



A QUASI EXPERIMENTAL STUDY TO ASSESS THE EFFECTIVENESS OF STRUCTURED EDUCATIONAL PROGRAMME ON ATTITUDE REGARDING DIET IN PREGNANCY AMONG ANTENATAL MOTHERS IN SELECTED HOSPITALS OF PUNJAB.

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ABSTRACT

The diet during pregnancy in antenatal period is a positive nutritional support of pregnancy promotes a successful outcome and better health of both mothers and infants. It is the major factor in ensuring healthy outcomes in women and newborns. Quantitative research approach is adopted in this research. The research design selected for the present study Quasi experimental study to assess the effectiveness of Structured teaching programme on attitude regarding diet in pregnancy among antenatal mothers in selected hospitals of Punjab. The sample of the present study comprised of 200 experimental and 200 control group. Convenient sampling technique was used to select the sample for the study. The tools in the present study were socio demographic profile data, likert scale to assess knowledge. Conceptual model of this study relies on Modified Conceptual Model based on Ludwig Von Bertalanffy General System Theory 1968. Statistical Analysis Comparing of findings of experimental and control group using descriptive and inferential statistics. The mean post-test scores of attitude (106.74) were significantly high in comparison to mean pre-test scores of attitude (62.51) in experimental group. It reflects that it was significant difference. The mean post-test scores of attitude (60.690) were significantly high in comparison to mean pre-test scores of attitude (61.34) in control group. It reflects that it was no significant difference. It is concluded that structured educational programme relating to care and management of selected health problems of elderly women was effective as a teaching strategy that helped the care givers to improve their attitude.

KEY WORDS: Attitude, Structured educational programme, antenatal mothers, diet in pregnancy.

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INTRODUCTION

Pregnancy is a delightful experience for women in her life. An adequate intake of nutrition is a key component for individual's health and well-being particularly during pregnancy. During this phase nutrition helps her to maintain health and achieving desirable outcome. Diet is a fundamental pillar of maternal and child health during physiological changes in pregnancy¹

The diet during pregnancy in antenatal period is a positive nutritional support of pregnancy promotes a successful outcome and better health of both mothers and infants. It is the major factor in ensuring healthy outcomes in women and newborns.² One of the most important components of antenatal care is to offer information and advice to women about diet in pregnancy related complication and possible curative measures for early detection and management of complication. Malnutrition in pregnancy not only effects newborn but also impairs the mother's health.³

Balanced nutrition during pregnancy is very important for mother and fetal well-being. Approximately 300 extra calories are needed daily to maintain a healthy pregnancy. These calories should come from a balanced diet of protein, fruits, vegetables, and whole grains, with sweets and fats, kept to a minimum.⁴ A healthy, well-balanced diet during pregnancy can also help to minimize some pregnancy minor elements such as nausea and constipation. Fluid intake is also an important part of healthy pregnancy nutrition. Women can take in enough fluids by drinking several glasses of water each day, in addition to the fluids in juices and soups. An expectant mother should talk with her health care provider or midwife about restricting her intake of caffeine and artificial sweeteners. All alcohol should be avoided in pregnancy.⁵

The World Health Organization (WHO) in 2023 recommends that pregnant increase their intake of energy, vitamins, and minerals through increased macronutrient and micronutrient consumption during pregnancy. Women are advised to eat a variety of food groups including green and orange vegetables, meat, fish, beans, nuts, whole grains, and fruit, and to increase their overall food intake during pregnancy. Increasing the intake of nutrients is most important among women with a low pre-pregnancy body mass index (BMI). Weight gain during pregnancy: Healthy weight gain varies according to the mother's pre-pregnancy body mass index (BMI) and health. If her BMI before pregnancy.⁶

Antenatal micronutrient for pregnant women which include daily elemental iron (30–60 mg) and folic acid (0.4 mg) to prevent maternal anemia; calcium supplementation (1.5–2 g daily) with low dietary intake of calcium to prevent preeclampsia and vitamin A supplementation (up to 10 000 IU vitamin A daily or up to 25 000 IU vitamin A weekly) with a high incidence of night blindness.⁷

Malnutrition during pregnancy has a long-lasting effect on the physiological development of the fetus through increasing the risk of low birth weight, maternal morbidity and mortality, preterm delivery, and intrauterine growth retardation. Optimal nutrient intake during pregnancy reduces the risk of preterm baby, low birth weight, infant mortality, and small for gestational age neural tube defect, impaired fetal brain.⁸ Women need calories during pregnancy to build up her tissues, to build up fat stores, to make breast milk and for growth of placenta and fetus. During first 6th months of pregnancy, most of the extra food is needed to build up the mother's tissue and storing fat and supplementation of multiple micronutrients before 20 weeks of gestation reduces the risk of a preterm baby.⁹ The benefits of maintaining good nutrition during pregnancy are boosting the development of fetal bones and blood cells, reducing the pains and discomforts of pregnancy, boosting the immunity to prevent catching infectious diseases, preventing iron deficiency anemia and strengthening the body in preparation for childbirth, reduces the number of spontaneous abortions, stillbirths, and neonatal deaths.¹⁰

OBJECTIVES

1. To assess pre-test attitude regarding diet in pregnancy among antenatal mothers of experimental and control group in selected hospitals of Punjab.
2. To assess post test attitude regarding diet in pregnancy among antenatal mothers of experimental and control group in selected hospitals of Punjab.

MATERIALS AND METHODS

A quasi-experimental research design under nonrandomized control group design which include experimental group and control group was used to conduct the study. In this study sample were antenatal mothers. The sample size was 400 including 200 experimental and 200 control group and convenient sampling technique was used to select the sample for the study.



TOOLS

Tools consist of two sections:

Section A: Socio demographic profile data sheet

Socio Demographic Profile: Socio demographic variables under the study are- Age (in years), Gravida, Trimester, Religion, Educational status, Occupation, Type of family and Source of information.

Section B: Likert scale

It consists 30 Likert scale to assess the effectiveness of structured educational programme on attitude regarding diet in pregnancy among antenatal mothers in selected hospitals of Punjab.

RESULTS

Table .1 Pre-test and post-test level of attitude of experimental and control group. N=400

Level of attitude	Level of score	Experimental group (n=200)		Control group (n=200)	
		Pre-test	Post-test	Pre-test	Post-test
Adequate attitude	(111-150)	3(1.5%)	70(35%)	0(0%)	0(0%)
Moderate attitude	(71-110)	47(23.5%)	130(65%)	21(10.5%)	35(17.5%)
Inadequate attitude	(30-70)	150(75%)	0(0%)	179(89.5%)	165(82.5%)

Table shows that 200 antenatal mothers in experimental group, 3(1.5%) had adequate attitude score followed by 47(23.5%) had moderate attitude score followed by 150(75%) had inadequate attitude score in pre test attitude score and after the administration of structured educational programme, shows that 200 care givers, 70(35%) had adequate attitude score followed by 130(65%) had moderate attitude score followed by 0(0%) had inadequate attitude score in post test attitude score. It reveals that after 7 days of administration of structured teaching educational had significantly improved the attitude score in experimental group. On the other hand, shows that 200 antenatal mothers in control group, 0(0%) had adequate attitude score followed by 21(10.5%) had moderate attitude score followed by 179(89.5%) had inadequate attitude score in pre test attitude score and without administration of structured educational programme, shows that 200 care giver, 0(0%) had adequate attitude score followed by 35(17.5%) had moderate attitude score followed by 165(82.5%) had inadequate attitude score in post test attitude score. It reveals that after 7 days of without administration of structured educational programme had not significantly improved the attitude score in control group.

CONCLUSION

It is concluded that structured educational programme relating to diet in pregnancy was effective as a teaching strategy that helped the antenatal mothers to improve their attitude.

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