

A Study to Assess the Knowledge on Antenatal Diet among Mothers Residing at Kollapatty Village, Namakkal

G. Jamunarani

Associate Professor, Indirani College of Nursing, Puducherry.

Abstract

Introduction: Most of the women had inadequate general nutritional knowledge and their dietary intake. She did not meet the nutritional requirements during pregnancy due to poverty, ignorance, superstitious and taboos are some of the factors contribute to the poor nutritional status. The main aim of this study is to assess the level of knowledge regarding antenatal diet among pregnant women. *Design:* Descriptive researches were pre test only design was selected for this study. *Setting:* Kollapatti Village, Namakkal District. *Sample size:* Thirty antenatal mothers. *Sampling technique:* Convenient sampling technique. *Data collection procedure:* Data was collected with using structured interview questionnaires after obtaining permission from village officer. *Results:* 80% mothers had inadequate knowledge regarding antenatal diet. *Conclusion:* The proper information about the knowledge on antenatal diet to the antennal mothers is an essential to lead a healthy life.

Keywords: Dietary Intake; Pregnancy; Antenatal; Superstition; Taboos.

Introduction

Pregnancy, also known as gravidity or gestation, is the time during which one or more offspring develops inside a woman. In pregnancy most women need to eat more healthy food to help the baby grow. During pregnancy, a woman needs approximately 300 additional calories each day. These extra calories are needed to reach the recommended amount of weight gain during pregnancy (usually 25 to 35 pounds). It's important that she increase her intake of protein, iron, calcium and vitamins, eat the freshest foods available, and keep track of what she is eating to ensure that she and her baby are getting all the essential nutrients they need and avoiding or minimizing drugs like caffeine, and especially

alcohol and nicotine that could harm the child. In developing countries, many women are not able to take adequate diet due to gender in equalities and poverty. She doesn't meet the adequate diet during pregnancy due to inadequate knowledge of dietary intake. Because of that she delivered number of low birth weight (LBW) babies is particularly high (more than 30% in South Asia, 10-20% in other regions). A good start in life is important and maternal nutritional status during pregnancy has repeatedly been demonstrated to be associated with pregnancy outcomes.

Objectives

1. To assess the knowledge on antenatal diet among mothers at Kollapatti village.
2. To associate the demographic variables with the level of knowledge on antenatal diet.

Assumption

1. Mothers may have inadequate knowledge on antenatal diet.

Reprint Request: G. Jamunarani, Associate Professor, Indirani College of Nursing, (Sri Venkateswara Medical College Campus) No - 13 A, Villupuram - Pondi Main Road, Ariyur, Puducherry- 605 102, India

E-mail: yuvanigpti30@gmail.com

2. Knowledge can be varying according to the demographic variables.
3. Knowledge enhances practice.
4. Knowledge ensures safety of the mother and baby.

Methodology

Research approach

Survey method of research approach was adopted for this study.

Research design

Descriptive research was pre test only design was selected for this study.

Setting

Kollapatti village, which is situated in Namakkal district. It was 18 km away from the city. It has a population of about 750.

Population

Antenatal mothers who are residing in the Kollapatti village. An average of 40 antenatal mothers is residing in this village.

Sample / Sample size

30 antenatal mothers were selected for this study.

Sampling technique

Non probability convenient sampling technique was adopted for this study.

Criteria for sample selection

Inclusion criteria

1. Mothers who are willing to participate in the study.
2. Study will be only focused to the antenatal mothers who residing at Kollapatti Village.
3. Mothers who are able to understand and answer Tamil questions.
4. Mothers who are present during the period of data collection.

Exclusion criteria

1. Who had complications during antenatal period?
2. Who are unable to understand and answer the Tamil questions.

Material for data collection

The tool consist of two section

Section A: Demographic variables

Section B: Structured questionnaires related to antenatal diet

Data collection procedure

The data was collected with permission obtained from village leader and verbal permission from mothers. The data was collected with the help of structured interview questionnaires.

Data analysis and interpretation

The collected data was grouped and analyzed using descriptive and inferential statistics.

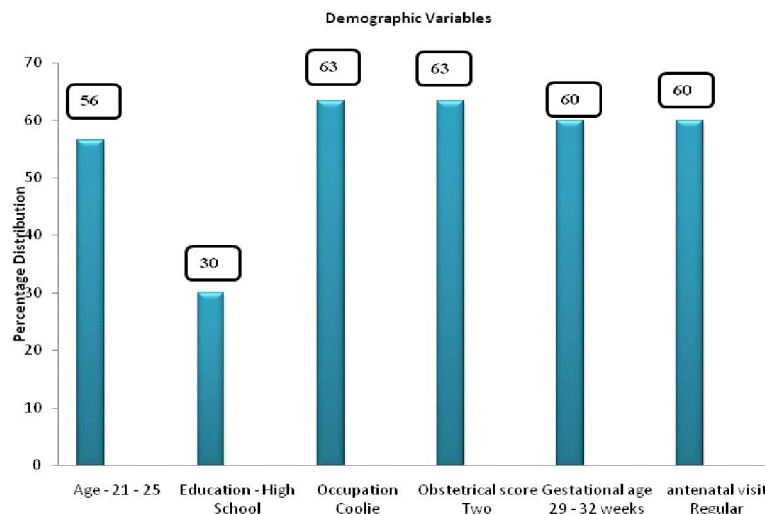


Fig. 1: Demographic Variables

Section A: Distribution of frequency and percentage of Demographic variables

Level of knowledge	Frequency (n)	Percentage (%)
Adequate knowledge (>75%)	0	0
Moderate knowledge (51 – 74 %)	6	20
Inadequate knowledge (<50%)	24	80

Section B: Level of knowledge

Section C: Association of demographic variables with level of knowledge

There is significant association between the age, education, income, type of family, religion and gestational age and there is no significant association between the occupation, obstetrical score and antenatal visit.

Discussion

1. The first objective was to assess the level of knowledge on antenatal diet on 80 % of the mothers had inadequate knowledge, 20% of the mothers had moderately adequate knowledge and no mothers had adequate knowledge.
2. The second objective was to identify the association between the demographic variables and the level of knowledge. There is significant association between the age, education, income, type of family, religion and gestational age and there is no significant association between the occupation, obstetrical score and antenatal visit.

Implications

Nursing practice

The present study showed that the maximum mothers have inadequate knowledge and some of them have adequate knowledge. The nurses are the vital role in educating the public through health education. The proper information about the knowledge on antenatal diet to the antenatal mothers is an essential to lead a healthy life.

Nursing administration

The community health midwife often viewed as a link between the community and health care system. So community health midwife educate the other community health workers and other health personnel on antenatal diet awareness and make health care services accessible to all. The nurse administrator should arrange the program on mass

health education about antenatal diet to the practice of community health midwife.

Nursing education

Health care delivery system in rural areas of India is mainly depending on the gross root level of workers. Therefore the nurse working on the peripheral levels are to be educated on antenatal diet. The nurse educator while planning the daily activities opportunity should be given to educate antenatal mothers on antenatal diet.

Nursing research

There have been many studies conducted about antenatal awareness among antenatal mothers. Many studies should be conducted specifically among the rural population.

Recommendations

1. The replication of the study conducted in large number of samples.
2. The same study can be conducted as a experimental study.
3. The same study can be conducted as a comparative study between urban and rural areas.

Conclusion

The present study showed that the maximum of mothers had inadequate knowledge and some of the mothers had moderately adequate knowledge on antenatal diet. The nurses are the vital role in educating the public through health education. The proper information about the knowledge on antenatal diet to the antenatal mothers is an essential to lead a healthy life.

References

1. Basavanthappa B.T. "Community Health Nursing", tenth edition, livingstone publisher, Newyork, 2001; 437.
2. Denise. F. Polit and Cheryl Tatano Beck. "Nursing Research", Seventh edition, Lippin cott Williams and Willkins Publishers, Newyork, 2003; 162: 289.
3. Garrow. J.S. "Human Nutrion and dietetics", Tenth edition, Livingstone Publishers, Newyork, 2001; 430.

4. Pilli Bagavathi. "Text Book of Statistics", second edition, Jaypee Publishers, New delhi, 1999; 122.
 5. Swaminathan.M. "Hand Book of Food and Nutrition", Fifth edition, The Bangalore printing and publishing, 2001; 186.
 6. Shanthi Ghosh. "Nutrition and Child Care", second edition, Jaypee Publishers, New delhi, 2002; 04.
 7. Sundar Rao. "Method of Statistics", Second edition, Jaypee Publishers, New delhi, 2001; 04.
-

Instructions to Authors

Submission to the journal must comply with the Guidelines for Authors.

Non-compliant submission will be returned to the author for correction.

To access the online submission system and for the most up-to-date version of the Guide for Authors please visit:

<http://www.rfppl.co.in>

Technical problems or general questions on publishing with IJPN are supported by Red Flower Publication Pvt. Ltd's Author Support team (<http://www.rfppl.co.in>)

Alternatively, please contact the Journal's Editorial Office for further assistance.

Publication-in-Charge

International Journal of Practical Nursing

Red Flower Publication Pvt. Ltd.

48/41-42, DSIDC, Pocket-II

Mayur Vihar Phase-I

Delhi – 110 091

India

Phone: 91-11-22754205, 45796900, Fax: 91-11-22754205

E-mail: redflowerppl@gmail.com, redflowerppl@vsnl.net

Website: www.rfppl.co.in