

NUTRITION EDUCATION AND PRACTICES AMONG MOTHERS ON CHILD UPBRINGING FOR GLOBAL CRISES AND REMEDIES IN MINNA METROPOLIS NIGER STATE.

BY

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Abstract

The study aimed at establishing nutrition Education and practice among mothers on child upbringing for global economic crises and remedies in Minna metropolis. Three objectives and three research questions guided the study A survey research design was employed. Populations of the study consisted all the working class mother that have their children/wards in nursery and primary schools in Minna metropolis and a multi-stage sampling techniques was employed to select 60 respondents. A questionnaire was used for data collection and data collected were analyzed using percentage and mean. Result revealed that 75% of the working class mothers do not possess adequate nutrition knowledge, 87% get nutrition information from advertisement programme and tradition. 74% of their nutrition practice are detrimental to health as it consist of junk foods. Based on these findings it was recommended that working class mother in Minna metropolis should be enlightened nutritionally to improve quality of food consumption.

Keyword: Nutrition, knowledge, practice, child upbringing and quality good health

Introduction

Nutrition is the science that deals with the study of nutrients in foods and how the body cells use them to maintain and sustain life for adequate health. The study of nutrition therefore gives basic information on food nutritive value and how they influence good health as well as how they can also lead to ill health.

Nutrition knowledge and practice among mothers role in child health, proper nurturing till adulthood. Mothers are children caregivers, who ensure that the child survive and develop into useful adulthood. For this reason mother nutrition knowledge and practice should be a concern for quality good health. Often mothers nutrition knowledge and practice in the families are usually based on traditional values, food likes and dislike food habits taboos and fallacies and information obtained from food advertisement in the mass media among other (Nancy, 2016). The sources of nutrition knowledge do not have scientific bases for choosing foods consumed may have impact on children growth and development negatively especially with regards to micro nutrients needs that are very important for proper mental development at childhood. This is because traditional food practice do not put micro nutrient needs into consideration and most food advertised in the mass media are usually junks they lack micro nutrient (James, 2010)

Nutrition continues to play important role in the life of individual right from conception till death. Food and agricultural organization (FAO, 2008) reported that nutrition status of expectant mother impact positively or negative on the wellbeing of the baby growing in the womb. Often pregnant woman's mal-nutrition status resulting from either under nutrition or over nutrition directly affect the normal development of the body in the womb, because the foetus solely depends on the nutrients store of the mother throughout the gestation period. Child nutrition outcomes, stunting and wasting in particular, are recognized as key indicators for tracking the nutrition and health status of children. Against this background, the present study investigates: (i) whether mother's nutrition-related knowledge (mother's knowledge) can substitute for mother's education or is complementary in producing positive child nutrition outcomes in a population where access to education is limited (for example, Minna metropolis); and (ii) the education level at which mother's education is positively associated with child nutrition outcomes.

Statement of the problem

Nutritional outcomes among under-five children in Minna Metropolis are among the worse globally. More than one third of children under five years of age in Minna metropolis are stunted (i.e. too short for their age or with height for age <-2), Likewise, approximately 18% of under-five children are wasted (i.e. too thin for their height or with weight for height <-2) in the same year. The prevalence of child under nutrition is higher for less educated mothers, with about half of children of less educated mothers reported stunted in 2013. In addition, school attendance rate and educational attainment for women are very low in minna metropolis. More than half of women minna metropolis never attended school, and higher percentage of girls drop out of school before they attain 15 years of age, thereby denying them the basic knowledge of health and nutrition. In Minna metropolis, primary education does not include element of public health nutrition, but course on nutrition is part of curricula in the junior secondary. This work will contribute to the limited in-depth studies on education of mothers as a key driver of child malnutrition in Minna metropolis

Purpose of the Study

The main purpose of the study was to carry out a study on the nutrition knowledge and practice of mothers. Specifically, the study determined:

- i. If mothers are exposed to basic nutrition knowledge
- ii. their sources of nutrition knowledge
- iii. if they can identify diseases that have nutrition effects
- iv. if they can relay diet therapy measures in the treatment of ill health conditions that have nutrition cure

Research Question

The following research questions guided the study.

- 1) To what extent are mothers exposed to basic nutrition knowledge?
- 2) What are mother source of nutritional knowledge?
- 3) To what extent are mothers empowered to identifying diseases that have nutrition effect?
- 4) How are mothers, able to relate to diet therapy and modification in the management of diseases that have nutrition effect?

Significance of the Study

The findings of this study, when documented will be beneficial to mothers, as report of findings may form the data base of decision whether to improve on the quality and quantity of nutrition education. This will in turn improve the efficiency and healthier handling of there child.

Methodology

The researchers employed descriptive survey research design for the study. A survey research design was employed because the researchers will not manipulate any variable of study; rather the reports of finding will be based on what is obtainable in present nutrition status.

The population for the study comprised all sixty(60) mothers in minna metropolis area. Limawa (12), peda(12), Sabon-Gari(12) Angwan Sariki (12) and angwan daji(12) In the areas. Sample of sixty (60) mothers made up the sample of study the population was used because it was a manageable size.

A questionnaire consisted sections A and B was used for data collection, section A consisted of demographic data

The instrument validity was established by experts and two were lecturers in the department of VTE (Home Economics), in colleges of education minna and one lecturer in the department of food science, federal university of technology minna, based on content usefulness to eliciting information on the study subject matter.

The instrument reliability was established through test-retest. Ten (10) samples of the questionnaire were administered to mothers who were part of the population but not part of the sampled. This was done twice within two weeks interval, and results generated on both occasions were analyzed using Pearson's (R) Correlation Coefficient and the result was 0.86.

Method of Data Collection

The researchers employed the assistance of two (one male and one female) who were residing within the sample area. They helped distribute the questionnaires to their fellow mothers. The researchers scrutinized the level of appropriateness in the completion of the questionnaire upon completion.

Method of Data Analysis

Data generated on the field survey was analyzed using frequency distribution, and mean. A mean of 2.5 and above indicated acceptance of opinion while a mean less than 2.5 and below indicated rejection of opinion.

Presentation of Results

Research question one; to what extent are mothers exposed to basic nutrition knowledge?

Table 1: Areas Covered in response of the respondent on Basic Nutrition Knowledge

S/N	ITEMS	VHE	HE	LE	VLE	D	DX2	SD	SDX	1 WX	RMK
1	Basic nutrient	14	56	21	63	17	34	8	8	2.7	AC
2	Functions	11	44	13	39	20	40	16	16	2.3	R
3	Deficiency effects	16	64	13	39	19	46	12	12	2.5	AC
4	Toxicity effect	12	28	12	36	23	36	18	18	2.1	R
5	Nutrients role in health care	5	20	8	24	21	42	26	26	2.0	R

Source: Field survey, 2022.

Table 1 above revealed that the mothers area exposed to basic nutrition knowledge of food nutrients and deficiency diseases associated with each nutrient ($X > 2.5$), but nutrient functions, toxicity and role health in care wwere not effectively covered ($X < 2.5$). This indicated that the six basic nutrients and their deficiency disease are adequately covered while food sources of each nutrients functions and toxicity were not.

Research question two: what are mother sources of nutrition Knowledge?

Table 2: The Response of the Respondent on Sources of Basic Nutrition Knowledge

S/N	ITEMS	VHE	HE	LE	VLE	D	DX2	SD	SDX	1 WX
6	Exposure in mothers	7	28	13	39	19	39	21	12	2.2R
7	Mass media	17	68	19	57	15	30	19	19	2.9 AC
21	(health talk)	19	57	17	68	15	30	19	19	2.9 Ac
8	Conferences & workshop	8	32	17	51	18	36	17	17	2.3R
9	Visit to health centre & Clinic	9	36	12	36	18	36	21	21	2.1R
10	At homes before enrolment	8	32		13		39		21	

Source: Field survey, 2022.

Table 2 above, revealed that the mothers source of basic nutrition knowledge were acquired through the mass media (radio and television health programmes) ($X > 2.5$) while little knowledge were acquired in heath talk, conferences and workshops attended, visit to health centers and clinics pre-enrolment had ($X < 2.5$), indicating that the Mother's major sources of basic nutrition knowledge were mass media health talks and programmes.

Research question three; Are mothers empowered to identifying diseases that have nutrition effect?

Table 3: the responses of the respondants on Knowledge of Diseases that has Nutrition effect

S/N	ITEMS	VHE	HE	LE	VLE	D	DX2	SD	SDX	1 WX	RMK
11	Diabetes	16	64	18	54	14	28	12	12	2.6	AC
12	Atherosclerosis	14	56	21	63	12	24	14	14	2.6	AC
13	Strokes	12	48	13	39	20	40	15	15	2.3	R
14	Cancer	5	20	11	33	21	42	23	23	1.9	R
15	Obesity	15	60	11	33	21	42	13	13	2.5	AC
16	HIV/AIDs	8	32	9	27	19	36	25	25	2.0	R

Source: Field survey, 2022.

Table 3 revealed that the mothers to relating the role of nutrition in the causes of disease such as diabetes, Atherosclerosis and obesity ($x > 2.5$) while the role of nutrition in the causes of strokes, cancer and HIV/AIDs were not fully understood ($x < 2.5$). This indicates that the mothers were well exposed to the roles of nutrition in the causes of diabetes, atherosclerosis and obesity but could not establish the role of nutrition in strokes, cancer and HIV/AIDs.

Research question three; Are mothers, able to relate to diet therapy and modification in the management of diseases that have nutrition effect?

Table 4:the responses of the respondents on Knowledge of Diet Therapy and Modification in the Management of Discuses

S/N	ITEMS	SA	SAX	4 A	AX3	D	DX2	SD	SDX	WX	RMK
17	Diabetes	12	48	11	33	19	36	18	18	2.3	R
18	Atherosclerosis	7	28	11	33	24	48	16	16	2.0	R
19	Strokes	8	32	13	39	19	36	20	20	2.1	R
20	Cancer	6	24	9	27	21	42	24	24	1.9	R
21	Obesity	16	64	16	39	17	34	14	14	2.5	AC
22	HIV/AIDs	7	28	8	24	21.	42	24	24	1.9	R

Source: Field survey, 2014.

Table 4 revealed that the mothers exposed to diet therapy and modification in the management of obesity ($X > 2.5$), while diet therapy and modification for diseases such as diabetes, atherosclerosis, stroke, cancer and HIV/AIDs were not fully understood ($X < 2.5$). This indicates that the mothers could effectively manage obese health condition using diet therapy and modification but could not manage diabetes, atherosclerosis, stroke, cancer and HIV/AIDs effectively with diet therapy and modification.

Discussion of Result

This finding reveals that the mothers level of exposure to the relationship between nutrition and health is minimal, compared to Gerger (2006) report, which stated that 76% of human diseases originates from nutrition habits and food choice. WHO (2013) also reported that the present challenges of the world double burden of diseases results from inadequate nutrition knowledge, not hunger or food in-availability. This findings of limited nutrition knowledge in mothers will no doubt discourage young mothers from the application of diet therapy in the management of health conditions. In section B, research question one(1)revealed that the mothers exposes to the six basic nutrients and the deficiency diseases associated with the inadequate consumption of each of the basic nutrients ($X > 1$),while their food sources, functions and toxicity were not exposed ($X < 1$). This findings is in agreement with WHO (2004) report which stated that lack of adequate nutrition knowledge is a major challenge in the world health issues, because people inability to effectively select and combine foods available to them is responsible for diseases that have nutrition effect, Jones (2011) stated that the application of drugs in the management of health conditions without modification of food choice and feeding habits cannot be effective. Davis (2008) further reported that nutrition and medicinc are inseparable factors in the restoration of health conditions when one is sick. Research question 2 revealed that the mothers were adequately exposed to the roles of nutrition in the causes of diabetes, arthrosclerosis and obesity ($X > 1$) while the role of nutrition in the causes of strokes, cancer and HIV/AIDs were inadequate ($X < 1$). This inadequacy of the role of nutrition in the causes of some diseases will in no doubt make the mothers ineffective in the management of those disease conditions which they are ignorance of. This finding, according to Kay (2012) report, will make the mothers inefficient in their medical practices especially with regards to disease that have nutrition effect. This position also collaborated with Davis (2008) report as stated earlier on. Research question 3 revealed that the mothers were adequately exposed to the application of diet therapy and modification in the management of obesity ($X > 1$) while other diseases such as diabetes, atherosclerosis, stroke, cancer and HIV/AIDs were inadequate ($X < 1$). This finding will in no doubt make the mothers effective in management of obesity on graduation but ineffective in the management of other diseases that have nutrition undertone. This finding is in agreement with Shalon, (2002) report which stated that people health

condition improves as their basic nutrition knowledge and application in health management increases.

Conclusion

The study concluded that the status of nutrition exposure of mothers was inadequate in identifying food sources, functions and toxicity of some basic nutrition ($X < 2.5$). Mothers cannot identify the role of nutrition in causes of disease conditions such as cancer, atherosclerosis, stroke, and HIV/AIDS; and that the mothers can only effectively apply diet therapy on the management of obesity only ($X > 2.5$), while ignorance on other disease conditions.

Recommendation

Based on these findings, it was recommended that:

- i. Health seminar/workshop should be organized for mother
- ii. Improve their adequate knowledge of nutrition and its role in causes of diseases among others.

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