



**ORIGINAL RESEARCH PAPER**

**Home Science**

**KNOWLEDGE ON NUTRITION AMONG SELECTED MOTHERS OF PRESCHOOL CHILDREN**

**KEY WORDS:** Knowledge, Mother, Preschool children.

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**ABSTRACT**

**Background:** Nutrition of Pre-School child is of paramount importance, because the foundation for life time health, strength and intellectual vitality is laid during this period. Nearly half of all deaths in children under 5 are attributable to undernutrition. India is one among the many countries where child malnutrition is severe. A mother is the principle provider of the primary care that her child needs during the first five years of life. Hence knowledge of mothers has an important role in the maintenance of nutritional status of the children.

**Objective:-** The aim of this study was to ascertain the level of knowledge of mothers towards nutrition of preschool going children.

**Materials & methods:** The base line study was carried out in Pravaranagar region, of Ahmednagar District of Maharashtra State with a sample size of 504. A pretested structured questionnaire was used to collect data.

**Result:-**In this present study the majority of the respondents (75.20%) were between the ages of 18 and 30 years. majority of respondent were Hindu (88.49%). Most of the respondents (mothers) were literate and educated up to secondary and higher secondary school level (57.94%), followed by 45.24 % up to under graduate (UG) and post graduate(PG) level. Most of the respondents (mothers) i.e 61.11 % obtained poor scores about various aspects of nutrition knowledge and 38.89 % of the respondents belonged to the fair and the good scores. This study finding revealed that the mothers need to be counseled about nutritional knowledge of preschool child

**Conclusion:** This study finding revealed that there is need to counsel the mothers about nutritional knowledge of preschool child and efforts should be enhance to increase the awareness of nutrition.

**INTRODUCTION**

Health is a fundamental human right and health is central to the concept of quality of life (Sundar Lal, 2007). Nutrition of Pre-School child is of paramount importance, because the foundation for life time health, strength and intellectual vitality is laid during this period. Child of today is a citizen of tomorrow and has valuable hand in nation building. Inadequate nutrition among the children leads to develop improper development of their body and mind, resulting into lower level of efficiency (Nazrin Ahmed 2012). It is well documented that the growth and nutritional status of preschool children are useful and sensitive indicators for judging health of a community or a nation (Sachdev HPS 1995, Bishnoi P et al 2004).Early childhood is a period of rapid growth and that nutritional insults during this period result into under or over nutrition (Sen PK 1994, Deonis M, et al 1993).Hence improving nutritional status of children becomes extremely important.

As per UNICEF (2017) nearly half of all deaths in children under 5 are attributable to undernutrition. This translates into the unnecessary loss of about 3 million young lives a year. 22.9 per cent, or just under one in four children under age 5 worldwide had stunted growth.

India is one among the many countries where child malnutrition is severe. As per NFHS 4 (2015-16), in India 38.4% of children under age five years are stunted (too short for their age) which indicates that, near about half of the country's children are chronically malnourished.

As per NFHS 4 (2015-16), in Maharashtra, 34.4% of children under age five are stunted, or too short for their age, which indicates that they have been undernourished for some time. 25.6 % are wasted, or too thin for their height, which may result from inadequate recent food intake or a recent illness. 36% are underweight, which takes into account both chronic and acute undernutrition.

The problem of malnutrition has caught the attention of policy makers and researchers for several decades. Various studies and surveys have been conducted to find out the root causes of child malnutrition. All these studies including the three National Family Health Surveys (NFHS) reveal that malnutrition is not the result of a single cause; the problem is multifaceted, the causes acting singly

or in combination with other complex factors like poverty, purchasing power, health care, ignorance on nutrition and health education, female illiteracy, social convention etc (Children in India 2012).As per the NFHS 4 data (2015-16), Mother's education has a direct impact on the nutritional status of the children.

A mother is the principle provider of the primary care that her child needs during the first five years of life. Nutritional awareness of mothers plays an important role in the health of children aged 0-5 years. The type of care she provides depends to a large extent on her knowledge and understanding of some aspects of basic nutrition and health care(Kiranpreet Kaur et al 2015).Nutrition education plays a significant role in bringing a permanent and favourable solution to the problem of malnutrition among school children (Sati and Dahiya, 2012; and Ramchandran, 2013).

Considering above background, which highlighted the importance of mother's knowledge regarding primary school going children. This study was conducted as a base line study to assess the mother's knowledge on nutrition of preschool children.

**1. OBJECTIVES OF THE STUDY**

- 1) To assess the socio-economic profile of the mothers.
- 2) To ascertain the level of knowledge of mothers towards nutrition of preschool children.

**2. MATERIAL AND METHODS**

**3.1.1 TARGET POPULATION**

The target population was mothers of preschool children aged 3-5 years.

**2.1.2 STUDY POPULATION**

The study population was mother of preschool children aged 3-5 years living in pravaranagar region of Ahmednagar District, Maharashtra State, India.

**3.1.3 INCLUSION CRITERIA**

- Mothers of preschool children aged 3-5 years belongs to pravaranagar region of Ahmednagar District.
- Mothers who agreed to participate in the study.

**3.1.4 EXCLUSION CRITERIA**

- Mothers who had no children aged below 3 years.
- Mothers, who were unavailable, were excluded from the study.

**3.1.5 SAMPLE SELECTION**

The study was carried out in Pravaranagar region, which are situated in Rahata, Shirrampur, Rahuri and Sangamner Talukas of Ahmednagar District of Maharashtra State. The List and names of the preschool children (3-5 years of age) and their mothers had been collected from the various preschools, private and anganwadi schools of selected villages.

Based on the assumption that as per NFHS-3 (2005-06) the Children under 5 years who are underweight (weight-for-age) in Ahmednagar District was 31%, with a desired 95% confidence interval and a standard error margin of 5% the sample size for the study was calculated. The minimum sample size needed for the study was 335.39. But to increase the validity and for analysis convenience, a sample of 504 mothers of preschool children (3-5 years of age) were selected for the base line study.

**3.1.6 METHOD OF DATA COLLECTION**

A structured questionnaire was developed, pre-tested and finalized based on the results of the pre-test. The validated questionnaire was distributed to all the mothers, at the beginning of the study and explained about the questions included. The socioeconomic information of the 504 selected respondents i.e Age, sex, caste, religion, education, monthly income of the family and type of family etc, knowledge of mothers about nutrition was collected for the base line study.

**3. RESEARCH AND DISCUSSION**

According to Rao, (2000) Socio-economic and demographic factors play an important role in the pattern of consumption of food and nutrients. Sunita Kejriwal and Santoshi Halder( 2017) suggested that SES and nutritional awareness of mother are significantly associated and effect child cognitive development. Hence, it is very essential to evaluate the socio-economic status of family of mothers and their preschool children.

The information on the profile of the mothers in terms of age, religion, education, occupation, monthly family income, type of family, type of house, source of water and sanitation facilities etc. were analyzed. The results are presented in the Table no. 1.

Table no. 1 showed socio-demographic characteristics. The age of the respondent (mothers) found that 35.12% of the respondents were in the age group of 18-25 years, 40.08 % of the respondents were in the age group of 25-30 years, 18.25 % of the respondents were in the age group of 30-35 years and the rest 6.55 % were above the age group of 35 years. The above table data showed that the majority of the respondents (75.20%) were between the ages of 18 and 30 years.

In Indian Society religion and caste has a very strong hold. Every religion has a different food preparations and eating beliefs directly affected on health and nutritional status of their family. Table also pertaining to religion the of the respondent (mothers) shows that majority of respondent were Hindu (88.49%), followed by 7.14% of were Muslim and 3.57 % of were Christian. Only 0.60% and 0.20 % of respondents belong to Buddhist and other religion respectively. As per the Census 2011 out of total population of Ahmadnagar district, 90.4 % population belongs to Hindu religion, followed by 7.06 % Muslim, 0.5 % Christian and 0.75% Buddhist religion.

A proper educational background of the family is very essential for better development of their children (Moestue 2008). Especially Mothers' education level even within the same social class is a key determinant of their children's health. A high level of maternal education could lower childhood malnutrition through other pathways such as increased awareness of healthy behaviour, sanitation practices and a more equitable sharing of household resources in favour of the children (Vella V et al 1992 and Smith LC 2000).

As stated by researcher, importance of mother's education the present study finding showed that most of the respondents (mothers) were literate and educated up to secondary and higher secondary school level (57.94%), followed by 45.24 % up to under graduate (UG) and post graduate(PG) level. Only 11.11 % was found up to primary school level. Table also indicates that most of the respondents (75.20%) were housewives and remaining were working as teacher (6.75%), farmer (6.15%), farm worker (6.15%), self employed (4.76%), social worker (1.59%) and used to spend 6 hours outside their homes in their job for six days in a week.

Nutritional status is also influenced by factors such as household income, the skills and capacity of care givers especially mother, use of limited resources for better care of children, as well as local availability of health-care services (WFIM 2013).The present study finding showed that most of the respondents (40.28%) household income per month ranged between Rs.5000-10000 and followed by 24.21% ranged between Rs.10000-20000, whereas 27.38% respondents were having more than Rs.20,000 per month. Only 8.13 % of respondent's household income were having less than Rs.5000 per month.

The sources of information regarding nutrition and hygiene information were asked and multiple answers were given. The results distribution shows that Television was on the top (84.92 %), followed by anganwadi worker/health worker/ social worker (60.11 %) and the radio (33.13 %) occupied the third place. Friends and family member (29.96 percent) were mentioned in the fourth place, News paper (28.57 %) were mentioned in the fourth order. Only 4.76 % received from magazines and 3.76 % from internet and social media. The Television and anganwadi worker/health worker/ social worker played an important role in the dissemination of information regarding health and nutrition.

This study was conducted as a base line study to assess the mothers knowledge on nutrition of preschool going children. From the Table no .2 it has been revealed that most of the respondents (mothers) i.e 61.11 % obtained poor scores about various aspects of nutrition knowledge and 38.89 % of the respondents belonged to the fair and the good scores taken together. The table also indicates that as the educational level of the mothers decreased the knowledge scores were also went low. A high proportion of the respondents whose were illiterate or had studied only up to primary and secondary school had 'poor' knowledge on nutrition. As the education level of the mothers raised the proportion of the respondents with 'fair' and 'good' knowledge on nutrition also increased. However 40.82 % Post graduate (PG) level of education of the respondents (mothers) had obtained poor knowledge scores. The similar finding with this result was found in a study done by Gupta Mahesh et al (1991) which reported that there was no significant association between mothers' KAP and educational level. This is also supported by a study on relationship between the mothers' nutrition knowledge and literacy done by Parul Christian et al found that the great majority of both literate and illiterate mothers had scores in the poor range (1-3 points).

**Conclusion:**

It has been revealed that most of the respondents (mothers) i.e 61.11 % obtained poor scores about various aspects of nutrition knowledge; Overall knowledge regarding nutrition among study subjects was not satisfactory. Hence this study finding revealed that the mothers need to be counseled about nutritional knowledge of preschool children and efforts should be enhance to increase the awareness of nutrition.

**Table. 1 The Socio-demographic characteristics of the respondents (n=504)**

Variables	n	%
<b>Age Years</b>		
18-25	177	35.12
25-30	202	40.08
30-35	92	18.25
Above 35	33	6.55

<b>Religion</b>		
Hindu	446	88.49
Muslim	36	7.14
Christian	18	3.57
Buddhist	3	0.60
Others	1	0.20
<b>Education level</b>		
Illiterate (unable to read and write)	5	0.99
Primary School	56	11.11
Secondary School	166	32.94
Higher Secondary School	126	25.00
Under graduate (UG)	102	20.24
Post graduate(PG)	49	9.72
<b>Occupation Status</b>		
House wife	379	75.20
Teacher	34	6.75
Social worker	8	1.59
Health worker	3	0.59
Self employed	24	4.76
Farmer	31	6.15
Farm worker	25	4.96
<b>Household income per month in Rupees</b>		
< Rs.5000	41	8.13
Rs.5001-10000	203	40.28
Rs.10001-20000	122	24.21
Above Rs.20000	138	27.38
<b>Source Receiving Nutrition and Hygiene Information</b>		
Radio	167	33.13
Television	428	84.92
Newspaper	144	28.57
Magazine	24	4.76
Friends/Family members	151	29.96
Anganwadi /Health worker/Social worker	303	60.11
Other (Internet media, social media etc)	19	3.76

n=number %=percentage

**Table no. 2 Distribution of Respondents (Mothers) by Nutritional Knowledge Scores**

Respondents (Mothers) educational level	Respondents (Mothers) n=504	Respondents(Mothers) knowledge on Nutrition n=504					
		Good (>38)		Fair (>19 to 38)		Poor (<19)	
		n	%	n	%	n	%
Illiterate (unable to read and write)	5	-	-	-	-	5	100
Primary School	56	-	-	7	12.5	49	87.5
Secondary School	166	-	-	30	21.67	136	78.31
Higher Secondary School	126			64	50.79	62	49.21
Under graduate (UG)	102	30	29.41	36	35.29	36	35.30
Post graduate(PG)	49	19	38.77	10	20.41	20	40.82
<b>Total</b>	<b>504</b>	<b>49</b>	<b>9.72</b>	<b>147</b>	<b>29.17</b>	<b>308</b>	<b>61.11</b>

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