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KNOWLEDGE AND ATTITUDES OF ANGANWADI WORKERS ABOUT BREAST FEEDING IN THE FIELD PRACTICE AREA OF TERTIARY CARE HOSPITAL, HYDERABAD

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INTRODUCTION

Breast milk is the ideal food for the infant under any circumstances. No other food is required by the baby until 6 months of life. A child who is breast feed has a greater chance of survival than a artificially fed.¹ Exclusive breast feeding gives a nutritional advantage to the babies during first few months of life.² It can cut down about 15% of all child death. In India only 41% of women are able to practice exclusive breast feeding upto 6 months.³ Breast feeding practice varies among different areas and population. In India, breast feeding in rural areas appears to be shaped by the beliefs of a community.⁴ These practices are further influenced

ABSTRACT

Background: Breast feeding is one of the most important determinants of child survival, birth spacing and prevention of childhood infections. It is important for the Anganwadi workers to have adequate scientific knowledge about breast feeding practices. . Hence this study was conducted to assess the knowledge and attitude of AWW with regards to breast feeding practices.

Methodology: A facility based cross sectional study was conducted covering all 68 ICDS centers. A pretested semi-structured questioner was given to all AWWs. All questions were read out and explained by the author and all queries were clarified.

Results: only 70 % AWW believed that breast feeding should be given on demand and 75 % AWWs believed that bottle is better than katori & spoon for infant feeding. 40% said breastfeeding should be stopped if mother is sick. Most of AWW (98%) believed that almonds and dry fruits increase breast milk secretion.

Conclusion: Present research draws very important conclusions that although knowledge of AWW regarding initiation of breast feeding is high but their knowledge regarding prelecteal feeds, feeding on demand, bottle feeding and breast feeding during sickness needs further improvement.

Keywords: Anganwadi worker, ICDS center, breast feeding, prelecteal feeding

> by social, cultural and economic factors. In rural areas, auxillary nurse midwives, anganawadi workers, health workers, traditional and trained birth attendants also influence the breast feeding practices. National guideline on infant and young child feeding (IYCF) recommends that infant should exclusively breast feed for six months of life and there after adequate and safe complementary food should be provided upto two years of life.⁵ Strategies for promotion of exclusive and immediate breast feeding and introduction of appropriate complementary feeding is an important strategy and can be implemented by partnership with ICDS. It is one of the duties of AWW to enhance the capability of mother to look after the health

and nutritional need of the child through proper nutrition and health education. Hence this study was conducted to assess the knowledge and attitude of AWW regarding breast feeding.

MATHODOLOGY

A facility based cross sectional study was conducted from October 2015 to November 2015 covering all 80 ICDS centers of field practice area of Deccan College of Medical Sciences. Study was approved by ethical committee of the institute and necessary approval was taken from ICDS department. The project had 80 AWWs of which 68 participated in the study. The remaining 12 did not give consent hence not included in the study. AWWs were interviewed after obtaining informed consent by personally visiting ICDS centers (Anganwadi). The AWWs were briefed about the objectives of the study. A pretested semi-structured questioner was given to all AWWs. All questions were read out and explained by the author and all queries were clarified. Efforts were made to minimize consultation amongst the AWWs. Data was entered in MS excel and analyzed using SPSS (version 16).

RESULTS

In the present study 97.1% AWWs had the correct knowledge that breast feeding should be started immediately after birth, 100% said colostrum should be given and 94 % said breast milk is best food upto 6 months of age, but only 70 % believed that breast feeding should be given on demand and another 30% believed it should be given every 2 hours. 75 % AWWs believed that bottle is better than katori & spoon for infant feeding. **(table 1)**.

Table 1: Knowledge and Attitudes about breastfeeding and weaning (n=68)

Belief	Desired Response	Correct response	Incorrect response
Breast Milk is best food up to 6 months of age	Yes	64 (94.2)	04 (5.8)
Breast feeding should be started immediately after birth	Yes	66 (97.1)	02 (2.9)
Colostrum should be given to the child	Yes	68 (100)	0
Commercial milk preparations are more nutritious than breast milk	No	66 (97.1)	02 (2.9)
Frequency of breast feeding			
On demand	Yes	48 (70.5)	20 (29.5)
Every 2 hours	No	20 (29.5)	48 (70.5)
Weaning should be started from 6 months	Yes	63 (92.7)	05 (7.3)
Antibodies/ protective substances are present in breast milk	Yes	68 (100)	0
Breastfeeding should be continued as long as possible(TILL 2YRS)	Yes	65 (95.6)	03 (4.4)
If mother fails to lactate, the best substitute is cow's milk	Yes	66 (97.1)	02 (2.9)
Bottle is better than katori & spoon	No	17 (25)	51 (75)

Table 2: Breast feeding and social considerations (n=68)

Belief	Desired Response	Correct Response	Incorrect Response
Bottle feeding is more healthy for the mother	No	63 (92.7)	05 (7.3)
Breastfeeding is an embarrassing activity outside the house	No	37 (54.5)	31 (45.5)
Pre-lacteal feed should be given to child before giving breastfeeding	No	60 (88.3)	08 (11.7)
Prolonged breastfeeding disfigures the breast	No	64 (94.2)	04 (5.8)

Table 3: Belief about breastfeeding during diseases (n=68)

Belief	Desired Response	Correct Response	Incorrect Response
Solely breastfed infants are less susceptible to diarrhea than	Yes	67 (98.6)	01 (1.4)
bottle fed infants			
Unhygeienic bottle feeds are a major cause of diarrhea	Yes	64 (94.2)	04 (5.8)
During diarrhea breastfeeding should be stopped	No	64 (94.2)	04 (5.8)
Breastfeeding should not be stopped even if mother is sick	Yes	41 (60.3)	27 (39.7)

Table 4: General beliefs about breastfeeding (n=68)

Belief	Desired answer	Correct Response	Incorrect Response
There is no significant difference in quality of milk of healthy and	Yes	39 (57.4)	29 (42.6)
malnourished mothers			
Size of breast determines quantity of breast milk secretion	No	63 (92.7)	05 (7.3)
Bottle feeding should be avoided.	Yes	42 (61.8)	26 (38.2)
Almonds and other dry fruits increase breast milk secretion	No	01 (1.4)	67 (98.6)
Lactating mother should consult a doctor before taking medicines as	Yes	66 (97.1)	02 (2.9)
their secretion in milk may harm child			
Mother should be breastfeed low birth weight child more frequently	Yes	64 (94.2)	04 (5.8)
Child should be burped after every feed, to avoid regurgitation	Yes	66 (97.1)	02 (2.9)
Mother and child bond is better with breastfeeding	Yes	68 (100)	0
Breastfeeding is beneficial for health of mother	Yes	66 (97.1)	02 (2.9)

Regarding social consideration about breast feeding 11% AWW said prelacteal feed should be given before breast milk. About 45% AWWs felt breast feeding is embarrassing activity outside house and 6% believed prolong breast feeding disfigure the breast. (table 2). When assessing the knowledge about breast feeding during illness, majority of AWWs had correct knowledge that breastfeeding should not be stopped during diarrhea but 40% said breastfeeding should be stopped if mother is sick.(table 3). In present study only 57% agreed that there is no significant difference in quality of milk of healthy and malnourished mothers. Most of AWW (98%) believed that almonds and dry fruits increase breast milk secretion. Only 61% of the AWWs had correct knowledge that bottle feeding should be avoided totally (Table 4).

DISCUSSION

Anganwadi workers (AWW) are the first level health care workers responsible for promotion of maternity and child health care. The knowledge, attitude and practice of AWW determine the effectiveness of maternal and child health programmes in community. Earlier studies have reported that trained and motivated health workers favourably influence breast feeding practices in the community. 6,7 In the present study 97% AWWs had the correct knowledge that breast feeding should be started immediately after birth, 100% said colostrum should be given and 94 % said breast milk is best food upto 6 months of age. Similar findings have been reported in Kapil U(1995) study⁸, T Amar(2009) study⁹ and Sondankar PD (2015) study¹⁰ while D. chattopadhaya (2004)¹¹ reported that only 17% AWW knew the age of exclusive breast feeding. The encouraging findings in the present study about the breastfeeding may be due to increase emphasis on the importance of subject of breastfeeding during preplacement training and possibly because of repeated health education messages on this topic through mass media. In present study it is found that 70 % AWW believe that breast feeding should be given on demand and another 30% believe it should be given every 2 hours. 75 % AWWs believed that bottle is better than katori & spoon for infant feeding. In a study by T Amar it is found that only 66% Anganwadi Supervisors knew that breast feeding should be given on demand.9 A study at Jabalpur by Hernagal found that 44% of lactating mothers follows the fix timing for breast feeding.¹²

Regarding social consideration about breast feeding 11% AWW said prelacteal feed should be given before breast milk. In a study by T Amar it is found that 6% of AWW believed that prelacteal feed should be given and 55% AWW had knowledge that gripe water, ghutti and honey were harmful to baby.9 When assessing the knowledge about breast feeding during illness, majority of AWWs had correct knowledge that breastfeeding should not be stopped during diarrhea but only 40% said breastfeeding should be stopped if mother is sick and 43% believed that there is significant difference in quality of milk of healthy and malnourished mothers. In a study done in Gujarat by Purvi P it is found that only 6% AWWs advised continuing breast feeding in sickness.13 The continuation of breastfeeding during sickness has been documented by other workers.14-16 This could be because of tradition and customary belief regarding quality of milk of sick mother. These findings suggest the need of educating the functionaries on the continuation of breastfeeding during diseases. Most of AWW (98%) believed that almonds and dry fruits increase breast milk secretion. Similar findings have been reported by other workers.14,15,17 In a study by Kapil U it was found that majority of CDPO had knowledge that dry fruits, milk and desi ghee increase the breast milk secretion.¹⁸ These foods are considered galactogogues although there is no scientific rationale behind it. Dry fruits are not only expensive but also beyond the reach of poor and middle class mothers. There is a need of developing appropriate messages about this aspect of breastfeeding. In the present study, only 61.8% of the AWWs had correct knowledge that bottle feeding should be totally avoided. The bottle feeding rate was reported 49% among infants in a study by Banapurnath.¹⁹. This has emerged as a very discouraging aspect. It may be due to knowledge gained by the AWWs from the peer group or by observing the rearing practices adopted by the other working mothers in their localities.

CONCLUSION

Breast feeding promotion is a significant child survival strategy. Intervention to improve early and correct infant feeding practice can result in considerable reduction in neonatal morbidity and mortality. Present research draws very important conclusions that although knowledge of AWW regarding initiation of breast feeding is high but their knowledge regarding prelecteal feeds, feeding on demand, bottle feeding and breast feeding during sickness needs further improvement. As correct breast feeding as well as complimentary feeding is important to prevent malnutrition and childhood illness, and AWW is key person who will promote the good practice in her area, hence they should be equipped with knowledge by regular training by professional. Supervisors should provide continuous on job guidance to AWW, to bridge the gap between training and job requirement.

REFERENCES

- K Park. Park's Textbook of preventive and Social Medicine, 22nd edition. Jabalpur: Banarsidas Bhanot publishers; 2015. pg 495.
- OP Ghani. Essentia Pediatrics,4th edition. New Delhi: Interprint; 1996. Pg 45.
- 3. J Kishor. J kishoer's National Health programs of India,11th edition. New Delhi : century Publications; 2014. Pg 175.
- Iskandar MB, Costello C, Nasution Y. Initiation and Duration of breast feeding in Indonesia. Asia pac popul J. 1990;5:89-112.
- Govt. of India, Dept. of Women and Child Development, Ministry of Human Resource Development. National guideline on infant and Young Child feeling. New Delhi India: Govt. of India; 2004. Pg 10. Available at http://wcd.nic.in/fnb/fnb/guidelines/nationalguidelines. pdf Accessed on August 10th, 2015.
- Maheswari RK, Gupta BD, Arora AK, et al. knowledge and attitude towards infant feeding among rural health personnel. Indian J Pediatr. 1987;54: 930-4.
- 7. Pal S. Changing trends in breast feeding. Indian pediatr. 1984; 21:179-82.
- Sanjay Kumar Bhasin, Rakesh Kumar, Saudan Singh, et al. Knowledge and Attitudes of Anganwadi Workers About Infant Feeding in Delhi. Indian paediatrics. March 1995;32:346-50.
- 9. Amar Taksande, Satish Tiwari, Alka Kuthe. knowledge and attitudes of Anganwadi supervisor workers about infant feeding in Gondia district. Indian J Community Med. 2009 Jul;34(3):249-51.

- 10. Sondankar PD, Kotnis SD, Kumavat AP. Profile of Anganwadi workers and their knowledge regarding maternal and child health services in an urban area. Int J Med Sci Public Health. 2015 Dec; 4(4):502-7.
- Chattopadhyay D. Knowledge and skills of Anganwadi workers in Hoogly District, West Bengal. Indian J Community Med. 2004 Sep;XXIX(3):117-8.
- Harnagle R, Chawla PS. A study of knowledge, attitude and practices of lactating mothers on breast feeding, weaning, immunization and dietary practices at Jabalpur cantonment, India. Int J Curr Microbiol App Sci. Nov 2013; 2(11):393-403.
- 13. Purvi parikh, Kavita Sharma. Knowledge and perception of AWW with reference to promotion of community based complementary feeding practices in semi tribal Gujarat. Natl J Community Med. 2011 Oct; 12(3):357-64.
- 14. Kapil U, Manocha S. Knowledge and attitudes towards breastfeeding amongst Auxiliary Nurse Midwives in rural Delhi. Indian Pediatr. 1989;26:1003-6
- 15. Kapil U, Bhasin S. Perception towards breastfeeding amongst working women of a public school in Delhi. Indian Pediatr. 1992;29:753-6.
- Bahl L. Some aspects of infant weaning practices and beliefs in rural in habitants of district Shimla. IndianPediatr.1982;12:921-25.
- 17. Kapil U, Bhasin S, Manocha S. Knowledge and attitude amongst well to do adolescent school girls towards breastfeeding. Indian Pediatr. 1990;27:1277-81.
- Kapil U, Paul D, Manocha S. knowledge and attitude among CDPO towards breast feeding. Indian J peadiatr. 1989 Nov;56(6):771-4.
- 19. Banapurmath CR, Nagaraj MC, Banapurnath S, et al. Breast feeding practices in villages of central Karnataka. Indian peaditrics. June 1996;33(6):47-49.