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Assess the Knowledge Regarding ICDS among Mothers of Under Five Children

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Abstract

Background: Integrated child development scheme represent one of the world's largest and most unique programmes for early childhood development. The Integrated Child Development Scheme is a government initiative for the all round development of under 5 children. Its aim is to reduce infant mortality, child malnutrition, provide pre-school education, mid day meal programme, Balawadi and special nutrition. *Aim:* The aim of the study is to assess the knowledge regarding ICDS services among mothers of under five children residing in Aikkarnadu Gramma panchyath at Ernakulam district. *Materials and Methods:* A descriptive cross section survey design was adopted. The study was conducted on 128 mothers of under five children residing at Aikkaranadu Gramma Panchayath using convenient sampling technique. Data were collected by structured knowledge questionnaire and obtained data were analysed by descriptive and inferential statistics. *Results:* The knowledge score of mothers of under five revealed that 32 (41.0%) had good knowledge. 87 (67.0) had average knowledge regarding ICDS services. There is significant association between education [p <. 001] and knowledge on ICDS scheme [p < .009] with knowledge level of mothers of under five children regarding ICDS services.

Keyword: ICDS: Integrated Child Development Scheme

Introduction

"Children are the world's most valuable resource and its best hope for the future".[1]

Child development programmes of social justice seek to meet the health, nutritional and educational need of infants, pre-school children and women from the poor and vulnerable sections of the society. Healthy children are the future of our state and wealth of our nation.[2]

The Hindhu 2005 Monday reported that the Minister for the industries and social welfare, V.K. Ebrahim Kunju said that take home strategy under the integrated child development schemes was introduced in the selected block of last year would be extended to all blocks in the scheme. He was speaking after distributing awards to the best anganwadi workers and Grama Panchayath for implementing the ICDS programmes at a function held at the EMS memorial Town hall, Ernakulam on Saturday. The Minister said Rs. 44 lakh had been allotted In this year, state budget for constructing buildings for anganawadi.[3]

Recent studies estimated that about 53% had moderate knowledge and 38% had adequate knowledge and 9% of the mother had inadequate

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knowledge about the ICDS service. 7 A 2005 study found that the ICDS programme was not particularly affective in reducing malnutrition largely because of implementation problem and because the poorest states had received the least coverage and funding. During the 2012–13 fiscal year, the Indian central government spent 159 billions on the programme. The widespread network of ICDS have an important role in computing malnutrition especially for the children of weaker group [7].

Objectives

The objectives of the study were:

1. To assess knowledge regarding ICDS services among mothers with under five children residing at selected communities of Aikkaranad Grama Panchayath.
2. To determine the association between knowledge on ICDS scheme with selected demographic variables.

Operational Definition

□ *Knowledge:* In this study knowledge refers to the correct response received from the mothers of under five children about ICDS service. It is graded as good, average, poor. Knowledge assessed by structured knowledge questionnaire.

□ *ICDS Services:* In this study it refers to Integrated Child Development Services (ICDS) is a government programme in India which provides food, preschool education, and primary healthcare to children under 5 years of age and their mothers.

□ *Mother:* In this study mothers refers to women who have given birth to one or more children and taking care of child who is between the age group of 0-5 years.

Hypothesis

There is significant association between ICDS services and selected demographic variables.

Research Approach

The research approach used for this study was non experimental research approach.

Research Design

The research design used for this study was descriptive cross section survey design.

Variables

- *Variable:* knowledge.
- *Selected demographic variables:* Age, education, occupation, religion, type of family, breast feeding, awareness on ICDS services, approach of teacher, monthly income & no of children.

Setting of the Study: Selected areas of Aikaranad Gramma Panchayath.

Population: Mothers of Under five children in Ernakulam District.

Sample: Sample taken for the study is mothers of under five children residing in Aikkaranad Grama Panchayath.

Sample Size: Sample size for the study is 128.

Sampling Technique: In this study convenient sampling technique was used that is the selection of sample units from a population using non random procedures.

Sample Selection Criteria

Inclusion criteria

- Who are willing to participate in the study.
- Who has children less than 5 years.
- Who are present during the time of data collection.

Description of Tool

Tool - 1

- Section A: Demographic Performa of mothers consist of demographic data such as age, education, religion, occupation, income, breast feeding, awareness of ICDS services, approach of teacher.
- Section B: It consisting of 30 structured questionnaire to assess knowledge regarding ICDS services among mothers of under five children.

Scoring for the Level of Knowledge

Good: 21-30

Average: 11-20

Poor: 0-10

Piolt Study

Study was conducted among 20 mothers of under five children in Aikkaranad Gramma Panchayath to

check the feasibility and practicability of the study and it was found to be feasible.

Methods of Data Collection

An administrative permission were obtained from the principal of MOSC College of Nursing Ethical committee of MOSC Medical College and obtain permission from medical officer Vadavucode block. After obtaining permission the subject were selected. Informed consent were obtained from the participant and data will be collected using a questionnaire.

Results

Section A: Distribution of mothers according to demographic data

Table 1: Distribution of demographic characteristics of mothers with under five children

Sl No	Demographic characteristics	Frequency (f)	Percentage (%)
1	*Age*		
	Below 20	13	10.2
	21–25	53	41.4
	26–35	44	34.4
	36–45	18	12.5
	Above 45	0	0
2	*Education*		
	Primary education	4	3.1
	High school	18	14.1
	Higher secondary	23	18.0
	Degree	69	53.9
	PG	14	10.9
3	*Religion*		
	Christian	65	50.8
	Hindu	61	47.7
	Muslim	2	1.6
	Others	0	0
4	*Occupation*		
	With occupation	55	43
	Without occupation	73	57
5	*Family type*		
	Nuclear family	108	84.38
	Joint family	21	16.4
6	*Monthly income*		
	Below 5000	13	10.2
	5001–15000	53	51.6
	15001–25000	48	37.5
	Above 25000	15	11.71
7	*Pregnancy*		
	Pregnant	3	2.3
	Not pregnant	125	97.7
8	*Breast feeding*		
	Feeding mothers	33	25.8
	Non feeding mothers	95	74.2
9	*No of children*		
	1	57	44.5
	2	57	44.5
	3	14	10.9
10	*Approach of teacher*		
	Approached	114	89.1
	Not approached	14	10.9
11	*ICDS services*		
	known	73	57
	Not known	55	43

Section B: Mothers knowledge regarding ICDS services.

Table 2: Distribution of mother's knowledge regarding ICDS services

Level of Knowledge	Kowledge Frequency	Percentage (%)	Standard Deviation
Poor (1–10%)	01	0.8	4.303
Average (11–20%)	86	67.2	
Good (21–30%)	41	32	

Table 2 shows that out of 128 mothers 86 (67.2%) mothers have average knowledge and 41 (32%) have good knowledge and only 01(0.8%) have poor knowledge.

Section C: Association of level of knowledge score with selected demographic data

In this section we assess the association of level of knowledge with selected demographic variables is done. Chi square ($\chi 2$) is used to find the association of level of knowledge of selected demographic variables.

Table 3: Association of level of knowledge score with selected demographic data

Demographic variables	Good	Average	Poor	χ	df	p- value	Level of significance
Age				5.026	3	.496	Significant
Below 20	3	10	-				
21–25	16	37	-				
26–35	19	25	-				
36–45	3	15	-				

Education				11.14	1	.001	Significant
Up to higher secondary	6	39	-				
Degree-PG	35	48	-				
Religion				2.508	1	.081	Not significant
Hindhu	16	47	-				
Christian	20	40	-				
Monthly income				3.797	1	0.39	Not significant
Up to 15000	16	50	-				
15000 and above	25	37	-				
Occupation				2.8	1	0.69	Not significant
With occupation	22	33	-				
Without occupation	19	54	-				
Family type				2.19	1	.110	Not significant
Nuclear	31	75	-				
Joint family	12	10	-				

Table 4: Association of level of knowledge score with selected demographic data

Demographic variables	Good	Average	Poor	χ	df	p- value	Level of Significance
Awareness regarding ICDS services				6.412	1	.009	Significant
Known	13	75	-				
Unknown	11	44	-				
Breast feeding				0.61	1	.493	Not Significant
Feeding mothers	10	23	-				
Not feeding mothers	31	64	-				
No of children				5.900	2	.089	Not Significant
1	24	33	-				
2	12	45	-				
3	5	9	-				

Discussion

A descriptive design was used to collect data from 128 mothers of under five children to assess the knowledge regarding ICDS services in Aikkaranadu Gramma Panchayth The collected data were analyzed by using descriptive and inferential statistics, presented in tables bar and pie diagrams. This chapter attempt to discuss the findings as per objectives.

Findings related to the assessment of knowledge regarding ICDS services among mothers of under five children by using a structured knowledge questionnaire

A cross sectional study was conducted among 100 mothers of under five children in a selected Aganawady center of Tirupati to evaluate the knowledge of mother of under five children regarding ICDS services. The data was collected using pre-structural questionnaire. The data analyzed using inferential and descriptive statistics study findings revealed that out of 100 mothers 53 had moderate knowledge 38 had adequate knowledge and only 9 had inadequate knowledge regarding ICDS.

In present study out of 128 samples 41 (32%) had good knowledge score, 86 (67.2%) had average knowledge score, 1 (0.8%) samples had poor knowledge score.

Findings related to the association of knowledge regarding ICDS services with selected demographic variables

Research design was cross-sectional descriptive design. The study was conducted at Anganwadi centers, Tirupati. Population includes mothers of under-five children. Sample size consists of 100 mothers of under-five children under inclusion criteria. Study findings revealed that out of 100 mothers 53 (53%) had moderate knowledge, 38 (38%) had adequate knowledge and only 9 (9%) had inadequate knowledge regarding ICDS services. The mean knowledge regarding ICDS services among mothers is 23.14 with the standard deviation of 4.362. There is a significant association between knowledge regarding ICDS services with age of mother, educational status of mother, educational status of father, monthly income, religion at $p < 0.01$ level. A majority of mothers were having moderate knowledge regarding ICDS services and demographic variables were statistically significant, and hence it can be concluded that, there should be improve knowledge regarding ICDS services by providing education regarding various services for different

groups in order to improve the utilization of ICDS services to improve maternal and child health. In the present study it is found that there is no association between the other socio demographic variables and there is association between the variables like education, awareness of ICDS services.

Conclusion

To conclude we need to conduct awareness classess for mothers regarding the importance of ICDS Services to promote maximum utilization of services. ICDS Services are essential to reduce the child mortality and morbidity among undervife.

References

1. Braga L, Braga J. Learning and growing: A guide to child development. Prentice Hall; 1975.
2. Wilhelm AG. Digital nation: Toward an inclusive information society. Mit Press; 2006 Feb 17.
3. Ryan RM, Deci EL. Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. American psychologist. 2000 Jan;55(1):68.
4. Ruel MT, Alderman H. Maternal and Child Nutrition Study Group. Nutrition-sensitive interventions and programmes: how can they help to accelerate progress in improving maternal and child nutrition?. The Lancet. 2013 Aug 10; 382(9891):536–51.
5. Vennam U, Komanduri A, Cooper E, *et al.* Early Childhood Education Trajectories and Transitions: A study of the experiences and perspectives of parents and children in Andhra Pradesh, India. Young Lives Working Paper 52.
6. Kumar KA, Walia A, Chaturvedi S. India Disaster Report. National Institute of Disaster Management, IIPA Campus, New Delhi. Google Scholar. 2012 Jun.
7. Blencowe H, Cousens S, Oestergaard MZ, *et al.* National, regional, and worldwide estimates of preterm birth rates in the year 2010 with time trends since 1990 for selected countries: a systematic analysis and implications. The Lancet. 2012 Jun 9; 379(9832):2162–72.
8. Lokshin M, Das Gupta M, Gragnolati M, *et al.* Improving child nutrition? The integrated child development services in India. Development and Change. 2005 Jul;36(4):613–40.