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# Assessment of knowledge regarding growth monitoring for under five children among Anganwadi workers in selected ICDS centers of Moradabad, U.P., India 

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#### Abstract

Anganwadi centres are a component of the 1975-instituted ICDS (Integrated Child Development Services) Scheme. Anganwadi employees are those employed at the village level who provide services under the ICDS Scheme. In accordance with the National Policy for Children, the programme was begun. The largest of India's multifaceted welfare programme, ICDS, aims to help millions of women and children who are suffering from nutritional deficiency illnesses, illiteracy, a lack of understanding and poor knowledge. That is essential in childcare facilities to evaluate development using precise anthropometric indicators (weight, length, and body mass index) the answer with which nutritional status or failure in growth. The primary aim of this study was to assess the knowledge regarding growth monitoring for under five children among Anganwadi workers in selected ICDS centres of Moradabad. To test the Anganwadi workers knowledge with growth monitoring, quantitative research was used in the current research. This study's research design was descriptive research design. In this research, structured knowledge questionnaires were employed as the primary measures to evaluate the knowledge growth monitoring of Anganwadi workers. This study was conducted at selected Anganwadi centre Dist. Moradabad, UP. The study revealed that 15(16.7\%) Anganwadi workers have poor knowledge, followed by 58(64.4\%) Anganwadi workers have average knowledge and 17(18.9\%) Anganwadi workers have good knowledge regarding growth monitoring for under five children. Overall knowledge score, range varies to min 4 to max 26 , mean score was 15 , median score was 16 and the standard deviation was 5.1.


Keywords: Growth monitoring, under five assessment, anganwadi workers, knowledge

## Introduction

In its literal sense, "ANGAN" implies an outdoor area. The government of India's Social and Women Welfare Department has developed Anganwadi centres. Anganwadi centres are a component of the 1975-instituted ICDS (Integrated Child Development Services) Scheme. Anganwadi employees are those employed at the village level who provide services under the ICDS Scheme. In accordance with the National Policy for Children, the programme was begun. The largest of India's multifaceted welfare programme, ICDS, aims to help millions of women and children who are suffering from nutritional deficiency illnesses, illiteracy, a lack of understanding and poor. Anganwadi worker is a multifunctional agency chosen among the community around it. The most at-risk population segments are the focus of AWW. Children aged 1 to 6 years old, pregnant women, nursing moms, women in reproductive age (15 to 45 years), and teenage girls aged 11 to 18 are among the beneficiaries. The unconventional early childhood education, supplemental nutrition, immunization, routine wellness assessments, growth monitoring, and transfer services are among the services provided by Anganwadi workers to children.

## Objectives of the study

- To assess the knowledge regarding growth monitoring for under five children among Anganwadi workers.
- To find out the association between the knowledge regarding growth monitoring for under five children among Anganwadi workers with their selected demographic variables.


## Assumptions

The study assumes that some information about the growth tracking for children under the age of five in certain Anganwadi centres may be preserved by the Anganwadi personnel.

## Hypothesis

The hypothesis was tested under 0.05 level of significance
H1: There is significance association between the knowledge regarding growth monitoring for under five children among Anganwadi workers with their selected demographic variables.

## Materials and methods of the study

Research Approach: Quantitative Research Approach.
Research Design: Descriptive Research Design.
Sample: 90 Anganwadi Workers.
The current research used power analysis to find out the sample size and found was 90 studied by the underdescribed formula. $\mathrm{N}=4 \mathrm{pq} / \mathrm{d}^{2}$
$\mathrm{P}=$ Expected ratio
$\mathrm{Q}=1-\mathrm{P}, \mathrm{P}=20 \%$
$\mathrm{Q}=1-\mathrm{P}(1-0.20)=0.90$
$\mathrm{D}=$ Precision $1 \mathrm{FD}=1 \%(0.1)$
$\mathrm{N}=4 * 0.20 * 0.80 /(0.1) 2$
$\mathrm{N}=90$

Setting of the study: Selected Anganwadi centre Dist.
Moradabad, UP.

## Sample selection criteria

## Inclusion Criteria

## Anganwadi workers who were

- Interested to take part in the investigation.
- Who were accessible while data was collected.


## Exclusion Criteria

- Any Anganwadi worker suffering from a significant medical condition.


## Description of the tool

Tool 1 - Demographic Performa.
Tool 2- Semi Structured Knowledge Questionnaire.


Fig 1: Schematic representation of research methodology

## Result <br> The data collected was organized and presented under following sections:

Section 1: Description of the Socio demographic variables.
Section 2: Findings related to knowledge regarding growth-
monitoring for under five children among Anganwadi workers

Section 3: Findings related to association between the knowledge regarding growth monitoring for under five children among Anganwadi workers with their selected demographic variables

## Section 1

Table 1: Frequency and percentage of demographic variables

| Demographic Variable | Frequency | Percentage |
| :---: | :---: | :---: |
| Training Status |  |  |
| Trained | 68 | 75.6\% |
| Untrained | 22 | 24.4\% |
| Age |  |  |
| 19-25 years | 3 | 3.3\% |
| 26-30 years | 14 | 15.6\% |
| 31-35 years | 44 | 48.9\% |
| Above 35 years | 29 | 32.2\% |
| Marital Status |  |  |
| Married | 63 | 70\% |
| Unmarried | 21 | 23.4\% |
| Unmarried | 3 | 3.3\% |
| Widow | 3 | 3.3\% |
| Working Experience |  |  |
| Less than 1 years | 22 | 24.4\% |
| 1-5 years | 37 | 41.1\% |
| More than 5 years | 31 | 34.5\% |
| Education |  |  |
| Metric | 9 | 10\% |
| Above Metric | 81 | 90\% |
| Working Area |  |  |
| Rural | 65 | 72\% |
| Urban | 25 | 28\% |

The findings reveal that Majority 68(75.6\%) of the Anganwadi workers are trained. Majority 68(75.6\%) of the Anganwadi workers are trained of the samples 44(48.9\%) of the Anganwadi workers belongs to the age group of 31-35 years, 63(70\%) of the Anganwadi workers are married. 37(41.1\%) of the Anganwadi workers have the working experience of $1-5$ years followed by $81(90 \%)$ of the Anganwadi workers have the education status of above metric. And majority 65(72\%) of the Anganwadi workers lives in rural area.

Section 2: Demonstrates show that 15(16.7\%) Anganwadi workers have poor knowledge, followed by 58(64.4\%) Anganwadi workers have average knowledge and 17(18.9\%) Anganwadi workers have good knowledge regarding growth monitoring for under five children. Data revealed that in overall knowledge score, range varies to min 4 to max 26, mean score was 15 , median score was 16 and the standard deviation was 5.1.


Fig 2: Frequency distribution of Anganwadi workers according to level of knowledge regarding growth-monitoring for under five children

Table 2: Assessment of knowledge regarding growth monitoring for under five children among Anganwadi workers

| No. of items |  | Knowledge score |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Range | Min | Max | Mean | Median | Standard deviation |
| 28 | 22 | 4 | 26 | 15 | 16 | 5.1 |

Section 3: Association table described that the knowledge level present in table 9 displays the chi-square values of age and working experience were less than the 0.05 level of significance. This proves that there was a statistically significant association between the levels of knowledge with their selected socio-demographic variables was partially
accepted. Hence that shows the stated hypothesis $\mathrm{H}_{1}$ - There will be significance association between the knowledge regarding use of growth monitoring chart for under five children among Anganwadi workers with their selected demographic variables was partially accepted.
Hence, the hypothesis (H1) is accepted.

Table 3: Association between the knowledge regarding growth monitoring for under five children among Anganwadi workers with their selected demographic variables

| Variable | Poor knowledge | Average knowledge | Good knowledge | Chi-square value \& DF | P Value | Inference |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Training status |  |  |  |  |  |  |
| Trained | 12 | 42 | 14 | $\begin{gathered} 0.896 \\ \mathrm{DF}=2 \end{gathered}$ | 0.639 | NS |
| Untrained | 3 | 16 | 3 |  |  |  |
| Total | 15 | 58 | 17 |  |  |  |
| Age |  |  |  |  |  |  |
| 19-25years | 0 | 3 | 0 | $\begin{aligned} & 19.538 \\ & \mathrm{DF}=6 \end{aligned}$ | 0.003* | NS |
| 26-30years | 2 | 11 | 1 |  |  |  |
| 31-35years | 6 | 34 | 4 |  |  |  |
| Above 35years | 7 | 10 | 12 |  |  |  |
| Total | 15 | 58 | 17 |  |  |  |
| Marital status |  |  |  |  |  |  |
| Married | 9 | 38 | 16 | $\begin{gathered} 7.538 \\ \mathrm{DF}=6 \end{gathered}$ | 0.274 | NS |
| Unmarried | 5 | 15 | 1 |  |  |  |
| Divorce / Separated | 0 | 3 | 0 |  |  |  |
| Widow | 1 | 2 | 0 |  |  |  |
| Total | 15 | 58 | 17 |  |  |  |
|  |  |  |  |  |  |  |
| Working Experience |  |  |  |  |  |  |
| Less than 1 year | 3 | 18 | 1 | $\begin{aligned} & 16.055 \\ & \mathrm{DF}=4 \end{aligned}$ | 0.003* | S |
| 1-5 years | 5 | 28 | 4 |  |  |  |
| More than 5 years | 7 | 22 | 12 |  |  |  |
| Total | 15 | 58 | 17 |  |  |  |
| Education status |  |  |  |  |  |  |
| Metric | 3 | 4 | 2 | $\begin{gathered} 2.346 \\ \mathrm{DF}=2 \end{gathered}$ | 0.309 | NS |
| Above metric | 12 | 54 | 15 |  |  |  |
| Total | 15 | 58 | 17 |  |  |  |
| Working area |  |  |  |  |  |  |
| Rural | 12 | 44 | 9 | $\begin{gathered} 3.986 \\ \mathrm{DF}=2 \end{gathered}$ | 0.136 | NS |
| Urban | 3 | 14 | 8 |  |  |  |
| Total | 15 | 58 | 17 |  |  |  |

## Conclusion

## The following are the major conclusions:

- Majority 58(68.4\%) of the Anganwadi workers have average knowledge regarding growth monitoring for under five children
- There was a significant association between the level of knowledge regarding growth-monitoring for under five children with age and working experience of Anganwadi workers.

Conflicts of interest: The author claims to be free of any conflicts of interest.

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## References

1. Prasanna Kumara BJ, Kamini S, Menon AGG. Factors affecting the knowledge, attitude\& adoption of improved practices in health \& nutrition of ICDS
beneficiaries. Indian J Nutr Diet. 2001;7;(4):140-47.
2. Kishor J. National Health Programme in India: Country Publication: $7^{\text {th }}$ edition: New Delhi; c2007. p. 348-349.
3. Park K. Text book of preventive $\&$ social medicine. $19^{\text {th }}$ ed. Jabalpur. MS Banarsi Dasbhanot Publisher.
4. Whaley And Wong's Essentials of Paediatric Nursing $7^{\text {th }}$ ed. Philadelphia: Elsevier Reed; c2005
5. Best John W, Khan V. James. Research in Education $6^{\text {th }}$ ed. Prentice - Hall of India. New Delhi.
6. Foster - Bunsberger and Anderson. Family - Centred Nursing Care of Children. WB Saunders Company Philadelphia; c1989.
7. Peter Dawson. Normal growth and revised growth charts. Paediatrics in Review. 2002;23(7):255-6.
8. WHO Library Cataloging. WHO Child Growth Standards; c2006. [1, 2, 305, 306 screen] Available From URL: http://www.who.int/childgrowth/en
9. Anamika Choudhary. Assessment of the extent of the knowledge of Anganwadi workers regarding maternal,
child nutrition and health and problems faced during Job Fulfillment: A Study of Urban and Rural Areas of Jaipur District of Rajasthan, International Journal of Trend in Scientific Research and Development (IJTSRD). ISSN No: 2456-6470; c2017.
10. Kavita Gomase J. A Study to Assess the Effectiveness of Self Instructional Module on Knowledge Regarding Management of Selected Minor Ailments of Preschool Children among Anganwadi Workers. Indian Journal of Forensic Medicine \& Toxicology. 2021 Apr-Jun;15:2.
11. Malatesh Undi. Knowledge and skill of Anganwadi workers in growth monitoring in an urban slum of Central Part of Karnataka. Indian Journal of Community Health. 2019 Oct-Dec;31:4.
12. Khushbu Meshram, Effectiveness of planned teaching on knowledge and practice regarding growth monitoring of under-five children among Anganwadi Workers in the Rural Area of Wardha District, (2018). International Journal of Current Research and Review. 2020 Dec;12:23.
13. Kapila Kumari Sharma. A study to assess the effectiveness of self-instructional module regarding assessment and prevention of protein energy malnutrition in children under five years of age among Anganwadi workers at selected ICDS centre at Jaipur, (2022). International Journal of Creative Research Thoughts (IJCRT). ISSN: 2320-2882. 2022 Feb;10:2.
14. Rinku Maity. Assessment of Knowledge and Utilization of ICDS Services among Mothers of Under Six Children in Selected ICDS Centers, South 24 Parganas, West Bengal. International Journal of Nursing \& Midwifery Research. 2022;9(1):1-8
15. Chaturvedi S, Shrivastava BC. Singh JV impact of 6 years exposure to ICDS Scheme on Growth and Health status of target children U.P. Indian Journal Medical Research. 1986;12:766-774.
16. Singh Harzit. Text-Book of Pediatric Nursing $1^{\text {st }}$ ed. New Delhi.

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