



## Assessing Anganwadi Workers knowledge on HIV/ AIDS by Using case studies: An Innovative Approach

**Dr. Patil Reshma S**

Ass.Lecturer, Department of Community Medicine, Bharati Vidyapeeth Deemed University Medical College, Pune.

**Dr. Gothankar Jayashree S**

Asso.Professor, Department of Community Medicine, Bharati Vidyapeeth Deemed University Medical College, Pune.

**Dr. Vaidya Varsha**

Asso.Professor, Department of Community Medicine, Bharati Vidyapeeth Deemed University Medical College, Pune.

### ABSTRACT

*Anganwadi workers (AWW) are the key persons to inform the community regarding approach towards diseases like HIV/ AIDS, sound knowledge of the subject is therefore essential. To assess awareness of AWW regarding high risk behavior in HIV/AIDS, a cross-sectional study was done among 30 AWW from ICDS project-1, Pune. They were divided into four groups. Each group was assigned seven case studies and was asked to rank them according to risk of transmission. Group C ranked sequencing of given case studies correctly. The remaining three groups B, A, D were in the second, third and fourth positions respectively. Eight of the study group could answer it correctly meaning their level of knowledge related to HIV/AIDS is inadequate. Assessing AWW's knowledge on HIV/AIDS and high risk behavior using case studies was an innovative idea to assess their awareness. AWWs were found to have inadequate knowledge related to high risk behavior for HIV/AIDS, therefore training programme is recommended.*

**KEYWORDS:** Anganwadi workers, high risk behavior, Case studies

### Introduction

Over 40 million persons worldwide are currently living with HIV/AIDS and the AIDS pandemic presents a major global public health challenge.[1] India had an estimated 1.8-2.9 million HIV positive persons, with an estimated adult HIV prevalence of 0.36% and high risk groups inevitably show higher numbers. These groups are at a great risk of acquiring and transmitting HIV infection due to more frequent exposure because of higher levels of risky behavior.[2] The Indian epidemic continues with to be concentrated in population with high risk behavior characterized by unprotected sex, injecting drug use with shared injecting equipments.[3] In recent years it has been observed that HIV/AIDS spread has occurred from individuals practicing high risk behavior to the general population.[4] Therefore there is a need to identify these individuals.

Anganwadi workers (AWW) play a pivotal role in creating awareness in urban slums regarding behavior towards HIV/AIDS. Sound knowledge of the subject in Anganwadi workers is therefore essential.

Various approaches like lectures, film shows and street plays were utilized previously in training of Anganwadi workers however case study as a group activity for assessing Anganwadi workers knowledge on high risk behavior for HIV/AIDS is not used before.

### Materials and Methods:

Study design – Cross-sectional study

Study population – 30 Anganwadi workers from (ICDS project – 1), Pune, Maharashtra

### Methodology -

On the occasion of world AIDS day a programme was organized for Anganwadi workers at Urban Health Training Center of Bharati Vidyapeeth Deemed University Medical College, Pune. For the purpose of group activity Anganwadi workers (AWW) were randomly divided into four groups i.e. A, B, C, and D. consisting of Seven to eight AWW in each group. Details of group activity were explained to AWWs. Seven case studies in local language (Marathi) on high risk behavior related to HIV/AIDS were given to each participant (AWW) of every group. A group leader from each group was identified.

AWW were instructed to rank these case studies from higher to lower level of high risk behavior for HIV/AIDS. Time limit of 10 minutes was given for discussion within the group and to rank these case studies. At the end of 10 minutes group leaders were asked to present the ranking of high risk behavior decided by their group. This ranking was then compared with ranking given by experts from department of Medicine, Skin and Community Medicine.

At the end of session, feedback on case studies as a group activity was taken and detail discussion on correct answers were done with Anganwadi workers.

### Seven case studies given to Anganwadi workers are as follows :-

1. Chandrashekhar is married. He is homosexual and keeps relations with unknown persons. He is aware of AIDS and he knows about his chance of getting infected with AIDS but he is not interested in confirming the same for himself.
2. Rewati, wife of Chandrasekhar is not having any idea that her husband is homosexual. She is not having extra marital relationship. Since three years of married life this couple is using condom during intercourse.
3. Sharad and Pratima are married since 15 years and have 2 children. After second child Sharad underwent for vasectomy. Therefore they are not using any contraceptive devices. For job purpose Sharad regularly goes on long tours.
4. Pratima is Sharad's wife.
5. Preeti is Sharad's friend. She is having sexual relationship with Sharad as well as other clients.
6. Jasbeer, 18 years old had close relationship with his girl friend which has now ended as per his parent's advice. He once drank in a party and went for walk with his friends. These friends were intravenous drug abusers and Jasbeer was forced to experience the same. After such a bad experience Jasbeer decided to leave this company but now he is afraid of getting HIV/AIDS.
7. Dolly is a commercial sex worker. She heard of HIV/AIDS 2 years back and thought of leaving this job. But for earning livelihood she continued with the same. However she never keeps any relationship with a person who refuses to use condom.

### Results:

**Table-1 Ranking of case studies**

Case studies (Sr.No.)	Expert's ranking	Grp A(8)	Grp B(7)	Grp C(8)	Grp D(7)
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1	1	6	1	1	1
2	5	1	3	5	7
3	6	5	4	6	3
4	7	3	2	7	6
5	3	4	6	3	5
6	2	2	5	2	2
7	4	7	7	4	4
Ranking of group		Third	Second	First	Fourth

1. Group C ranked first in sequencing of given case studies correctly.
2. In remaining three groups B, A, D were in the second, third and forth position of ranking respectively.
3. Out of total 30 Anganwadi workers only one group (8 AWW) could rank case studies correctly from higher to lower level of high risk behavior for spreading HIV/AIDS. Thus indicating inadequate knowledge related to high risk behavior for HIV/AIDS amongst Anganwadi workers.

### Discussion

Addressing issues of empowerment of high risk groups is a successful strategy for obtaining their adherence to safe sex behavior.[2] AWWs are increasingly involved in health care activities owing to their acceptability in urban slums. Further they are engaged in activities which demands frequent community contacts, therefore are able to identify particular individuals and groups in the community easily. So these workers can be utilized as key in-

formants in identifying suspected persons with high risk behavior and prevent further spread of the disease. Present study revealed AWWs were having an inadequate knowledge regarding high risk behavior for HIV/AIDS. Garg PN et al observed very poor knowledge of HIV/AIDS in health agents and their training requires to be improved. [5]

### Conclusion

Anganwadi workers were having inadequate knowledge related to high risk behavior for spreading HIV/AIDS, therefore training programme to improve the skills is recommended. Assessing knowledge on HIV/AIDS pertaining to high risk behavior using case studies was found very effective. Oral feedback session revealed that this method helped AWW to increase their knowledge on HIV/AIDS. Group activity helped the AWWs in discussing and coming to probable correct conclusion.

It was an innovative idea as perceived by AWWs for testing their awareness with active participation of everyone and total freedom for expressing their views.

### Recommendation

Such participatory training programmes may become more effective rather than routine mass trainings taken for Anganwadi workers, therefore it is recommended that regular innovative education programmes should be organized for AWWs.

## REFERENCES

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