

Knowledge, attitude, and self-reported practice related to healthy cooking among non-academic female staff of University of Jaffna

M.N.F. Azra¹, D.M.A.D. Bandara¹, M.R.M. Rifkhan¹, N. Srisaravanapavanathan², B. Kumarendran³

¹*Faculty of Medicine, University of Jaffna*

²*Teaching Hospital Jaffna*

³*Department of Community and Family Medicine, Faculty of Medicine, University of Jaffna*

Background and objective: Healthy cooking refers to cooking food without losing nutrients, using minimal amounts of sugar, salt, spice, and saturated fat, and also preventing formation of harmful substances during cooking. Healthy cooking may be a challenge for working women. We aimed to determine the factors associated with knowledge, attitude and self-reported practice related to healthy cooking among non-academic female staff of the University of Jaffna.

Methods: This descriptive cross-sectional study was conducted among all 427 eligible female non-academic staff in the Jaffna Campus of the University of Jaffna, from October to November 2019, using a self-administered questionnaire comprising sections for participant characteristics, knowledge, attitude, and self-reported practice in relation to healthy cooking. Descriptive and inferential statistics were computed using SPSS software.

Results: Response rate was 73.3% (313/427). Mean age of the participants was 32.4 (± 8.1) years. Of 313 participants, majority were Tamil (91.4%), Hindu (86.3%), married (52.7%), degree holders (55%). Knowledge items for which a smaller proportion scored correctly were “boiling of vegetable is better than steaming” (39.6%), “cutting vegetables into large pieces is not good for health” (30.4%) and “boiling vegetables using small amounts of water is better than over boiling them” (66.1%). The vast majority (93%, n=291) had gotten cooking knowledge from their families. Around a third (32.3%, n=101) indicated a preference for food prepared by frying. Nearly half reported washing vegetables after cutting (47.3%) and washing rice more than twice (47.3%) as routine practice. There was a statistically significant association between educational status and knowledge ($p=0.014$), and between age and attitude ($p=0.002$) and self-reported practice ($p=0.024$).

Conclusion: Knowledge and practice related to healthy cooking among female university staff needs improvement. Health promotion interventions to improve healthy cooking practices among staff should be implemented.

Keywords: Healthy Cooking, Knowledge, Self-Reported Practice, Attitude, University of Jaffna