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Assess the knowledge, attitude and practice regarding dietary practices in prevention of malnutrition among mothers with under five children in selected anganwadi in view of preparing self instructional module

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Abstract
Nation's health depends on healthy citizens. A healthy adult emerges from a healthy child. Children are priceless resources and if the nation neglects their health, it would become a nation of unhealthy citizens. Nutrition of under five children is of paramount importance because the foundation of our life time, health, strength and intelligence vitality is laid during this period. As we have entered the new millennium, India faces the burden of diseases in which nutritional deficiencies are more common. Among the nutritional problems, PEM (Protein Energy Malnutrition) has been identified as a major health and nutritional problem in India among under five children.

This study was aimed to assess the knowledge, attitude and practice regarding dietary practices in prevention of malnutrition among mothers with under five children in Maharishi Nursing home at Dharapuram in view of preparing self instructional module.

The conceptual framework of the study was based on the modified Pender's health promotion Model (Revised 2002). The study made use of descriptive non Experimental Survey Design. Convenient sampling technique was used to select 200 samples for the study. The tool used for the study was structured interview schedule to assess knowledge and practice, 5 point likert scale to assess the attitude. The data were gathered and analyzed by using descriptive and inferential statistics.

The knowledge mean score is 15.29 (SD±5.47) and attitude mean score is 68.2 (SD±7.47). There was positive correlation between the knowledge and attitude test score (r=0.59). The demographic variables age (X2=13.026), education (X2=83.472), occupation (X2=67.53), monthly income (X2=40.52), religion (X2=12.716) and source of health information (X2=23.028) were associated with knowledge of mothers with under five children. Other demographic variables such as type of family, number of under five children and type of food consumption had no association with knowledge regarding dietary practices in prevention of malnutrition. Area wise analysis was done. By distributing self instructional module on dietary practices in prevention of malnutrition which aids to gain knowledge on prevention of malnutrition. The study findings revealed that the mothers were having moderately adequate knowledge, attitude and practice regarding dietary practice in prevention of malnutrition.

Keywords: Knowledge, attitude, malnutrition, under five year

Introduction

Nation's health depends on healthy citizens. A healthy adult emerges from a healthy child. Children are priceless resources and if the nation neglects their health, it would become a nation of unhealthy citizens. Nutrition of under five children is of paramount importance because the foundation of our life time, health, strength and intelligence vitality is laid during this period. As all entered the new millennium, India faces the burden of diseases in which nutritional deficiencies are more common. Among the nutritional problems, PEM (Protein Energy Malnutrition) has been identified as a major health and nutritional problem in India. It is not only an important cause of childhood morbidity and mortality but also leads to permanent impairment of physical and mental growth of children who survive.

In today's world children are affected by various diseases, that are responsible for high rates of morbidity and mortality. But mal-nutrition is a leading problem in the under developed and developing countries among under five children. In a vast majority of children, mild to moderate malnutrition remains undetected due to lack of awareness on the part of all

concerned in medical and paramedical personnel and parents. Protein energy malnutrition has been identified a major health and nutritional problem in India. It occurs particularly in children in the first year of life. It is characterized by low birth weight if the mother is malnourished. Poor growth in children and high level of mortality in children between 12 to 24 months and is estimated to be an underlying cause in 30% of death among under five children.

Severe protein energy malnutrition often associated with infection contributes to high child mortality in underprivileged communities. Further early malnutrition can have lasting effects on growth and functional status. The frequency of malnutrition cannot be easily estimated from the prevalence of commonly recognized clinical syndromes of malnutrition such as marasmus and kwashiorkor. The current concepts of malnutrition are that its clinical forms are kwashiorkor and marasmus. The incidence of protein energy mal nutrition in India in preschool children is 1-2 percent. The problem exists in all the states and that nutritional marasmus is more frequent than kwashiorkor. Malnutrition is a condition which occurs when the body does not get the required amount of nutrients for the maintenance of the positive health.

Statement of the Problem

Assess the knowledge, attitude and practice regarding dietary practices in prevention of malnutrition among mothers with under five children in selected anganwadi in view of preparing self instructional module….

Objectives

1. To assess the knowledge score regarding dietary practices in prevention of malnutrition among mothers with under five children.
2. To assess the attitude score regarding dietary practices in prevention of malnutrition among mothers with under five children.
3. To assess the practice scores regarding dietary practices in prevention of malnutrition among mothers with under five children
4. To correlate the knowledge and attitude scores regarding dietary practices in prevention of malnutrition among mothers with under five children.
5. To find the association of knowledge scores regarding dietary practices in prevention of malnutrition among mothers with under five children with their selected demographic variables.

Hypotheses

H1: There will be a significant correlation between the knowledge and attitude scores regarding dietary practices in prevention of malnutrition among mothers with under five children.

H2: There will be a significant association between the knowledge score regarding dietary practices in prevention of malnutrition among mothers of under five children with their selected demographic variables.

Materials and Methods

This chapter deals with the methodology adopted for the study. It includes research approach, research design, setting, criteria for sample selection, sample and sampling techniques, instrument and scoring procedure, data collection procedure and plan for data analysis.

Data Collection Procedure

The data collection was done in selected anganwadi. Before conducting the study written consent was taken from the medical officer. The data was collected for a period of five weeks from 200 samples.

The purpose of the study was explained to the subjects prior to the study and verbal consent was obtained from those under five children's mothers. The samples were interviewed by the researcher those who met the inclusion criteria were selected by using non probability convenient sampling technique. The structured interview schedule was used to assess the knowledge and practice and 5 point likert scale was used to assess the attitude of the mothers of under five children regarding dietary practices in prevention of malnutrition. The data was collected for a period of 1 hour and 30 minutes for one mother. The investigator collected data from 5-6 mothers of under five children per day. Then the self instructional module on dietary practice in prevention of malnutrition was given. The data was analyzed by using statistical measurements and tabulated.

Analysis and Interpretation

Description of demographic variables

According to the age group, mothers with under five children 18-22 years were 23(11.5%), 23-27 years were 75 (37.5%), 28-32 years were73(36.5%) and 33-38 years were 29 (14.5%). With regard to education the data showed that 8(4.0%) mothers of under five children were illiterate, 22(11.0%) had primary school education, 63(31.5%) had high school education and 107(53.5%) mothers were graduates. According to occupation majority of 112(56.0%) mothers of under five children were house wife, 53(26.5%) mothers were self employed, 17(8.5%) mothers were Government employed and 18(9.0%) mothers were collie. With regard to type of family, 79(39.5%) mothers of under five children were living in nuclear family and majority of 121(60.5%) mothers were living in joint family. According to the number of under five children majority of 152(76.0%) mothers of under five children had only one child, 47(23.5%) mothers had 2 children and 1(0.5%) mother had 3 children under the age of five. With regard to monthly income 48(24.0%) mothers family monthly income is Rs. 5000 and below, 57(28.5%) monthly income The study findings are consistent with the findings of 30 mothers of under five children were selected using simple random sampling technique 26.67% of mothers had inadequate knowledge, 53.33% of mothers had moderately adequate knowledge and 20% of mothers had adequate knowledge regarding protein energy malnutrition.

The Second objective: Assess the attitude score regarding dietary practices in prevention of malnutrition among mothers with under five children.

Data showed that the attitude of 200 mothers in which 88(44%) of mothers had moderately favorable attitude, and 112(56%) of mothers had favorable attitude.

The study findings are consistent with the findings of Goliath., (2010) [7] 120 mothers participated in the study. All mothers had children less than three years of age. Sample included 60 from urban area and 60 mothers from rural area The result shows that 40%of the urban mothers and 20% of the rural mothers had unfavorable attitude. The Third

objective: Assess the practice score regarding dietary practices in prevention of malnutrition among mothers with under five children. The data showed that the practice of 200 mothers in which 2(1%) of mother had inadequate practice, 116(58%) of mothers had moderately adequate practice, and 82(41%) of mother had adequate practice.

The study findings are consistent with the findings of 120 mothers participated in the study. All mothers had children less than three years of age. Sample included 60 from urban area and 60 mothers from rural area. The result shows that regarding practice, most of the urban mothers (70%) followed adequate practice compared to rural area mothers (36.7%).

The Fourth objective: correlate the knowledge and attitude scores regarding dietary practices in prevention of malnutrition among mothers with under five children.

The data analysis showed the correlation coefficient of knowledge and attitude is (r=0.59) which is positively correlated which is significant at $p<0.05$ level.

The study findings are consistent with the findings of Conducted a study on relation of childhood malnutrition to parental education and mothers' nutrition related to knowledge, attitude and practice. Severely malnourished children (26), weight for age 55.27 3.17 were identified in Muslim urban slum. Equal number of normally nourished children matched for age, sex per capita were identified A strong relation was found between nutritional status of the subjects and educational level of their mothers (r=O.52) ($p<0.025$). Analysis revealed that knowledge, attitude and practice had association with the nutritional status, Hence therefore H1: There will be a significant correlation between the knowledge and attitude scores regarding dietary practices in prevention of malnutrition among mothers with under five children was accepted.

The Fifth objective: Association of knowledge regarding dietary practice in prevention malnutrition among mothers with their selected demographic variables.

Data analysis showed that the chi-square values were calculated. The study showed that age (x2=13.026), education (x2=83.472), occupation (x2=67.53), monthly income (x2=40.52), religion (x2=12.716) and source of health information (x2=23.08) these six demographic variables showed there in statistically significant association of knowledge of mothers regarding dietary practice in prevention of malnutrition. Other demographic variables like type of family, no of under five children, and types of food consumption showed there was no significant association of knowledge of mother regarding dietary practice in prevention of malnutrition.

The study findings are consistent with the findings of conducted a study regarding malnutrition among children aged 1-5 years in a selected urban slum in Hyderabad. A significant association (x2=4.496), $p<0.05$) was a found between age and underweight. The study findings are consistent with the findings of, which reveals that furthermore restricted intake of meat, vegetables during illness and low maternal education were main risk factors for mild mal nutrition in the study area.

The study findings are consistent with the findings of which shows the prevalence of underweight decreased significantly ($p<0.01$) as family income increased.

The study findings are consistent with the findings of It has been observed that extent of malnutrition was significantly more among Muslim compared to Hindus and children whose mothers were illiterate. Hence therefore H2: There will be a significant association between the knowledge scores regarding dietary practices in prevention of malnutrition among mothers of under five children with their selected demographic variables was accepted.

Conclusion

The present study assessed the knowledge, attitude and practice, regarding dietary practices in prevention of malnutrition among mothers with under five children. The study reveals that the knowledge score was moderately adequate for 112(56%). Regarding attitude 112(56%) were having moderately favorable attitude. In practice 116(58%) were having moderately adequate practice. The mean knowledge and attitude scores are 15.29 (SD 5.47) and 68.2 (SD 7.47). There was a significant correlation between knowledge and attitude regarding dietary practice in prevention of malnutrition (r=0.59) $p<0.05$. The study findings revealed that mothers of under five children need to be given information on dietary practices in prevention of malnutrition to improve their knowledge, attitude and practice, further the self instructional module may disseminate the knowledge to other mothers.

Reference

1. Dutta P. Paediatric Nursing, (2nd ed.), Jaypee brothers medical publishers, Pp 64-2000;65:202-217.
2. Ghai OP, *et al.* Essential peadiatrics, (4th ed.), Jaypee brothers medical publishers; c2004. P. 101-107, 115-116.
3. Gupta P. Essential pediatric Nursing, (2nd ed.), CBS Publishers & distributions; c2008. p. 282, 285.
4. Gupta S. The short text book of paediatrics, (10th ed.), gopsons paper Ltd; c2004. p. 125, 129, 134, 135.
5. Hockenberry Marilyn J *et al*. Wongs Essentials ofpaediatric Nursing, (8th ed.), Elseviers publishers; c2009. p. 381.
6. Park K. Text book of preventive and social medecine, (19th ed.), H/S Banaridas Bhanot publishers; c2007. P. 472.
7. Nachega JB, Chaisson RE, Goliath R, Efron A, Chaudhary MA, Ram M, *et al*. Randomized controlled trial of trained patient-nominated treatment supporters providing partial directly observed antiretroviral therapy. AIDS (London, England). 2010 Jun 6;24(9):1273.