

A Review of Nutritional Knowledge of Homemakers and Its Association with Their Educational Level

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ABSTRACT

Adequate nutrition, a fundamental cornerstone of any individual's health, is especially critical for women because inadequate nutrition wreaks havoc not only on women's own health but also on the health of their children and family as women are the homemakers and they cook food for the family. The family's health depends on the nutritional knowledge of the homemaker. This study is being carried out with the objective of assessing the nutritional knowledge of homemakers through a questionnaire method, to study if education plays a role, to find out if proper nutrition from the kitchen is supplied to the family, to find out homemakers from which educational background are able to maintain the health of their family in a better way.

A descriptive institutional-based study was conducted to assess the knowledge of homemakers about their nutritional knowledge and family health associated with it. It employed both quantitative and qualitative data collection methods from January to June of the year 2023. A total of 100 adult women were taken as samples out of which 50 women were taken from LIG section and the remaining 50 from that of the MIG section. Random Sampling method was applied for selecting a sample from the population. Under the construct of nutrition knowledge, there were thirty-two questions for the quantitative study. Nutrition knowledge questions aimed at assessing the nutrition knowledge of women on the aspects of the nutritional requirement. The response rate was 100%. Different questions were asked to assess the knowledge of homemakers on nutrition and family health in the study area. The mean age of the participants was 32 years, while the age range was 25-45 years.

Out of the 100 respondents, 41% (majority) were in age of 25-30 years. 33%

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were in the 31-35 year group, 15% were from the 41-45 years group and only 11 % were from 36-40 years of age. 21% were illiterate, 35% (majority) were matriculated, 25% passed senior secondary and only 19% pursued higher education.

This study has documented the level of knowledge of homemakers on nutrition and its association with educational level. The incidence of dietary inadequacies as a result of dietary habits and patterns in women is higher. This study revealed that more than half of the respondents did not know the basic sources of macro and micronutrients. Hence, nutrition intervention such as nutrition education in different villages, health centers, and health posts is very essential. Women's organizations should be given responsibility for the community particularly for women's nutrition to increase the level of nutritional knowledge of homemakers in the studied area.

Keywords : Nutrition, Women's awareness, Knowledge

I. INTRODUCTION

Adequate nutrition, a fundamental cornerstone of any individual's health, is especially critical for women because inadequate nutrition wreaks havoc not only on women's own health but also on the health of their children and family as women are the homemakers and they cook food for the family. The family's health depends on the nutritional knowledge of the homemaker. This study is being carried out with the objective of assessing the nutritional knowledge of homemakers through a questionnaire method, to study its impact on family members, to find out if proper nutrition from the kitchen is supplied to the family, to check health disorders like deficiencies among family members due to the nutritional knowledge of homemaker.

Women have an important role in determining the nutrition of households and societies but due to illiteracy, they may lack the basic nutritional knowledge required to fulfil their roles properly (McGuire J, Popkin B.et.al, 1990). Among determinants of food choices of individuals, nutrition

knowledge (NK) is considered one of the factors affecting food intake (Bradette-Laplante M. et.al, 2017). To investigate the impact of the NK effect, a Nutrition Knowledge Questionnaire was developed and widely used in several groups of population and different settings. Written questionnaires were frequently used to measure NK. The correctness of the responses relies on participant literacy, a relevant factor to be considered when target groups have low levels of education and socioeconomic status (Adams RJ, Appleton SL.et.al, 2009). individuals will change their diets appropriately when they get accurate information about what they should eat and they should know the effects of food consumption on health (Miller LM, Cassady DL,2015). Food choices and nutritional intake are determined by the awareness of individuals about food and by the selfperception of the importance of balanced meals.

Several investigations have been made on the nutritional knowledge of housewives, and the extent to which they apply it in the everyday preparation of food **(Abraham SF, Beumom PJV.etal,1980)**. In 1975 the British Nutrition Foundation sponsored a study in

which a very large series of housewives in the UK were questioned regarding (i) their interest in food preparation; (il) which nutritional components (e.g. protein, fat, carbohydrate, minerals, vitamins) they knew by name; (ii) good sources of particular nutrients; and (iv) foods suitable for growth, pregnancy, and lactation, etc. It was concluded that the general level of nutritional knowledge was disappointing (Lowenberg ME, Todhumer El.et.al, 1979).

Awareness generation on various aspects of nutrition is the most important sustainable strategy to combat malnutrition and promote nutrition to people. Advocacy and sensitization of policymakers, nutrition orientation of program managers, and capacity building of field functionaries are one of the important activities of the Food and Nutrition Board towards creating nutritional awareness for promoting the nutrition of the people. Different activities are carried out for different target groups for disseminating nutrition information.

NUTRITIONAL KNOWLEDGE OF HOMEMAKERS

Housewives' knowledge of healthy food may influence the formation of the family's eating behaviours. A questionnaire consisting of several sections was used for assessing nutrition knowledge where questions were adopted. Adequate knowledge and attitudes of mothers about diet can be a factor that prevents nutritional problems (stunting and malnutrition) (Marchianti et al., 2022).

Numerous factors including taste, convenience, food cost or security, and cultural or religious beliefs influence dietary intake (Heaney, S, O'Connor,2011, Hendrie, G, Coveney,2008,

Parmenter, K, **Waller,2000**). Factors that are wellknown to influence nutrition knowledge include age, sex, level of education, and socioeconomic status (**Parmenter,** K, **Waller,2000**). Women tend to have higher levels of nutrition knowledge than men, and this difference has been attributed to their more dominant role in food purchasing and preparation or lower interest in nutrition by men (Wardle, J, Parmenter, K & Waller, J,2000). Higher levels of nutrition knowledge have been reported in those with higher education or socioeconomic status (Worsley, A,2000, Dallongeville, J, Marecaux, N,2001). The specific contribution of nutrition knowledge to the overall quality of food intake is considered to be complex and is influenced by the interaction of many environmental factors demographic and (Wardle, J, Parmenter, K & Waller, J,2000). However, a greater understanding of the relationship between nutrition knowledge and dietary intake is important as emerging evidence supports a strong link between low health literacy, poor management of chronic and increased health disease, costs (Eichler, K, Wieser, S,2009,

Vernon, JA, Trujillo, A,2007).

Responses rely heavily on participant literacy, and this is more limited with lower levels of education and socio-economic status (Adams, R, Appleton, S, 2009). Types of nutrition knowledge assessed also vary widely across instruments, with some measuring general concepts (Parmenter, K & Wardle, J, 1999, Eppright, E, Fox, H,1970). while others explore only some nutrition aspects such as fat (Block, G, Gillespie, C,2000,

Kristal, A, Bowen, D,1990) or fibre (Lee, C, Godwin, S,1997). Knowledge of nutrition facts, or declarative knowledge may not translate through to skill or process knowledge, essentially the ability to choose healthier foods, understand food labels or select healthier options from a range of foods available. Nutrition knowledge instruments that assess declarative nutrition concepts may have little relevance to the set of knowledge and skills required to make appropriate dietary decisions that promote health.

Among determinants of food choices of individuals, nutrition knowledge (NK) is considered as one of the factors affecting food intake (**Bradette-Laplante M**, **Carbonneau É,2017).** Written questionnaires were frequently used to measure NK. The correctness of the



responses relies on participant literacy, a relevant factor to be considered when target groups have low levels of education and socioeconomic status (Adams RJ, Appleton SL,2009).

Several studies investigated the impact of knowledge on food choice and consumption habits, showing that subjective knowledge is a stronger driver of consumer behavior than objective knowledge (Pieniak Z, Verbeke W,2006). According to Wardle et al, the highest knowledge corresponds to the highest adherence to nutritional recommendations, at least for selected foods such as fruit, vegetables, and fat. However, the growing exposure to web information and biased self-perception of NK contribute to increasing false beliefs (Wardle C, Derakhshan H,2017). According to Alba and Hutchinson, consumers are overconfident, meaning that they are convinced to know more than they do.

According to Miller et al, individuals will change their diets appropriately when they get accurate information about what they should eat and they should know the effects of foods consumption on health. Several studies addressed knowledge effects on dietary intake and the broad range of consumer attributes and behaviors related to foods such as attitudes, perceptions, and choices (**Spronk I, Kullen C,2014**).

Nutritional awareness has a direct effect on diet quality and is related to socioeconomic factors, in particular, education and income that influence the nutritional awareness-diet quality relationship (Alkerwi A, Sauvageot N,2015). It is assumed that NK will lead to an improvement of the diet by providing individuals the necessary information about choosing healthy foods, preparing and consuming these foods as recommended in dietary guidelines (Öngün Yilmaz H, Aydin Hakli D,2021).

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