

Parental satisfaction and utilization of services provided by Anganwadis for children under five years - A descriptive study



Medical Science

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

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ABSTRACT

The purpose of the study was to determine the parental satisfaction and utilization of services provided by Anganwadis for under five children. The study was done based on Anderson model of health care utilization. The design selected for the study was descriptive study design. Three hundred subjects were selected from the selected wards of Kallara panchayath, Thiruvananthapuram district using cluster sampling technique. The tools used for the data collection were structured questionnaire to assess socio- personal data, utilization of Anganwadi services and a three point rating scale known as maternal satisfaction scale to assess the satisfaction of mothers regarding Anganwadi services. The findings revealed that fifty nine percentage of mothers were utilizing Anganwadi services for pre-primary education. Majority of the mothers (69.2%) had good satisfaction regarding most of the Anganwadi services. There was significant association between maternal satisfaction scores and selected Sociopersonal variables like birth order of the child and number of children ($P < 0.01$). From the study it is clear that majority of the services provided were with high quality ie; 69.2% of mothers expressed good satisfaction. Only health education and health checkup facilities should be strengthened.

Introduction

ICDS is one of the solid foundations for the development of nation's human resource by providing an integrated package for women and young children. One Anganwadi is established for every 1000 population, in most of the villages their services are not provided effectively, and utilization by the public is also very limited. Even though, the ICDS programme is available, the services are not properly utilized by beneficiaries. 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.

The Government of India is committed to child development as a policy priority and is steadily expanding ICDS programme with the ultimate aim of reaching every child under the age of 6 years before the turn of the century. The impact on the lives of children is evident in several crucial indicators increased birth weight, reduced incidence of malnutrition, increased immunization coverage, and reduced infant and child mortality rate in area covered by the ICDS scheme, to lay the foundation for proper psychological, physical and social development of the child and school dropout, to achieve effective co-ordination of policy and implementation amongst the various departments to promote child development; and to enhance the capability of the mother to look after the normal health and nutritional needs of the child through proper nutrition and health education.

Review of literature

As per Census of India 2011 there are 158.8 million children below 6 years of age and many of them have inadequate access to health care, nutrition, primary education, sanitation, child care, early stimulation, etc. The census reveals that the child population in the age group of 0 - 6 years in Kerala is 3,322,247, which constitutes 9.95% of Kerala's total population.

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 under 6 years received any kind of services from an Anganwadi center (AWC). In areas covered by AWC almost three fourth of children under 6 years (74%) did not receive any supplementary food from AWC in last 12 months and only 12% received supplementary food almost every day. Most pregnant and lactating mother do not use AWC services during pregnancy or while breast feeding.

Preethi J et al (2011) conducted a descriptive study to identify the knowledge and utilization of ICDS services in Udupi District (Karnataka). Out of 225 women, among pregnant women 74.1% utilizing supplementary nutrition and 7.4% utilizing immunization. Among lactating mothers 76.2% utilizing supplementary nutrition, 4.8% utilizing health education.

Madhavi H et al (2009) conducted a study on utilization of Integrated Child Development Services (ICDS) scheme and beneficiaries-satisfaction in rural area of Gulbarga district. It showed that only 44.92% of the guardians of 0-5 year children were satisfied with the services provided by Anganwadis.

Prabhakar V et al (2014) conducted a cross sectional study on client satisfaction of Anganwadi centres under ICDS scheme in a slum of Kolkatta. Results showed that majority (63%) had average satisfaction, 36.6% had poor satisfaction and only 1.4 % of parents had good satisfaction with Anganwadi services. 58% of mothers revealed that most of the Anganwadi workers were harsh with them and their child.

Objectives of the study

- To estimate the utilization of Anganwadi services among under five children.
- To determine the parental satisfaction related to Anganwadi services.
- To determine the association between utilization of Anganwadi services and selected socio personal variables
- To determine the association between parental satisfaction and selected socio personal variables

Research methodology

Research approach: quantitative
Design: Descriptive design

Setting: Selected wards of Kallara Village, Thiruvananthapuram (ward 1 and 17).

Population: Underfive children and their mothers

Sample: 300 under five children and their mothers residing in selected wards of Kallara Village.

Sampling Technique: Cluster sampling technique (ward 1 and 17).

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:

1. Self administered Structured questionnaire to assess the rate of utilization of ICDS service .
2. A three point rating scale called maternal satisfaction scale was used to determine the satisfaction of mothers regarding anganwadi services.

Validity and reliability: The tools were validated by nine experts. The internal consistency of the structured questionnaire was assessed by using Kuder Richardson formula. Reliability of parental satisfaction scale was ensured by test rest method. Simple Pearson correlation formula was used to calculate the reliability and was found to be 0.81.

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 two 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.

Results

Table 1: Frequency and percentage distribution of utilization of various Anganwadi services for underfive children

Utilization of Anganwadi services	Frequency	Percentage
Health mixture (n = 300)	205	68.33%
Immunization (n = 300)	147	49%
Health education (n = 300)	108	36%
Health checkup (n = 300)	108	36%
Growth monitoring (n = 300)	228	76%
Pre primary education (n = 200)	118	59%

Table 1 shows that majority of the mothers (76%) were utilizing the growth monitoring services and only 59% were utilizing preprimary education facility for their underfive children.

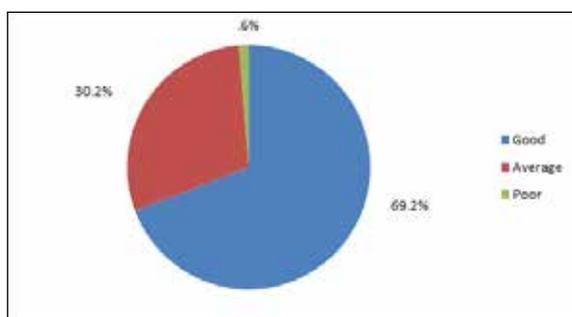


Figure 1: Distribution of parental satisfaction regarding Anganwadi services (n= 118)

Figure 1, shows that 69.2% mothers had good satisfaction regarding the various Anganwadi services.

Table 2: Association between utilization of anganwadi services and selected socio personal variables(n= 300)

Association	Chi square value	df	P value
Income	12.7	2	0.01**
Birth order of child	9.1	2	0.05*

The data presented in the table reveals that there was a significant association between utilization of Anganwadi services and socio- personal variables like income (when economic status increased utilization rate decreased) and birth order of child (when the birth order of child increased utilization also increased).

Table 3: Association between parental satisfaction and selected sociopersonal variables (n= 118)

Association	Chi square value	df	P value
Number of children	20.5	6	0.05*
Birth order of child	9.1	2	0.001***

The data presented in the table reveals that there was a significant association between parental satisfaction and socio- personal variables like number of children (parents with 2 children had high rate of satisfaction) and birth order .

Discussion:

According to the present study majority of the mothers (76%) were utilizing growth monitoring services, 68.33% of mothers were utilizing the health mixture provided through anganwadis, 59% of mothers were utilizing services for preprimary education. Immunization services were utilized by 49% of mothers and 36% of mothers were utilizing health education and health checkup services.

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 percentage of mothers were utilizing supplementary nutrition, 58.3% of mothers were utilizing health checkup and 69.3% were utilizing non-formal preschool education

According to the present study majority of the parents (69.2 %) had good satisfaction, 29.5% parents had average satisfaction and only 1.3% of parents had poor satisfaction regarding Anganwadi services

The findings of the study done by Prabhakar V et al (2014) on client satisfaction of Anganwadi centres under ICDS scheme in a slum of Kolkatta were contradictory to the present study findings. Results showed that majority of the mothers (63%) had average satisfaction of Anganwadi centres, 36.6% had poor satisfaction and only 1.4 % of parents had good satisfaction of Anganwadi centres. The better parental satisfaction in Kerala may be due to the high quality of services provided through the Anganwadis in the state.

There is a significant association between the utilization of Anganwadi services and selected socio- personal variables like income and birth order of the child (p < 0.01). These findings were supported by the results of the study conducted by Ghosh S et al (2011) on factors influencing the utilization of ICDS services among three year to five year. The findings showed that there was a significant association of utilization of services and socio economic status of the family.

Conclusion :

ICDS is the one of the largest child development programme in India. Study concludes that majority of the mothers (76%) were utilizing the growth monitoring services but only 59% were uti-

lizing preprimary education facility for their underfive children. Sixty nine percentage of mothers had good satisfaction regarding the services. So the public should be informed more about the high quality free services provided through Anganwadis for their underfive children. Motivation from health personnel may help to improve the awareness and utilization of ICDS services.

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