

Original Research Article

A Study to Assess the Knowledge regarding Protein Energy Malnutrition in Under-Five Children among Anganwadi Workers at Selected Anganwadi Centre Obedullaghanj, (Mp)

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Abstract

Protein energy malnutrition has been identified as a major health problem in India, it is not only an important and mortality but leads also to permanent impairment of physical and possibly of mental growth of those who services. The objectives of the study include to assess the knowledge regarding protein energy malnutrition in under five children, to find out the association between knowledge scorers regarding protein energy malnutrition in under five children among Anganwadi workers with their selected demographic variables and to disseminate pamphlets regarding protein energy malnutrition in under five children among Anganwadi workers. The research approach adopted for the study was descriptive survey by using convenient sampling technique data collection was done by distributing structured questionnaires and purpose of the study was explained to the anganwadi workers and were assured of confidentiality of responses at last pamphlet regarding protein energy malnutrition were distributed Anganwadi workers. The data generated was analyzed using both descriptive and inferential statistics based on the objective in terms of frequency, percentage, mean, median, standard deviation and chi square. The major findings are summarized as follows majority of Anganwadi workers 60% belongs to age group of 20-26year, 70% Anganwadi workers from Muslim, 90% are educated level was up to higher secondary. The study reveals that out of 30 samples majority of Anganwadi workers 96.6% had moderate knowledge, 3.33% Anganwadi workers had adequate and 0% Anganwadi workers had inadequate knowledge regarding protein energy malnutrition.

Keywords Assess, Protein Energy Malnutrition, Under-Five Children, Anganwadi Workers

Introduction

Nearly one in five children under age five in the developing world is under weight (MDG Report, 2012) and it continues to be a primary cause of ill health and mortality among children. The world health organization (WHO) has reported hunger and related malnutrition as the greatest signal threat to the world's Public health. One in every three malnourished children of the world lives in India and under-nutrition is a major cause in more than half of under-five deaths. In India around 43% of under five children were underweight according to the report of third national family health survey (NFHS-3) conducted during 2005-06 were as in rural Uttar Pradesh, it was 44.1%. Malnutrition has shown to be an important concern in children because of rapid growth and development. Pre-School children are most vulnerable to the effect of protein energy malnutrition (PEM) and their nutrition status is considered to be a sensitive indicator of community health, so that the present study was conducted to study the epidemiology of protein energy malnutrition among children (1-6years) in rural areas of Lucknow [1].

Protein energy malnutrition (PEM) or Protein calorie malnutrition (PCM) is a wide spread nutrition disease

in the developing countries. The present study was conducted with the objective to study the protein energy malnutrition (PEM) in children (0-6year) in rural population of Jhansi district in the state of Uttar Pradesh. Malnutrition is a range of conditions occurring when intake of one or more nutrients doesn't meet the requirement. PEM is an important nutrition problem among preschool age children [2]. Protein energy malnutrition is currently the most widespread and serious health problem of children in the world at any time approximately 100 million children suffer from moderate or severe form of PEM in the 1990s the number of underweight children suffering in developing countries decline from 177 million to 149 million the prevalence of severe malnutrition also decline but even than severe malnutrition remain an important problem in any one country the prevalence rates will be influenced by the season the availability of food the incidence of infection and the state of development of the health services as can be expected the peak incidence is immediately after epidemics of infectious illness and diarrheal results of community surveys in the past 10 years in the 17 different countries and involving 173000 children [3].

PEM is a major public health problem in India the prevalence of stunting among under five is 48% and wasting is 19.8% and with an underweight prevalence of 42.5% it is highest in the world in almost half of the under five children undernourished in 2015 [4].

By increasing the knowledge of Anganwadi workers regarding PEM in under five children through which we can strength the services and prevent malnutrition and reduce mortality and morbidity.

Objectives

- Assess the knowledge regarding protein energy malnutrition in fewer than five children among Anganwadi workers.
- Find out the association between knowledge scores regarding protein energy malnutrition in fewer than five children among Angawadi worker with their selected demographic variables.
- Disseminate the pamphlets regarding protein energy malnutrition in fewer than five children among Anganwadi workers.

Research Methodology

Research Approach: A quantitative research approach was used for this study

Research Design: In this present study a descriptive research design was adopted

Setting: In this present study the researcher setting was selected rural community (Goharganj) area that is under Obedullahganj district which is 35 km away from our college.

Population: In the present study, the population comprised of all Anganwadi workers working in selected rural areas M.P during the period of data collection

Sample: In this study the sample were Anganwadi workers working in Gohargaj Anganwadi center, obedullahganj.

Sample Size: In this study the sample size were 30 Anganwadi workers working in Goharganj rural area obedullahganj.

Sample Technique: In this study non probability purposive sampling technique was used for the selection of sample.

Criteria for Selection

Inclusive Criteria

1. Anganwadi workers who are willing to participate in study.
2. Anganwadi workers residing in Goharganj.
3. Anganwadi workers who were available at the time of data collection.

4. Anganwadi workers who are able to read and write in Hindi/English.

Exclusive Criteria

1. Anganwadi workers who were not willing to participate in the study.
2. Anganwadi workers who were not present at the time of data collection.

Description of Tools

Section A: consists of demographic variables. The part consist of 6 items pertaining to demographic profile of subject included age, education, Occupation, monthly income, religion, previous knowledge regarding PEM source of information.

Section B: structured knowledge questionnaires consist of 30 structured multiple choice question which include general information on PEM causes, sign, and symptoms, foods rich in protein and calorie, prevention of PEM.

Data Collection Procedure

Data collection was performed for one week. The investigator collected data from 30 Anganwadi workers that fulfilled the criteria, the investigator selected sample from rural area Goharganj under obedullahganj (MP) by purposive sampling technique, that data were collected by visiting each Anganwadi and self introduction and instructions was given followed by visiting each Anganwadi and self introduction and instructions was given followed by administrating of structured questionnaire to obtain their appropriate response.

Data Analysis and Interpretation

Section A: Frequency and Percentage Distribution of Selected Demographic Variables.

- Most of the Anganwadi workers (60%) belong to age group of 2-25 years, 30% belongs to age group of 20-25 years, 30% belongs to age group of 31-35 years, and only 3.3% were in the age group of 36 and above.
- Regarding education of the Anganwadi workers most of the Anganwadi workers (90%) were educated up to higher secondary, 10% were educated up primary school and 0% are non-literate and educated.
- Regarding working experience, 50% belong to <1 year, 30% belong to 2-5 year, and 10% belong to 6-9 year and 10 year and above.
- The data indicates that most of the Anganwadi workers 70% earns between ₹2001-3000, ₹3001-4000, 10% earns between < ₹1000/- and 0% earns between ₹1001-2000.
- The data despite that majority of Anganwadi workers 70% belongs to Muslim religion 20%

belong to Hindu religion, 10% belongs to Christian religion only 0% belongs to others.

- The data reveals that 50% of Anganwadi workers have a previous knowledge about protein energy malnutrition and 50% of Anganwadi workers does not having previous knowledge about protein energy malnutrition.

Section B: Frequency and Percentage Distribution of Anganwadi Workers Knowledge on Protein Energy Malnutrition

(N=30)

| Sl. no. | Knowledge Level | Frequency (F) | Percentage (%) |
|---------|-----------------------------|---------------|----------------|
| 1. | Adequate Knowledge (21-30) | 1 | 3.33 |
| 2. | Moderate Knowledge (11-20) | 29 | 96.6 |
| 3. | Inadequate Knowledge (0-10) | 0 | 0 |

The above table shows that majority of Anganwadi workers (96.6%) had moderate knowledge, 0%, Anganwadi workers had inadequate knowledge and only 3.33% Anganwadi workers had adequate knowledge regarding protein energy malnutrition.

Section C: Association of Knowledge Regarding Protein Energy Malnutrition with their selected Demographic Variables

The results indicate that among these 6 demographic variables only age of Anganwadi workers (7.815) and the working experience (3.814) is significant at the level $p \leq 0.05$ as the knowledge of anganwadi workers regarding protein energy malnutrition are increased day by day.

Recommendation

- A similar kind of study can be conducted for a large group.
- A similar kind of study can be conducted in different setting.
- A study can be conducted regarding prevention of protein energy malnutrition among workers in under five children living in selected area of obedullahganj (M.P).

Conclusion

Majority of Anganwadi workers in selected rural area lack of knowledge about prevention of protein energy malnutrition as per the study conducted on prevention

of protein energy malnutrition 96.6% Anganwadi workers having the moderate knowledge.

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