

Chapter-5

ASSESSING THE KNOWLEDGE LEVEL OF ANGANWADI WORKERS ON GROWTH MONITORING AND COUNSELLING SERVICES UNDER INTEGRATED CHILD DEVELOPMENT SCHEME (ICDS) IN 5 BLOCKS AT VADODARA DISTRICT OF GUJARAT

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INTRODUCTION

The Anganwadi Worker (AWW) is a vital community-based volunteer worker in the Integrated Child Development Services (ICDS) program, playing a key role in delivering services to children and mothers. Selected from the community, The success of the ICDS scheme is heavily dependent on the qualifications, experience, skills, attitude, and training of the AWW, who maintains close and continuous contact with beneficiaries. In rural and Gramya areas, an Anganwadi serving a population of 1000, and in tribal areas, serving 700, acts as the central point for ICDS services. The part-time honorary AWW, supported by a local helper, undertakes diverse responsibilities encompassing planning, service delivery, information, education, and communication, as well as management and organization. [2].

Monitoring the growth of a child is a valuable tool for evaluating their development and detecting early signs of growth issues, allowing for timely interventions [1]. This practice plays a crucial role in promoting child health and nutrition, serving as an educational resource for mothers in terms of appropriate child feeding, responding to illnesses, and understanding various factors influencing a child's growth and development. With its unique and underutilized potential, growth monitoring aids health workers and parents in identifying early problems and implementing corrective measures [3]. The effective execution of growth monitoring is a significant responsibility of Anganwadi Workers (AWWs), emphasizing the need for adequate training. This study aims to evaluate the knowledge of AWWs in this regard and identify any knowledge gaps, contributing to improved planning and implementation of growth monitoring at the district level.

RESEARCH QUESTION

What was the existing degree of understanding among Anganwadi workers regarding the supervision of children's growth at Anganwadi centers and delivering counseling to beneficiaries in Vadodara district?

RESEARCH OBJECTIVES

To assess the current knowledge level of Anganwadi workers regarding the monitoring of children's growth at Anganwadi centers and providing counseling to beneficiaries.

SPECIFIC OBJECTIVES

1. To establish a standardized criterion for the knowledge level of anganwadi workers employed in the ICDS based on the ICDS mission document and existing literature reviews.
2. To identify the disparity between the expected knowledge level of an Anganwadi worker and their actual knowledge.
3. To propose measures for closing the knowledge gap.

RESEARCH METHODOLOGY

The study was conducted during March-April 2015 in the Wagodiya, Padra-1, Karjana, and Savli-1 blocks of Vadodara district, Gujarat, focusing on 120 randomly selected Anganwadi centers from each block. A total of 120 Anganwadi workers participated, with 30 from Wagodiya, 25 from Padra-1, 35 from Karjana, and 30 from Savli-1. The study employed a cross-sectional descriptive design, utilizing a face-to-face interview schedule as the primary data collection tool.

The interview schedule included questions related to the socio-economic and demographic profiles of Anganwadi workers and their knowledge of various Integrated Child Development Services (ICDS), particularly growth monitoring under Anganwadi Centers. The data, collected through both quantitative and qualitative methods, were analyzed using SPSS software and Microsoft Excel. Ethical considerations were prioritized, with informed consent obtained, and confidentiality assured to all participants during the data collection process.

RESULTS AND DISCUSSION

The daily functioning of the Anganwadi Centers is a vital indicator of the effectiveness of the Integrated Child Development

Services (ICDS) Programme. These centers offer various services under one roof, such as providing supplementary nutrition to children aged 6 months to 6 years, offering pre-school education to those between 3 to 6 years old, conducting health check-ups for children, adolescent girls, pregnant and lactating women, providing referral services, and delivering nutrition and health education.

A study was conducted to assess Anganwadi Workers' (AWWs) knowledge of these services and their proficiency in growth monitoring. The findings revealed that 100% of the interviewed AWWs were aware of the services provided at AWCs. However, regarding the weight gain by children per month, 67% lacked knowledge, and only 33% had acquired this information through training or visits by health professionals.

The study also explored AWWs' awareness of growth monitoring tools, including the use of Salter scales and electronic weighing machines. Additionally, it investigated their understanding of the WHO Growth Charts and alternative modes of growth monitoring, such as Mid-Upper Arm Circumference (MUAC) tapes. The results indicated varied levels of awareness and proficiency among AWWs in these aspects, emphasizing the need for targeted training and support to enhance their knowledge and effectiveness in implementing ICDS services, especially in the context of child growth monitoring.

CONCLUSION

In conclusion, the study reveals that 67% lack proper understanding of children's weight gain, and 75% are unfamiliar with the usage of electronic weighing machines, even after training. Regarding growth charts, 87% of AWWs comprehend their significance and the color codes' meanings.

Notably, 91% of Anganwadi workers are unfamiliar with the correct utilization of Mid-Upper Arm Circumference (MUAC) tape. These findings emphasize the need for targeted training interventions to enhance AWWs' knowledge and proficiency in specific areas, particularly child growth monitoring and the use of relevant tools.

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