A Study to Assess the Effectiveness of Structure Teaching Programme on Knowledge Regarding Prevention of Malnutrition Among the Mothers of Under Five Children in Visnagar

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Abstract

Malnutrition among under-five children is an important concern for the health authorities in India. The aim of the present review was to assess the burden of under-nutrition and over-nutrition, its determinants and strategies required to tackle malnutrition among under-five children in India. Recent data were collected from Google search, Medline, and others. The information retrieved was reviewed and analyzed for discrepancies. Existing evidence shows that the prevalence of under-nutrition among under-five children was high and varied widely (under-weight: 39-75%, stunting: 15.4-74%, wasting: 10.6-42.3%) depending on the assessment methodology adopted. Studies on assessment of over-nutrition status among under-five children were limited. Distribution of various types of risk factors and its influence on nutrition status of children in a given set up should be analyzed for planning the control measures.

Keywords: Malnutrition; Under-five children.

Introduction

Questionnaire approach was the approach used for the study. It was considered to be the most suitable method here. Because it involved the collection of data from the representative of sample population. In the present study, Phase Iincludes assessing the knowledge of the mothers regarding prevention of malnutrition in children. Phase II was aimed at developing the structure teaching programme on prevention of malnutrition in children and administering the same questionnaire in order to assess the knowledge of mothers regarding prevention of malnutrition in children and determining its effect statistically.[1] The approach would help the investigator to evaluate the effect of the intervention that is 'structured teaching programme' on the variable that is 'knowledge' of mothers regarding prevention of malnutrition in children.[2]

Research approach is an umbrella that covers the basic procedure for conducting research. Evaluative research deals with how well programme is meeting its objectives.[3]

Methods of Data Collection

The research design is used for this study is Pre-experimental one group Pretest- Posttest design, for assessing the effectiveness of structured teaching programme on mothers regarding "prevention of malnutrition". Pre-experimental one group pre-test post-test design (O1 * O2) was adopted for the study.[4]

Variables

Variables are qualities, properties or characteristics of persons, things or situations that change or vary. Its related to the polit and hungler, 2001.

Dependent variable

Knowledge of mother in under five children

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Independent variable

Structured teaching programme

Setting of the Study

The physical location and conditions in which data collection takes placein the study. the study of this research valam area in Visnagar city.[5]

Sample

The sample for the present study comprised of 60 samples of mothers who are available during the period of data collection was the sample of the study.[6]

Sample-Size

The sample size selected for this study was 60 samples of Mothers of under five children.

Sampling Technique

A non-probability convenience sampling method is selecting the samples those are conveniently available for the researcher.[7]

A Non-Probability Conveniently Sampling technique was used for selecting 60 mothers who was met at the time of data collection

Criteria for Selecting the Sample

The sample selection was based on the following inclusion & exclusion criteria.

Exclusion criteria

1. Mothers who are not under five children.
2. Mothers who are not present at this time of data collection.

   Preparation of the structured questionnaire

Section A

Demographic question

Section B

Knowledge question

Scoring of Knowledge Questionnaire

Score	Knowledge Level
0-10	Inadiquate Knowledge
11-20	Moderately Adiquate
21-30	Adiquate

Validity of tool

- Content validity of the tool was established by 5 expert comprising from the department of child health nursing for their suggestions regarding Validity in that 2 physician 3 Associate Professor.

Pilotstudy

- The pilot study was conducted at Valam from 24/06/2020 to30/06/2020
- Total 60 Samples were selected fromValam
- Conducted Pre-test on 24/06/2020 and after that administered Health Education Programme on Prevention of Lung cancer. After 7 days, on the date of 30/Post-test was conducted.
- Data analyzed using descriptive and inferentialstatistics.
- The mean Knowledge scores obtained from the Samples in Pre-test was 9.43 and in Post-test it was found increased up to 15.11 with the mean difference of 8.

Reliability of the Tool

- The reliability of the knowledge questionnaire was determined by coefficient correlation formula and it was 0.93 which was more than 0.5 hence the questionnaire found to be reliable.[8]

Data Collection and Procedure

Ethical consideration

- Stages of datacollection
  1. Pre-test
  2. Implementation of theintervention
  3. Post-test

Data Analysis and Interpretation

Plan for Data Analysis

Section A: Distribution of demographic variables of mothers.(Table 1)

Section B: Knowledge of mothers regarding prevention of malnutrition in under five children before and after structured teaching programme.

Section C: Effectiveness of structured teaching programme on prevention of malnutrition under five children.

Mahalakshmi B, Saymabanu Adilbhai Mansuri / A Study to Assess the Effectiveness of Structure Teaching
Programme on Knowledge Regarding Prevention of Malnutrition Among the Mothers of Under Five
Children in Visnagar

155

Comparison of pre-test and post-test knowledge scores of mothers regarding prevention of malnutrition under five children.(Table 2 and 3)

Section D: Association between the pre-test knowledge score and selected demographic variables (Table 4)

Analysis and Interpretation of the Demographical Data of the Samples

Table 1: Frequency and Percentage wise distribution of Sample by their Demographic Data: (N=50)

Sr. No.	Demographic Variables		Frequency	Percentage
1	Age (years)	< 25 years	22	36.67%
		26-35	28	46.67%
		36 – 45	10	16.66%
		> 45 years	00	-
2	Religion	Hindu	60	100%
		Christian	00	-
		Muslim	00	-
		Any others	00	-
3	Types of Family	Nuclear	17	28.33%
		Joint	40	66.67%
		Extended	03	5%
4	Educational qualification	Primary	47	78.34%
		Higher secondary	08	13.33%
		Graduate	05	8.3%
		Post graduate	00	-
5	Occupation	Unemployed	00	-
		Agriculture	34	56.67%
		Labor	21	35%
		Skilled worker	05	8.33%
6	Monthly family income	< 5000	09	15%
		5000-10000	31	51.67%
		10000-15000	17	28.33%
		>15000	03	5%
7	Dietary pattern	Vegetarian	60	100%
		Non-vegetarian	00	–
8	No.of children	1 child	11	18.34%
		2 child	15	25%
		3 child	26	43.33%
		More than 3	08	13.33%
9	Source of information	Family member	38	63.33
		Health personnel	10	16.67
		Mass media	12	20
		Multi resource	00	–

Table 2: Analysis and Interpretation of the Data Collected on Structured Knowledge Questionnaire of the Samples.   [N=50]

Level of Knowledge	Pre test		Post test	
	Frequency	Percentage	Frequency	Percentage
Inadequate knowledge (0-10)	40	66.67%	13	21.67%
moderately adequate (11-20)	18	30.00%	27	45.00%
Adequate (21- 30)	02	3.33%	20	33.33%
Total	60	100%	60	100%

Table 3: Mean, Mean Difference, Standard Deviation (Sd) and 'T' Test Value of the Pre Test and Post Test Knowledge Scores of the Samples.

Knowledge test	Meanscore	Mean Difference	SD	Calculated 't' value	df	Level of significance
Pre-test	9.43	7.68	15.7	5.68	6	0.05
Post-test	17.11		45.15			

Table 4: Association Between the Pretest Knowledge Score of Mothers of Under Five Children Regarding Prevention of Malnutrition with Demographic Variable. N =60

Sr No.	Variables	Category	Frequency	Level of knowledge			d.f	t–value	Chi-square	Significant
				Inade	Mod. Adeq	Adeq				
1	Age (years)	< 25 years	22	16	5	1				
		26-35	28	18	10	0	6	5.68	3.056	NS
		36 – 45	10	6	3	1				
		> 45 years	00	0	0	0				
2	Religion	Hindu	60	40	18	2				
		Christian	00	0	0	0	6	5.68	0	NS
		Muslim	00	0	0	0				
		Any others	00	0	0	0				
3	Types of Family	Nuclear	17	10	6	1				
		Joint	40	28	12	0	4	5.68	21.5	SIGN.
		Extended	03	2	0	1				
4	Educational qualification	Primary	47	30	16	1				
		Higher seconda	08	8	0	0	6	5.68	8.16	SIGN.
		Graduate	05	2	2	1				
		Postgraduat	00	0	0	0				
5	Occupation	Unemployed	00	0	0	0				
		Agriculture	34	25	8	1	6	5.68	0	NS
		Labor	21	12	8	1				
		Skilled worker	05	3	2	0				
6	Monthly family income	< 5000	09	5	4	0				
		5000-10000	31	25	5	1	6	5.68	25.10	SIGN.
		10000-15000	17	8	9	00				
		>15000	03	2	00	1				
7	Dietary pattern	Vegetarian	60	40	18	2	2	5.68	00	NS
		Non-vegetarian	00	00	00	00				
8	No.of children	1 child	11	8	3	00				
		2 child	15	10	4	1	6	5.68	12.86	SIGN.
		3 child	26	20	5	1				
		More than 3	08	2	6	00				
9	Source of information	Family member	38	25	11	2				
		Health personnel	10	7	3	00	6	5.68	3.53	NS
		Mass media	12	8	4	00				
		Multi resource	00	00	0	00				

Mahalakshmi B, Saymabanu Adilbhai Mansuri / A Study to Assess the Effectiveness of Structure Teaching
Programme on Knowledge Regarding Prevention of Malnutrition Among the Mothers of Under Five
Children in Visnagar

157

Conclusion

The findings were summarized as follows.

Finding related to socio- demographic variables of nursing students.

- Highest percentages (46.67%) were in age of 26-35years.

- Highest percentages (100%) of Hindu Religion

- Highest percentages (78.34%) of People are studied till Primary education.

- Highest percentages (66.67%) Joint Family.

- Highest percentages (51.67%) People had Less than 5000-10000rs monthly income of family.

- Highest percentages (56.67%) of Agriculture occupation

- Highest percentages (63.33%) People of Family Member any Source of information.

- Highest percentages (100%) of Vegetarian Diet

- Highest percentages (43.33%) People of 3 number of children.

It was found that post-test mean score which is indicates that People in Selected Villages have good knowledge found to be significantly higher than the pre test mean score which is. It suggests that the effectiveness of Health Education Programme in improving the knowledge in People Living Near to the Industrialarea.[9]

It was found that there was significant association between the knowledge scores and variables Age, Gender, Education, Occupation, No. of children, diet, Source of Information.[10]

Implication

- Nursing Education
- Nursing Practice
- Nursing Research

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