



## Knowledge on prevention of food poisoning among adults in Dakkilivaripalem, Nellore, Andhra Pradesh.



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**Abstract:** Food poisoning is an illness caused by eating contaminated food. The food that causes the illness can be contaminated by salmonella, Noro virus. Food that are particularly vulnerable to contamination if they are not handled to store as cooked properly include meat, ready to eat food such as pre packed sandwiches, eggs, milk and dairy products **Aim:** The aim of the study was to assess the level of knowledge on prevention of food poisoning among adults. **Objectives:** 1. To assess the knowledge on prevention of food poisoning among adults. 2. To find the association between knowledge on prevention of food poisoning among adults with selected socio demographic variables. **Methodology:** 50 adults in Dakkilivaripalem, Nellore were selected by using convenience sampling. A structured questionnaire, it consists of 28 questions. **Results:** Reveled 2(4%) had B+ grade, 11(22%) had B grade and 18(36%) had C grade and 19(38%) had D grade of knowledge. **Keywords:** Knowledge, Prevention, Food Poisoning, Adults.

**INTRODUCTION:** Food poisoning is an illness caused by eating contaminated food. Most people will get better without the need for treatment by bacteria such as salmonella and Noro virus are responsible new organism for contamination. Food that are particularly vulnerable to contamination include meat, ready to eat food such as pre packed sandwiches, eggs and dairy products. Food poisoning is an acute illness typically characterized by gastro intestinal inflammation, vomiting and diarrhea, caused by food that is either naturally poisoning as contaminated by pathogenic bacteria.

Diarrhea not a disease, but it may be a symptom of a disease. The most common causes of diarrhea is Food poisoning. Bacteria like E-coli some medicines especially antibiotics artificial sweeteners like sochetol and mannitol which are in many sugar free food products like sugar less gram.

The main signs and symptoms of Food poisoning are abdominal pain and cramps, diarrhea, headache, vomiting, generally feeling sick, fever, chills, weakness and fatigue, nausea and muscle aches.

Management of Food poisoning, oral rehydration is achieved by administering clear liquids like sodium containing and glucose containing solutions. A simple ORS may be prepared with salt and 4 heaping teaspoons of sugar added to 1000 ml boiled cooled water. The World Health Organization (WHO) recommends a solution containing 3.5 g of sodium chloride 2.5g sodium bicarbonate 1.5g of potassium chloride and 20g of glucose per liter of water.

Prevention of Food poisoning most of their infectious can be early prevented by following a few preventions. The most basic and important requirement is hand washing, washing hands with soap



solution before and after eating food is a simple way of preventing contamination. Keeping all vegetables in the refrigerator and raising them in vinegar as salt water may reduce the chance of infections. Which preparing food, cook foods to safe temperature and refrigerator.

**NEED FOR THE STUDY:** The WHO region of the American is estimated to have the second lowest burden of Food poisoning globally. Nevertheless 77 million people still fall ill every year from contaminated food with an estimated 9000 deaths usually in the region.

The UK report by the Food standards agency suggests that there are 500,000 cases of Food poisoning per year among which 80,000 and Norovirus for 74,000 cases. It is also estimated that 10 million cases of infection intestine disease are undiagnosed.

**Subbarao G . M (2014)** did a descriptive study to evaluate the mother's knowledge and home practice on food safety in national institute of nutrition, AP, India. 200 sample sizes of mothers with less than 5 years of age children selected for sample the results showed that 60% of educated mothers are having adequate knowledge about poisoning but implementation on food safety practice are lack among mothers at home.

**Problem Statement:** A study to assess the knowledge on prevention of food poisoning among adults in Dakkilivaripalem, Nellore.

**OBJECTIVES:**

- ❖ To assess the knowledge on prevention of food poisoning among adults.
- ❖ To find out the association between the knowledge on prevention of food poisoning among adults with their socio demographic variables.

**OPERATIONAL DEFINITIONS:**

**Assess:** It is the assessment of knowledge among adults by using self-structured questionnaires.

**Knowledge:** Refers to level of understanding on prevention of food poisoning among adults.

**Prevention:** The action of stopping something from happening or arising.

**Food poisoning:** Food poisoning is an illness induced by eating food as drinks contaminated with harmful bacteria as eating food contaminated with chemicals called toxins.

**Adults:** Adults aged 19-60 years living in Dakkilivaripalem, Nellore.

**DELIMITATIONS:** The study is limited to adults,

- ❖ Aged between 19-60 years
- ❖ Residing in Dakkilivaripalem, Nellore.

**METHODOLOGY:**

**Research Approach:** A quantitative approach was adopted.

**Research Design:** The present study was descriptive research design.

**Setting:** Dakkilivaripalem village at Nellore.

**POPULATION:**

**Target population:** The target population includes all adults.

**Accessible population:** Adults 19 to 60 years who were residing in Dakkilivaripalem, Nellore.

**Sample:** The adults in Dakkilivaripalem, Nellore and who fulfill the inclusion criteria.

**Sampling Technique:** Non probability convenience sampling technique was adopted for this study.

**Sample Size:** The sample size selected for study includes 50 adults in Dakkilivaripalem, Nellore.

**Criteria for Sample Collection:**

**Inclusion criteria:**

- ❖ Adults who were living in Dakkilivaripalem.
- ❖ Adults who were willing to participate in the study.
- ❖ Adults who were available at the time of data collection.

**Exclusion criteria:**

- ❖ The adults those who were not interested.
- ❖ The adults who were not available at the time of data collection.

**Variables of the Study:**

**Independent variable:** Food Poisoning.

**Dependent variable:** Level of knowledge.

**Demographic variables:** Demographic variables include Age in years, Gender, Religion, Educational



qualification, Occupation, Marital status, Type of family, Family income and Source of information.

**Description of the Tool:**

**PART-A:** It deals with the socio demographic variables.

**PART-B:** A structured questionnaire, it consists of 28 questions.

**Score Interpretation:**

GRADE	MARKS	SCORE
A+	28	More than 85%
A	25-27	More than 75%
B+	20-24	More than 65%
B	16-19	More than 55%
C	14-15	More than 50%
D	<14	Less than 50%

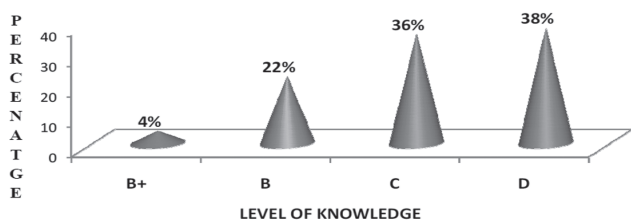
**Data collection procedure:** The data collection procedure will be carried in Dakkilivaripalem, Nellore. Structured questionnaire was used to collect the data. explain the procedure to the person and informed consent will be taken from them. The investigator assessed the person with structured questionnaire. It took 15 minutes for the assessment of knowledge on prevention of food poisoning among adult persons.

**Plan for data analysis:** Descriptive and Inferential statistics was used

**Results and Discussion:**

**Table-1: Frequency and percentage distribution of level of knowledge among adults. (n=50)**

Level of Knowledge	Fre (F)	Per(%)
B+	2	4
B	11	22
C	18	36
D	19	38
Total	50	100



**Fig no-1: Frequency and percentage distribution based on level of knowledge.**

**Table no-2: Frequency and percentage distribution of Mean and Standard deviation of knowledge.**

CATEGORIES	MEAN	S.D
Level of knowledge	11.82	3.62

**Table no-3: Association between level of knowledge and socio demographic variables among adults. (n=50)**

Demographic variables	B+		B		C		D		Chi Square
	F	%	F	%	F	%	F	%	
<b>Age in years</b>									
a)20-30 years	1	2	5	10	7	14	7	17	C=13.159
b)31-40 years	-	-	4	8	8	16	1	2	T=12.59
c)41-50 years	1	2	2	4	4	8	-	-	Df=6
									P<0.05
									S*
<b>Gender</b>									
a)Male	1	2	2	4	1	2	8	16	C=8.7049
b)Female	1	2	9	18	18	36	10	20	T=7.82
									Df=3
									P<0.05
									S*

**Discussion:**

- Regarding the level of knowledge among adults, 2(4%) had B+ grade, 11(22%) had B grade, 18(36%) had C grade, and 19 (38%) had D grade knowledge.
- The mean knowledge score of adults was 11.82 and standard deviation was 3.62.
- Regarding association between level of knowledge and demographic variables, age and gender had significant association at P<0.05 level.

**CONCLUSION:** It can be concluded that, majority of the adults, 19(38%) had low grade (D) knowledge on prevention of food poisoning. Hence the researcher felt that there is an immense need to implement an educational programme to adults on prevention of food poisoning.

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