Effectiveness of Structured Teaching Programme on Malnutrition and the Preparation of Hydrabadi and Davanagere Mix Recipe among Mothers of under Five Children in Selected Anganwadi centre of Hattikeri P. H. C., Ankola (U.K.), Karnataka

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ABSTRACT

Background: Malnutrition is the condition that develops when the body does not get the right amount of the vitamins, minerals etc. The purpose of this study was to evaluate the effectiveness of structured teaching programme on malnutrition and the preparation of Hydrabadi and Davanagere mix recipe among mothers of under-five children.

Aims and objectives: The study was conducted to assess the pre test score of mothers on malnutrition and the preparation of Hydrabadi and Davanagere mix recipe, evaluate the effectiveness of structured teaching programme And to find out association between pre test and post test knowledge score demographic variables.

Materials and Methods: Twenty mothers of under five children assessed. They were assessed for the level of knowledge regarding malnutrition and the preparation of Hydrabadi and Davanagere mix recipe by self structured questionnaires on first day pre-test followed by structured teaching programme for one hour. The post-test were conducted on seventh day by using same tool.

Results: Statistically significant effectiveness of structured teaching program was found. There was no significant association was found with selected demographical and knowledge score.

Conclusion: Our findings denotes that the effectiveness of structured teaching programme help to gain the knowledge score on malnutrition and the preparation of Hydrabadi and Davanagere mix recipe. It is essential for community health nurse to develop knowledge regarding malnutrition, its management and prevention in order to avoid life threatening complications among under five children’s.

Key Words: Structured teaching programme, Knowledge, Mothers of under five children’s, Hydrabadi and Davanagere mix.

INTRODUCTION

As India is a developing country, many children under five years are still undernourished. Children under the age of five years constitute a priority group because of their large numbers. In India they comprise about 13% of the total population. [1] They are also regarded as vulnerable or high risk group because of the problems arising during their growth, development and survival. 53% of the deaths are occurring among children during the first 5 years of life in developing countries including India. [2] Malnutrition is regarded as the most widespread condition affecting the health status of under five children. Approximately 47% of the India’s (under age of five years) children are underweight, one in three adult women in India is under weight and therefore at risk of developing babies with low birth weight. Children under age of five years suffer from a host variety of diseases like diarrhoea, respiratory infections, measles, pertusis, polio, tuberculosis and diphtheria due to malnutrition. [3,4]

Malnutrition results from imbalance between the body needs and intake of the nutrients, which can lead to syndromes of
deficiency, dependency, toxicity or obesity. [5] Malnutrition includes under nutrition in which nutrients are under supplied, under nutrition can results from inadequate intake, malabsorption, abnormal systemic loss of nutrients due to diarrhoea, haemorrhage, infection and it is associated with poverty, social deprivation. Malnutrition is a manmade disease. [6,7] It is a disease of human society. It begins of quite commonly in the womb and ends in the grave. Malnutrition among children is often caused by the synergistic effects of inadequate or improper food intake, repeated episodes of parasitic or other childhood disease such as diarrhoea, improper care during illness. [8] Malnutrition in childhood can also affect growth potential and risk of morbidity and mortality in later year of life. Malnourished children are more likely to grow into malnourished adults who face high tended risk of diseases and deaths. [9,10]

MATERIALS AND METHODS

The one group pre test post test pre-experimental design was used. The present study was conducted on 20 mothers of under five children’s of Hattikeri Anganwadi, Ankola. The nature of study was explained to the subjects and written consent was obtained. The subjects were selected by purposive non probability sampling method based on inclusion criteria. The structured questionnaire used in data collection. The tool consists of three questions to obtain socio demographic data, and thirty items to assess the level of knowledge regarding malnutrition and the preparation of Hydrabadi and Davanagere mix recipe. The tool was validated by experts in field of Public health nursing. Pre-test was conducted by using structured questionnaire followed by administration of structured teaching programme on same day of pre-test. The post test was conducted on seventh day of pre-test. The collected data was organized and analyzed based on the objectives by using descriptive and inferential statistics.

RESULTS

Findings related to socio demographic variables: majority of mothers 12 (60%) were between the age group of 21 to 25 years, 19 (95%) belongs to Hindus, majority 10 (50%) mothers were completed their PUC education.

Findings related to pre-test and post-test knowledge scores: mean of pre test is 15.35, median 16, standard deviation 3.7 and ranges is 13 and post test mean 23.9, median 24, standard deviation 2.37 and ranges is 07 this reveals significant gain in knowledge of mean, median, and range scores after administering Structured Teaching Programme (STP).

Table 1. Distribution of mean, median, standard deviation and range of pre-test and post-test knowledge scores.

<table>
<thead>
<tr>
<th>Values/ test</th>
<th>Mean</th>
<th>Median</th>
<th>Standard deviation</th>
<th>Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-test</td>
<td>15.35</td>
<td>16</td>
<td>3.7</td>
<td>13</td>
</tr>
<tr>
<td>Post-test</td>
<td>23.9</td>
<td>24</td>
<td>2.37</td>
<td>7</td>
</tr>
</tbody>
</table>

Effectiveness of Structured Teaching Programme (STP) in terms of gain in post test knowledge scores: calculated paired ‘t’ value (t calculated =33.16) is greater than tabulated value (t table = 1.73). Hence H1 is accepted. This indicates that the gain in knowledge score is statistically significant at p<0.05 levels. Therefore structured teaching programme (STP) on malnutrition and the preparation of Hydrabadi and Davanagere mix recipe is effective to improve the knowledge of Mothers of under five children’s.

Table 2. Mean difference, standard error and paired t-test of knowledge scores in post test.

<table>
<thead>
<tr>
<th>Mean Difference</th>
<th>Standard Error</th>
<th>Paired t-Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.55</td>
<td>0.55</td>
<td>33.16</td>
</tr>
<tr>
<td></td>
<td></td>
<td>1.37</td>
</tr>
</tbody>
</table>

Above table reveals that the calculated t-value (t=33.16) is greater than tabulated value (t=1.37), hence post test knowledge score was greater than pre-test knowledge score.

Association between pre-test and post-test knowledge scores with selected demographic variables: There was no significant association between knowledge scores and selected demographic variables.
**DISCUSSION**

Mean of pre test is 15.35, median 16, standard deviation 3.7 and ranges is 13 and post test mean 23.9, median 24, standard deviation 2.37 and ranges is 07 this reveals significant gain in knowledge of mean, median, and range scores after administering Structured Teaching Programme (STP). In support to our study an experimental study was conducted on a supplementary food based on Hyderabad mix in National Institute of Nutrition, Hyderabad. The food contains about 12.5% proteins. A daily supplement of 80 grams of Hydrabadi mix providing 300 kcal and 10 grams of proteins. The studies have shown that there is significant improvement in the growth rate of preschool children.

A similar study was also carried out on the Hydrabadi mix recipe in a village around Hyderabad by the National Institute of Nutrition with an objective to show that it is possible to develop action programmes with the active participation of the community to utilise the Hydrabadi mix recipe as local food resources for the best advantage of the preschool children in the community. This work clearly showed that such a programme would be received well by the village community and an evaluation of the feeding programme revealed that the incidence of malnutrition among preschool children can be considerably reduced with such preparation with are much cheaper than proprietary and processed foods. The researcher applied a Structured Teaching Programme (STP) on 20 Mothers of under five children’s. The results showed that mean effectiveness was increased by 8.55% with a median of 8%. It concluded that the STP was highly effective in improving the knowledge of Mothers of under five children’s on malnutrition and the preparation of Hydrabadi and Davanagere mix recipe.

**CONCLUSION**

The present study was undertaken to evaluate the effectiveness of structured teaching on nutrition, malnutrition and the preparation of Hydrabadi and Davanagere mix. The following conclusion was based on the finding. During the researcher’s field experience, it has been observed that most of the mothers of under five children’s were unaware about malnutrition, its prevention, management and complications. Hence structured teaching programme was effective strategy to enhance in the knowledge.

**REFERENCES**

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