

An attitude study of pregnant women towards anemia

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■ **ABSTRACT** : A random sample of 60 (30 urban and 30 rural) pregnant women of 18-45 age group were selected from three rural and urban settlements of Gorakhnath block of District Gorakhpur (U.P.) for this study. From the result it is clear that there is no significant difference in the attitude level of urban and rural pregnant women towards anemia.

■ **KEY WORDS**: Attitude, Pregnant women, Anemia, Health, Nutrition

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The health of women is linked to their status in the society. Woman is the pivot of the family and to be healthy; physically and mentally imposes a profound impact on the family. Pregnancy is not just one of the unforgettable moments of motherhood but is an important part of life for women. Health and nutrition plays an important role during pregnancy. Analyzing the population condition of different countries of the world in the present scenario, we found that there is close interrelationship between health and population development. Lack of population awareness may cause rapid population growth, high birth rate, infant mortality etc. Pregnant women and infants have a higher mortality rate in the rural and urban settlements of India. 28 per cent low weight babies are born due to lack of proper and nutritious diet to mothers.

25 per cent of the world's developing countries like India, maternal and gestational problems arise which indicates that health condition of women is miserable. In India, Malnutrition, constant and premature pregnancies, infection, partial health awareness are such prominent factors, who have made the health status of women vulnerable. Nutritional anemia among women

of reproductive age is a major health problem in various developing countries. 56 per cent women of reproductive age have high prevalence of anemia as per statistics of Natural Family Health Survey.

According to WHO, Nutritional anemia is defined as a condition in which the hemoglobin content of the blood is lower than normal as a result of a deficiency of one or more essential nutrients, regardless of the cause of such deficiency. Anemia is common health problem but this problem increases as iron supplementation demand by the mother and the fetus increases during pregnancy. In pregnancy the total maternal need for extra iron averages close to 800 mg, of which about 300 mg is for the fetus and the placenta and the rest is for maternal hemoglobin mass expansion. Physical weakness, headache, dizziness, staggering, breathlessness even in the mild work etc. are the symptoms of anemia.

The consequences of anemia during pregnancy are miscarriage, fetal death, and premature delivery as the body's cell does not get sufficient oxygen. As a result, natural immune system of body reduces. Pregnant women need to check hemoglobin every month and

should take iron rich and nutritional food during pregnancy.

Considering the importance of this problem, an attitude of urban and rural pregnant women towards anemia is taken in the most populous state of Uttar Pradesh whereby information regarding attitude status of pregnant women from different socio-economic background, may be obtained along with the factors and causes of low attitude level. Thus, based on the findings obtained from the study, necessary suggestions would be presented to enhance the attitude level of pregnant women towards anemia.

RESEARCH METHODS

Objective of the study :

To find out the level of attitude among rural and urban pregnant women towards anemia.

Hypothesis :

There is no significant difference in the level of attitude between urban and rural pregnant women.

Limitation of the study :

In the present study three villages *i.e.* Nagadh No. 1, Chamanpur, Bhagwanpur and three urban areas Basaratpur, Kakshipur, Surajkund of Gorakhnath block under Gorakhpur district of Uttar Pradesh were included.

Method :

A general survey method was used for the study.

Sampling :

A sample of 60 (30 rural and 30 urban) pregnant women of 18-45 age group were selected from three village and three urban settlements of Gorakhnath block of district Gorakhpur (U.P.) using random sampling

method.

Tools :

For the collection of data, interview schedule (self structured) is used.

RESEARCH FINDINGS AND DISCUSSION

The findings of the present study as well as relevant discussion have been presented under following heads :

Analysis of data :

Statement 1 :

Anemia is caused due to deficiency of iron salts and folic acid in the blood.

Data from the Table 1 shows that calculated mean of 't' is 2.63 which is significant at 0.05 level. On the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 2 :

Physical weakness, headache, dizziness, staggering etc. are the symptoms of anemia.

It is revealed from the Table 2 that calculated mean of 't' is 1.14 which shows no significance at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of rural pregnant women among urban and rural respondents.

Statement 3 :

Anemia depends on the socio-economic condition?

Data revealed that calculated mean of 't' is 0.99 which is not significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of rural pregnant women among urban and rural respondents.

Table 1 : Anemia is caused due to deficiency of iron salts and folic acid in the blood				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.80	1.126	2.63 (S)
Rural	30	3.10	0.923	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Table 2 : Physical weakness, headache, dizziness, staggering etc. are the symptoms of anemia.				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.967	0.971	1.14 (NS)
Rural	30	3.500	0.820	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Statement 4 :

Hemoglobin test is essential during pregnancy?

Data of Table 4 shows that calculated mean of 't' is 0.84 which is not significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of rural pregnant women among urban and rural respondents.

Statement 5 :

Anemia is caused due to lack of food nutrients?

Table 5 shows that calculated mean of 't' is 3.55 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 6 :

Intake of iron salts and calcium tablets during pregnancy is necessary?

In the Table 6 calculated mean of 't' is 6.03 which is significant at 0.05 level. In this way on the basis of

calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 7 :

Balanced and nutritious diet is essential for pregnant woman?

Data from the Table 7 revealed that calculated mean of 't' is 3.95 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 8 :

Pregnant women need to undergo regular checks at the health centre?

It is revealed from the Table 8 that calculated mean of 't' is 0.65 which is not significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of rural pregnant women among urban and rural respondents.

Table 3 : Anemia depends on the socio-economic condition

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.867	1.137	0.99 (NS)
Rural	30	3.600	0.932	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Table 4 : Hemoglobin test is essential during pregnancy

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.967	0.999	0.84 (NS)
Rural	30	3.733	1.143	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Table 5 : Anemia is caused due to lack of food nutrients

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.200	0.664	3.55 (S)
Rural	30	3.367	1.098	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Table 6 : Intake of iron salts and calcium tablets during pregnancy is necessary

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.567	0.504	6.03 (S)
Rural	30	3.400	0.932	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Table 7 : Balanced and nutritious diet is essential for pregnant woman

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.667	0.479	3.95 (S)
Rural	30	3.867	1.008	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Statement 9 :

Most of the pregnant women died due to lack of proper nutrition?

It is shown in Table 9 that calculated mean of 't' is 3.32 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 10 :

Anemic pregnant women may have death and other complications at the time of delivery?

It is revealed from the Table 10 that calculated mean of 't' is 2.96 which is not significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 11 :

Main cause of weakness in the most of the children is mother's lack of complete nutrition during pregnancy?

In the Table 11 the calculated mean of 't' is 6.09 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 12 :

Iron rich food should be taken to prevent anemia?

Data from Table 12 shows that calculated mean of 't' is 2.32 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 13 :

Repeated conception makes women mentally and physically weak?

Table 13 shows that calculated mean of 't' is 5.42 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women

Table 8 : Pregnant women need to undergo regular checks at the health centre

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.867	1.106	0.65 (NS)
Rural	30	3.667	1.269	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Table 9 : Most of the pregnant women died due to lack of proper nutrition

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.200	1.095	3.32 (S)
Rural	30	3.267	1.081	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Table 10 : Anemic pregnant women may have death and other complications at the time of delivery

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.167	0.950	2.96 (S)
Rural	30	3.433	0.971	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Table 11 : main cause of weakness in the most of the children is mother's lack of complete nutrition during pregnancy

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.567	0.504	6.09 (S)
Rural	30	3.300	1.022	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Table 12 : Iron rich food should be taken to prevent anemia

Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.900	1.029	2.32 (S)
Rural	30	3.267	1.081	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

among urban and rural respondents.

Statement 14 :

It is necessary to check the woman’s blood, urine and sugar level monthly from the beginning of pregnancy?

Table 14 represent that calculated mean of ‘t’ is 2.02 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 15 :

Impact of social and economic condition occurs on women’s health and nutrition?

The Table 15 that calculated mean of ‘t’ is 2.78 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 16 :

Pregnant women need to be aware of their health and nutrition?

Table 16 shows that calculated mean of ‘t’ is 0.12 which is not significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of rural pregnant women among urban and rural respondents.

Statement 17 :

Deliveries must always be in the hospital?

It is revealed from the Table 17 that calculated mean of ‘t’ is -3.02 which is not significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of rural pregnant women among urban and rural respondents.

Statement 18 :

Extra energy and protein is required to pregnant woman?

Table 13 : Repeated conception makes women mentally and physically weak				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.567	0.504	5.42 (S)
Rural	30	3.133	1.358	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Table 14 : check the woman’s blood, urine and sugar level monthly from the beginning of pregnancy				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.667	1.124	2.02(NS)
Rural	30	3.000	1.414	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Table 15 : Impact of social and economic condition occurs on women’s health and nutrition				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.133	0.900	2.78 (S)
Rural	30	3.333	1.295	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	S=Significant

Table 16 : Pregnant women need to be aware of their health and nutrition				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.133	1.332	0.12 (NS)
Rural	30	4.100	0.803	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Table 17 : Deliveries must always be in the hospital				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.467	0.973	-3.002 (NS)
Rural	30	5.000	0.000	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Data shown in the Table 18 revealed that calculated mean of 't' is 0.75 which is not significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of rural pregnant women among urban and rural respondents.

Statement 19 :

A pregnant woman needs to keep mentally healthy.

The Table 19 shows that the calculated mean of 't' is 2.43 which is significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of urban pregnant women among urban and rural respondents.

Statement 20 :

In the third month of pregnancy, iron supplement food must be included in the diet of pregnant woman.

The calculated mean of 't' is 1.20 in the Table 20 which is not significant at 0.05 level. In this way on the basis of calculated mean from the above statement, the attitude level is in favour of rural pregnant women among urban and rural respondents.

Testing of hypothesis :

Based on the findings from the study hypothesis of some statements have been approved on statement number 1, 5, 6, 7, 9, 10, 11, 12, 13, 14, 15, 19, and rejected in statements number 2, 3, 4, 8, 16, 17, 18, 20.

The level of attitude of urban pregnant women regarding 'deficiency of iron salt and folic acid in the blood causes anemia' was higher in comparison to rural

pregnant women.

The level of attitude of rural pregnant women regarding the symptoms of anemia was higher in comparison to urban pregnant women.

The level of attitude of rural pregnant women regarding 'prevalence of anemia depends on socio-economic condition' was higher in comparison to urban pregnant women.

The level of attitude of rural pregnant women regarding hemoglobin test during pregnancy was higher in comparison to urban pregnant women.

The level of attitude of urban pregnant women regarding 'lack of food nutrients cause anemia' was higher in comparison to rural pregnant women.

The level of attitude of urban pregnant women regarding 'intake of iron salts and calcium tablets during pregnancy' was higher in comparison to rural pregnant women.

The level of attitude of urban pregnant women regarding 'balanced and nutritious food during pregnancy' was higher in comparison to rural pregnant women.

The level of attitude of rural pregnant women regarding 'regular check up in health centres' was higher in comparison to urban pregnant women.

The level of attitude of urban pregnant women regarding 'maternal mortality due to proper nutrition' was higher in comparison to rural pregnant women.

The level of attitude of rural pregnant women regarding 'extra energy and protein requirement during pregnancy' was higher in comparison to urban pregnant

Table 18 : Extra energy and protein is required to pregnant woman				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.400	1.303	0.75 (NS)
Rural	30	3.133	1.432	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Table 19 : A pregnant woman needs to keep mentally healthy				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	4.567	0.504	2.43 (S)
Rural	30	4.100	0.923	
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

Table 20 : In the third month of pregnancy, iron supplement food must be included in the diet of pregnant woman				
Respondent	Number	Mean (M)	Standard deviation (SD)	"t"
Urban	30	3.600	1.354	1.20
Rural	30	3.200	1.215	(NS)
Degree of freedom (df) = 58		required "t" at 0.05 level	2.09	NS=Non-significant

women.

Suggestions:

Findings from the study raised the issue of health awareness studies as some suggestions are given below for future prospects-

Studies are needed to explore the level of awareness of unmarried women towards their health.

Studies are needed to find out the level of practice of married women towards their health.

To find out the Knowledge, Attitude and Practices of young couples towards small family norms.

Studies are needed to find out the level of awareness of students towards health care.

Studies are needed to explore Knowledge, Attitude and Practices of rural community towards different aspects of health dimension.

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