A STUDY TO ASSESS KNOWLEDGE, ATTITUDE AND PRACTICES OF MOTHERS OF UNDER FIVE CHILDREN REGARDING PREVENTION OF PROTEIN ENERGY MALNUTRITION IN SELECTED RURAL COMMUNITY OF GWALIOR

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ABSTRACT

The current study has been undertaken to assess knowledge, attitude and practice score regarding prevention of protein energy malnutrition among mothers of under five children by awareness package in selected community area, Gwalior. The research design used for study was pre-experimental in nature. The tool for study was self-structured knowledge questionnaire which consists of 4 parts- PART-I consisted questions related to Socio-demographic data, PART-II consisted of self-structured knowledge questionnaire to assess knowledge score regarding prevention of protein energy malnutrition among mothers of under five children mothers, PART-III consisted of 5-point Likert scale for attitude and PART-IV consisted of check list for practice assessment. The data was analyzed by using descriptive & inferential statistical methods. A measure of strength of the relationship between two variables is provided by the coefficient of correlation, denoted by ‘r’. If the relationship between two variables is of linear form, it is called the coefficient of linear correlation or Pearson’s product-moment correlation. As evidence by the data from above table shows the linear regression was noted. The coefficient of correlation (r-value) between knowledge vs attitude is 0.234 (P=0.072) shows that there is positive correlation, but the P-value obtained is more than 0.05, hence it was considered that there is no significant correlation between the knowledge vs attitude. The coefficient of correlation (r-value) between knowledge vs practice is 0.245 (P= 0.059) indicates that there is a positive correlation, but the P-value obtained is more than 0.05, hence it was considered that there is no significant correlation between the knowledge vs practice. And the coefficient of correlation (r-value) obtained between attitude vs practice is 0.359 (P= 0.005) gives the information of positive correlation. There is significant correlation found between attitude and practices as the P ≤ 0.05.

Keywords: prevention of protein energy malnutrition, knowledge, attitude and practice.

I. Introduction

Malnutrition is described as "the cellular mismatch between the supply of nutrients and energy and the body's demand for them to guarantee development, maintenance, and particular functions" by the World Health Organization (WHO). A series of connected diseases, such as marasmus, kwashiorkor, and intermediate phases of marasmus-kwashiorkor, are together referred to as protein-energy malnutrition (PEM). The Greek word marasmos, which implies withering or wasting, is where the word marasmus comes from. Marasmus is characterised by emaciation and requires insufficient protein and calorie intake. The phrase "kwashiorkor" means "the disease of the weaning" in the Ga language of Ghana. Williams coined the phrase in 1933, and it refers to a sufficient calorie consumption but insufficient protein intake. Marasmus lacks edoema, but kwashiorkor exhibits it.

A illness created by humans, malnutrition frequently begins in the womb and ends in death. It is a widespread issue, particularly in developing nations and underprivileged areas of certain developed nations. This is especially true for developing nations when there is no restriction on population growth and inadequate resources. In 2005, the United Nations International Child Emergency Fund claimed that 150 million children worldwide suffer from malnutrition; millions of Indian children also lack access to their basic human rights to life, health, nutrition, education, and clean water. According to reports, 63% of them go to bed hungry and 53% are undernourished.
II. Need of the study

Today’s healthy child is tomorrow’s better citizen. Development of healthy child is influenced by many factors, in that nutrition is also one of the important factors that determine health in addition to environment, genetics, socio-economic status of the family etc. The children of under five are most vulnerable groups who are prone to many infectious disease, nutritional deficiencies, accidents etc. Deficiency of the nutrients such as carbohydrates and proteins in children may have mild to moderate impact on growth and cognitive development of the child. As the mothers are the primary care giver who cares for their child, they should have adequate knowledge in early identification of diseases and prevention of protein energy malnutrition.

III. Objective of the study

1. To assess the knowledge of mothers of under five children regarding prevention of Protein energy malnutrition.
2. To assess the attitude of mothers of under five children regarding prevention of protein energy malnutrition.
3. To assess the practices of mothers of under five children regarding prevention of protein energy malnutrition.
4. To correlate knowledge, attitude and practices of mothers of under five children regarding prevention of protein energy malnutrition.
5. To associate knowledge, attitude and practices of mothers of under five children regarding prevention of protein energy malnutrition with selected demographic variables.

IV. Hypotheses:

RH1 - There is significant correlation between knowledge and attitude of mothers of under five children regarding prevention of protein energy malnutrition.
RH2 - There is significant correlation between attitude and practices of the mothers of under five children regarding prevention of protein energy malnutrition.
RH3 - There is significant correlation between knowledge and practices of the mothers of under five children regarding prevention of protein energy malnutrition.
RH4 - There is a significant association between knowledge of the mothers of under five children with selected demographic variables.
RH5 - There is a significant association between attitudes of the mothers of under five children with selected demographic variables.
RH6 - There is a significant association between practices of the mother of under five children with selected demographic variables.

IV. Assumption

1. Mothers of under five children possess some knowledge regarding prevention of protein energy malnutrition.
2. Mothers of under five children may have either positive or negative attitude regarding prevention of protein energy malnutrition.
3. Mothers of under five children might practice correct methods regarding prevention of protein energy malnutrition.

V. Methodology

An evaluative approach was used and descriptive correlation research design was used for the study. The samples consisted of 60 mothers of under five children selected by Non probability convenient sampling technique. The setting for the study was rural community of Aathri, Gwalior layout, Gwalior. Data was gathered with help of demographic variables & administering a self-structured knowledge questionnaire for knowledge, 5-point Likert scale for attitude and check list for practice. Data were analysis using descriptive & inferential statistics.

VI. Results

The analysis of and interpretation data was based on the objectives and hypothesis, both descriptive and inferential statics by used for the data analysis.

• Descriptive statistics Frequency and percentage distribution were used to study the demographic variables of the mother and family such as age, education, occupation, type of family, income and type of food. And Mean, median and standard deviation were used to assess the level of knowledge, attitude and practices of mothers of under-five children regarding prevention of protein energy malnutrition within selected demographic variables.

• Inferential statistics includes the correlation coefficient to find out correlation between the knowledge, attitude and practices of mothers of under-five children regarding prevention of protein energy malnutrition. Pearson’s correlation was used to correlate the knowledge, attitude and practices. And Fischer’s exact probability test and Chi-square test, which was used to associate knowledge, attitude and practices of the sample with that of the selected demographic variables.

The following conclusion were drawn on the basis of the finding of the study

☐ According to the analysis and interpretation of data showed that maximum 36 (60%) of the mother belong to 21-25 year of age group.
☐ Educational wise the distribution of subject include 19(31.7 %) mothers had high school education, 15 (25 %) mothers had education up to PUC/ Diploma, 12 (20%) mothers were illiterates, 8 (13.3%) mothers had primary school education and 6 mothers (10%) had others include degree and postgraduates.
Majority of Mothers of under five children, about 46 (76.7%) were housewife, 8 (13.3%) mothers had other occupation, 5 (8.3%) mothers were Labor work and 1 (1.7%) mother having business.

With respect to type of family, about 30 (50%) mothers belongs to joint family, 22 (36.7%) mothers belongs to nuclear family, 5 (8.3%) mothers belong to broken family and 3 (5.0%) mothers belong to single-parent family.

Income of the family includes, 20 (33.3%) mother’s family earn up to 3000-5000, 18 (30%) mother’s family earn above 5000/month, 15 (25%) mother’s families of <3000/-month and about 7 (11.7%) mothers belong to >10,000/-month.

Coming to type of food maximum number of the mothers 47 (78.3%) belongs to mixed type of food (i.e. the people prefer to eat both vegetarian and nonvegetarian food pattern) and minimum number about 13 (21.7%) mothers belongs to pure vegetarian.

The level of knowledge of the mothers of under five children. About 48 (80%) of the mothers of under five children have inadequate knowledge, 12 (20%) mothers of under five children have moderate knowledge and none of them are having adequate knowledge.

The level of attitude of the mothers of under five children. Majority of 34 (56.66%) mothers of under five children belongs to neutral attitude, 26 (43.33%) mothers of under five children had favorable attitude and none of them had unfavorable attitude.

Table 1: Association of demographic variable with the level of Practice among the mothers of under five children (n=60)
<table>
<thead>
<tr>
<th>Nuclear</th>
<th>22</th>
<th>9</th>
<th>11</th>
<th>2</th>
<th>P=0.970</th>
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<tbody>
<tr>
<td>Joint</td>
<td>30</td>
<td>11</td>
<td>16</td>
<td>3</td>
<td>NS</td>
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<tr>
<td>Broken</td>
<td>5</td>
<td>1</td>
<td>3</td>
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<td>Single parent</td>
<td>3</td>
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**E. Income**

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<th>&gt;10000</th>
<th>7</th>
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<td>5000-10000</td>
<td>18</td>
<td>7</td>
<td>9</td>
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<td>NS</td>
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<tr>
<td>3000-5000</td>
<td>20</td>
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<td>&lt;3000</td>
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**F. Type of food**

|          | Vegetarian | 13 | 4 | 8 | 1 | $\chi^2=0.455$
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<tr>
<td></td>
<td>Mixed</td>
<td>47</td>
<td>18</td>
<td>24</td>
<td>5</td>
<td>P=0.796</td>
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<tr>
<td>Total</td>
<td>60</td>
<td>22</td>
<td>32</td>
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P value in Fisher’s exact test is given in above table except for type of food which is given in chisquare

Ns – non significant  
S- significant-(p<0.05)

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P value in Fisher’s exact test is given in above table except for type of food which is given in chisquare

Ns – non significant  
S- significant-(p<0.05)

The association between the level of practices with the demographic variables of the subjects. Age as a demographic variable shows the significant association with the practices. Remaining variables such as education, occupation, type of family, income and type of food shows that statistically there is no significant association with the levels of practices at 5% level of significance.

**VII. Limitations**

- When interpreting a research report reader are accepted to be aware of the limitation that might impact on the interpretation of results and researchers must acknowledge possible limitations when reporting there finding.
- The study was confirmed to small number of samples.
- Knowledge of the sample was assisted only through the structured interview questionnaire.
- Attitude of the sample was assisted only through the structured interview questionnaire.
- Practice of the sample was assisted only through the structured interview questionnaire.

**VIII. References**

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