. Just as 85.7% of the 14 women who stated that their children fell from high places, such as the flat roof of a house or a tree, immediately took their child to a health care facility. There was a statistically significant correlation between falling from a high place and taking the child to a health care facility ($P < 0.05$). In a study by Algier (1986) a large percentage of mothers implement traditional procedures after a fall occurs. Compared to this result the more than half of the mothers in our study who took their child to a health care facility after a fall rather than implement traditional procedures is a positive finding.

The majority of the women whose child had suffered a burn appropriately used a cold application over the burn site immediately after the burn and took the child to a health care facility (44.8%) or just used cold application (34.5%), but 20.7% of the women had inappropriate actions such as applying ointment, toothpaste or olive oil to the burn site (Table III). In the study by Conk conducted in 1992 the findings were similar to ours in that more than half of the family members used cold application but some used inappropriate traditional procedures.

Although the number of women in our study who reported their child had suffered FOA (8 children), poisoning (6 children), and wounding from a sharp object (4 children) was small, the majority of interventions by the women following these types of accidents were appropriate. Half of the women (4 women) in the event of a FOA turned their child upside down and struck them on the back and immediately took them to a health care facility or only struck the child on the back and were able to remove the foreign object (2 women) (Table III). In cases of FOA the person is struck four times on the back with the palm of the hand for the purpose of dislodging

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

the foreign object (Asphyxia, 2005). In this situation the women in our study appropriately turned their children upside down and struck their backs.

In the poisoning cases five of the six women stated that they tried to induce vomiting in their child and immediately took them to a health care facility (Table III). In the event of poisoning the most appropriate action is to immediately go to the nearest health care facility. Unknowingly doing any kind of intervention will delay treatment and may cause injury and worsen the situation. In our study although it is positive that the majority of the women immediately took their child to a health care facility, their actions in inducing vomiting may have created problematic situations. In the study conducted by Algier in 1986 it was determined that most mothers implement traditional measures for poisoning.

The women need to be educated about what needs to be done immediately in the event of any of the home accidents as well as the most appropriate action being to take the child to a health care facility as soon as possible. Ensuring early diagnosis and treatment for home accidents is also important for preventing unwanted consequences of home accidents. In our study the fact that the children involved in a home accident (44.8% of the burns, 61.4% of the falls, 83.3% of the poisonings, 50% of the FOA) were immediately taken to a health care facility is a positive finding. Compared to the similar study by Algier in 1986 in which the majority of mothers used traditional procedures for home accidents, today the women in our study have become quite knowledgeable about this subject.

In answer to the question of where they learned about what to do first in the event of a home accident the majority of the women stated that they got information from those around them, such as a neighbors or a relative. The finding that the women are getting information about interventions to employ first in the event of a home accident from those around them makes one think that health care personnel working in primary care need to consider the importance of this subject. An important duty on this subject falls to midwives and nurses who make home visits to women. Members of the primary health care team who make home visits have an important duty for improving the health of society, particularly for ensuring the health and safety of children under the age of 5 years. The health care team members making home visits can provide education to families about how to protect their children from potential dangers in their home and how they can take preventive measures and in this way can decrease the incidence of home accidents. (Close, 2002; Watson, Kendrick, Coupland et al. 2005). No statistically significant difference ($P>0.05$) was

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

found between the women's educational status, age, family type, number of people living in the family, monthly family income and the status of their children being involved in a home accident or the first interventions that are done after a home accident. In a study by Hippisley (2002) no significant difference was found between socioeconomic status and accidents in children under 5 years old. However there is a report in the literature that burns, poisoning and falls are more common in low socioeconomic level groups and in slum areas (Kılıç, 1993).

5. CONCLUSIONS AND RECOMMENDATIONS

The findings in this study are in parallel with others in the literature that the incidence of home accidents is high among the 1-6 year old age group, and that the most common types, respectively, are falls and burns, followed by FOA, poisoning and wounds from sharp objects. The majority of home accidents happen to boys and children between 0-36 months. Although the majority of the actions taken by women after their children were involved in a home accident were positive, some women, even though small in number, used inappropriate interventions that they primarily had learned from neighbors and relatives. No statistically significant difference was found between the sociodemographic characteristics of the women and the frequency of home accidents or the first actions taken after a home accident ($P>0.05$).

Based on these results, taking into consideration the frequency of home accidents, the fact that some of the actions taken by women in the event of a home accident were inappropriate and learned from neighbors and relatives, it is recommended that nurses and midwives who work in primary care:

- prepare and provide education to mothers of 0-6 year old children primarily on the subject of preventing home accidents, and on what should be done if an accident occurs in spite of precautions,
- taking into consideration that information that school children learn is transferable to their families and their own future as adults, they be given health education about frequently seen accidents, their prevention and first aid,
- the media and other communication organizations broadcast programs for public education on the prevention of home accidents and the first aid that needs to be given in the event of an accident.

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Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

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* Corresponding author: E-mail: belkiskaratas@yahoo.com

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Table I. Distribution of Age and Gender of Children by Type of Home Accident (n:66)*

	Falls		Burns		Others (FOA**, Poisoning, Injuries)		Total	
	n	%	n	%	n	%	n	%
Age								
0-36 months	34	77.3	21	72.4	12	66.7	67	73.6
37+ months	10	22.7	8	27.6	6	33.3	24	26.4
Gender								
Male	24	54.5	17	58.6	6	33.3	47	51.6
Female	20	45.5	12	41.4	12	66.7	44	48.4

* n is doubled.

**FOA: Foreign Object Aspiration

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

Table II. Manner of Occurrence of Home Accidents (n:66)*

How it Happened	n	%
Falls		
-Within the home (from couch, sofa, crib, furniture etc.)	30	68.2
-In the home's garden (tree, roof, swing, etc.)	14	31.8
Burns		
-Boiling water	17	58.6
-Heater	7	24.1
-Hot oil	5	17.2
Foreign Object Aspiration		
-Swallowing object like hazel nut, pistachio, sugar cube	3	37.5
-Swallowing object like hair barrette, button, bead	5	62.5
Poisoning		
-Swallowing medication	2	33.3
-Swallowing bleach	1	16.7
-Swallowing rat poison	2	33.3
-Food poisoning	1	16.7
Wound Injuries		
-Cutting injuries with sharp object	4	100.0

* n is doubled.

Table III. Distribution of What Treatments Were Used by the Women in Accidents (n:66)*

What was done first	n	%
Falls		
-Applied a Wound Ointment and Took to Health Facility	27	61.4
-Nothing	8	18.2
-Only Applied a Wound Ointment	7	15.9
-Ice Application	2	4.5
Burns		
-Cold Application and Took to Health Facility	13	44.8
-Only Cold Application	10	34.5
-Application of ointment, toothpaste, olive oil	6	20.7
Foreign Object Aspiration		
-Remove with Finger and Took to Health Facility	4	50.0
-Turn Upside Down and Strike Back	2	25.0
-Remove with Finger	2	25.0
Poisoning		
-Had Child Swallow Salty Water, Tried to Induce Vomiting and Took to Health Facility	5	83.3
-Had Child Swallow Salty Water, Tried to Induce Vomiting	1	16.7
Wound injury		
Applied Ice and Took to Health Facility	3	75.0
Applied Dressing	1	25.0

* n is doubled.

Belkıs Karataş, Elife Kettaş, Sabire Yurtsever: *Interventions by mothers of 1-6 year old children after home accidents*

Table IV. Some Characteristics of Families by Their Children Have Home Accident.

<u>Characteristics of Families</u>	<u>Situation of children's have occurred home accident</u>						<u>p value</u>
	<u>Have occurred</u>		<u>Have not occurred</u>		<u>Total</u>		
<u>Mother Age</u>	<u>n</u>	<u>%</u>	<u>n</u>	<u>%</u>	<u>n</u>	<u>%</u>	
20-24	9	60.0	6	40.0	15	100.0	
25-29	16	55.2	13	44.8	29	100.0	
30-34	21	77.8	6	22.2	27	100.0	
35+	20	69.0	9	31.0	29	100.0	
<u>Mother educational status</u>							
Illiterate	4	57.2	3	42.8	7	100.0	
Primary school	35	72.9	13	27.1	48	100.0	
Secondary school	16	72.7	6	27.3	22	100.0	
High school +	11	47.8	12	52.2	23	100.0	
<u>Number of people in family</u>							
3-5 people	58	65.9	30	34.1	88	100.0	
6 and over	8	66.7	4	33.3	12	100.0	
<u>Family type</u>							
Nuclear family	58	63.7	33	36.3	91	100.0	
Wide family	8	88.9	1	11.1	9	100.0	
<u>Avarage monthly income</u>							
Minimum wage/Less than min. wage	19	61.3	12	38.7	31	100.0	
Over min. wage	47	68.1	22	31.9	69	100.0	