

To Assess The Nutritional Awareness and Nutrient Intake of Nurses



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Abstract

The concept of power and empowerment are related and power is defined as a socially determined one, which has nothing to do with the individual's capabilities or strength a subjective perspective analysis has shown that in most of the cases the social capital of nursing is small. For example, Oommen's study shows that only 27 percent of the nurses would advise their daughters to join the profession while 70 percent would not, a piece of evidence which strongly indicates that man of them do not perceive their occupation as prestigious (Oommen, 1978).

According to the Canadian mental health association, 20% of Canadians will personally experience a mental illness in their life time. More will have a drinking, gambling or drug addition Nurses who are trained in these matters provide support in clinics, hospitals and schools throughout the country.

The nursing profession gives a permanent salary. Most of time at levels higher than those of teachers and other comparable women's job.

Keywords: Monitoring, Proliferation, Infrastructure, Exploitative, Opportunities, Pressures

Introduction

Nursing is a profession, like a doctor, but training for a nurse is different in how much long a person must train and what kind of training they need. In some, nurse are trained for three to five years or more before they get a license as a nurse.

Council Body	State	Year of Establishment
Kerala Nurses and Midwives Council	Kerala	1953
Maharashtra Nursing Council	Maharashtra	
Delhi Nursing Council	New Delhi	1997
Mizoram Nursing Council	Mizoram	1994
Karnataka Nursing Council	Karnataka	1961

Nursing includes a range of specialties and definitions that vary from country to country. Broadly speaking, a nurse is a person who has formally been educated and trained in the care of the sick or disabled. Nursing also includes several other fields of medicine including the prevention of disease, caring for a monitoring as well as advising pregnant women etc.

The dramatic transformation created by healthcare reform and other pressures, coupled with economic recovery and demand for a variety of clinicians, has created a dynamic scenario for nursing employment where attitudes and career outlooks of younger, mid-career and older nurses appear to be headed in different directions. Though nurses of all ages are very satisfied with the choice of their carriers. They view the overall state of nursing today and the near future for their jobs paths satisfaction.

Manjunath Naganur, a staff working at a private hospital in Belgaum, Karnataka. The issue relates to the travails faced by the nurses everywhere in India with lack of job opportunities in government run hospitals to extreme exploitation in the hands of private/corporate hospitals. The proliferation of private nursing of nursing graduates who have little choice but to join private/corporate hospitals often at extremely low wages.

Many nurses, who mainly come from poor backgrounds, have to pay lakhs of rupees to get a nursing degree and hence have to take huge loans thus leaving them indebted increasing demands on the healthcare infrastructure, it looks like there is no longer any scope for India to lose any

more of its nursing is professionals to an exploitative work environment. Change is the only way out.

Indian Nurses Face Injustice, Exploitation

These woman move to urban centres like Delhi and Mumbai with the support of their friends, other nurses and relatives, and are vulnerably in an unfamiliar setting and city of course, a look at the working life of nurse is incomplete without to king in to account aspects like their living arrangements, transportation and the on duty facilities. While many hospitals do offer accommodation with in their premises or in areas close by – easing the pressure on them to find lodging and daily transportation to work this largely serves their own purpose.

Hospitals are able to out a substantial port of their costs on house rent allowance that key would other wise have to pay. In any case the kind of accommodation provided is of minimal standards and offers no privacy.

In many hospitals, during duty hours there are no rooms for them to rest or change their clothes. And even paying for overtime is an alien concept. The nurse patient ratio in India is a poor – 1:30 it's worse in the general wards. Which could be as high as 1:50 and this shortage often results in their having to put in additional hours.

Objective of the Study

1. To assess the nutritional awareness among nurses.
2. To study the nutritional intake of nurses.

Review of Literature

Lize (1994) reported that one of its main aims to alleviate short term hunger by providing 25% of the energy requirement of the nurses per day micro nutrient and studies have shown that micro nutrient deficiencies persisting some nurses despites this program.

Miannowsk and Roszkowski (1996) reported that good habits and behavior are often formed early in life and nutrition education of nurses can have a major role in ensuring appropriate dietary patterns and good health. In Poland, most nurses attend nutritional health programmers which is particularly well suited for teaching nutrition and nutrition education study to test the usefulness of educational materials was conducted in three randomly selected hospitals in Warsaw.

Miannowska and Roszkowski (1996) reported that food habits and behavior are often formed early in life and nutrition education of nurses can have a major role in ensuring appropriate dietary patterns and good health.

Garryw *et al.* (1998) found that the integrate nutrition project is an going comprehensive program focused on increasing consumption of whole grains.

Freggie *et al.* (1998) said that the (Mission Nutrition) program from the dietitians supports nurses with credible curriculum based resources, easy to use lesson plans, for nurses.

Anonymous (2008) reported that diet of not a single nurses in different states in India can be fully satisfactory. The diet of nurses was generally grossly deficient in calcium vitamin A, Vitamin C, Riboflavin and animal protein. Diet of south Indian nurses in

general alone of Kerala in particular were grossly deficient even in respect of calories and total protein.

Nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities of sick or well and in all sittings. Nursing includes the promotion of health, presumption of illness, and the care of ill disabled and dying people advocacy, promotion of a safe environment research, participation in shaping health policy and in patient and health systems management, and education are also key nursing roles.

De Lucia, Otto, & Palmier (2009) concluded the profession of nursing as a whole is overloaded because there is a nursing shortage. Individual nurses are over loaded. They are overload by the number of tasks they perform. They work under cognitive overload.

Marrio and Powers (2010) has given recommendations from the Americans Dietetic Association's nutrition practice guidelines for type 1 and type 2 diabetes in nurses. The research literature was reviewed to answer nutrition therapy factors reviewed are carbohydrate, protein intake, cardiovascular disease and weight management regular physical activity and use of self monitored blood glucose data. The evidence is strong that medical nutrition therapy in the management of diabetes.

Dan and High (2011) has given the concept of a balanced diet to promote health nutrition education during before and after the nutrition awareness, nutrition education on dietary behavior change in attitude and to assess the effect of nutrition conclusion community nutrition knowledge of adult can improve their diet and eating behavior of the concept.

As per my knowledge the latest reviews has been found till 2011. We have tried out best but unable to find the data after 2011-2018.

Methodology

Research methodology is the plan, structure and strategy of the investigation so as to obtain answer to research question and control variance plan in the overall scheme.

Clinical Assessment

Clinical assessment consists of routine medical history and physical examination to detect physical sign and symptoms (Gibson, 1990). The physical changes as defined by (Jellife, 1996) examine those change, believed to be related to inadequate nutrition, that can be seen or felt in superficial epithelial tissue the skin, hair, eyes and lips or in organs near the surface of the body.

Sample Selection

The sample were selected by random sampling method for the study.

Sample Size

100 sample were selected on the following segment.

1. 50 nurses selected from Government Hospitals (group list).
2. 50 nurses selected from the private Hospitals (group second).

Location of The Study (Study Area)

The investigation was made an assessment of nutritional status of the nurses there fore the study was carried out in different hospitals of the Kanpur city from required segments (Government and private). The area of the study was selected in following location or hospitals.

Data Collection

In order to accomplish the objectives of the study, an appropriate "Research Procedure" and suitable "tools" were used and distinctively discussed under the following manner:

General Information

The information's about age, education family income family type etc of respondents were obtained by questionnaire and interview schedule through an approved performa attached in appendix.

Finding & Discussion

Table 5.1 Distribution of Respondent's on the Basis of Food Habits

S.No.	Food Habit	Respondent of Government Hospitals		Respondent of Private Hospitals	
		Normal	%	Normal	%
1.	Vegetable	25	50	15	36
2.	Non vegetable	05	10	08	16
3.	Eggetarian	20	40	24	48
	Total	50	100%	50	100%

Table 5.1 depicts that the maximum respondents i.e. 50% in first group and 36% in second category were vegetarian. 40% and 48% were found eggetarian in both categories respectively only 10% and 16% respondents were found non vegetarian respectively in both groups.

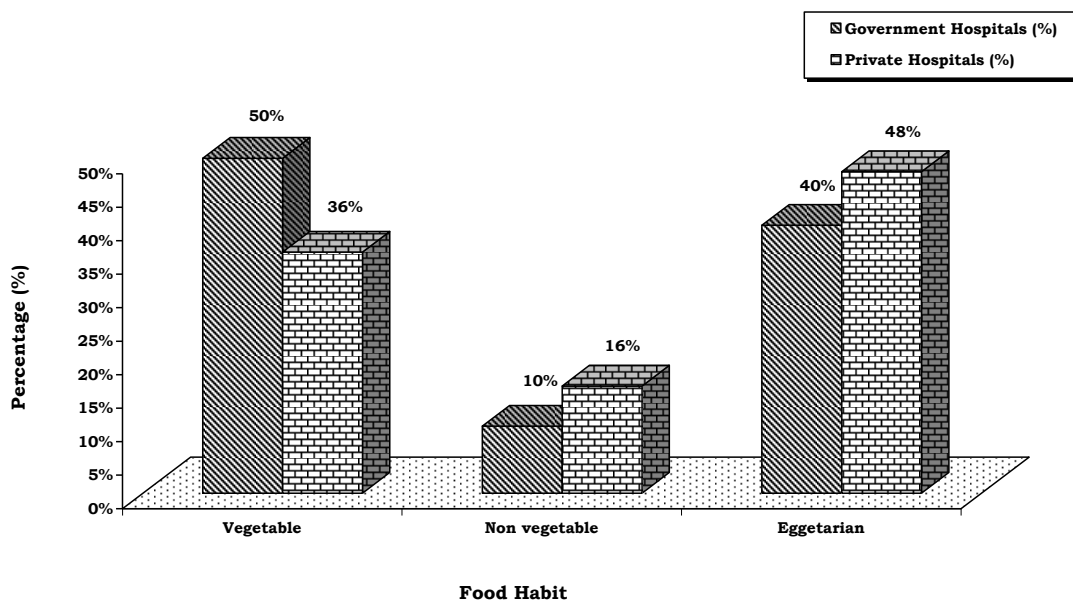


Figure 5.1 : Distribution of respondents o the basis of food habits.

Table 5.3.1: Mean Nutrient Intake of Respondents on The Basis of Age Group

S.No.	Age Group	Government Hospitals				Private Hospitals				
		N	Mean Energy intake (Kcal)	RDA (Kcal)	Deficient %	N	Mean Energy intake (Kcal)	RDA (Kcal)	Deficient %	
1.	25-35	25	1822	2225	-18.05	30	1700	2225	-23.59	
2.	35-45	20	2000	2225	-10.10	15	1618	2225	-27.28	
3.	45-55	05	1900	2225	-15.05	05	1918	2225	-13.79	
	vi		0.130				r	0.160		

Table 5.3.1 shows the calories consumption of respondents as compared to R.D.A. Both groups were taking significantly deficient calories than their actual calories need suggested by ICMR for their R.D.A. Maximum i.e. 18.05% deficiency of calories was found in the age group of 25-35 years in first group where as 27.28% calories deficiency was found

of in age group of 35-45 years in second group. Table shows that second group respondents who were working in private hospital were taking low calories as compared to first group. The values of correlation coefficient is 0.130 and 0.160 for both group respectively which is not significant.

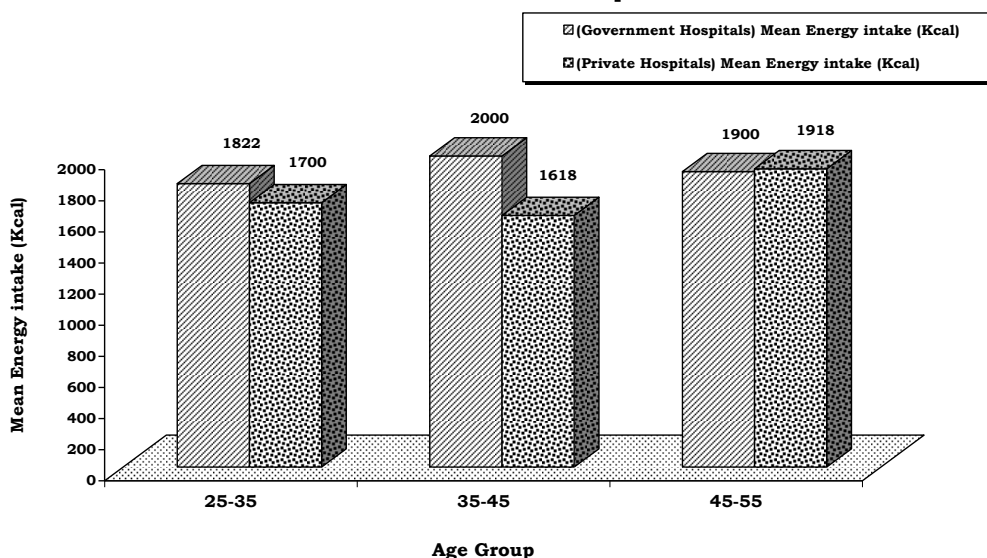


Figure 5.3.1 : Mean nutrient intake of respondents on the basis of age group.

Table 6 : Mean score of respondents about knowledge/awareness level on selected aspect of nutrition.

S. No.	Selection aspects of Nutrition (out of 30 score)	Mean Score of Respondents of Government Hospital	Mean Score of Respondents of Private Hospital
1.	About Balanced Diet (10 score)	7	8
2.	About Nutrients and effect of deficiency (10 score)	6	7
3.	About Health Foods (10 score)	7	8

Table 6 In Government Hospital the awareness and knowledge about selected aspect of Nutrition is less than that of private hospital. In Government Hospital out of 10, 7 respondents were knowing about balanced, diet 6 respondents were knowing about nutrients and effect of its deficiency and 7 were knowing about health foods.

It is clear that the respondents of private hospitals were more conscious and aware about the nutrition and balanced diet than the respondents of government hospitals. But the respondents of both categories were having good score and better performance. As the nature of job of nurses they were having knowledge about health and nutrition in both segments.

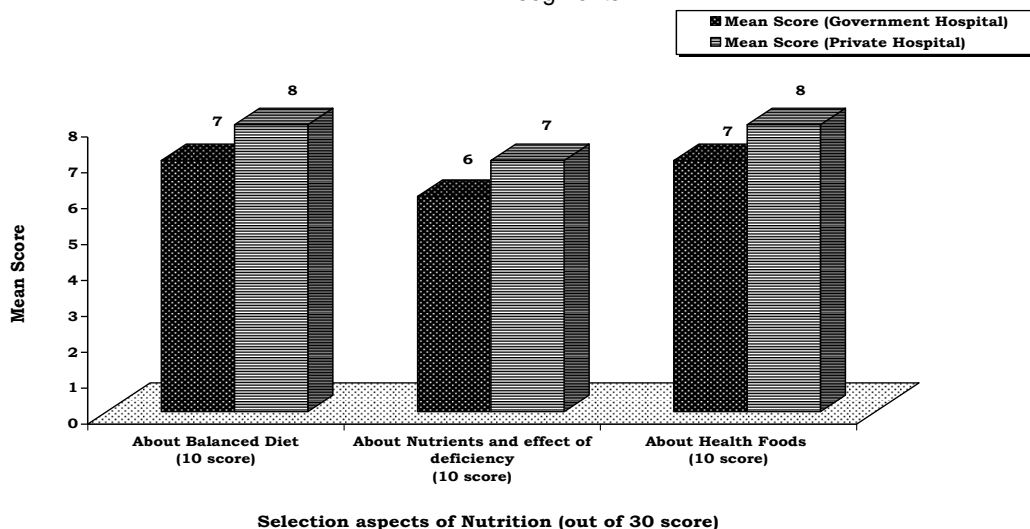


Figure 6: Mean score of respondents about knowledge/awareness level on selected aspect of nutrition.

Summary & Conclusion

1. It was found that the respondents from first category (nurses from Government Hospitals) and second category (Nurses from Private Hospitals) belonged to 25-35 years of age group.
2. Majority of respondents had nuclear family in both categories.
3. In the first category most of the respondents were consuming nutrients in their diet especially protein, iron and calcium was found deficient in both categories in comparison to R.D.A.
4. In both categories the knowledge and awareness level of respondents had high score in all three aspects of nutrition and balanced diet.

Suggestions

1. ICN urges to support nurses including facility access to legal aid when appropriate.

2. The facility of cabs should be provided to nurses 24 hours.

Reference

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