



## Utilization of anganwadi services for children under five years and awareness of mothers regarding anganwadi services- A cross sectional survey

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### ABSTRACT

*The purpose of the study was to determine the rate of utilisation of anganwadi services for under-five children, and maternal awareness regarding the services in selected wards of Kallara Village, Thiruvananthapuram district. The design selected for the present study was descriptive study design. 322 subjects (under-five children and their mothers) were selected using cluster sampling technique. The tools used for the data collection were structured questionnaire to assess socio- personal data, awareness of mothers regarding Anganwadi services and utilization of Anganwadi services. Data was collected by house to house survey using structured questionnaire in the year 2014. The study concluded that only fifty nine percentage of mothers were sending their under-five children to Anganwadis and utilizing the services regularly and most of the mothers (60.9%) had average knowledge regarding Anganwadi services. There was significant association between the utilization rate and variables like maternal awareness ( $p < 0.01$ ) and family income ( $p < 0.05$ ). Accurate information and motivation from health personnel may help to improve the awareness and utilization of ICDS services.*

**KEYWORDS :** Utilization, anganwadi services, under-five children.

### Introduction

The Central Government dedicate to the nation a unique programme for children of India on the birthday of Mahatma Gandhi. The Integrated Child Development Services (ICDS) was started on 2<sup>nd</sup> October, 1975. ICDS is one of the solid foundations for the development of nation's human resources by providing an integrated package for women and young children. One anganwadi is established for every 1000 population. As per Census of India 2011, there are 158.86 million children below six years of age, and many of them have inadequate access to health care, nutrition, sanitation, child care, early stimulation, etc. Even though, the ICDS programme is available in most of the villages the services are not properly utilized by beneficiaries.

According to the planning commission evaluation report on ICDS 2011, poor location and physical set up of AWs, unhygienic environment; non availability of equipment and other basic amenities like electricity and water, shortage of storage space; wastage and misuse of material, failure to maintain accounts and absence of staff, etc., are some of the factors which hamper smooth implementation of ICDS.

According to National Family Health Survey-3 (NFHS), utilization of Integrated Child Development Services (ICDS) was inadequate. Some observable points were, only 33% of children fewer than 6 years received any kind of services from an Anganwadi center.

### Review of literature

Preethi J et al (2011) conducted a descriptive study to identify the knowledge and utilization of ICDS services in Udupi District (Karnataka). Mothers having underfive children revealed that, 71.1% were utilizing supplementary nutrition, 58.3% were utilizing health checkup, 69.3% were utilizing non-formal preschool education, 26.7% full, 50.5% partial utilization of immunization services and 46.7% of mothers had poor knowledge regarding ICDS services. The main reason for not utilizing ICDS services were due to household work (43%), distance from Anganwadi (40%) and due to lack of awareness (13%).

Nirmal G et al (2013) conducted a descriptive study to assess the awareness and utilization of ICDS services among mothers of under-five children in a selected rural community of Trissur district. Findings of the study showed that there was a significant association of awareness about ICDS services among mothers of under six children with selected variables like education of mother, occupation of mother, monthly income of the family, socioeconomic status of the family and registration of the child at the Anganwadi center as the 'p' value of chi square test was  $< 0.05$ .

### Objectives

- To estimate the utilization of Anganwadi services among under five children.
- To determine the awareness of mothers regarding Anganwadi services.
- To determine the association between utilization of Anganwadi services and maternal awareness.
- To determine the association between utilization of Anganwadi services and selected sociopersonal variables

### Research methodology

Research approach: quantitative

Design: Descriptive design

Setting: Selected wards of Kallara Village, Thiruvananthapuram

Population: Underfive children and their mothers

Sample: 322 under five children and their mothers residing in selected wards of Kallara Village.

Sampling Technique: Cluster sampling technique (Selected wards of Kallara Panchayat).

### Inclusion criteria

Mothers of children with 6 months – 5 years who were willing to participate in the study and available during data collection.

Mothers who were able to comprehend and communicate in Malayalam & English.

### Tools and technique:

Tools: Structured questionnaire to assess the rate of utilization of ICDS service and awareness of mothers.

Technique: Structured interview schedule

Validity and reliability: The tools were validated by seven experts. The internal consistency of the structured questionnaire was assessed by using Kuder Richardson formula. Simple Pearson correlation formula was used to calculate the reliability and was found to be 0.82.

**Ethical consideration:** Ethical Clearance was obtained from the ethical committee of Sree Gokulam Medical College and Research Foundation. Informed consent was taken from study participants.

### Data collection procedure:

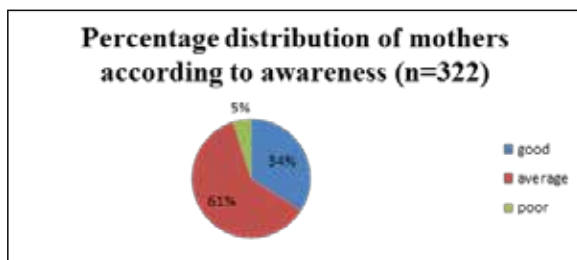
Lists of wards were collected from panchayat office. Sampling frame was prepared and three wards were randomly selected by lottery method. The researcher collected the data from all the mothers of the selected wards with 6 months to five year old children and who met the inclusion criteria by house to house visit using interview technique. Informed consent was obtained from mothers.

**Results:**

**Table 1: Distribution of the utilization of various Anganwadi services for under-five children**

Utilization of Anagnwadi services	Frequency	Percentage
Supplementary feeding (n = 322)	211	65.0%
Immunization (n = 322)	158	49%
Health education (n = 322)	108	33.0%
Health checkup (n = 322)	104	32.2%
Growth monitoring (n = 322)	177	54.9%
Pre primary education (3years to 5years n = 179)	106	59.2%

Table shows that majority of mothers (65 %) were utilizing supplementary feeding provided through anganwadis but only 33% of mothers were utilizing health education and only 32.2% were utilizing health check up services. Only fifty nine percentages of mothers with children aged 3- 5 years were sending their children to Anganwadis for non formal pre primary education.



**Figure 1: Distribution of mothers based on awareness regarding anganwadi services**

Figure shows that majority of mothers (61%) had average awareness regarding Anganwadi services, 34 % of mothers had good awareness and only 5 % mothers had poor awareness regarding Anganwadi services.

**Table 2: Association between utilization of anganwadi services and selected variables**

Association	Chi square value	df	P value
Utilization of anganwadi services and maternal awareness	9.4	2	0.01**
Utilization of anganwadi services and family income	6.8	2.	0.05*

There was significant association between utilization of anganwadi services and selected variables like maternal awareness (p<0.01) and family income (p<0.05). Utilization of services was significantly higher among mothers with good awareness.

**Discussion**

According to the present study majority of the mothers (65%) were utilizing the supplementary feeding, 54.9 % of mothers were utilizing the growth monitoring services 59.2% of mothers were utilizing services for pre-primary education.

Results were consistent with the results of the study conducted by Preethi J et al (2011) on knowledge and utilization of ICDS services in Udupi District (Karnataka). Seventy one percentages of mothers were utilizing supplementary nutrition, and 69.3% were utilizing non-formal preschool education.

In the Present study majority mothers (61%) had average awareness regarding anganwadi services, 34% of mothers had good awareness and only 5 % mothers had poor awareness regarding Anganwadi services. There was significant association between utilization of services provided by anganwadis and maternal awareness (p< 0.01\*\*)

The findings were consistent with the study conducted by Nirmal G et al (2012) on awareness and utilization of ICDS services among mothers of under six children, which showed that 60.5% of mothers had average knowledge, 25.5% of mothers had good knowledge and 14% had poor knowledge regarding ICDS services and there was significant association between awareness of mothers about ICDS services and utilization of ICDS services by their children in the age group of 3- 6 years (p< 0.05\*).

**Conclusion:**

Children comprise one third of the total population in the country. ICDS is the one of the largest child development programme in the India. Study concludes that majority of the mothers of under five children had only average level of awareness regarding ICDS services. The utilization rate of the Anganwadi services for pre-primary education was average (59%). The utilization of health education and health check-up services was very low (33 % and 32.2 % respectively). Accurate information and motivation from health personnel may help to improve the awareness and utilization of ICDS services.

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