

EFFECTIVENESS OF PLANNED TEACHING PROGRAMME (PTP) ON KNOWLEDGE REGARDING COMPLEMENTARY FEEDING AMONG PRIMI-PARA MOTHERS IN SELECTED VILLAGES OF KHARAR, MOHALI, PUNJAB.

Minu S.R., Kesani Vanaja Lakshmi Durga Bhavani, Alanjangi Monika,
Juthuka Sandhya Rani

Faculty of Nursing, Rama University, Mandhana, Kanpur, Uttar Pradesh,
Kanpur

Email id: dean.nursing@ramauniversity.ac.in

Abstract

A pre experimental research was conducted on 60 primipara mothers to evaluate the effectiveness of planned teaching programme regarding complementary feeding in selected villages of Mohali, The data was collected by closed ended knowledge questionnaire and 't' test and chi square were used for statistical analysis. The result shows that post-test mean score was 28.18 which is higher than the pre-test mean score (12.38). The obtained 't' value was 37.525 which is significant at 0.05 level. It shows that the planned teaching programme was effective as majority of primipara mothers had adequate knowledge regarding complementary feeding after teaching.

Keywords: Complementary feeding, Primipara mothers, Planned teaching program.

Introduction:

Children constitute a major proportion of the global population today and most important and vulnerable segment of our population. According to WHO "A healthy child is a sure future". The future of our nation depends on the way in which we nurture our children today.

Adequate nutrition during infancy is fundamental to the development of each child's full human potential. The period from birth to two years of age is most critical for the promotion of optimal growth, health and behavioral development. It is reported by the researches that this is the peak age for growth faltering, deficiencies of certain micronutrients and common childhood illnesses such as diarrhoea. After a child reaches two years of age, it is very difficult to reverse stunting that has occurred earlier. The immediate consequences of poor nutrition during this period leads to significant morbidity and mortality and delayed mental as well as motor development which effect the future development of child.

According to WHO (2010) estimation India is

having highest IMR 50.78/1000 live births, of which Karnataka place top in south Indian states (43/1000 live births) when compared with (38/1000 live births) Maharashtra and (30/1000 live births) Tamil Nadu.

Inadequate feeding practices contribute to increase in malnutrition, almost fourfold between the first few months of life and the completion of two years of age. It is estimated that worldwide 10.9 million children under five years of age die every year of which 2.42 million deaths occur in India alone. The global strategy of infant and young child feeding recognizes that 2/3 of these deaths occur during the 1st year and is related to inappropriate infant feeding practices. So good feeding practice is an important factor for under one year of age because weaning period is the most crucial period in child development.

Further, introduction of complementary foods before the age of six months neither enhances growth nor nutritional status of infants. It may replace the breast milk in breastfed infants but

increases exposure to contaminated weaning foods. Hence, it is felt to be important to make the mothers aware of the complementary form feeding.

The purpose of the study was to evaluate the effectiveness of planned teaching programme.

Materials and Method:

A pre experimental study was conducted on knowledge regarding complementary feeding among primipara mothers in selected villages of Kharar, Mohali, Punjab. The study was conducted in Badala and Badali villages of Kharar and Mohali, Punjab. The villages are about 2 km away from the Ambika college of nursing, Kharar. Sixty primiparamothers were selected by non probability, convenient sampling. Closed ended questionnaire and planned teaching program were used to conduct the study. Reliability of the tool was tested by using split-half method and validity was tested in consultation with experts from the related field.

Official permission, ethical clearance and informed consent:

The proposed study was conducted after the approval of the ethical committee of the college. Permission was obtained from the Senior medical officer of the selected primary health centre. Informed consent was obtained from each participant of the study before starting the data collection. Assurance was given to participants that the anonymity of each individual and confidentiality would be maintained throughout the study.

Pilot study:

Six primiparamothers were selected by using convenient sampling technique and pre test was conducted by using closed knowledge

questionnaire. On the same day planned teaching programme was given to the mothers. Post test was conducted after seven days of pre test.

Findings reveal the feasibility of conducting final study and to determine the method of data analysis.

Data Collection Procedure:

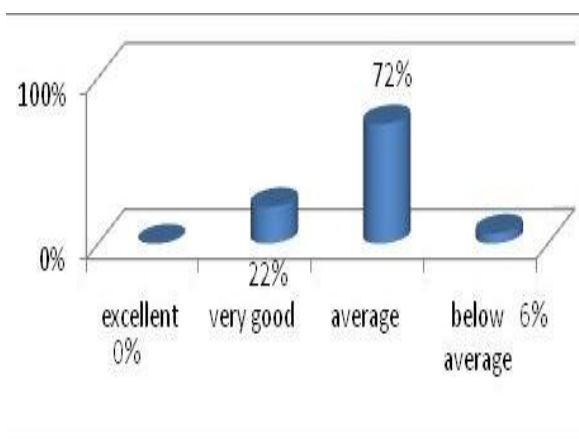
Data were collected from Badala and Badali villages, from 9am to 5pm daily from 7-8 primipara mothers per day. Pre test was conducted by using closed ended knowledge questionnaire for about 20-30 minutes followed by planned teaching programme for 40 minutes on the same day. Post test was conducted for the same samples by using the closed ended knowledge questionnaire after seven days of planned teaching.

Results:

Among the primiparamothers 57% were between 24-27 years of age.. Thirty percentage of them had secondary school education. Majority (75%) were home makers and educational status of husbands was matric for 32%. Majority(62%) had monthly family income of Rs.5000-10,000. Majority (73%) primiparamothers were vegetarian and 63% from Sikh religion. Around (50%) belonged to nuclear family and 67% obtained information regarding complementary feeding from mass media.

The pretest knowledge scores show that majority of primiparamothers (72 %) had average knowledge and 22 had very good knowledge. Only 6 % had below average knowledge before implementation of the structured teaching

programme. (Fig-1).



Figure;1 - The cylindrical diagram shows percentages distribution of pretest knowledge score.

The post test knowledge score shows that 58% mothers had good knowledge and 24 % had excellent knowledge. Only 13 % had average knowledge and 5% had below average knowledge.(fig-2)

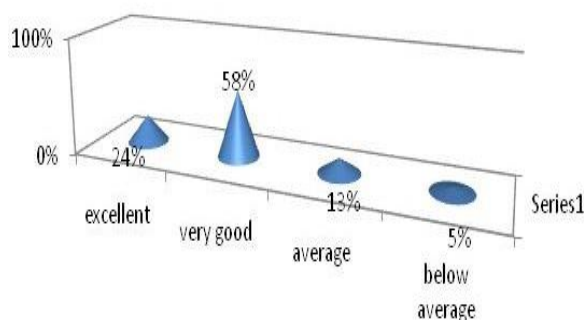


Figure 2- The conical diagram shows percentage distribution of posttest knowledge score.

Further the mean, SD and mean difference reveal that post-test mean score values were higher than the pretest mean score values. The finding was significant upto level of 0.05 probability and the difference was 15 which

depicts the effectiveness of the module. Further hypothesis was tested to find out significant difference between pre & post test knowledge scores at 0.05 level of probability. It reveals that there is significant.

Table :1 Compression of Pre & Post test Mean, SD, Mean difference & t values.

Test	Mean	SD	Mean difference	Paired t value
Pretest	12.38	3.087		
Posttest	28.18	1.049	15.8	37.525

That post test mean score (28.18) was higher than pre-test mean score (12.38).

Conclusion:

Majority of the primipara mothers had

inadequate knowledge regarding complementary feeding before implementation of teaching programme. Planned teaching programme regarding complementary feeding was effective as majority of primipara mothers got adequate knowledge in post test.

The obtained chi square value was 9.196 (P<0.05) showed there is significant association between education of mother and posttest knowledge score 9.348 (P<0.05) occupation of mother and post test knowledge score.

References:

- 1) Aggarwal A, Verma S, Faridi M; Dayachand: A study of Complementary feeding reasons for

- inappropriateness in timing, quantity and consistency department of paediatrics, university college of medical science and Guru Teg Bahadur .By Hospital, Delhi, India: Indian J pediater. 2008 Jan;75(1):49-53. Available on :<http://www.ncbi.nlm.nih.gov/pubmed/18245935>
- 2) Ann Ashworth, Alan Jackson, 'Focusing on Malnutrition management to improve child survival in India' Journal of the Indian Academy of pediatrics. June 2007; 44 (6) : pp.413.
 - 3) Binns C, Lee A, Wang Y. Introduction of complementary foods to infant within the first six months postpartum in Xingjian, PR China. Asia pediatrics Journal of clinical Nutrition, 2007 Sep; 16(1) : 462-6.
 - 4) Brown A, Leem: Maternal child feeding style during the weaning period: Association with infant weight & maternal eating style, Eat Behav.2011 Apr; 12(2): pp:108-111. Available on : <http://www.ncbi.nlm.nih.gov/pubmed/21385639>
 - 5) Das DK. Ahmed S. knowledge and attitude of Bangladeshi rural mothers regarding breast feeding and weaning Indian J Pediatric. 1995 oct; vol 10: 213-217. Dec.10-13, 2001.
 - 6) Government of India; National family health survey (NFHS 3) 2005 2006. Fact sheet Karnatka state.
 - 7) Hasan J, Khan Z, Sinha SN. "Socio – Cultural factors i nf luencing nutritional status of infants – a longitudinal study". Indian journal of maternal and child health. 1991; 2(3):84-.
 - 8) Kathryn Dewey, Chessa Lutter, WHO Global consultation on complementary feeding. Methods, 5th edition, Lippincott, pp.88.
 - 9) Mini Sheth and Reeta Dwivedi, weaning or complementary food, Indian Journal of Pediatrics, 2006;73(1):61-64.
 - 10) Polit. F, Denise, Beck Cheryl Tatano, Nurisng Research Principles and
 - 11) Shivamurty K. S. Infant feeding and weaning practices: Journal of Indian Medical Association Jaipur, Rajasthan, A. J. Publishers:2008(1) P576-578.
 - 12) Subbiah N. knowledge and attitude towards weaning: The Nursing Journal of India Delhi: 2006, 47(1):P8
 - 13) www.WHO.Int/entity/nutrition/publications/infant feeding/complementary feeding. Pdf.
 - 14) www.rdcindia.org
 - 15) www.rdcindia.org