

KNOWLEDGE OF NUTRITIONAL PRACTICES AMONG THE ANGANWADI WORKERS OF DAHOD DISTRICT

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ABSTRACT

Knowledge plays an important role for achieving desired results. To perform active role in any activities, information being understood play an important role. For the purpose of this study, knowledge was operationalised information and understanding of the Anganwadi workers (AWWs) regarding nutritional practices. The present study was conducted in Dahod district of Gujarat state, with a view to study the profile and knowledge of AWWs regarding nutritional practices. The study revealed that majority of AWWs were middle age, secondary to college level education, Schedule tribe, possessed pakka house and service was main occupation. Anganwadi workers had the maximum knowledge about selected nutritional practices i.e. 'The main sources of fat is butter and ghee (71.81 %)', 'The important function of calcium is growth and development of bone in the body and Green leafy vegetables and pulses are good sources of iron (66.63%). great majority (91.30 per cent) of the AWWs had medium level of knowledge about nutritional facts.

Keywords: knowledge, anganwadi workers, profile and nutritional practices

INTRODUCTION

Children constitute principle assets of any country. Children's Development is as important as the development of material resources. Under nutrition is widely prevalent in the tribal, urban, and rural and slum areas of the country, especially among vulnerable sections of the population namely pre-school, school going children, expectant and nursing women (Maya Kumari et.al. 2010).

ICDS Scheme is the most comprehensive scheme of the Government of India for early childhood care and development. It aims at enhancing survival and development of children from the vulnerable sections of the society. Integrated child development service is a powerful outreach programme to achieve major national goals related to nutritional health problems.

The Anganwadi worker (AWW) is the community based voluntary frontline worker of the ICDS programme selected from the community, she assumes a pivotal role due to her close and continuous contact with the beneficiaries. The key functions of anganwadi is to provide supplementary

nutrition to the children below six years of age and nursing and pregnant mothers from low income families; immunization of all children less than six years of age and immunization against tetanus for all the expectant mothers, provide nutrition and health education to all women in the age group of 15-45 years, as well as basic health check-up, which includes antenatal care of expectant mothers, postnatal care of nursing mothers, care of newborn babies and care of all children under six years of age. AWW has to conduct various different types of job responsibilities. Not only she has to reach to variety of beneficiary groups but she has to provide them with different services. Taking into consideration all above factors this study was conducted to find out socio economic characteristics of anganwadi workers and their knowledge of nutritional practices in Dahod district.

OBJECTIVES

- (a) To know the the Socio-economic characteristics of the anganwadi workers
- (b) Knowledge score of anganwadi workers on selected nutritional practices

METHODOLOGY

A survey was carried out in Limkheda, Dhanpur and Garbada talukas of Dahod district. The respondents were selected randomly selected from selected talukas as a making of 110 samples for the study. A set of 15 questions of nutritional practices of food approved by an expert were used for assessing the knowledge of Anganwadi workers (AWWs). The questions were multiple choices related to knowledge of food sources, dietary habits, food groups, nutrients, health and diseases. The data were collected through personal interview method. By using descriptive statistics the data was analyzed by calculating frequency and percentage.

RESULTS AND DISCUSSION

The Socio-economic characteristics of the Anganwadi workers

The data presented in Table revealed that nearly more than half (56.90 per cent) of the anganwadi worker belonged to middle age group and 44.54 per cent of them belongs to young age group. More than half (51.81 per cent) of the Anganwadi worker were possessed higher secondary education followed by 22.72 per cent of them were graduate and 18.18 per cent of the respondents had secondary level of education.

The data presented in Table indicate that majority (68.18 per cent) of the respondents belonged to other schedule tribe followed by other backward class (17.27 per cent) and schedule cast (14.54 per cent).

The data depicted in Table 1 indicate that majority (64.54 per cent) of Anganwadi worker possessed *pakka* house followed by 21.81 per cent and 13.63 per cent of them who had kachha and mix house, respectively.

More than fourth-fifth (80.90 per cent) of the Anganwadi worker had joint family. It can be observed from the data presented in Table: 1 that 36.36 of the Anganwadi worker had service as a main occupation, whereas 25.45 per cent had agriculture, animal husbandry and service as a source of income and 23.63 per cent had agriculture, business and service as a source of income.

The data presented in Table 1 show that exactly half

of the Anganwadi worker had annual income ranging from ₹ 25001/- to ₹ 50,000/- whereas 34.34 per cent of them had annual income upto ₹ 25000/- and Only 15.45 per cent of the respondent had annual income more than ₹ 50,000/- .

The results were similar to Desai Gaurav et. al.(2012) and Patil S. B. et. al (2013).

Tabel -1 The Socio-economic characteristics of the Anganwadi workers n=110

Sr. No.	Particulars	Frequency	Percent
1	Age group (in years)		
	Young (Upto 35)	49	44.54
	Middle (In Between 36 to 50 years)	56	50.90
	Old (Above 50 years)	05	04.54
2	Educational status		
	Primary	08	07.27
	Secondary	20	18.18
	Higher Secondary	57	51.81
	Graduate	25	22.72
3	Caste		
	Schedule Caste (SC)	16	14.54
	Schedule Tribe (ST)	75	68.18
	Other Backward Class (OBC)	19	17.27
4	Family type		
	Joint	89	80.90
	Nuclear	21	19.09
5	Types of House		
	Pakka Makan	71	64.54
	Kachha	24	21.81
	Mix	15	13.63
6	Family Annual Income		
	Up to ₹ 25,000/-	38	34.54
	₹ 25001/- to ₹ 50,000/-	55	50.00
	₹ 50,001/- to ₹ 75,000/-	17	15.45
7	Occupation		
	Only Service	40	36.36
	Agriculture and Service	16	14.54
	Agriculture , animal hus- bandry and Service	28	25.45
	Agriculture , business and Service	26	23.63

Knowledge score of nutritional practices of anganwadi workers

To study the knowledge of nutritional practices of anganwadi workers of Dahod district survey questionnaires were distributed to them to request to fill it by own. A score

of one was given for each correct answer and zero was given for a wrong answer or if no answer was given by them. The response was given by the aganwadi workers are presented in decreasing order of selected nutritional practices.

Table-2 indicates that the anganwadi workers had the maximum knowledge about seven selected nutritional practices *i.e.* ‘The main sources of fat is butter and ghee (71.81 %)', ‘The important function of calcium is growth and development of bone in the body and Green leafy vegetables and pulses are good sources of iron (66.63%)', ‘Good vision of eye is the important function of vitamin A (65.45 %)', ‘Iron is

necessary for synthesis of haemoglobin (60.90%)', ‘Dietary fiber mainly obtain from green leafy vegetables(59.09%)', and ‘Deficiency of protein leads to decreased height and weight, lower down HB and infection to the child(53.63%).

About four of the selected nutritional practices were only moderately known to the respondents. This included “Energy and fat is not a food groups, Vitamin-C is one type of nutrient.” About 6-15% knowledge was prevalent for four of the nutritional practices. This low knowledge was related to food habits, function of vitamin-D, type of milk having high protein and niacin is one type of vitamin.

Table 2 : Knowledge of aganwadi workers on selected nutritional practices

n=110

Sr. No	Nutritional Practice	Frequency	Percent
1	The main sources of fat are butter and ghee.	79	71.81*
2	The important function of calcium is growth and development of bone in the body.	73	66.63*
3	Green leafy vegetables and pulses are good sources of iron.	73	66.63*
4	Good vision of eye is the important function of vitamin A.	72	65.45*
5	Iron is necessary for synthesis of haemoglobin.	67	60.90*
6	Dietary fiber mainly obtains from green leafy vegetables.	65	59.09*
7	Deficiency of protein leads to decreased height and weight, lower down HB and infection to the child.	59	53.63*
8	Energy and fat is not a food group.	55	50.00#
9	Vegetable khichadi of fermented pulses are easily digestible and nutritious.	52	47.27#
10	Cereal and pulses is one type of food groups.	45	40.90#
11	Vitamin C is one type of nutrient.	23	20.90#
12	Regular taking of heavy breakfast is good for healthy body.	15	13.63@
13	Vitamin D is help in absorption of calcium.	14	12.72@
14	Skim milk is one type of milk which has high protein and low calary.	09	08.18@
15	Niacine is one type of vitamin.	08	07.27@

*=Maximum knowledge(above 50%), # = Moderate knowledge (20-50%), @ =Least knowledge (less than 20%)

Extent of knowledge about nutritional facts

Table 3: Knowledge level of aganwadi workers on selected nutritional practices

n=110

Sr. No.	Knowledge level	Frequency	Per cent
1	Very high level (Above 10 out of 15)	00	00.00
2	High level (Eight and equal to 10 out of 15)	24	26.40
3	Medium level (Three and equal to seven out of 15)	83	91.30
4	Low level (Two and below two out of 15)	03	03.30

The extent of knowledge on nutritional practices was analysed on the basis of the score obtained. Accordingly subjects were classified as having very high (above 10), high

(eight and equal to 10), medium (three and equal to seven), low (two and below two) levels of knowledge as presented in Table 3.

Table-3 shows that great majority (91.30 per cent) of the aganwadi workers had medium level of knowledge followed by high level (26.40 per cent) and low level (3.30 per cent). The results more or less contrast as presented by Maya Kumari *et. al.*, (2010), Biradar *et. al.*, (2013), Chaudhari *et. al.* (2015) and Shweta *et. al.* (2011).

CONCLUSION

The range of age of agnawadi worker was 30 to 50 years. They were belonging to joint families. Majority of AWWs had higher secondary to college level education. The family income was ranged from ` 25000 to 50000 per annum. More than half of the subjects surveyed were

engaged in service. Anganwadi workers had the maximum knowledge about selected nutritional practices i.e. 'The main sources of fat is butter and ghee (71.81 %)', 'The important function of calcium is growth and development of bone in the body and Green leafy vegetables and pulses are good sources of iron (66.63%). great majority (91.30 per cent) of the AWWs had medium level of knowledge about nutritional facts. Regular reinforcement of training with on-job capacity building, follow-ups with regards to CF rather than just IEC (Information education and communication) on key IYCF messages is recommended. These might bring about discretion among the change agents (AWWs) between simply giving messages and science behind 'bring about behavior change' in any community. This probably would accelerate prevention and reduction of undernutrition in community.

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Received : August 2017 : Accepted : October 2017