# Knowledge, Attitude, Behavior and Myth towards Epilepsy among Community People.

Bimala Shah Gupta<sup>1</sup>, Laxmi BK<sup>1</sup>.

<sup>1</sup> College of Nursing, Nepalese Army Institute of Health Sciences.

### **ABSTRACT**

**Introduction:** Epilepsy represents one of the major brain disorders worldwide. Living in the society is more challenging than epilepsy itself. The main objective of the study was to find out knowledge, attitude, behavior and myth towards epilepsy among community people.

**Methods:** The descriptive cross-sectional study design was adopted with the systematic random sampling. A structured, pretested interview questionnaire was used to collect data and analyzed by using descriptive statistics.

**Results:** Of the 50 respondents. With regards to knowledge, attitude, behavior and myth towards epilepsy, 100% correctly thought that epilepsy is a brain disorder while 70% believed it to be a psychiatric disorder and an inherited disorder (70%). Most of them thought that epilepsy can be cured (90%). Similarly 94% viewed that a person with epilepsy takes up a job. About 78% of the respondents would throw the water on the person and 50% would make the person smell a shoe during seizure. Similarly 14% would take the person to the Dhami/Jhankri. Myths found to be prevalent were epilepsy is transmitted by eating non vegetarian diet (18%), caused by an evil/supernatural power (26%) and can be treated by spiritual healer (18%).

**Conclusions:** Although majority of the respondents had heard of epilepsy. False attitude, behavior and myth about the condition still prevail in a community. It may be worthwhile including awareness programs about epilepsy by community education/localhealth organization in order to dispel the false attitude, behavior and manage the person with epilepsy in community as well.

**Keywords:** attitude; behavior; community people; epilepsy; knowledge; myth.

## INTRODUCTION

Epilepsy is one of the world's most prevalent common and non-communicable diseases and accounts for 0.5% of the whole burden of diseases in the World. Among 50 million people with epilepsy worldwide, 90% of them are found in developing countries. Ninety percent of these patients are not receiving adequate treatment. They could live normal lives if treated <sup>1</sup>. Sociocultural attitudes continue to have a negative impact on management of epilepsy in many developing

countries. It is believed that epilepsy results from witchcraft or possession by evil spirits and therefore treatment should be through the use of herbs from traditional doctors, fetish, priests and religious leaders<sup>1</sup>. This huge treatment gap may be due to the limited knowledge, poverty, cultural beliefs, stigma, poor health delivery infrastructure like inadequate supplies of antiepileptic drugs, and shortage of trained health care workers<sup>3</sup>.

Correspondence:

Bimala Shah (Gupta), MN, MA College of Nursing, Nepalese Army Institute of Health Sciences.

Email: bimushah@hotmail.com

The incidence of epilepsy is increasing day by day. Due to lack of knowledge and false practices during management of epilepsy, more complication may arise and people may be at risk of dying. In Nepal, research into how much community people know about epilepsy appears limited. Therefore, need to find out the knowledge, attitude, behavior and myth towards epilepsy among community people. As it helps in planning for health awareness programs, health campaign in order to dispel the misconceptions and stigma among community people.

## **METHODS**

The descriptive cross-sectional with probability systematic random sampling technique was used. The study was conducted at Gaindakot VDC in Nawalparasi District in the Lumbini Zone of southern Nepal from March 2013 to December 2013. The sample consisted of 50 community people above 20 years of age. A structured, pretested questionnaire was used to collect data by interviewing. Questionnaires were translated to local (Nepali) language. The study was conducted after getting permission from Research Committee (NAIHS-College of Nursing). Written consent taken from each respondents after explaining to them the purpose of the study. Descriptive analysis

was performed using the Microsoft Excel version 2007 and Statistical Package of Social Sciences (SPSS) windows version 17.0 software.

## **RESULTS**

Regarding Socio-demographic information of Respondents. Out of 50, majority (48%) was aged 21-39 years and 14% were above 60 years. Mean age was 40.56(SD±13.217). Fifty-six percent were female and 98% were Hindu similarly 62% from Brahmin/Chhetri ethnicity as 8% followed by Marginalized group. Regarding marital status 90% were married and 88% were literate. Most (70%) of respondents involved in farming and 94% had income above 7000 per month.

Regarding knowledge, Study result shows that 100% of respondents correctly thought that epilepsy is a brain disorder while 70%, 70% believed that epilepsy is a psychiatric disease, an inherited disorder respectively. In other hands 34% thought that epilepsy is contagious. Most (90%) viewed epilepsy can be cured in contrast 52% thought epileptic patients need lifelong treatment. Whereas 90% had knowledge about Periodic reevaluation or follow up is important for cure the disease (Table 1).

**Table 1.**Knowledge towards Epilepsy ( n=50)

Variables	Yes Frequency (%)	No Frequency (%)	
Epilepsy is a brain disorder.	50 (100)	0 (0)	
Epilepsy is a psychiatric disease.	35 (70)	(15) (30)	
Epilepsy is an inherited disorder.	35 (70)	15 (30)	
Epilepsy is contagious.	17 (34)	33 (66)	
Epilepsy can be cured.	45 (90)	5 (10)	
Epileptic patients need lifelong treatment.	26 (52)	24 (48)	
Periodic reevaluation or follow up is important for cure the disease.	46 (92)	4 (8)	

Around 86% thought that epileptic patient can live like others. Similarly majority 94%, 94% and 94% viewed that a person with epilepsy can marry, have children and take up a job respectively (Table 2).

**Table 2.** Attitude towards Epilepsy(n=50)

Variables	Yes Frequ (%)	iency	No Fre (%)	quency
Epileptic patient can live like others.	43	(86)	7	(14)
A person with epilepsy can marry.	47	(94)	3	(6)
A person with epilepsy can have children.	47	(94)	3	(6)
A person with epilepsy can take up a job.	47	(94)	3	(6)

With regards to behavior on witnessing a person with seizure, about 78% of the respondents would throw the water on the person and 50% would make the person smell a shoe during seizure. Likewise 14% of the respondents would take the person to the Dhami/Jhankri, Priest/Temple. Most (96%) felt guilt/shame for having an epileptic patient in their family and allow their children to play /stay with a child/person with epilepsy (82%). Similarly 30%viewed that epileptic member is discriminated by family member /school teacher.

Table 3 shows that 18% of respondents had a false notion that epilepsy is transmitted by eating non vegetarian diet. Other myths found to be prevalent were that epilepsy is caused by an evil/supernatural power (26%) and epilepsy can be treated by spiritual healer (18%).

**Table 3.** Myth toward Epilepsy (n=50)

Variables	Yes		No		
	Frequency (%)		Frequency (%)		
Epilepsy is transmitted by eating non vegetarian diet.	9	(18)		41	(92)
Epilepsy is caused by an evil/supernatural power.	13	(26)		37	(74)
Epilepsy can be treated by spiritual healer.	9	(18)	41	(82	)

### DISCUSSION

Regarding information about Epilepsy, 100% of respondents had heard about epilepsy. This finding is similar to other study done in India showed around 98.6% had heard of epilepsy <sup>4</sup>. Majority 58% of respondents got information about epilepsy from their relatives and 42% of respondents got information from friends. This finding is inconsistency to other study reported that 66% of the respondents got information from health workers, 22% from friends/relatives <sup>5</sup>.

In this study, Most(100%) of respondents stated that medicine need to be supplied to the epileptic patients from government with free of cost, similarly 34% viewed that provide free schooling and provide job from government (56%).

With regards to knowledge, attitude toward epilepsy 100% of respondents correctly thought that epilepsy is a brain disorder this study finding is consistency to other study findings that 79.2% correctly identified epilepsy as a brain disorder 6. While 70% believed that epilepsy is a psychiatric disease this study finding also consistency to the study of same authors 5, 6 showed that 81.8% believed it to be a psychiatric disorder. In our study, 34% thought that epilepsy is contagious and most (90%) viewed epilepsy can be cured both findings are nearly inconsistency to other findings done by Hashmi& Dixit which showed that only 4% consider epilepsy as contagious disease and 40% felt that epilepsy can be cured 7. And epileptic patients need lifelong treatment (52%) this finding is similar to the findings by same author (Hashmi& Dixit) as noticed 60% thought that a person with epilepsy has to take lifelong treatment <sup>7</sup>. Similarly majority 94%, 94% viewed that a person with epilepsy can marry, have children respectively. Similar type of study done in Delhi reported that Positive attitude was observed with respect to marriage (89%) and having children (92%) 8. Regarding behavior of the respondents on witnessing a person with seizure, about 78% of the respondents would throw the water on the person and 50% would make the person smell a shoe during seizure. This study findings are contradict with the study of Hashmi& Dixit which showed that during epileptic fits, 15% would splash water over the face, 23% felt that they would put a shoe or onion on nose 7. In this study, that Positive attitude was observed with respect to allowing a child to play with a child with epilepsy (82%). This finding is similar to other findings stated allowing a child to

play with a child with epilepsy (95%) <sup>7</sup>. Other myth found to be prevalent in this study was that epilepsy is caused by an evil/supernatural power (26%). This finding is also supported by same author as negative attitude was reflected in the belief that epilepsy is due to supernatural powers (16%) <sup>8</sup>.

There were prevail false notion, attitude, behavior and myth in community people. It is recommended for improving public awareness to bring about a change in attitude, behavior and myth towards epilepsy by running education programs with the help of local health organization in order to improve the management of persons with epilepsy in community.

## REFERENCES

- 1. Kabir M, Iliyasu ZI, Abubakar IS, Kabir IS, & Farinyaro IS. Knowledge, attitude and beliefs about epilepsy among adults in a northern nigerian urban community. Annals of African Medicine. 2005;4(3):101-12.
- 2. Rajbhandari KC. Epilepsy in Nepal. Neurol J Southeast Asia. 2003;8: 1-4.
- 3. Thapa L, Shrestha A, Dalton LP, Poudel R, Pokhrel BR. Ghimire A, Rana PVS. Clinical and socio-economic factors among epileptic patients in Nepal: A big challenge. Journal of college of Medical Sciences. 2011;7(2):29-33.

- 4. Joshi SH, Mahmood ES, Bamel A, Agrwal AK, & Shaifali I. Perception of epilepsy among the urban secondary school children of bareilly District. Ann India Acad Neur.2012; 15(2):125-27. <a href="http://dx.doi.org/10.4103/0972-2327.94996">http://dx.doi.org/10.4103/0972-2327.94996</a>
- 5. Sidig A, Ibrahim G, Hussein A, & Rahman AA. A study of Knowledge, Attitude, Practice towards Epilepsy. Sudanese Journal of Public Health . 2009; 4: 393-98. Retrieved on April 12, 2013, from <a href="http://www.sjph.net.sd.com">http://www.sjph.net.sd.com</a>.
- 6. Rafael F, Dubreuli CM, Burbaud F, Tran DS, Clement JP. Preux PM, Nubukpo P. Knowledge of epilepsy in the general population based on two frence cities: implications of stigma. Institut.de neurologie tropical.2010; 17(1):82-86.
- 7. Hashmi S J & Dixit JV. Knowledge, attitude and practice of epilepsy among patients and family members attending urban health and training center. Global journal of medicine and public health.2012; 1(5): 1-5.
- 8. Gourie Devi M, Gururaj G, Satishchandra P, Subbakrishna DK. Prevalence of neurological disorders in Bangalore, India: A community-based study with a comparison between urban and rural areas.Neuroepidemiology. 2004;23:261–8. http://dx.doi.org/10.1159/000080090