



ORIGINAL RESEARCH PAPER

Community Medicine

KNOWLEDGE OF ANGANWADI WORKERS REGARDING BREAST FEEDING PRACTICES IN A RURAL AREA- A CROSS-SECTIONAL STUDY

KEY WORDS:

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BACKGROUND

As a global public health recommendation, infants should be exclusively breastfed for the first six months of life to achieve optimal growth, development and health. Thereafter, to meet their evolving nutritional needs, infants should receive safe and nutritionally adequate complementary foods while breastfeeding continues for up to two years of age or beyond. BF as major factor in child survival, growth and development. Benefits of breastfeeding for the mother, baby and Economic benefits. Anganwadi Worker (AWW) is one of the important frontline worker and responsible for IYCF (BF) activities in her area. Need to give regular training and do assessment of knowledge for BF

hours.

- 1 (0.81%) didn't know, 16 (13.01%) partially known and 106 (86.18%) well known to the concept - longest duration to continue BF
- 21 (17.07%) had inadequately and 102(82.93%) good knowledge about 4 points of good attachment by baby during Breastfeeding
- 40 (32.52%) participants partial knowledge and 83 (67.48%) good knowledge about 4 points of baby's good position during Breastfeeding
- 3 (2.43%) didn't know, 33 (26.82%) partially known and 87 (70.73%) well known to the concept 4 points of mother's position during BF.

OBJECTIVES

1. To study the knowledge of Anganwadi Workers regarding Breast feeding practices.
2. To suggest suitable recommendations

MATERIALS/METHODS

Community based cross sectional study.
 Rural area of a Taluka in Latur District.
 Study Period-Ten months
 Study Population- Anganwadi workers in rural area of a Taluka in Latur District
 Sample Size- 123 AWWs
 Sampling method – multistage random sampling method
 A self administered pretested and semi structured Questionnaire to get data

Inclusion Criteria

Anganwadi Worker, who gave voluntary consent

Exclusion Criteria

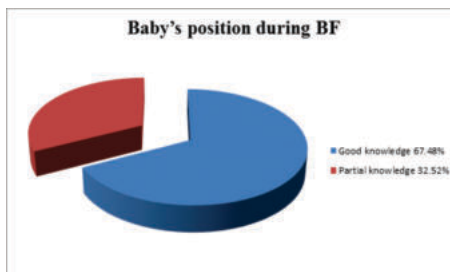
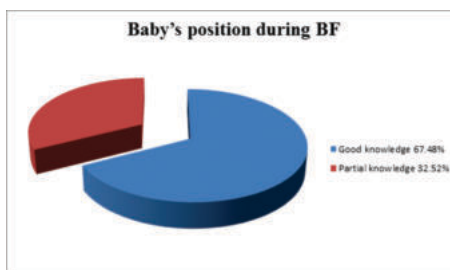
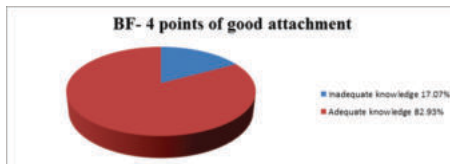
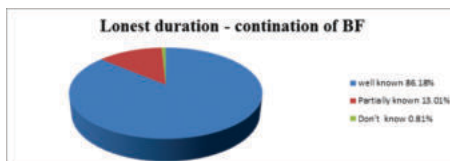
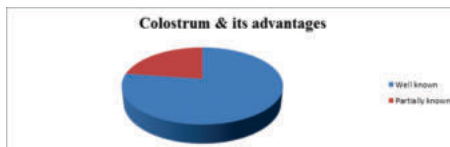
Anganwadi Workers, who had taken leave

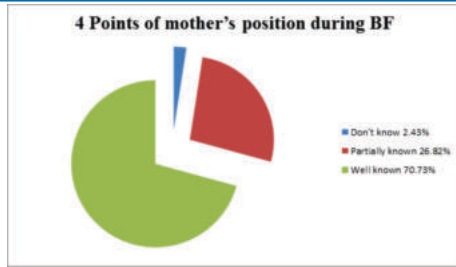
Analysis: Proportions and frequencies have been computed. Microsoft excel 2007 has been used for generating charts.

Results

To take overall knowledge of BF,115 (93.49%) participants answered that training is the best method. 8(6.51%) AWWs thought that TV/Newspaper etc is the best method.

- 6 (4.88%) participant had inadequate knowledge while 117 (95.12%) had adequate knowledge regarding initiation of breast feeding after normal delivery.
- 16 (13.01%) had inadequate knowledge while 107(86.4%) had adequate knowledge about initiation of breast feeding after LSCS
- 22(17.88%) had inadequate knowledge and 101(82.11%) had adequate knowledge regarding Exclusive BF Definition
- 28 (22.76%) participants partially known and 95(77.23%) well known about Colostrum & its advantages
- 24(19.51%) participants partially known and 99(80.49%) well known about advantages of BF to baby and mother
- 1 (0.81%) had inadequate knowledge and 122 (99.19%) had adequate knowledge about the Frequency of BF in 24





CONCLUSION

AWWs had good knowledge regarding various BF assessment indicators given by WHO but some technical knowledge need to improve in areas like mothers position and baby's position during BF, how to give correct advice to mother bottle feeding. Regular trainings to update knowledge is needed.

REFERENCES -

1. Programme Guide Infant & Young Child Feeding:2011 http://www.unicef.org/nutrition/final_iycf_prog:guide2011-pdf.
2. WHO/UNICEF. Acceptable medical reasons for use of breast-milk substitutes.2008. <http://www.unicef.org/nutrition>
3. Park K. Textbook of Preventive & Social Medicine. 26th Edition: M/s.Banarsidas Bhanot Publishers;2021.p724-735
4. A Strategic Approach to Reproductive, Maternal, Newborn, Child and Adolescent Health(RMNCH+A) in India, and Newborn Action Plan Ministry of Health & Family Welfare Government of India. <http://www.mohfw.nic.in>
5. Gangal p. Basic Training Module Of Breast Feeding And Complimentary Feeding:2005 pages 5-45.
6. Integrated Management Of Neonatal And Childhood Illness, Training Module For Medical Officer. Treat The Young Child And Counsel The Mother: 2005; 4 page no.20-42.
7. Andey UVVK, Budimelli S, Chebrolu K, Swamy CG, Naresh J, Babu RS. Knowledge and socio-demographic Profile of Anganwadi workers in Mangalagiri rural Integrated Child Development Services project, Guntur. Int J Community Med Public Health 2019;6:3460-5.