



THE RELATIONSHIP LEVEL OF KNOWLEDGE AND ATTITUDE OF THE MOTHER IN THE MANAGEMENT OF FEBRILE SEIZURES WITH FIRST TREATMENT OF FEBRILE SEIZURES IN CHILDREN AGED 6 MONTHS - 5 YEARS

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ABSTRACT

Fever is a problem that is often encountered in raising children. Mother's knowledge is needed so that the action given is correct, how can the mother lower the child's body temperature. The purpose of this study was to determine the relationship between the level of knowledge and attitudes of mothers in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months-5 years at Cibinong Hospital in 2022. This type of research is quantitative analysis, cross sectional approach. The population is 50 respondents, the sample is 50 respondents, with total sampling technique. The instrument in this study was distributing questionnaires in the form of questionnaires. Of the 25 respondents, there were 16 respondents (64.0%) handling febrile seizures with good knowledge, 9 respondents (36.0%) handling was not carried out with good knowledge p value $0.033 < 0,05$ means there is a relationship between the two variables. 29 respondents had first treatment of febrile seizures with a positive attitude as many as 13 respondents (55.2) p value $0.390 > 0.05$ meaning there was no relationship between the two variables. The conclusion of this study is that there is a relationship between the level of knowledge of mothers in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022 and there is no relationship between the attitude of mothers in the first handling of febrile seizures in children aged 6 months – 5 years at Cibinong Hospital in 2022.

Keywords: Knowledge, Attitude, First Management of Febrile Seizures

INTRODUCTION

Febrile seizures are the most common neurological disorder in children, 1 in 25 children will experience one febrile seizure. This is because children under the age of 5 years are very susceptible to various diseases due to the fact that the immune system is built perfectly. 1 Fever seizure attacks in one child are not the same, depending on the threshold value of each seizure. Therefore, every seizure attack must receive prompt and appropriate treatment, especially seizures that last a long time and are repeated. This is because delays and procedure errors can result in sequelae in children, and can even cause death



Seizures that last a long time are usually accompanied by apnea (stop breathing) which can result in hypoxia (reduced tissue oxygen levels) thereby increasing capillary permeability and causing brain edema which results in damage to brain neuro cells. If a child often has seizures, more and more brain cells will be damaged and have a risk of causing developmental delays, mental retardation, paralysis and also 2-10% can develop epilepsy. 3

According to WHO (World Health Organization) in 2012 the risk factors for febrile seizures in children in several countries in the world, such as in the USA, there are nearly 1.5 million cases each year. Most of them occur in the age range of 6 to 36 months with a peak at 18 months. The incidence of febrile seizures varies in different countries. Western Europe and America have recorded 2 to 4% annual incidence of febrile seizures. Whereas in India it is 5 to 10% and in Japan it is 8.8% if you calculate the percentage of almost 100% of cases of febrile seizures. Nearly 80% of cases of febrile seizures are simple seizures and 20% are cases of complex febrile seizures. In Asia, the incidence of febrile seizures is reported to be higher, around 80% -90% of all febrile seizures are febrile seizures. Febrile seizures reported in Indonesia reach 2-4%. 5 The incidence of febrile seizures in West Java Province, the treatment of febrile seizures in toddlers aged 0-5 years at the Bandung city hospital in 2012, there were 2,220 patients with febrile seizures in hospitals aged 0-1 years, while those aged 1-4 years were 5.696 million. In 2010 data obtained for febrile seizures at the general hospital in the city of Bandung was 2.22%.

Based on disease data, it shows that febrile seizures rank 7th out of the top 10 diseases in Cibinong Hospital. The impact that becomes anxiety in children who suffer from febrile seizures, so that it can raise various nursing problems, lack of family knowledge regarding the causes of febrile seizures and their management accompanied by proper handling of febrile seizures when at home. Therefore, febrile seizures need more attention to prevent disability, brain nerve damage, paralysis, mental retardation and even death. Seizures in children can disrupt the life and social life of parents, especially mothers, because mothers are made to experience tremendous stress and anxiety. In fact, some thought their child could die from a seizure. Some mothers panic when their child has a fever and make mistakes in managing the fever and its complications. One of the mistakes that mothers make is due to a lack of knowledge in handling. Providing information to mothers about the fever and seizures themselves is important to relieve their stress and anxiety

Factors that influence the mother's behavior in handling fever include knowledge, the mother's ability to handle febrile seizures must be based on correct knowledge about febrile seizures. This knowledge requires learning through both formal and non-formal education, through experience in interacting with children who have seizures and experiences obtained from other people. Personal experience can be used as an effort to improve by repeating the experience gained in solving the same problem, such as handling a child with a fever. mothers can behave positively.9

The results of research conducted by Roly Marwan (2017), entitled factors related to the first treatment of febrile seizures in children aged 6 months-5 years at the Pekauman Health Center in

2017. This research method uses a cross sectional approach. The study population was mothers who had children aged 5 months-5 years with febrile seizures. Sampling used purposive sampling, and obtained 24 mothers as samples. The independent variable (independent) is the first treatment for febrile seizures, the dependent variable is children aged 5 months-5 years. Data were collected and analyzed using the Spearman rank test with a result of 0.05. The results of the study from 22 respondents, behavioral factors with the first handling of febrile seizures had negative behavior as many as 6 respondents (85.7%), as many as 10 respondents (45.5%) with less knowledge. Of the 22 respondents, 13 respondents (59.1%) had experience and 9 respondents (40.9%) had less experience. Of the 22 respondents, 15 respondents (68.2%) were in the positive behavior category and 7 respondents (31.8%) were in the negative category. Of the 22 respondents, as many as 5 respondents (22.7%) first treatment was good, as many as 7 respondents (31.8%) first treatment was sufficient and as many as 10 respondents (45.5%) first treatment was lacking. Most (45.5%) of the respondents' knowledge at the Pekauman Health Center was in the less category. Most (59.1%) of the respondents' experiences at the Pekauman Health Center were included in the experience category, the majority (45.5%) of the respondents' seizure management at the Pekauman Health Center were included in the first handling of febrile seizures in the less category. From these results it can be concluded, there is a significant relationship between the knowledge factor and the first treatment of febrile seizures in children aged 6 months-5 years at the Pekauman Health Center $p = 0.000 < (0.05)$. There is a significant relationship between the experience factor and the first treatment of febrile seizures in children aged 6 months-5 years at the Pekauman Health Center $p = 0.005 < (0.05)$. There is a significant relationship between behavioral factors and the first treatment of febrile seizures in children aged 6 months-5 years at the Pekauman Health Center $p = 0.007 < (0.05)$. 10

In addition, research conducted by Euis Ritawani Hasibuan (2018), entitled the relationship between mother's knowledge and first treatment for toddlers with febrile seizures. This research method uses cross sectional. The research population is mothers who have children 6 months-5 years. Sampling using random sampling, and obtained 94 mothers as samples. The independent variable (independent) is knowledge, the dependent variable (dependent) is the first treatment for toddlers with febrile seizures. Data were collected and analyzed using the chi square test of 0.05. The results showed that of the 94 respondents 58 respondents (61.7%) had good knowledge, 62 respondents (66%) received proper treatment and 60 respondents (68.83%) never had fever. The p value = 0.02, which means <0.05 , so it is said that there is a relationship between knowledge in toddlers who have febrile seizures.

Based on the results of an initial preliminary study conducted at Cibinong Hospital in 2022 on July 17 2022, data on the incidence of febrile seizures were found in medical records throughout 2019-2022 at Cibinong Hospital as many as 30 children aged 6 months-5 years. Even within 6 months there were several children who came back with the same case. The results of interviews with 10 mothers said that 5 of them did not know the first treatment when their child had a febrile seizure, 3



of them came in a state of panic, anxiety and knew the first treatment for a febrile seizure, 2 of them did not know the cause of a febrile seizure in children and did not know the first treatment for a seizure fever in children.

Based on the description above, the researcher is interested in conducting research with the title "The relationship between the level of knowledge and attitudes of mothers in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months-5 years at Cibinong Tahun 2022 Hospital".

RESEARCH METHODS

The design in this research is quantitative analytic. Quantitative analysis is research directed at explaining a situation or situation. While the method used is cross sectional, which is a study to study the dynamics of the correlation between risk factors and effects, by way of approach, observation or data collection at once (point time approach). 9 Population is a generalization area consisting of objects or subjects who have certain qualities and characteristics determined by the researcher to be studied and then drawn conclusions. So the population is not only people, but also objects and other things. 9 The population in this study is a number 50 mothers who have children aged 6 months-5 years with febrile seizures at Cibinong Hospital in 2022.

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Sampling technique is a sampling technique. There are various kinds of sampling techniques to determine the sample to be used in research. In this study the sample technique used is *total sampling*. Total sampling is a sampling technique where the number of samples is equal to the number of population. 9 Where the sample used is 50 mothers who have children aged 6 months-5 years with febrile seizures at Cibinong Hospital.

This research was conducted in November 2022 and data were collected from respondents. In collecting research data assisted by one person who was given an explanation in advance about ways to fill out the questionnaire. The number of respondents was 50 people. The results of the study were analyzed by univariate and bivariate. Univariate analysis is presented in the form of a frequency distribution which includes the frequency distribution regarding Knowledge Level, Mother's Attitude in the Management of Febrile Seizures and First Handling of Febrile Seizures. Then a bivariate analysis was carried out to find out the relationship between the level of knowledge and attitudes of the mother in the management of febrile seizures and the first treatment of febrile seizures aged 6 months - 5 years at Cibinong Hospital in 2022 using total sampling.

RESEARCH RESULT

Table 1 Frequency Distribution of Mother's Knowledge in the Management of Febrile Seizures Children aged 6 months – 5 years at Cibinong Hospital Bogor Regency in 2022

| No | Knowledge | Frequency | Percentage (%) |
|-------|-----------------|-----------|----------------|
| 1 | Good (76-100%) | 25 | 50.0 |
| 2 | Enough (56-76%) | 15 | 30.0 |
| 3 | Less (< 56%) | 10 | 20.0 |
| Total | | 50 | 100.0 |

Based on table 1. Frequency distribution of mothers' level of knowledge in managing febrile seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022 shows the results of 50 respondents with good category knowledge of 25 respondents (50.0%).

Table 2 Frequency Distribution of Mother's Attitudes in the Management of Febrile Seizures in Children Aged 6 Months – 5 Years at Cibinong Hospital in 2022

| No | Attitude | Frequency | Percentage (%) |
|-----|----------|-----------|----------------|
| 1 | Negative | 21 | 42.0 |
| 2 | Positive | 29 | 58.0 |
| tal | | 50 | 100.0 |

Based on table 2 Frequency Distribution of Mother's Attitudes in the management of febrile seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022 shows the results of 50 respondents with a positive attitude category of 29 respondents (58.0%).

Table 3 Frequency Distribution of First Handling Fever Seizures in Children 6 Months – 5 Years at Cibinong Hospital in 2022

| No | First Management of Febrile Seizures | Frequency | Percentage (%) |
|----|--------------------------------------|-----------|----------------|
| 1 | Are not done | 22 | 44.0 |
| 2 | Done | 28 | 56.0 |
| | Total | 50 | 100.0 |

Based on table 3 Frequency Distribution of First Treatment of Febrile Seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022 shows the results of 50 respondents in the category of first treatment of febrile seizures, 28 respondents (56.0%).

Table 4. The relationship between the mother's level of knowledge in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months – 5 Years at Cibinong Hospital in 2022

| Pengetahuan | Penanganan pertama kejang demam | | | | Ju mla h (n) | % % | OR(IK 95%) 0.4237 (0.044- 0.725) | P Value 0.033 |
|--------------|---------------------------------|---------------|-----------|---------------|-----------------------|---------------|--|------------------|
| | Tidak dilakukan | | Dilakukan | | | | | |
| | n | % | N | % | | | | |
| Baik | 9 | 36.0 % | 16 | 64.0 % | 25 | 100.0 % | | |
| Cukup | 9 | 60.0 % | 6 | 40.0 % | 15 | 100.0 % | | |
| Kurang | 4 | 40.0 % | 6 | 60.0 % | 10 | 100.0% | | |
| Total | 22 | 44.0 % | 28 | 56.0 % | 50 | 100.0% | | |

Based on table 4 the results of the analysis of the relationship between the level of knowledge of mothers in the management of febrile seizures and the first handling of febrile seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022, it is known that 25 respondents had good knowledge with the first handling of febrile seizures, 16 respondents (64 ,0%). The results of the analysis of the relationship between the level of knowledge of the mother in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months - 5 years at Cibinong Tahun 2022 Hospital, with a total of 50 respondents, bivariate analysis with the chi-square test, showed a p value of 0.033 so that the p value < 0.05, then Ha is accepted Ho is rejected, which means there is a relationship between the level of knowledge of the mother in the management of febrile seizures and the first handling of febrile seizures at Cibinong Hospital in 2022.

Table 5. Relationship between mother's attitude in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months -5 years at Cibinong Hospital Bogor Regency in 2022

| Penanganan pertama kejang demam | | | | | | | | |
|---------------------------------|-----------------|--------|-----------|--------|------------|---------|---------------------|---------|
| Sikap | Tidak Dilakukan | | Dilakukan | | Jumlah (n) | % (n) | OR(95% CI) | P Value |
| | n | % | N | % | | | | |
| Negatif | 9 | 42.9 % | 12 | 57.1 % | 21 | 100.0 % | 0.609 (0.196-1.891) | 0.390 |
| Positif | 16 | 55.2 % | 13 | 44.8 % | 29 | 100.0 % | | |
| Total | 25 | 50.0 % | 25 | 50.0 % | 50 | 100.0 % | | |

Based on table 5 the results of the analysis of the relationship between the mother's attitude in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022, it is known that 29 respondents had a positive attitude by not having the first treatment of febrile seizures as many as 16 respondents (55 ,2%).

The results of the analysis of the relationship between the mother's attitude in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months - 5 years at Cibinong Tahun 2022 Hospital, with a total of 50 respondents, bivariate analysis with the chiquare test, showed the result p value = 0.390 so that p value > 0. 05, then Ha is rejected and Ho is accepted, which means that there is no relationship between the mother's attitude in the management of febrile seizures and the first treatment of febrile seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022.

From the results of the analysis, it was also obtained an Odd Ratio (OR) value of 0.609. A positive attitude will have the opportunity to influence the first treatment of a febrile seizure in the category of not being carried out compared to a negative attitude.

Table 6. Bivariate Selection of Level of Knowledge and Attitudes of Mothers in the Management of Febrile Seizures with First Management of Febrile Seizures in Children Aged 6 Months – 5 Years at Cibinong Hospital in 2022

| No | Variabel | p Value | Keterangan |
|----|-------------|---------|----------------|
| 1 | Pengetahuan | 0.033 | Kandidat |
| 2 | Sikap | 0.390 | Bukan Kandidat |

Based on table 6, it explains the p value of each variable in the bivariate selection. Based on the table, the variable that is a candidate and can enter the multivariate stage is one variable, namely knowledge. Meanwhile, the variable that is not a candidate and cannot enter the multivariate stage is attitude. The results of the knowledge variable were obtained with a p value of $0.033 < 0.25$.

DISCUSSION

a. Knowledge Level of Mothers in the Management of Febrile Seizures in Children Aged 6 Months – 5 Years at Cibinong Hospital in 2022

The results showed that out of 50 respondents, 25 respondents (50.0%) had good knowledge, 15 respondents (30.0%) had sufficient knowledge, and 10 respondents (20.0%) had poor knowledge.

The results of this study are supported by Euis Ritawani Hasibuan's research (2017) entitled *The Relationship between Mother's Knowledge and First Treatment for Toddlers with Febrile Seizures at the Tenayan Raya Inpatient Health Center in 2018*. The results showed that of the 94 respondents 58 respondents (61.7%) had good knowledge, 62 respondents (66%) received proper treatment and 60 respondents (68.83%) never had fever. The p value = 0.02, which means < 0.05 , so it is said that there is a relationship between knowledge in toddlers who have febrile seizures. Knowledge is a result of knowledge from humans for the combination or collaboration between a knowing subject and a known object. All that is known about a particular object. Knowledge is also interpreted as the result of human sensing or the result of knowing someone about an object through the senses they have (eyes, nose and so on), automatically at the time of sensing so as to produce knowledge. This is greatly influenced by the intensity of attention and perception of the object

Factors related to knowledge include internal factors such as education Experience as a source of knowledge is a way to obtain the truth of knowledge by repeating the knowledge obtained in solving problems faced in the past, age, namely age affects one's comprehension and mindset. The older you are, the more developed your comprehension and mindset, as well as beliefs that

are passed down from generation to generation and without any prior proof, these beliefs can affect a person's knowledge, whether those beliefs are positive or negative. External factors such as the mass media, information obtained from both formal and non-formal education can have a short-term impact (immediate impact) resulting in a change or increase in knowledge,

From the results of research conducted at the Cibinong Hospital in 2022, it was shown that 50 respondents, as many as 25 respondents (50.0%), had good category knowledge, which means that the mother's knowledge in the good category is more dominant because many already know the first treatment when a child has a febrile seizure. So the insight that the mother has can influence the mother's handling when the child has a febrile seizure.

b. Attitudes of Mothers in the Management of Febrile Seizures in Children Aged 6 Months – 5 Years at Cibinong Hospital in 2022

The results showed that out of 50 respondents, 29 respondents (58.0%) had a positive attitude, 21 respondents (42.0%) had a negative attitude.

The results of research conducted by Kholimatusadiya (2017), entitled *The Relationship between Knowledge and Mother's Attitude in the First Management of Fever in Children Aged 0-59 Months at the Cempaka Banjar Baru Inpatient Health Center in 2017*. The results of the study from 32 respondents obtained that a positive attitude with good knowledge was 7 respondents (21.9%), and with sufficient knowledge of 8 respondents (25%). Meanwhile, mothers who had a negative attitude with sufficient knowledge were 4 respondents (12.5%) with less knowledge by 13 respondents (40.6%). There is a relationship between first knowledge of fever in children aged 0-59 months at the Cempaka Banjar Baru Inpatient Health Center in 2017, namely p value a (0.000 < 0.005).²⁸

Attitude is a person's readiness to act in a certain way towards certain things. This attitude can be positive, and can also be negative. In a positive attitude, the tendency of action is to approach, like, expect certain objects. Meanwhile, in an attitude of hatred, dislike of certain objects

Factors that influence attitudes include personal experience, which is one of the bases for forming attitudes. To be able to have a response and appreciation of a person must have experience related to psychological objects, the influence of other people who are considered important is one of the social components that influence individual attitudes, cultural influences, namely where we live and are raised, have a major influence on the formation of our attitudes. , mass media Means of communication have a different influence on the formation of individual opinions and beliefs, educational institutions and religious institutions as a system have an influence on the formation of attitudes because both of them lay the foundation for understanding and concepts within the individual.¹⁸



From the results of research at Cibinong Hospital from 50 respondents with as many as 29 respondents (58.0%) the attitude of the positive category is more dominant, which means that mothers can be calm facing children when febrile seizures occur.

c. First Handling of Fever Seizures at Cibinong Hospital in 2022

The results showed that out of 50 respondents, 28 respondents (56.0) had the first category of febrile seizures, 22 respondents (44.0) did not carry out the first treatment of febrile seizures.

The results of research conducted by Roly Marwan (2017), entitled factors related to the first treatment of febrile seizures in children aged 6 months-5 years at the Pekauman Health Center in 2017. The results of the study of 22 respondents, behavioral factors with the first treatment of febrile seizures negative as many as 6 respondents (85.7%), as many as 10 respondents (45.5%) with less knowledge. Of the 22 respondents, 13 respondents (59.1%) had experience and 9 respondents (40.9%) had less experience. Of the 22 respondents, 15 respondents (68.2%) were in the positive behavior category and 7 respondents (31.8%) were in the negative category. Of the 22 respondents, as many as 5 respondents (22.7%) first treatment was good, as many as 7 respondents (31.8%) first treatment was sufficient and as many as 10 respondents (45.5%) first treatment was lacking. Most (45.5%) of the respondents' knowledge at the Pekauman Health Center was in the less category. Most (59.1%) of the respondents' experiences at the Pekauman Health Center were included in the experience category, the majority (45.5%) of respondents handling seizures at the Health Center.

Febrile convulsion is a seizure that occurs at a temperature rise of 38°C, which is caused by an extracranial process, usually occurs at the age of 3 months to 5 years. Febrile seizures do not always cause the child to have an increase in temperature as above, sometimes with a temperature that is not too high the child has a seizure

Factors related to the first treatment of febrile seizures, namely anxiety is a concern that is not clear and spread, which is related to feelings of uncertainty and helplessness, this emotional state has no specific object, anxiety is experienced subjectively and is communicated interpersonally. Knowledge, namely behavior based on knowledge will last longer than behavior that is not based on knowledge. One's knowledge of an object contains two aspects, namely positive aspects and negative aspects. Attitude is a reaction or response that is still closed from someone to a stimulus or object. This attitude cannot be seen immediately, but can only be interpreted first from closed behavior.

From the results of research at Cibinong Hospital, from 50 respondents, 28 respondents (56.0) first treatment of febrile seizures was carried out more dominantly, which means that the mother can carry out the appropriate handling when a febrile seizure occurs in a child.

d. Correlation between Mother's Level of Knowledge in the Management of Febrile Seizures in Children Aged 6 Months – 5 Years and First Management of Febrile Seizures at Cibinong Hospital in 2022

The statistical test results obtained a p value of 0.033, which means that the p value < 0.05 , so the null hypothesis (H_0) is rejected and the alternative hypothesis (H_a) is accepted. So that there is a relationship between the level of knowledge of the mother and the first handling of febrile seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022.

The results of this study are supported by Euis Ritawani Hasibuan's research (2017) entitled *The Relationship between Mother's Knowledge and First Treatment for Toddlers with Febrile Seizures at the Tenayan Raya Inpatient Health Center in 2018*. The results showed that of the 94 respondents 58 respondents (61.7%) had good knowledge, 62 respondents (66%) received proper treatment and 60 respondents (68.83%) never had fever. The p value = 0.02, which means < 0.05 , so it is said that there is a relationship between knowledge in toddlers who have febrile seizures.

Knowledge is a result of knowledge from humans for the combination or collaboration between a knowing subject and a known object. All that is known about a particular object. Knowledge is also interpreted as the result of human sensing or the result of knowing someone about an object through the senses they have (eyes, nose and so on), automatically at the time of sensing so as to produce knowledge. This is greatly influenced by the intensity of attention and perception of the object.

Behavior based on knowledge will last longer than behavior that is not based on knowledge. One's knowledge of an object contains two aspects, namely positive aspects and negative aspects. These two aspects will determine a person's attitude, the more positive aspects and objects that are known, the more positive attitude towards certain objects will arise.

Information obtained from both formal and non-formal education can have a short-term effect resulting in an increase in knowledge. When a mother searches for a lot of information regarding the first treatment of a febrile seizure, her knowledge will automatically increase by understanding what actions may and may not be taken when her child has a febrile seizure and can assess whether the actions taken when her child has a seizure are correct or not. The more information that comes in, the more knowledge you get about health

In research at Cibinong Hospital it was shown that the majority of education was good, this was supported by questionnaire data showing good knowledge of 25 respondents (50.0%) and through interviews with respondents looking for information related to handling when children have fever and when seizures are accompanied by fever, a lot of information is obtained. knowledge related to handling when febrile seizures occur in children.

e. Relationship between Mother's Attitude in the Management of Febrile Seizures in Children Aged 6 Months – 5 Years with the First Handling of Febrile Seizures at Cibinong Hospital in 2022

The statistical test results obtained a p value of 0.390, which means that the p value > 0.05 so the null hypothesis (H_0) is accepted and the alternative hypothesis (H_a) is rejected. So that there is no relationship between mother's attitude and first handling of febrile seizures in children aged 6 months - 5 years at Cibinong Hospital in 2022.

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Attitude is a reaction or response that is still closed from someone to a stimulus or object. This attitude cannot be seen immediately, but can only be interpreted first from closed behavior. Attitude actually shows the connotation of the suitability of reactions to certain stimuli. In everyday life is an emotional reaction to social stimulus. Newcomb, one of the social psychologists, stated that attitude is a readiness or willingness to act and not the implementation of certain motives. Attitude is not yet an action or activity but a predisposition to action or behavior. That attitude is still a closed reaction, not an open reaction or open behavior.

The research at Cibinong Hospital showed that the majority of respondents had a positive attitude, but between attitudes and the first handling of febrile seizures was not related. This is supported by questionnaire data showing a positive attitude, as many as 29 respondents (58.0%) and data obtained through interviews with respondents because attitudes do not determine how mothers handle children when they have febrile seizures, so the data obtained is more dominant in positive attitudes even though it is not interconnected.

f. Correlation between Knowledge Level and Mother's Attitude in the Management of Febrile Seizures in Children Aged 6 Months - 5 Years with First Management of Febrile Seizures in Children aged 6 months - 5 Years at Cibinong Hospital in 2022

The results of the bivariate selection showed that there was a knowledge variable with a p value of $0.033 < 0.25$ meaning that it was included in the candidate, and an attitude variable with a p value of $0.394 > 0.25$ meaning that it was not included in the candidate. From the results of

the logistic regression test, it was found that the p value was $0.033 < 0.25$, so it correlated with the first treatment of febrile seizures.

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Factors related to the first treatment of febrile seizures, namely anxiety is a concern that is not clear and spread, which is related to feelings of uncertainty and helplessness, this emotional state has no specific object, anxiety is experienced subjectively and is communicated interpersonally.



Knowledge, namely behavior based on knowledge will last longer than behavior that is not based on knowledge. One's knowledge of an object contains two aspects, namely positive aspects and negative aspects. Attitude is a reaction or response that is still closed from someone to a stimulus or object. This attitude cannot be seen immediately, but can only be interpreted first from closed behavior.

Judging from Exp (B) for significant variables, the greater the value of Exp (B) means the greater the effect on the dependent variable being analyzed. In this data, it means that the knowledge level variable has the greatest influence on the first treatment of febrile seizures, namely Exp (B) is 1,000.

From the results above it has been proven that knowledge has a major influence on the first treatment of febrile seizures in children, this is because mothers who know a lot of information regarding febrile seizures and the first treatment of febrile seizures can handle them well.

CONCLUSIONS

1. Based on the results of the study showed that of the 50 respondents, 25 respondents (50.0%) had good knowledge, 15 respondents (30.0%) had sufficient knowledge, 10 respondents (20.0%) had insufficient knowledge.
2. Based on the results of the study, the results showed that from 50 respondents, 29 respondents (58.0%) had a positive attitude, 21 respondents (42.0%) had a negative attitude.
3. Based on the results of the study, the results showed that from 50 respondents, 28 respondents (56.0%) were first treated with febrile seizures, 22 respondents (44.0%) were not treated first with febrile seizures.
4. Based on the results of the study, it was shown that out of 50 respondents, 25 respondents had good knowledge with the first treatment of febrile seizures, 16 respondents (64.0%).
5. Based on research results
Based on the research results, the bivariate selection results showed that there was a knowledge variable with a p value of $0.033 < 0.25$, meaning that it was included in the candidate and an attitude variable with a p value of $0.390 > 0.25$, meaning that it was not included in the candidate.

SUGGESTIONS

1. For Science (scientific)
It is hoped that the research results obtained can add references regarding related research and also as a comparison material that will be carried out afterwards.
2. For Cibinong Hospital
As a reference for Cibinong Hospital to increase the provision of information to mothers regarding the first handling of febrile seizures in children.



3. For Respondents

Dig up more information regarding the first handling of febrile seizures in children aged 6 months – 5 years.

4. For Educational Institutions

It is hoped that the results of this research can be useful as information material and as a reference, especially complementary materials in the library which can later be useful for students as material for the learning process and additional knowledge for STIKes Wijaya Husada Bogor students.

5. For Further Researchers

Future researchers can add insight into variables that are not present in this study.

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