Original Research Article **Nursing**

International Journal of Pharma and Bio Sciences

ISSN 0975-6299

EFFECT OF COMPUTER ASSISTED PRESENTATION REGARDING ANTENATAL DIET IN KNOWLEDGE AMONG ANTENATAL MOTHER AT PRIMARY HEALTH CENTRE

***S.JOSE AMALA ANILDA BSC (N) CLINICAL INSTRUCTOR.**

Saveetha College of Nursing, Saveetha University,Chennai-105

ABSTRACT

Antenatal Period is a very crucial period for both mother and fetus.. Adequate nutrition during pregnancy is important to enable to fetus to grow and develop physically and mentally to full potential. It is widely believed that fetal nutrition plays a key role is the well-being of the newborn. The need for study is to show the effectiveness of computer assisted presentation regarding antenatal diet in knowledge among antenatal mother objectives: To assess the knowledge regarding antenatal diet among antenatal mother, To assess the effect of computer assisted presentation regarding antenatal diet among antenatal mother, To associate the posttest level of knowledge of antenatal mothers regarding antenatal diet with selected demographic variables. Methodology: Research approach Quantitative approach Research design: One group pre and post test design. Result: In posttest 37 mothers(62%)have gained adequate knowledge,23 mothers(38%)have gained moderately adequate knowledge and nobody have inadequate knowledge about antenatal diet after computer assisted presentation.

KEYWORDS : *computer assisted presentation, antenatal diet, knowledge, antenatal mother*

S.JOSE AMALA ANILDA
Saveetha College of Nursing, Saveetha University, Chennai-105

***Corresponding Author**

Received on: 04-08-2016
Revised and Accepted on 22-02-2017
DOI: http://dx.doi.org/10.22376/ijpbs.2017.8.2.b275-278

INTRODUCTION

Pregnancy and child birth are special events in women`s lives and indeed in their families. This can be a time of great hope and joyful anticipation. The primary aim of antenatal care is to achieve a healthy mother and healthy baby at the end of pregnancy. The quality of care is more important than the quantity. Pregnancy requires specialized care generally agreed to preventive activity. Antenatal Period is a very crucial period for both mother and fetus. To get healthy baby from a healthy mother, diet during pregnancy is plays a very important role. If a tree is well nourished with water, it gives nourished fruits. The same way, when mother is provided with good nutritious diet during her pregnancy, it will yield a nourished baby. During pregnancy, many changes that takes place in maternal body. About 910 of portions are deposited on the fetus and maternal tissues. The balanced diet is required to maintain growth of fetus, placenta and maternal tissues .As per WHO 75% of diet should consist of cereals. The normal intake requirements during pregnancy are extra 300 calories, 38 mg iron, 220 mg iodine, 65 mg protein, 1000 mg calcium, vitamin-C 40 mg, vitamin-A 11mg/ week and intake of sodium is 2400 mg. Adequate nutrition during pregnancy is important to enable to fetus to grow and develop physically and mentally to full potential. It is widely believed that fetal nutrition plays a key role is the well-being of the newborn. Infant and further influences heath during childhood and adulthood with possible effects into next generation

Need for the study

Diet in pregnancy is very essential to provide delivery of a healthy baby. During this period, mother has to extra amount of calories. She has to eat for herself and for the baby. The total weight gain during pregnancy is 10-12.5 kg. In 2^{nd}& 3^{rd} trimester every week 2-4 k & in 1^{st} trimester 1-2 kg. Nutrients for the fetus come from mothers diet, stored nutrients in the mothers bones & tissues & synthesis of certain nutrients in the placenta. Placenta facilities the transfer of nutrients, hormones & other substances from mother to fetus. But many people don't know about the dietary pattern. Especially in rural areas, they didn't even know what were the physiological changes that occur during pregnancy and need for supplementary nutrition. Because of illiteracy, they take the diet as normal women takes. This amount of food that the mother took is not sufficient for the growing fetus. This will result in baby born with low birth weight & mal formations, IUGR etc. Poor nutrient during pregnancy is well known to contribute to adverse pregnancy outcome. Although this is the first study that has looked superficially at the relationship between maternal micronutrients and pregnancy complications in adolescents. A study was conducted at rural area in Haryana. A sample of 615 mothers was selected. The study revealed that the proportion of low birth weight deliveries decreased in mothers receiving adequate nutrition, mothers who were regular for antenatal checkups the percentage of low birth weight babies was 13.26%, those with irregular antenatal checkups had 25.72% and no visits 25.2% the study concluded that antenatal clinic regularly are more likely to have better nutritional status, their health awareness is also better.

Statement of the problem

A study to assess the effect of computer assisted presentation regarding antenatal diet in knowledge among antenatal mother at primary health centre, Nemam.

Objectives

- To assess the knowledge regarding antenatal diet among antenatal mother
- To assess the effect of computer assisted presentation regarding antenatal diet among antenatal mother
- To associate the posttest level of knowledge of antenatal mothers regarding antenatal diet with selected demographic variables.

Research hypothesis

There is a significant increase in the level of knowledge regarding antenatal diet among antenatal mothers after computer assisted presentation.

MATERIALS AND METHODS USED

The research approach used in the study was quantitative approach by using one group pretest and post test design research design. The study was conducted at primary health centre nemam by using non probability convenient sampling technique. The tool used for the study was demographic variable and structured questionnaire to collect the data and data were analyzed by using mean, standard deviation, chi-square test and paired t test methods are used.

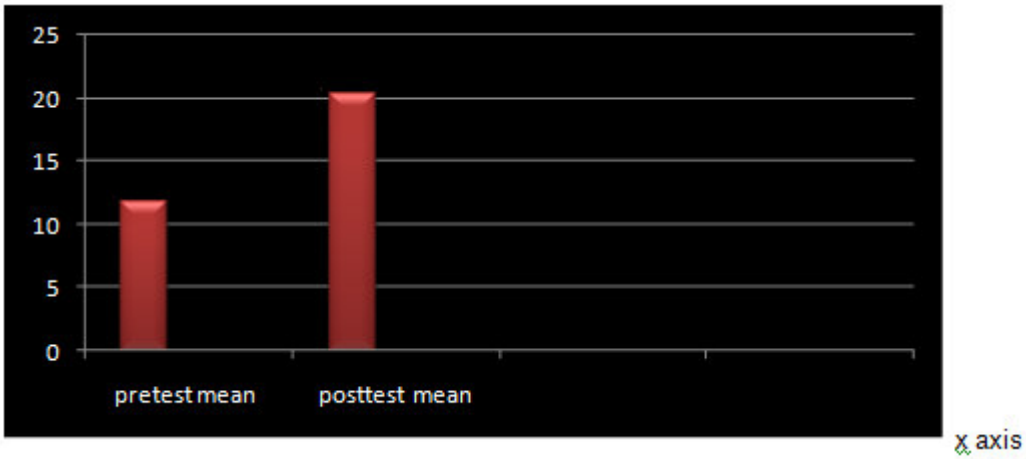
Data collection procedure

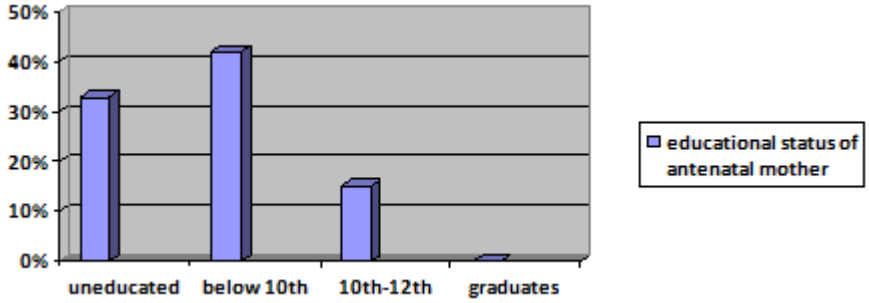
After obtaining the permission from the higher authority the study was conducted the antenatal mother who came to antenatal OPD were selected as samples informed consent was obtained from each mother who are attending the OPD. Confidentiality was maintained for each sample while collecting the data. Socio-demographic data was collected from each patient. First the pretest was conducted to the mothers by giving the structured questionnaire related to antenatal diet then the computer assisted presentation was given to the mothers related to antenatal diet. After 7 days the posttest was conducted with the same questionnaire for the antenatal mothers.

RESULT

The result shows that 37 mothers(62%)have gained adequate knowledge,23mothers(28%)have gained moderately adequate knowledge and nobody have inadequate knowledge about antenatal diet after computer assisted presentation this shows the effectiveness of computer assisted presentation. The mean value of pre- test was 11.8 and the post- test value was 20.4 this shows the effect of computer assisted presentation on level of knowledge regarding antenatal diet among antenatal mothers. In the study 20 mothers (33%) are uneducated, 25 (42%) below 10^{th} std, 15(25%) are studied 10^{th} to 12^{th} std and none of

them are graduates. And 35 (59%) mothers are coming under low socio-economic class, 23(38%) mothers are coming under middle class and 2(3%) mothers are coming under high economic status.





CONCLUSION

The study concludes that the effect of computer assisted presentation regarding antenatal diet in knowledge among antenatal mother at primary health centre hence it may helps to prevent and reduces the maternal mortality and morbidity rate.

Structured questionnaire related to antenatal diet

1) The extra calorie to be taken during pregnancy
   a)+300 b)+500 c)+750
2) The normal weight gain during pregnancy
   a) 15-20 kg b) 10-12.5 kg c) 8-10 kg
3) The neural tube defect can be prevented by taking
   a) folic acid b)vitamins and minerals c) carbohydrate
4) The normal range of BMI is
   a)15-18.5 b) 20-24.5 c) 25-30
5) The daily dosage of folic acid during pregnancy is
   a)5mg b)10mg c) 15mg
6) The vitamin A prophylaxis dosage during pregnancy
   a) 11mg/week b) 7mg/week c) 13mg/week
7) The deficiency which causes the anemia during pregnancy
   a)calcium b) iodine c) iron
8) The iron rich foods are
   a) dates, jaggery, drumstick leaves b) dairy products c) cereals, pulses
9) The protein rich diets are
   a) egg and pulses b) green leafy vegetables c) potatos
10) The iodine is essential during pregnancy because
   a) for proper mental health b)to prevent congenital anamoly c)to prevent anemia
11) The normal value of iron during pregnancy
   a)38mg b) 50mg c) 65mg
12) The normal intake of iodine during pregnancy
   a) 220 mg b) 300 mg c) 450 mg
13) The calcium is essential during pregnancy because
   a) increase the body weight b) for formation of bones, teeth c)for good health
14) The diet to be taken during pregnancy daily are
   a) fat and oils b) vitamin-C, green leaves and egg c) carbohydrate foods
15) The foods to be avoided during pregnancy are
   a) caffeine and drugs b) fibre diets c) dairy products
16) The vitamin-A rich diets are
   a)egg and dairy products b) cereals c)orange coloured fruits and carrot
17) The normal value of protein during pregnancy
   a)50 mg b) 65 mg c) 70 mg
18) The diet which helps to prevent constipation and digestion problems are
   a) carbohydrates b) protein c) fibre diet
19) The diet to be taken for gestational diabetes mellitus are
   a) carbohydrate foods b) fibre diets c) fat and oil foods
20) The carbohydrate food items are
   a) rice, cereals, millets b) egg and pulses c) fruits and vegetables
21) The intake of unhealthy food during pregnancy results in
   a) neural tube defect b) prematurity, low birth weight c) skin problems
22) The daily intake of salt during pregnancy
   a) 1000mg b) 3000mg c) 2400 mg
23) The daily intake of calcium during pregnancy are
   a) 1000mg b) 1500mg c) 2000mg

24) The diet to be taken to prevent the morning sickness during pregnancy

a) fat and oil products b) ginger c) none of these

25) The diet to be taken for hypertension mothers during pregnancy are

a) calcium and salt restriction b) vitamins c) all of these.

CONFLICT OF INTEREST

Conflict of interest declared none.

REFERENCES

1. D.C. Dutta. 2004) Text book of obstetrics.. New delhi: new central book agency private limited ;(6th edition page no. 100-102.
2. Molly Rom & N. Geetha Jaypee. text book of nutrition for nurses. New Delhi: medical publishes private limited;(2000) page no. 89-91.
3. Vijay D.Joshi. Hand book of nutrition & duties. 4th edition. New delhi: vora publication;(2004) page no. 213-216.
4. M.Swaminathan. Hand book of food & nutrition. fifty edition. Bangalore: Jaypee publications; (1986), page no.189-192.
5. Susan O. Orshan. Maternity. Newborn & Women Health Nursing. 4th edition Philadelphia: Lippincott Williams & Wilkins; 2008.
6. Wong, Hockenberry, Wilson and Lowdermilk. Maternal child nursing care. 3rd edition. Missouri: Mosby Elsevier; 2006.
7. Unit of Maternal and Infant Health, Agency for Public Health, Lazio Region, Rome, Italy. asole@asplazio.it
8. B.T Basavanthappa. Textbook of midwifery & reproductive health nursing.2nd edition. New Delhi: Jaypee brothers medical publishers; 2006.
9. Prof S Kamalam. Exercises in pregnancy. Pondicherry Nursing Journal 2009; 2: (1) 34-36
10. Diane M Fraser, Margaret A Cooper and Gillian Fletcher. Myles textbook for Midwives. 14th edition. Edinburgh: Churchill Livingstone; 2003.
11. Gloria Hoffmann Wold. Contemporary maternity nursing. Missouri: Mosby; 1997.
12. David M. B. Hall and David Elliman. Health for All Children. 4th edition. Oxford Medical Publications; 2003.
13. Mrs. Sheeba et at. Pondicherry journal of nursing 2009; 1: (1) 34-36.

Reviewers of this article

Dr. Sahbanathul Missiriya, Ph.D

Professor, Department of community Health Nursing,
Saveetha College of Nursing,
Kancheepuram Dt. , Tamilnadu, India

G. Bakhya Shree M.S. (Research)

Coordinator and Trainer, Department of Biotechnology and Life Sciences, Dexter Academy, Madurai, Tamilnadu

Prof.Dr.K.Suriaprabha

Asst. Editor , International Journal of Pharma and Bio sciences.

Prof.P.Muthuprasanna

Managing Editor , International Journal of Pharma and Bio sciences.

We sincerely thank the above reviewers for peer reviewing the manuscript