



# International Journal of Midwifery and Nursing Practice

E-ISSN: 2663-0435  
P-ISSN: 2663-0427  
[www.nursingpractice.net](http://www.nursingpractice.net)  
IJMNP 2021; 4(2): 79-82  
Received: 10-05-2021  
Accepted: 14-06-2021

**V Beautily**  
Department of Child Health  
Nursing, Saveetha College of  
Nursing, SIMATS, Chennai,  
Tamil Nadu, India

**Krishnapriya MR**  
B.Sc (N) IV Year, Saveetha  
College of Nursing, SIMATS,  
Chennai, Tamil Nadu, India

## Assess the effectiveness of video assisted teaching on food adulteration and its ill effects among home makers

**V Beautily and Krishnapriya MR**

### Abstract

**Background:** The Good nutritive food plays a crucial function in maintaining proper health and additionally helps in prevention and therapy of disease. A healthy person can be the base for empire placing up Subsequently health is multidimensional units of human beings like physical, mental, social, spiritual, sexual and environment etc. are the huge range of dimensions of human strength. The process of taking food and using it for growth, metabolism and repair. Nutritional stages are ingestion, digestion, absorption, transport, admiration and excretion. The main type of adulteration is economically motivated adulteration (EMA) which is targeted towards financial advantages. This is known as food fraud. It includes the delusion of food, substitution of food with inferior or cheaper quality substances, keywords, assess, knowledge effectiveness, video evicted teaching, food adulteration, ill effects.

### Objectives

- To assess the level of knowledge on food adulteration and its ill effects among homemakers.
- To assess the effectiveness on video assisted teaching on food adulteration and its ill effects among homemakers.
- To find the avocation on posttest level of knowledge on food adulteration and its ill effects with selected demographic variables

**Methodology:** A quasi experimental research design with simple random sampling technique was adopted to conduct a study among 60 homemakers. Data was gathered by using self-structured questionnaires. Confidentiality was maintained throughout the procedure. Collected data were analyzed by using descriptive and inferential statistics

**Result:** Among 60 homemakers that level of knowledge regarding the food adulteration and its ill effects 88.35% had adequate knowledge and 11.67% had moderate knowledge om food adulteration and its ill effects among homemakers. The study shows that nine of the demographic variables like Age, education, type of family, Dietary habits about food adulteration had shown statistically significant avocation with level of knowledge on food and its ill effects among homemakers.

**Conclusion:** These studies concluded that there is statistically significant avocation with level of knowledge on food adulteration and its ill effects.

**Keywords:** assess, knowledge, effectiveness, video assisted teaching, food adulteration, ill effects

### Introduction

Food must not contain or must only contain acceptable and safe levels of adulterants, contaminants or any other substance that may endanger the health of the food. Additionally, these foods deprive the body of nutrients necessary for normal growth and development <sup>[1]</sup>. Food refers to materials of solid or liquid nature. When ingested, they can achieve one or more functions of growth, maintenance and energy supply. Eating appropriate foods in terms of content and type can promote nutrition and health <sup>[2]</sup>. The term adulteration is a legal term that means that the food produced does not meet federal state standards. Adulteration is the addition of non-food items to prepared foods to improve the quality of raw food, which will result in a decrease in the actual quality of the food in meat and meat products <sup>[3]</sup>. The type of food adulteration is deliberate adulteration, and the adulteration is deliberately added to increase profits. Accidental adulteration, adulteration is found in food due to negligence, ignorance or lack of proper facilities <sup>[4]</sup>.

If the physiological functions of consumers are damaged due to the addition of harmful substances or the removal of important ingredients, food adulteration can endanger health. In order to protect the health of consumers, the Indian government promulgated the Food Adulteration Prevention Act in 1954 <sup>[5]</sup>. The causes of adulteration may be availability of too many products in market, poor buying practices of consumers, consumer mentality of

**Corresponding Author:**  
**V Beautily**  
Department of Child Health  
Nursing, Saveetha College of  
Nursing, SIMATS, Chennai,  
Tamil Nadu, India

bargaining and availability of adulterant [6]. The reasons for food adulteration are market shortages, lack of well-trained workforce, outdated food processing technology, and ignorance of disease outbreaks caused by adulterated food. If the quality or purity of the product falls below the prescribed standard, injurious to health [7]. Variety of adulterants observed in quiet a number foods. An adulterant is a substance that is included in any food material to diminish its quality. For example, when water is brought in milk, the water is called as an adulterant. There are wide variety of adulterants such as, water, starch, caustic soda, cane sugar, urea, chalk powder, sodium chloride, skimmed milk, fructose, formalin, ammonium, tamarind seeds, papaya seeds, argemone seed, metanil yellow, saw dust, cassia bark, palm oil etc. That are introduced in a variety of kinds of ingredients (FSSAI, 2012) [8].

The health effects such as diarrhea, dysentery, and vomiting. The consumption of adulterated ingredients can lead to various illnesses like belly disorder, coronary heart problem, indigestion, acidity, ulcer, autism, cancer, joint pain, asthma metabolic dysfunction, food poisoning, eye sight problem etc. (pal 2017) [9]. Sampling analysis procedure: Any food inspector may enter and inspect any place where any food is manufactured or stored for sale or stored for manufacture of any other food for sale or displayed or displayed for sale, or any adulteration and sampling of any manufacture or storage of any food. The food or adulterant used for analysis. The inspector will send a written notice to the seller at the same time, indicating his intention. Take three samples and paste the seller's signature on them. After notifying the local health authority, the sample was sent to a public analyst for analysis [10].

FSSA 2006 Food Safety and Standards Act, if there is evidence that the quality is not qualified, replaced by cheap substances, it extracts the ingredients of any item, prepared or stored in unsanitary conditions, contains toxic ingredients, uses colorants and exceeds prescribed limits. Or prescribed standards Purity preservative [11]. Anyone, whether he or another person, intentionally sells food to consumers by manufacturing food or selling unsafe food, causing personal injury or death, will be fined. The fine may exceed 100,000 rupees, and a fine may be imposed. Imprisonment of not less than seven years [12]. The AGMARK standard is derived from agricultural marketing. The authorization certificate is only granted to industry professionals with appropriate experience and market position. Prior to the application of the appropriate AGMARK label, marketing and inspection management personnel or state government personnel are usually present during product selection, processing, classification, and packaging [13].

World Consumer Rights Day on March 15 is celebrated in various parts of the world, namely the right to choose, the right to know and the right to be heard, and the Consumer Protection Act 1986, as revised in 2002, it provides a very simple and comprehensive mechanism to seek true dissatisfaction [14].

The terms food safety and food quality can sometimes be confusing. Food safety refers to all chronic or acute hazards that may endanger the health of consumers. There is no room for negotiation. Quality includes all other attributes that affect the value of a product to consumers. This includes negative attributes such as spoilage, dirt

contamination, discoloration, odor, and positive attributes such as food source, color, taste, texture, and processing methods [15].

**Materials and Methods**

A quasi experimental research design was used to assess the knowledge on food adulteration and its ill effects among home makers. This study was conducted in Avadi, Thiruvallur district. The total sample size is 60 who all are satisfies the inclusion criteria, simple random sampling technique was used to collect the data from sample. The inclusion criteria married female homemakers. Those who know to read Tamil were included in the study, those who are willing to participate in the study. Those who are illiterate or uneducated were excluded. Explained about the study and informed consent was obtained. Data was collected by self-structured questionnaires. Confidentiality was maintained throughout the study. Collected data were analyzed by using descriptive and inferential statistics. The project has been approved the ethics committee of the Institution.

**Results and Discussion**

**Section 1: Description of sample characterizes**

The majority of the home makers, 23(38.3%) were aged between 20-30 yrs, 43(71.7%) had higher secondary education, 31(51.7%) belonged to nuclear family and 36(60%) were non-vegetarian.

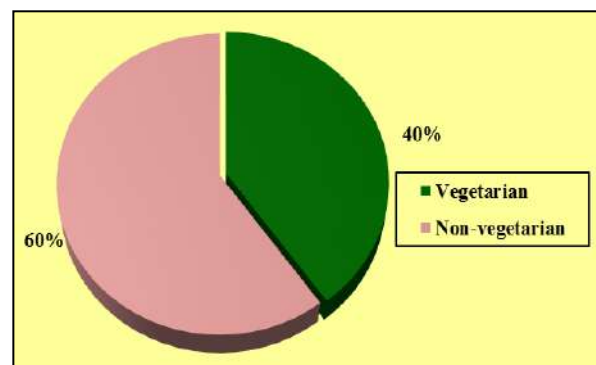


Fig 1: Percentage distribution of dietary habits of homemakers

**Section B: Assessment of level of knowledge on food adulteration and its ill effects among home makers**

Table 2: Frequency and percentage distribution of pretest and level of knowledge on food adulteration and its ill-effects among homemakers. N = 60

Knowledge	Inadequate (≤10)		Moderate (11 – 15)		Adequate (16 – 20)	
	No.	%	No.	%	No.	%
Pretest	53	88.33	7	11.67	0	0
Post Test	0	0	6	10.0	54	90.0

The study which shows that in the pretest, 53(88.33%) had inadequate knowledge and 7(11.67%) had moderate knowledge on food adulteration and its ill-effects among homemakers. Whereas in the post test, 54(90%) had adequate knowledge and 6(10%) had moderate knowledge on food adulteration and its ill-effects among homemakers.

**Section C: Effectiveness of video assisted teaching on food adulteration and its ill-effects among homemakers**

**Table 3:** Comparison of pretest and post-test level of knowledge on food adulteration and its ill-effects among homemakers N = 60

Knowledge	Mean	S.D	Paired 't' test Value
Pretest	8.18	2.08	t = 33.164 p = 0.0001 S***
Post Test	17.58	1.69	

\*\*\*p<0.001, S – Significant

The study shows that the pretest mean score of knowledge was 8.18±2.08 and the post-test mean score of knowledge was 17.58±1.69. The calculated paired 't' test value of t = 33.164 was found to be statistically highly significant at p<0.001 level. This clearly infers that administration of Video Assisted Teaching on knowledge on food adulteration and its ill-effects among homemakers was found to be effective in improving the level of knowledge among homemakers in the post test.

**Section D: Association of level of knowledge on food adulteration and its ill-effects among homemakers with selected demographic variables**

**Table 4:** Association of post level of knowledge on food adulteration and its ill-effects among homemakers with their selected demographic variables. N = 60

Demographic Variables	Inadequate		Moderate		Adequate		Chi-Square Value
	No.	%	No.	%	No.	%	
<b>Age</b>							
20 – 30 yrs	-	-	2	3.3	21	35.0	χ <sup>2</sup> =1.704 d.f=2 p = 0.427 N.S
31 – 40 yrs	-	-	1	1.7	19	31.7	
41 – 50 yrs	-	-	3	5.0	14	23.3	
<b>Education</b>							
Higher secondary	-	-	4	6.7	39	65.0	χ <sup>2</sup> =0.091 d.f=2 p = 0.955 N.S
Graduated	-	-	1	1.7	7	11.6	
Illiterate	-	-	1	1.7	8	13.3	
<b>Family type</b>							
Nuclear family	-	-	2	3.3	29	48.3	χ <sup>2</sup> =0.897 d.f=1 p = 0.344 N.S
Joint family	-	-	4	6.7	25	41.7	
<b>Dietary habit</b>							
Vegetarian	-	-	0	0	24	40.0	χ <sup>2</sup> =4.444 d.f=1 p = 0.035 S*
Non-vegetarian	-	-	6	10.0	30	50.0	

\*p<0.05, S – Significant, N.S – Not Significant

The present study shows the demographic variable dietary habits had shown statistically significant association with post-test level of knowledge on food adulteration and its ill-effects among homemakers at p<0.05 level. The other demographic variables had not shown statistically significant association with post-test level of knowledge on food adulteration and its ill-effects among homemakers.

**Conclusion**

The studies concluded that there is no significant difference between level of knowledge on food adulteration and its ill effects among homemakers with selected demographic variables.

**Acknowledgement**

We would like to extend our gratitude to the authorities of Saveetha College of Nursing and Saveetha Medical College Hospital for this study.

**Authors Contribution**

All the authors actively participated in the work of study. All the authors read and approved the final manuscript.

**Conflict of Interest**

The authors declare no conflict of interest.

**References**

1. Majumdear S. Food hazards and food security, Everyman’s science 2010;64:348-355.

2. Monika Sharma. Textbook of Nutrition for B.Sc Nursing students, CBS publications 2017, 2-32.
3. Requirements for Temporary food service Establishments, Farmers Branch 2017.
4. Dhyani A, Saklani A. To assess awareness of consumers towards consumer protections laws, International journal of Market 1994;23:9-12.
5. Nagvanshi D. A study on common food Adulterants and Knowledge about Adulteration among women of Rae Bareli District. International Journal of Home science 2015;1(3):5-8.
6. Nidhi Gupta, Priti Panchal. Extent of Awareness and food adulteration detection in selected food items purchased by homemakers, Pakistan Journal of Nutrition 2009;8(5):660-667.
7. Ankika Choudhary, Neeraj Gupta. An overview of food adulteration: concept, source, impact, challenges and detection. International Journal of chemical studies.
8. Dr. Mohendra Pal, Dr. Meenu Mohinder. Food adulteration: A global public health concern 2020, (8).
9. Krystal Godfrey Quadras, Dr. Rekha Battalwar. Assessment of student awareness and effectiveness of planned teaching programme regarding Adulteration of food. International Journal of Home science.
10. Lakshmi V, Labs RV. Food Adulteration, International Journal of science Inventions Today 2012, 1(2).
11. Shailesh Ishwar, Puja Dudga. A cross sectional study to assess awareness about food adulteration in an urban slum. Medical Journal, Armed forced India.

12. Prathusha G, Dr. P Radha Rani. Assessment of student knowledge and effectiveness of intervention regarding Adulteration of food. The pharma Innovation Journal 2019, 8(7).
13. Srilakshami B. Human Nutrition for B.Sc Nursing students, New age International Publisher 243-249.
14. Manjula Thakur, Amarjit Singh. Impact of health education package on knowledge and practice of women regarding food Adulteration, Nursing and Midwifery Research Journal.
15. Assuring food Safety and quality, Guidelines for strengthening national food control systems. Joint FAO/WHO Publication 3.