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Impact of nutrition education on adolescent girls of Purna Maharashtra

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ABSTRACT

The present research work was undertaken to study the knowledge of adolescent girls about reproduction, health care, nutritional awareness. Also to evaluate an impact of educational training in knowledge, attitude and behavior of subject due to nutrition education imparted to them. About 240 adolescent girls, in the age group of 11 to 15 were selected at random, divided into 12 various batches of 20 girls in each batch. The nutrition education and package of activities were provided to these subjects. The inferences were drawn with the help of suitable statistical tools wherever felt necessary. It is clear from the results that majority of the sample adolescent girls assessed to have either poor or fair levels of awareness about the component included on reproductive health care and nutritional awareness. However, after receiving training regarding reproductive health care, nutritional awareness for a period of 2 months, highly significant improvement was noticed in their awareness and behavior in respect to the components dealt in training their percentages increased significantly in fair and good categories of awareness.

Key words: Reproductory & nutritional awareness, Health habits & Scientific information.

INTRODUCTION

The word adolescent is derived from the Latin word 'Adolescere' which means 'to grow' or 'become mature'. The process of maturation becomes rapid from the puberty stage that is from 11 to 13 yrs [Easwaran & Poorani, 1991].

Therefore it is need to train these vulnerable group regarding reproductive, health and nutritional awareness. Especially for girl and woman it is essential to educate this population because, today girls are future mothers. To strengthen any nation there is need of healthy mothers. Only healthy mothers can produce health citizens [Eelizabeth, 2000]

As health is no doubt fundamental to human progress, girls, boys and newly married couples are the threshold of married life, which should have prior idea about conception, pregnancy and associated wastage. The consequences like malnourished babies, anemia, deterioration of health etc. Girl's age at marriage considerably influences her reproductive health outcome i.e. anemic and malnourished adolescent girls give birth to malnourished babies only, which has to be rectified at this stage only. Therefore reproductive health and nutritional awareness should be given priority in health care to have healthy mothers to get healthy children. After several years of independence, India is far behind in maintaining good health as indicated through parameters as IMR, MMR, HIV infected persons, diseased conditions of family members etc.

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Second factor nutritional awareness is also important today in India, many young girls and woman are malnourished and anemic [Chawal et. al. 2005]. They do not have proper knowledge about their nutritional requirement; inadequate knowledge may cause various health problems.

Most of the Indian woman and girl's diet is lacking in many nutrients and having low Hb levels [Greger & Divilabiss, 1979, Jondhale et. al. 1999]. Therefore it is needed to educate and trained these adolescent girls regarding reproductive health and nutritional awareness with following objectives.

• To give scientific information to adolescent girls on reproductive health care effectively and intensively for quality.

• To give scientific information to adolescent girls on nutrition awareness for good health.

• To assist the impact on attitude, values and behavior changes of the trainees after attending it (Pre and post testing).

MATERIALS AND METHODS

Nearly 240 adolescent girls in the age of group 11 to 15 yrs were randomly selected from Purna town of Parbhani district in Marathwada region of Maharashtra state. Nutrition education and package of activities was provided on various aspects of health care, puberty changes, functioning of female, male reproductive system, pregnancy, nutrients and their functions to the subjects. Various teaching methods and aids were used for through understanding of the content material. Questionnaire was employed to collect the required information collected data was pooled and analyzed with appropriate statistical methods.

Background information: Majority of the subjects were form nuclear families (63.33%), nearly 72.91% student were having family size up to 4 to 8 members, majority of subjects parents were labors (26.66%) followed by teachers (25.41%).

RESULTS AND DISCUSSION

Table 1 indicates impact of training on nutrient awareness of 240 enrolled adolescent girls in 12 batches. About 61% of adolescent girls were assessed to have fair level of awareness about carbohydrates and its function at the time of pre testing. After having training, awareness increased to good level (82.5%) and fair level (10%) with regard to awareness about fat and oil and its function 63.75% adolescent girls were having fair knowledge followed by for awareness (31.25%).

After training majority of adolescent girls knowledge level improved to good level. Majority adolescent girls (71.66%) knowledge about protein and its function was fair level followed by poor level (18.75%). After training majority girls (84.16%) knowledge was improved to good level. About 50% of adolescent girl's awareness about all vitamins was fair followed by poor (37.5%). After training maximum girls (79.16%) gain good knowledge about function of vita-A and its sources was observed fair followed by poor (27%). After completion of the training majority of adolescent girls knowledge level improved up to good level (86.6%). Regarding vit-C function and sources 56.66% adolescent girls were having fair knowledge followed poor (31.16%) knowledge.

After training majority of adolescent girls knowledge increased up to good levels 61% about function of vit-D and its sources was completion of training adolescent girl's knowledge improved at good level (82.5%). Adolescent girl awareness about dietary minerals was found fair (63.33%) followed by poor (28.33%). Hence knowledge improved at good level (44.5%) after completion of the training. Awareness regarding calcium, iron and iodine, majority of adolescent girl's knowledge was found at fair levels 70, 75 and 55% respectively at pre testing. It was improved to good level 85.83%, 85.0 and 75.83% respectively at post testing.

	Nur	nber and	percentage of adolescent girls					
Particular awareness	reness Pre test		Post to	est	'Z' value			
	N	= 240	N= 240					
Carbohydrates and its function								
Poor	74	30.83	06	2.5	3.69578**			
Fair	146	60.83	24	10	6.953463**			
Good	20	60.83	198	82.5	1.3162**			
Very good	-	-	12	5.00	-			
Fat and oil and its function		21.25	0.0	2.22	0.455501.444			
Poor	75	31.25	08	3.33	3.475781**			
Fair	152	63.75	42	17.55	6.492302**			
Good	12	5.00	182	3.33	10.0808**			
Very good	-	-	08	17.5	-			
Protein and its function	45	10 75	04	1.00	1.0/2740*			
Poor	45	18./5	20	1.00	1.803/48*			
Good	172	6 25	20	0.35 94.16	9.10/002**			
Very good	15	3 33	14	5 86	0.34264NS			
All vitamine	08	5.55	14	5.80	0.34204103			
Poor	90	37.5	08	3 33	1 30846**			
Fair	120	50.00	42	17 55	4.30040			
Good	36	15.00	100	79.16	9.63215**			
Very good	-	-	- 170	-	-			
Function of vit-A and its sources								
Poor	64	26.66	12	5.00	2.622391**			
Fair	156	65.00	34	14.16	7.212843**			
Good	16	6.06	182	75.86	10.4036**			
Very good	04	1.66	12	5.00	0.31875NS			
Function of vit-C and its sources								
Poor	82	31.16	04	1.66	3.346727**			
Fair	136	56.66	24	10.00	11.89954**			
Good	24	10.00	208	86.66	11.7509**			
Very good	08	3.33	04	1.66	0.108227NS			
Function of vit-D and its sources								
Poor	80	33.33	12	5.00	3.415121**			
Fair	146	60.33	15	6.25	7.491873**			
Good	09	3.75	198	82.5	11.1955**			
Very good	05	2.08	15	6.25	0.45644 NS			
Dietary minerals								
Poor	68	28.33	16	6.66	2.504003**			
Fair	152	63.33	21	8.75	7.325745**			
Good	34	14.16	186	77.5	9.22009**			
Very good	06	2.5	17	0.08	0.349927NS			
Calcium and its sources	26	10.02	10	4.16	0.000/71NG			
Poor	20	10.85	10	4.10	0.8026/11NS			
Fair	108	/0.00	12	5.00	9.000004**			
Voru good	20	13.85	12	63.63 5.00	0.22048NS			
Iron and its sources	08	5.55	12	5.00	0.22940103			
Poor	20	8 33	01	0.41	1 318761**			
Fair	180	75.00	21	8.75	9 388738**			
Good	22	916	204	85.00	11 5261**			
Very good	18	7.5	24	10.00	0 34953NS			
Iodine and its sources	10	1.0	21	10.00	0.51755115			
Poor	70	29.16	10	4.16	3.035844**			
Fair	132	55	33	13.75	5.516673**			
Good	28	11.66	182	75.83	9.26309**			
Very good	10	4016	15	6.25	0.22942 NS			
NS=Non Significant *Significant at P<0.05 **P<0.01								

Table 1: Impact of training on nutrient awareness of adolescent girls

NS=Non Significant *Significant at P<0.05

Table 2 showed an impact of training on reproductive awareness of adolescent girls. About 67% adolescent girls awareness about physical changes during puberty was fair, followed by poor levels 30.30%. After completion of training majority of adolescent girls awareness was improved to good level 87%. Regarding awareness about physiological changes during puberty 55% adolescent girls awareness was found fair level followed by poor level 45%. At post testing majority (86.25%) of adolescent girl's awareness improved to good levels. Awareness

regarding personal care and hygiene during menstrual cycle 55% girl's knowledge was fair followed by poor (33.33). After undergoing training 72% adolescent girls had good knowledge. Majority of adolescent girls (80%) awareness about structure and function of uterus was observed poor followed by fair 20.41%. Whereas majority of adolescent girls (80%) knowledge about fertilization was observed poor (80%) followed by fair (20%) level. After undergoing training 73% adolescent girls had good knowledge followed by very good knowledge 14.16%. Nearly 90% of adolescent girls knowledge about contraceptives was observed poor after training, it was improved to fair level (60.83%) followed by poor level (35.83%). Majority of adolescent girls (86%) awareness about pre-natal stages was poor after having training it improved to fair level (50.83%).Only 10 % adolescent girls had good knowledge was seen poor followed by fair (24.16%). This knowledge was improved to fair (63.33%) level after training. Maximum girls (80%) knowledge about vaccination during childhood was observed poor. It was improved to fair level (77%) after undergoing training.

		Number and Percentage of adolescent girls						
Particular reproductive awareness	Per test N= 240		Per test 'Z' value					
			N=240					
Physical changes during puberty								
Poor	72	30.00	08 3	3.33	3.335071			
Fair	160	60.66	16	10.66	8.12696			
Good	08 3.83		210	87.50	13.2099			
Very good			06	2.50				
Physiological changes during puberty								
Poor	108	31.25	08	3.33	5.059644			
Fair	132	55.00	16	6.66	6.226027			
Good	-		207	86.25				
Very good			05	2.08				
Personal care and hygiene during menstrual cycle								
Poor	80	33.33	06	2.5	3.438127			
Fair	132	55.00	20	8.33	6.306027			
Good	28	11.66	172	71.66	8 53361			
Very good	20	11.00	42	17.50				
Structure and function of uterus				17100				
Poor	191	79 58	10	416	11 11214			
Fair	49	20.41	18	7 50	1 981512			
Good	77	20.41	155	64 58				
Very good			57	23.75				
Knowledge about fertilization			57	20.10				
Poor	192	80.00	14	5.83	10 61276			
Fair	192	20.00	16	6.66	1 51 1007			
Good	40	20.00	176	73 33	1.511007			
Very good			3/	14.16				
Knowledge about contracentives			54	14.10				
Rhowledge about contraceptives	218	00.83	86	35.83	0.051173			
Foir	210	90.85	1.46	60.83	7 10785			
Good	22	9.10	08	3 33	7.10705			
Very good			08	5.55				
Very good Knowledge about pre-netural stages of development								
Rilowiedge about pre-natural stages of development	206	95 92	04	20.16	8 420672			
FOOL	200	05.05	122	50.92	0.420072 4.04806			
raii	54	14.10	24	10.00	4.94690			
Very good			24	10.00				
Core during mean an av								
Care during pregnancy	100	75 02	66	27.5	7 009262			
POOL	102	73.83	152	21.3	7.908202			
Fair	38	24.06	152	03.33	5./0186			
Good			22	9.10				
very good								
Knowledge about vaccination	102	00.41	20	0.00	10 70000			
Poor	193	80.41	20	8.33	10.72239			
Fair	47	90.58	186	11.5	8.81745			
Good			34	14.1	b			
very good								
NS=Non Significant *Significant d	tt P<0.	05	**P<	<0.01				

Table 2: Impact of training on reproductive awareness of adolescent girls

Table 3 illustrates health awareness and habits of adolescent girls. Before the training 88% adolescent girls have habit of tooth brushing daily. After training all adolescent girls 100% develop this habit. Regarding nail cutting weekly 53% adolescent girls use to follow this habit after training all adolescent girls cut their nails once a week. Bating daily was seen in 92% adolescent girls, after training all adolescent girls follow the habit of bathing daily. Maximum girls 83% wash head once a week. After training all adolescent girls 100% use to practice this habit. Head bathing twice a week was seen in 46% girls after training 71% adolescent girls develop this habit. Healthy habits of washing hands after each use of toilet were observed in 88% adolescent girls. 34% adolescent girls was taking care about cleanliness of nose, ears, eyes and hair at pretesting while 97% were observed for taking care of the same at post testing. Regarding wearing clean school uniform it was observed that only 32% adolescent girls were wear clean school uniform. This awareness improved to 94% at post testing.

Before the training playing games and sports regularly was observed in only 13%, later it was improved to 52%. Regarding daily exercise or yoga only 10% adolescent girls found to follow this practice, later it was improved to 22%. The habit of keeping school bag, shoes and uniform at pooper place at home was observed in 25%, it was found improved to 81% adolescent girls at post testing. Before the training 30% adolescent girls had the habit of mouth washing after each meal, it improved to 93% at post testing. All above findings are in line with the findings [Prista et. al. 2003].

Helping in household work was a found in 87% adolescent girl at pre testing it was improved to 97% adolescent girls at post testing. Before the training 38% adolescent girls use to listen carefully towards elderly after training 82% adolescent girls follow this habit.

Particular health habits		Number and Percentage of adolescent girls				
		Per test		st	'Z' value	
		N= 240		N=240		
Tooth bruching daily	212	88.33	240	100	5.37672**	
Noil outting wookly	126	52.5	240	100	10.5705**	
Pathing doily	222	92.5	240	100	4.08775**	
Head bathing a week Head bathing twice a week	196	81.66	240	100	6.5593**	
	110	45.83	170	70.83	4.24439**	
	186	77.5	240	100	7.24303**	
Washing hands before every mean	68	28.33	212	88.33	10.1962**	
Washing hands with soap after each use of latrine Takes care about the cleanliness of nose, ears, eyes and hairs Always use school uniform Always use clean shoes and shocks Wash school bag and tiffin bag regularly Sometimes falls sick Play games and sports regularly Does exercise/yoga regularly Keep school bag, shoes and uniform at proper place Wash mouth after each meal Helps in household work Listen carefully towards elderly	82	34.16	232	96.66	11.7762**	
	76	31.66	226	94.16	11.1128**	
	72	30	232	96.6	12.1475**	
	62	25.83	180	75	7.61096**	
	228	95.00	110	45.83	9.866297**	
	31	12.91	124	51.66	5.18331**	
	24	10	52	21.66	1.42918	
	58	24.16	194	80.83	9.08301	
	72	30	224	93.33	11.1243	
	208	86.66	232	96.66	3.8657	
	92	38.33	197	82.08	7.64771	
NS=Non Significant *Significant at P<0.05 **P<0.01						

NS=Non Significant *Significant at P<0.05

CONCLUSION

It is from the result that, majority of the sample adolescent girls assessed to have either poor or fair levels of awareness about the components included on reproductive health care and nutritional awareness and health awareness and habits. However, after receiving training regarding reproductive health care and nutritional awareness for a period of 2 months, highly significant improvement was noticed in their awareness and behavior in respect to the all components dealt in training as their percentages increased significantly in fair and good categories of awareness and habits.

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