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Assess the Knowledge on Malnutrition and Evaluate the Effectiveness of Cooking Practices to Prevent Malnutrition among Antenatal Mothers at Selected Villages of Waghodiya Taluka

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ABSTRACT

Introduction:-The term "Maternal nutrition" focuses attention on women as mother , on their nutritional status as it relates to the bearing of child. At the same time, women also play vital role if often unacknowledged, role in their families, communities, and societies. However, the poor nutritional status of many women in the world today compromises their capacity to meet the vigorous demands of their multiple roles as mothers and productive workers. **Objectives :-** (1) Assess level of knowledge of Antenatal mother regarding malnutrition. (2)To demonstrate cooking practice regarding malnutrition. (3)To assess the effectiveness of cooking practices. (4)To find out the association between the existing pre test knowledge of antenatal mother regarding malnutrition with their selected demographic variables. **Materials & Methods:-**methodology adopted for the study is discussed. The methodology of the study includes the research approach, research design, variables, setting of the study, population, sample, sampling technique, sampling criteria, development and description of the tool, content validity of the tool, reliability of the tool, pre-testing, pilot study, data collection and plan for data analysis. This study is aimed at assessing the knowledge of antenatal mother related to malnutrition and effectiveness of cooking practice.**Result:** In the group of the antenatal motherspre test knowledge mean score was 9.80&posttest mean score was 22.10 & t-test value was 25.181 at the significance level 0.05.

KEYWORDS

Effectiveness, Knowledge, Antenatal mother, Cooking practice, Assess

INTRODUCTION

The term "Maternal nutrition" focuses attention on women as mother , on their nutritional status as it relates to the bearing of child. At the same time, women also play vital role if often unacknowledged, role in their families, communities, and societies. However, the poor nutritional status of many women in the world today compromises their capacity to meet the vigorous demands of their multiple roles as mothers and productive workers.

Mother have Lack of sufficient knowledge regarding food and preparation of food at home in rural and urban area. In urban area the people are using and eating food like fast food and not eating healthy food made at home. Women are maintaining body and not eaten food in pregnancy and normal life. Method of preparing food is not known and cocking artificial and earily made food by people.

The basic necessities of human life like the "food, clothing, shelter, health care and love" are the same in all cultures. Yet , the infant caring practice and resources vary tremendously by culture in families and communities. There are many misconceptions and confusions regarding the dietary requirements in most communities. The human milk alone, even in reasonable qualities, cannot provide all the energy and protein required for maintaining an adequate velocity of growth for the infant, after the age of 6

months. It is therefore necessary to introduce more concentrated energy densenutritional supplements at this age. Infants also require iron supplements after the age of six months to prevent iron deficiency anemia.

The antenatal diet during pregnancy should be adequate to provide the maintenance of maternal health, the need of the growing foetus, the strength and vitality required during labour and for successful lactation. During pregnancy there is increased calorie requirement due to increase growth of maternal tissues, foetus, placenta and increase basal metabolic rate. The pregnancy diet ideally should be light, nutritious, easily digestible and rich in protein, minerals and vitamins. The daily requirement of diet during pregnancy is kilocalories-2600, protein-60gm, iron-40mg, calcium-1000mg,zinc-15mg, vitamin A-600IU etc.

STATEMENT OF THE STUDY

"ASSESS THE KNOWLEDGE ON MALNUTRITION AND EVALUATE THE EFFECTIVENESS OF COOKING PRACTICES TO PREVENT MALNUTRITION AMONG ANTENATAL MOTHERS AT SELECTED VILLAGES OF WAGHODIYA TALUKA"

OBJECTIVES OF THE STUDY

- Assess level of knowledge of Antenatal mother regarding malnutrition.
- To demonstrate cooking practice regarding malnutrition.
- To assess the effectiveness of cooking practices.
- To find out the association between the existing pre test knowledge of antenatal mother regarding malnutrition with their selected demographic variables.

ASSUMPTIONS

There may be knowledge on prevention of management of malnutrition among antenatal mother

RESEARCH HYPOTHESIS

H-1: The mean post test knowledge score of antenatal mother regarding malnutrition and cooking practice will be significant higher than their mean pre test knowledge score.

H-2: There is a significant regarding knowledge of mother on prevention of malnutrition and cooking practice its management with selected variable.

RESEARCH METHODOLOGY

The Methodology of research indicates general pattern of organizing the procedure for gathering valid and reliable data for the problem and investigation.

RESEARCH DESIGN

The design selected for the study is one group pre-test post-test design as an overall

plan for obtaining answer to the question being studied.

RESEARCH APPROACH

Evaluative approach as the study demanding development of intervention (effectiveness of cooking practices to prevent malnutrition) for mother group of selected inWaghodia PHC Waghodiya, Taluka, Vadodra.

SAMPLE AND SAMPLING TECHNIQUES

The samples of the study will be selected by using non probability convenience sampling technique according to inclusive criteria as well as availability of samples from selected villages of Waghodiya.

SAMPLE SIZE

The sample size constitutes 60 women, from selected settings of villages of Waghodiya who fulfill the inclusive criteria.

SETTING

The study will be conducted in selected villages of Waghodiya.

POPULATION

Amongantenatalmothers atselected villages of Waghodiya.

INCLUSION CRITERIA

- Antenatal Mothers of WaghodiyaTaluka, at Waghodiya PHC , Vadodara.
- Will be present during the period of data collection.
- Who are willing to participate in the study.

VARIABLES UNDER THE STUDY

Independent variables

In this study Independent variable is the effectiveness of cooking practices to prevent malnutrition, as it is believed to cause or influence the dependent variable i.e knowledge of antenatal mothers regarding malnutrition and cooking practice.

Dependent variables

In this study, knowledge of antenatal mothers regarding malnutrition and cooking practice is the Dependent variable.

DEVELOPMENT OF TOOLS

This consists of two parts:

Section 1:

Consist of demographic variable such as age, education, occupation, type of family, family income, previous knowledge of malnutrition.

Section 2:

Self structured questionnaire will be used to.assess the knowledge on malnutrition and evaluate the effectiveness of cooking practices to prevent malnutrition among antenatal mothers at selected villages of waghodiyataluka.

Scoring procedure:

For knowledge assessment –

If answer yes – 1

If answer no – 0

SCORING INTERPRETATION:

- Adequate knowledge - 67-100%
- Moderately adequate knowledge -34-66%
- Inadequate knowledge - < 33%

PLAN FOR DATA COLLECTION

A written consent will be obtained from the concerned authority the data collection will be done within a given period of 4 weeks after a brief introduction of the self and establishing the rapport, the investigator will give a brief details about the nature of the study and an oral consent will be obtained from the sample and confidentially of the response to be assured

RESULT

SECTION:A Description of Sample Characteristic

Baseline data containing sample characteristics would be analyzed using frequency and percentage.

SECTION: B Assessment of Pre-Test Knowledge Score of Antenatal Mothers

Analysis of existing knowledge of antenatal mothers among malnutrition and cooking practice.

SECTION: C Analysis ofthe effectiveness of cooking practices to prevent malnutrition among antenatal mothers.

Comparison of pre-test and post-test knowledge scores of antenatal mothers regarding malnutrition and cooking practice.

SECTION: D Association of selected demographic variable with the level of pre-test knowledge score of antenatal mothers

SECTION A: DESCRIPTION OF THE DEMOGRAPHIC VARIABLES OF THE ANTENATAL MOTHERS

DESCRIPTION OF SAMPLE CHARACTERISTIC

Sr.No	Characteristics	Categories	Frequency	Percentage%
1	**AGE**	18-22	12	20.00%
		23-27	40	66.67%
		28-32	08	13.33%
		33 & above	00	00%
		TOTAL	60	100%
2	**TYPES OF FAMILY**	Nuclear	04	06.67%
		Joint	44	73.33%
		Extended	02	03.33%
		Single	10	16.67%
		TOTAL	60	100%
3	**EDUCATION**	Illiterate	12	20.00%
		Primary	30	50.00%
		Secondary	12	20.00%

		Graduate	06	10.00%
		TOTAL	60	100%
4	**OCCUPATION**	Agriculture	02	03.33%
		Housewife	58	96.67%
		Employed	00	00%
		Laborer	00	00%
		TOTAL	60	100%
5	**RESIDENCE**	Urban	06	10.00%
		Rural	54	90.00%
		TOTAL	60	100%
6	**INCOME**	<3000/-	00	00%
		3001-6000/-	20	33.33%
		6001-9000/-	38	63.33%
		9000/- above	02	03.33%
		TOTAL	60	100%
7	**NUMBER OF CHILD**	1	24	40.00%
		2	22	36.67%
		3	12	20.00%
		Above 3	02	03.33%
		TOTAL	60	100%
8	**PERVEOUS KNOWLEDGE**	Yes	20	33.33%
		No	40	66.67%
		TOTAL	60	100%

SECTION B: ASSESSMENT OF PRE TEST KNOWLEDGE SCOREOFANTENATALMOTHERS (N=60)

Percentage and Mean of the Pre-test

	N	**Minimum**	**Maximum**	**Mean**	**Percentage %**	**S.D**	**S.D %**
Total	60	4	19	9.80	32.67%	3.45	11.50%
Valid N (list wise)	60						

SECTION:C ANALYSIS OF THE EFFECTIVENESS OF COOKIN PRACTICES TO PREVE MALNUTRITION

Paired Sample Statistics: Effectiveness of Planned health education programme

	Mean	Mean Difference	Percentage	SD	Std. Error Mean	Coefficient of correlation	T	P	Significance Level
Pre-test Score	9.80	12.3	32.67 %	3.45	0.44	0.233	25.181	.00	Significant
Post-test Score	22.10		73.67 %	2.55	0.32				

N=60, t 0.05=1.684

SECTION: DASSOCIATION OF DEMOGRAPHIC VARIABLE WITH THE LEVEL OF PRE-TEST KNOWLEDGE SCORE OF ANTENATAL MOTHERS

Demographic Variable		Adequate	Moderate	Inadequate	X^2	D.F	Level of significance at 0.05 level
Age in year	18-22years	00	05	07	1.465	2	1.465<5.99 NS
	23-27years	00	12	28			
	28-32years	00	04	04			
	33&above	00	00	00			
Types of family	Nuclear	00	02	02	4.959	3	4.959<7.815 NS
	Joint	00	28	16			
	Extended	00	00	02			
	Single	00	08	02			
Education	Illiterate	00	06	06	4.593	3	4.593<7.815 NS
	Primary	00	18	12			
	Secondary	00	08	04			
	Graduate	00	06	00			
Occupation	Agriculture	00	00	02	3.574	1	3.574<3.841 NS
	Housewife	00	38	20			
	Employed	00	00	00			
	Laborer	00	00	00			
Residence	Urban	00	06	00	3.860	1	3.860>3.841 S
	Rural	00	32	22			
Income	<3000/-	00	00	00	3.838	2	3.83<5.99 NS
	3001-6000/-	00	14	06			
	6001-9000/-	00	24	14			
	9000/-above	00	00	02			
No. of Child	1	00	10	14	9.304	3	9.304>7.815 S
	2	00	18	04			
	3	00	08	04			
	Above 3	00	02	00			
Previous knowledge	Yes	00	12	08	0.144	1	0.144>3.841 S

Variables of age (χ^2=1.465), types of family (χ^2=4.959), education (χ^2=4.593), occupation (χ^2=3.574), residence (χ^2=3.860), monthly income (χ^2=3.838), number of child (χ^2=9.304), previous knowledge (χ^2=0.144), was found significant at 0.05 level of significant, Thus it can be interpreted that there is a significant association between knowledge of antenatal mothers with their age, types

of family, education, occupation, residence, income, number of child, previous knowledge and there is no significant association between knowledge of antenatal mothers with selected socio demographic variables such age, types of family, education, occupation.

So we conclude that from the entire four variable that is significantly associated with pre-test knowledge score four demographic variable with associate hence the hypothesis (H_2) is accepted with types of family, education, monthly income and previous knowledge.

DISCUSSION

The present study was under taken to evaluate the effectiveness of cooking practices to prevent malnutrition among antenatal mothers. Pre experimental research design with single group pre testpost test design approach was adopted in order to achieve the objective of the study. The sample were selected using purposive sampling technique. The sample size was 60 and the data was collected from them by using a structured knowledge questionnaire before and after administration of demonstration on cooking practice.

CONCLUSION

This chapter deals with the conclusion, implication, recommendation and limitation of the study "The effectiveness of cooking practices to prevent malnutrition& demonstration of cooking practice for antenatal mothers in selected villages of Waghodia PHC, Waghodiya Taluka".

The following conclusions were drawn on the basis of the present study: In the pre-test conducted among 60 subjects, none had adequate knowledge score. In the post-test, 63.33% had adequate knowledge score on malnutrition & cooking practice after administration of demonstration on cooking practice.

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