

Impact of Educational Intervention on Knowledge of Mothers Regarding Childcare and Nutrition in Himachal Pradesh

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ABSTRACT The study aimed at providing educational intervention to mothers regarding knowledge on childcare and nutrition. The study adopted a pretest-posttest research design. A total sample of 150 mothers was selected from two villages, one of which served as experimental group and the other acted as control group. The tool consisted of a self-structured questionnaire schedule covering aspects of childcare and nutrition. All mothers were first pre-tested regarding their knowledge on nursing, neonatal and infant care, health, child's growth, behaviour and nutritional aspects. Intervention consisted of educating mothers in the experimental group for a period of one and a half years. All the mothers were then post-tested on the above aspects. Significant differences were seen in all the aspects of childcare and nutrition between experimental and control group mothers during post-testing

INTRODUCTION

Children are the future of any nation. In India about three-fourth of the infant population lives in villages. It is imperative to preserve this wealth and to promote their well being through exercising utmost care in order to make them healthy and to protect them from deadly diseases. It is well established that the welfare of a child and his future are totally dependent upon the care and attention bestowed upon him before and after birth. Care of children had always traditionally been the forte of mothers irrespective of education, income and social class differences.

Motherhood can be defined as "the biological process of giving birth" to exercising control over responsibility for one's young (Aurora, 2001). The important task of motherhood is to fulfill physical, emotional, social, intellectual and moral needs of children. There is no doubt that a mother plays an important role in this regard. Attitude of mothers towards breast-feeding, weaning methods, her company and response to the child are important factors that ultimately lead to inculcation of basic discipline and personality development.

Challenging living conditions and work hours undermine the capacity of mothers to provide optimal care for children whereby compromises are sometimes made in keeping the children clean, hygienic preparation of food especially in the absence of reasonably adequate services as

reported by Nair and Radhakrishnan (2004). Studies by Sheeba et al (2003) on comparative studies related to the home environments of children in deprived urban settings and high socio-economic status reveal that children in deprived settings had poor home environment which contributed to the difference in their developmental status.

Poor knowledge on part of mothers can lead to disastrous results in the field of care giving. A mother has to regulate the child's behaviour, attitudes, outlook and home environment in the family since these are the basic factors that influence the growth of children. If the mothers are not acquainted with knowledge pertaining to feeding, weaning, health and nutrition including growth and behaviour of children, it might affect the rearing of their children. Providing timely education in the form of intervention to the mothers could fill these gaps in knowledge. With this objective in mind the study aimed at providing educational intervention to mothers regarding knowledge of child care and nutrition.

MATERIALS AND METHODS

The study adopted a pre-test posttest research design with a specific period of intervention. A total sample of 150 mothers and their infants in the age group of birth to eighteen months were selected from two villages, Bundla and Kandi of Kangra district of Himachal Pradesh. One of the villages, Bundla, served as

an experimental village wherein 73 mothers were taken and 78 mothers were selected in the control group. Pre-testing was done on all the mothers regarding their knowledge on aspects of childcare (nursing, neonatal and infant care, health, child's growth and behaviour) and nutrition. The tool consisted of a self-structured questionnaire schedule consisting of aspects of childcare and nutrition.

The intervention consisted of educating mothers of infants in experimental group only. An intervention programme was planned which aimed at providing to mothers of experimental group scientific education regarding neonatal and infant care, nursing mother, health and nutrition of infants, pregnant and lactating women, growth and development of children and behaviour of children. This kind of knowledge was given for a period of one and a half years through various techniques of lectures, demonstrations and discussions. The mothers in the control group were devoid of any kind of such experience. Mothers in both groups were then post tested to see the effect of intervention on their knowledge. Appropriate statistical measures were applied to see the differences brought out by intervention.

RESULTS AND DISCUSSION

Children's cognitive, motor and behavioural development can be affected by their nutritional and health status. Poor socio-cultural environments including poor physical resources such as overcrowded homes with poor sanitation, low income, little knowledge of play, poor stimulation at home are detrimental to intellectual development (Mcgregor, 1984 and Salt et al., 1988)

The knowledge of mothers regarding aspects of childcare and nutrition is given in Tables 1 and 2. It can be seen that at the initial phase, i.e,

during pretesting, mothers in both group had similar levels of knowledge on all the aspects. After providing intervention for one and a half years, it was observed that the mean scores of mothers in both groups had shown an increase but as compared to the control group, the experimental group mothers had better knowledge on different aspects of childcare. When we look upon the categories of child care knowledge and nutrition highly significant differences were obtained in case of knowledge regarding neonatal and infant care, nutrition, health aspects, child's growth and child's behaviour. Compared to the control group, increased scores were seen between two groups in these aspects also. In a study done by van den Boom (1994) on the influence of temperament and mothering, it was found that after giving intervention, mothers were significantly more responsive, stimulating and controlling of their infants behaviour than control group mothers.

Care given in crowded and chaotic conditions have been found to be less responsive and more restrictive, controlling and punitive to the children (UNICEF, 2003). Increase in number and percentage of mothers in experimental group was found in various child rearing aspects. Significant differences were found in the beliefs like feeding water/ sweetened water/honey to newborns, bad practice of putting oil in ears and eyes and importance of colostrum, management of diarrhea requires a combination of ORS and medicines as prescribed by doctors.

In a country like India where the rural population accounts for nearly 60 percent, the literacy rate of this group in case of women is very low. We all know that education can bring about many changes in people, more appropriately in case of women as when we educate one woman we educate the whole family. In the present study, right kind of education was

Table 1: Aspects of childcare and nutrition among mothers of experimental and control group

Aspects	Pre- Test			Post- Test		
	Exp	Con	t- value	Exp	Con	t-value
Nursing	13	13.13	0.67	13.28	13.36	0.18
Neonatal and Infant care	18.22	18.66	1.38	23.75	21.25	9.08**
Nutrition	10.67	9.95	2.93**	17.5	15.21	9.6**
Health	18.53	18.11	1.54	26	22.2	15.4**
Child's growth	10.2	10.95	1.32	11.16	10.75	2.2
Child's behaviour	20.7	20.48	0.88	26.67	24.63	7.3**
Total	91.32 (3.9)	91.3 (5.4)	0.22	118.42 (3.12)	107.41 (4.96)	18.11**

Note: Figures in parenthesis denotes standard deviation

Table 2: Beliefs of mothers regarding childcare practices and nutrition

Beliefs of mothers		Pre test			Post test		
		Exp	Con	t-value	Exp	Con	t-value
Colostrum is essential for infant.	N	46	45	0.01	68	39	7.21*
	%	(63)	(57.6)		(93.1)	(50)	
There is no need to feed water/ sweetened water/ honey to newborns	N	34	38	1.58	64	36	6.31*
	%	(46.5)	(48.7)		(87.6)	(46.1)	
Putting oil in ears and eyes is bad practice	N	42	40	0.18	58	36	4.40*
	%	(57.5)	(51.2)		(79.4)	(46.1)	
It is not necessary to give semisolid or soft foods to the child	N	55	52	0.69	69	52	4.64*
	%	(75.3)	(66.7)		(94.5)	(66.7)	
By the age of one years baby should be able to eat adult food	N	63	61	0.95	68	57	3.26*
	%	(86.3)	(78.2)		(93.1)	(73)	
It is necessary to boil and cool drinking water for young children	N	57	58	0.25	70	55	4.46*
	%	(78)	(74.3)		(95.8)	(70.5)	
Diarrhea should be managed well with ORS and fluids is there is no need to give medicines	N	61	71	0.45	73	64	4.23*
	%	(83.5)	(78.2)		(100)	(82)	
Brushing teeth regularly should be a regular practice for toddlers	N	69	74	0.29	71	72	1.22
	%	(94.5)	(94.8)		(97.2)	(92.3)	
There is no need to toilet train child before 1 & 1.5 years. He will learn on his own	N	40	32	1.06	52	34	3.32**
	%	(54.7)	(41)		(71.2)	(43.5)	
Diarrhea & vomitings are associated with teething	N	37	30	0.79	62	29	7.54**
	%	(50.6)	(38.4)		(84.9)	(37.1)	
Deworming should be done for child in once in 6 months	N	60	55	1.31	69	52	4.64*
	%	(8.21)	(70.5)		(94.5)	(66.7)	
Children should not be ridiculed and compared between siblings	N	56	55	0.56	65	54	2.84*
	%	(76.7)	(70.5)		(89)	(69.2)	
Variety of books should be provided.	N	68	75	0.99	73	74	2.05*
	%	(93.1)	(96.1)		(100)	(94.8)	

given to the women regarding aspects of childcare and through the intervention period of one and a half years, their wrong beliefs were negated. The results in this regard are in agreement with a study done by Shubhangna (1999) that found mother's attitudes towards colostrum feeding to the newborns were positive in most cases that must be given after one hour of birth to the newborns. An earlier report by Kaul and Abrol (1997) found that educated mothers are supposed to have better knowledge of hygiene and health needs and practices. Lack of proper facilities like basic education, income, and access to mass media might affect their knowledge and practices.

Among people there is a strong belief that giving sweetened water or honey as a first food for the neonate would reflect on a pleasing personality of the infant. This was seen in the present study where a majority of the women thought to give this kind of thing to the newborn. After giving the proper education to mothers majority of them did not think that this was a good practice. Sharma (2003) found that about one third of the mothers preferred honey as first food to babies given after birth.

CONCLUSION

The infant's most frequent caretaker in his earliest months is his own mother, and it is his mother who, whether directly through her behaviour towards him or indirectly through other aspects of the environment she provides for him, plays a large part in determining the nature and extent of his experience during his first year. If mothers are given proper knowledge and scientific education of child care practices such as nursing, neonatal and infant care, nutrition, health, child's growth and behaviour, it is imperative they would exercise their knowledge on children thereby reducing the incidences of faulty fads and beliefs and rearing their children in an environment that promotes growth and positive development.

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