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Research Article

A Comparative Study to Assess the Knowledge and Practice Regarding Antenatal Diet among Anaemic and Non Anaemic Antenatal Mothers in Selected Antenatal Clinics at Vijayapur in a View to Prepare Guideline Sheet

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Abstract: Background: Anaemia is a major health problem in the worldwide. Around one third of world population has affected with different form of anemia. Anemia during pregnancy is a public health problem especially in developing countries and is associated with adverse outcomes in pregnancy. **Aim:** Assess the nutritional diet of anemic and non-anemic antenatal mother and determine their knowledge and practice regarding effect of antenatal diet**. Materials and methods:** The study was conducted with 500 anemic and 500 non anemic antenatal mothers were selected by using purposive sampling techniques. The knowledge is assessed by structured knowledge questionnaires; practice was assessed by rating scale and data were analyzed by using descriptive and inferential statistical methods. **Result:** The study result shows that the mean knowledge score among anaemic mother was found to be 9.13 with standard deviation of 1.47 and mean knowledge score among non-anemic mothers was found to be 15.84 with standard deviation 1.77. The mean knowledge score differ significantly with t-value = 65.16 and p-value < 0.0001. The mean practice score among anemic mother was found to be 38.42 with standard deviation of 6.59 and mean practice score among non-anemic mothers was found to be 27.55 with standard deviation 6.59. The mean practice score differ significantly with t-value = 26.05 and p-value < 0.0001. **Conclusion:** The research concludes that there is a difference between knowledge and practice among anemic and non-anemic mothers so need to provide awareness programme for antenatal mothers.
Keywords: Antenatal clinic, Antenatal diet, Knowledge, Practice, Guideline sheet.

Introduction

Anaemia is a major health problem in the worldwide. Around one third of world population has affected with different form of anemia. Anemia during pregnancy is a public health problem especially in developing countries and is associated with adverse outcomes in pregnancy[1]. According to World Health Organization (WHO) anaemia in pregnancy is considered to be of a public health significance or problem if population studies find the anaemia prevalence of 5.0% or higher. Prevalence of anaemia of ≥40% in a population is classified as a severe public health problem[2]. Global data shows that 56% of pregnant women in low and middle income countries (LMIC) have anaemia[1]. The prevalence of anaemia is highest among pregnant women. Anaemia is widespread in

India, 58.6% of children, 53.2% of non-pregnant women and 50.4% of pregnant women were found to anaemic in 2016, as per NFHS. India carries the highest burden of disease despite having anaemia control programme for 50 years[3].

Anaemia during pregnancy is reported to have negative maternal and child health effect and increase the risk of maternal and perinatal mortality[4,5]. The negative health effects for the mother include fatigue, poor work capacity, impaired immune function, increased risk of cardiac diseases, and mortality[1,4,6]. Some studies have shown that anaemia during pregnancy contributes to 23% of indirect causes of maternal deaths in developing countries[1].

Objectives stated and objectives achieved

- ✓ To assess the knowledge of antenatal mothers regarding antenatal diet.
- ✓ To assess the practice of antenatal mothers regarding antenatal diet.
- ✓ To compare anemic and non-anemic mothers knowledge and practice regarding antenatal diet.
- ✓ To find the association between knowledge score with sleeted demographic variables.

Hypothesis

H_0: There is no significance difference in knowledge and practice of antenatal mother in anemic and non-anemic group.

H_1: There is significance difference in knowledge and practice of antenatal mother in anemic and non-anemic group.

H_0: There is no significant association between knowledge and practice score and selected demographic variables.

H_1: There is significant association between knowledge and practice score and selected demographic variables.

Materials and Methods

Research Variable: Knowledge and practice regarding antenatal diet.

Baseline variables: Age, occupation, income, educational status, etc.

Source of data: Data was collected antenatal clinics of Vijayapur District.

Research design: Explorative study design.

Setting: The present study was conducted in selected antenatal clinics of Vijayapur city.

Population: In this study, the population consist antenatal mothers of selected antenatal clinics Vijayapur.

Sample: In this study, the sample would consist of anemic and non-anemic antenatal mothers.

Sampling technique: In this study purposive sampling technique were used.

Sample size: The sample for the present study would consist of 500 anemia and 500 non anemia antenatal mother antenatal clinics at Vijayapur.

Results

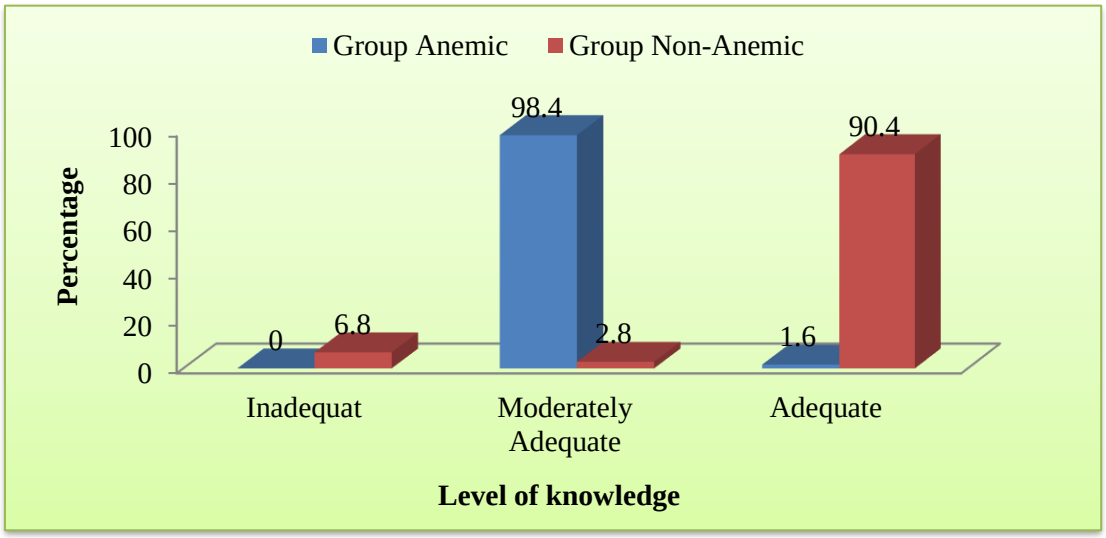

Figure 1. Level of knowledge of antenatal mothers regarding antenatal diet

Table 1. Level of practice of antenatal mothers regarding antenatal diet

Level of practice	Group				Total
	Anemic		Non-Anemic		
	Fr	%	Fr	%	
Poor	416	83.2	118	23.6	533
Good	84	16.8	382	76.4	466
Total	500	100.0	500	100.0	1000

Table 2. Comparison of level of knowledge among anemic and non-anemic mothers regarding antenatal diet

Group	N	Mean	Std Deviation	S.E	t-value	P-value
Anemic	500	9.13	1.47	0.06	65.16 (df=998)	0.0001 (NS)
Non-anemic	500	15.84	1.77	0.07		

Table 3. Comparison of level of practice among anemic and non-anemic mothers regarding antenatal diet

Group	N	Mean	Std Deviation	S.E	t-value	P-value
Anemic	500	38.42	6.59	0.29	26.05 (df=998)	0.0001 (NS)
Non-anemic	500	27.55	6.59	0.29		

Discussion

The study result shows that out of 500 anemic mothers majority 492(98.4%) had inadequate knowledge and 8(1.6%) had moderately adequate knowledge and there no anemic mothers with adequate knowledge regarding antenatal diet. The out of 500 non anemic mothers, majority 452(90.4%) had moderately adequate knowledge, 34(6.8%) had adequate knowledge and 14(2.8%) had inadequate knowledge regarding antenatal diet.

The practice was observed that, majority 416(83.2%) in anemic and 118(23.6%) in non-anemic mothers had poor practice respectively. 84(16.8%) in anemic mothers and 382(76.4%) in non-anemic mothers had good practice respectively. The study concludes that anemic antenatal mother need knowledge regarding antenatal diet and information booklet will improve the knowledge of anemic antenatal mother.

Recommendations

Keeping in view the findings of the present study the following recommendations were made.

- ✓ A similar study can be conducted on a large sample may help to draw more definite conclusions and make generalization.
- ✓ A similar study can be undertaken with pre-test, post-test design with control group.
- ✓ A similar study can be conducted by descriptive often serves to generate hypothesis for future research.
- ✓ A similar study can be conducted among adolescent girls.
- ✓ A study can be conducted using various methods of teaching to determine the most effective method of teaching example–structured teaching programme, etc.

Conclusion

Majority of antenatal mother had moderate adequate knowledge towards antenatal diet. There is time alarm to educate the antenatal mothers through video assisted mass health education programme, seminar, workshop and healthy life style. This may help to reduce the morbidity and mortality rates.

Conflicts of interest: None declared.

References

1. Black RE, Victora CG, Walker SP, Bhutta ZA, Christian P, De Onis M, Ezzati M, Grantham-McGregor S, Katz J, Martorell R, Uauy R. Maternal and child undernutrition and overweight in low-income and middle-income countries. The Lancet. 2013;382(9890):427-51.
2. World Health Organization, Worldwide prevalence of anaemia 1993-2005:WHO global database on anaemia, 2008.
3. https://www.indiaspend.com/improve-womens-education-health-services-to-reduce-indias-anaemia-burden-worlds-highest/
4. Allen LH. Anemia and iron deficiency: effects on pregnancy outcome. Am J Clin Nut. 2000;71(5):1280S-4S.
5. Mbule AM, Byaruhanga YB, Kabahenda M, Lubowa A. Determinants of anaemia among pregnant women in rural Uganda. Rur Rem Heal. 2013;13(2):1-15.
6. Stevens GA, Finucane MM, De-Regil LM, Paciorek CJ, Flaxman SR, Branca F, Peña-Rosas JP, Bhutta ZA, Ezzati M, Nutrition Impact Model Study Group. Global, regional, and national trends in haemoglobin concentration and prevalence of total and severe anaemia in children and pregnant and non-pregnant women for 1995–2011: a systematic analysis of population-representative data. Lan Glob Heal. 2013;1(1):e16-25.
7. https://www.who.int/vmnis/anaemia/prevalence/summary/anaemia_data_status_t2/en/

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