



Dissertation

**Comparison of Knowledge, Attitude
and Practises of Mobile Health Teams
of District Burhanpur and Khandwa
posted under Rashtriya Bal Swasthya
Karyakram in Madhya Pradesh**

Dr Arpit Datey
Roll No.-0263
IIHMR Jaipur

INTRODUCTION

- The 'Child Health Screening and Early Intervention Services' (RBSK) Programme aims at early detection and treatment of the 4Ds prevalent in children. These are Defects at birth, Diseases in children, Deficiency conditions and Developmental Delays including Disabilities.
- **Target Group-** The facilities aim to cover all children of 0-6 years of age group in rural areas & urban slums, in addition to older children up to 18 years of age registered in classes till 12th in Government and Aided schools. It is estimated that these services will spread and benefit all the children in a phased method.

- Since the studies on Knowledge, Attitude and Practices of Mobile health team members are very rare, so there was really a need for this study to be carried on KAP in two districts namely Burhanpur and Khandwa. The result of this study can be further utilized by the district or state level unit for arranging Training workshop for the team members if they lack adequate knowledge and for improving attitude and practices, counselling and other tools may be used by the higher authority for making the team members realize the importance of their work and how much difference their work makes to the society, if they follow correct practices and with correct attitude towards their work.

Research Question:

- What are the knowledge, attitude and practices among the RBSK Mobile Health Teams of Burhanpur and Khandwa district?

Objective:

- To assess the knowledge, attitude and practice among the RBSK teams of Burhanpur district.

PURPOSE OF THE PROJECT

The motto behind conducting such project is to understand the micro level functioning of RBSK project. It also gives the idea of:

- Functioning of RBSK programme in Burhanpur district
- To assess the knowledge, attitude and practise of RBSK Mobile Health Teams which form the backbone of the programme.

STUDY PERIOD: 8 WEEKS (6th February 2017 to 5th May 2017)

PLACE OF STUDY : District Burhanpur and few field visits to nearby Khandwa District of Madhya Pradesh

Research Design- The research design selected for this study was Descriptive cross sectional type of study and the sampling was Non-probability Convenient type of sampling. It included collection of information and data directly from the subjects of the study through a predesigned questionnaire.

Target Population – Health Screening Teams of RBSK (the backbone of RBSK)

Instrument

1. Knowledge questionnaire
2. Individual Interview/ discussion

Data Analysis

Analysis of the collected data using MS Excel Software.

Population: Population Size- 60

The population for this study includes RBSK health team members of different background. (AYUSH Doctors, , pharmacist , ANM'S)

Description of instrument

Structured questionnaire to assess the knowledge, attitude and Practise of health care personnel regarding Rashtriya Bal Swasthya Karyakram:

This consists of 60 questions. The items/questions are based on the RBSK Operational guideline, job aids, knowledge about the program, Child Health Awareness, Attitude towards work, Sense of Responsibility and Standard practices followed.

SOURCES OF DATA COLLECTION :

There are basically two sources of data collection.

These are :

Primary

Secondary

Primary sources of data: By interacting with employees of the MHTs.

Questionnaire.

Through direct observations during field visits while Monitoring the MHTs.

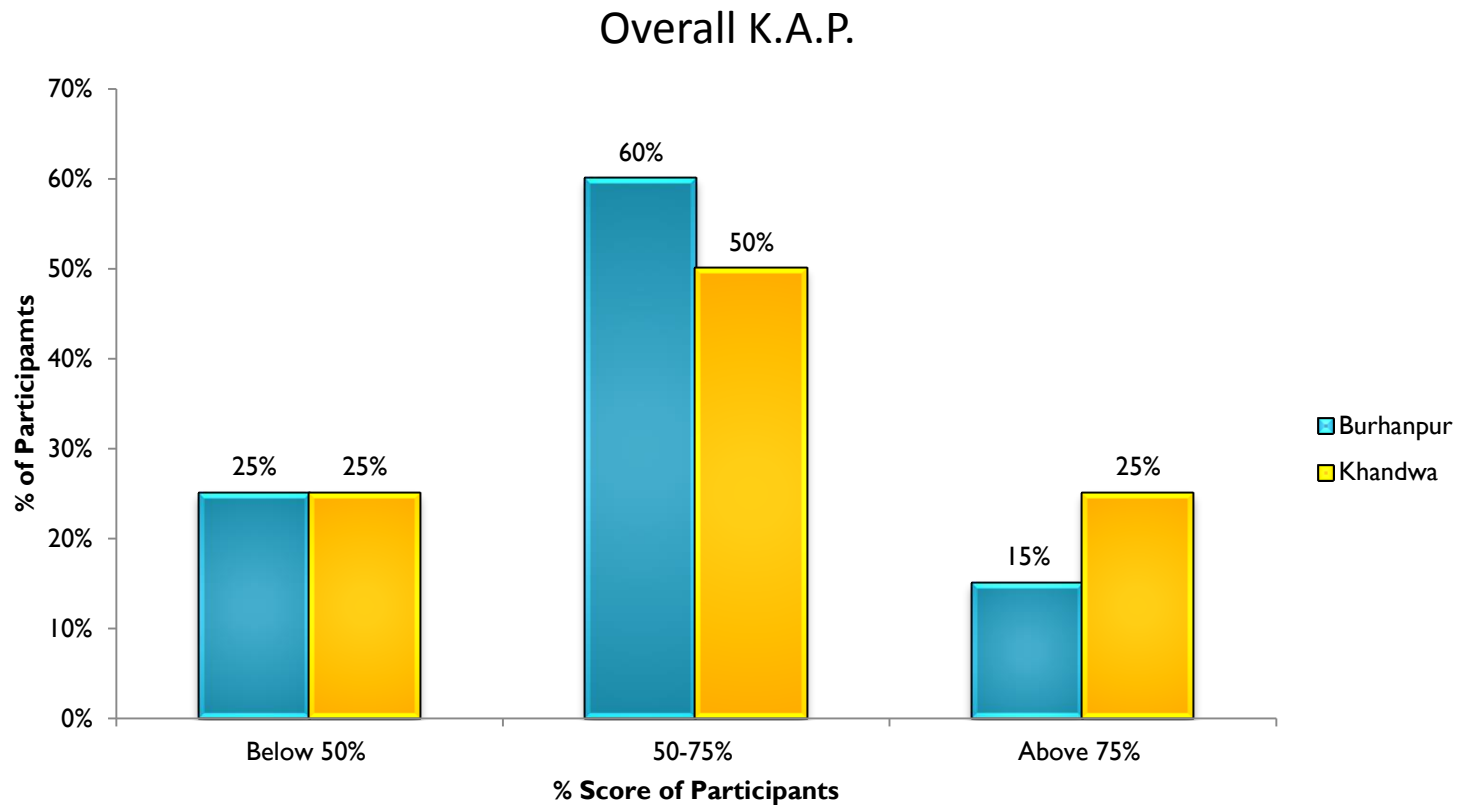
Secondary sources of data: Through registered records.

Data collection process:

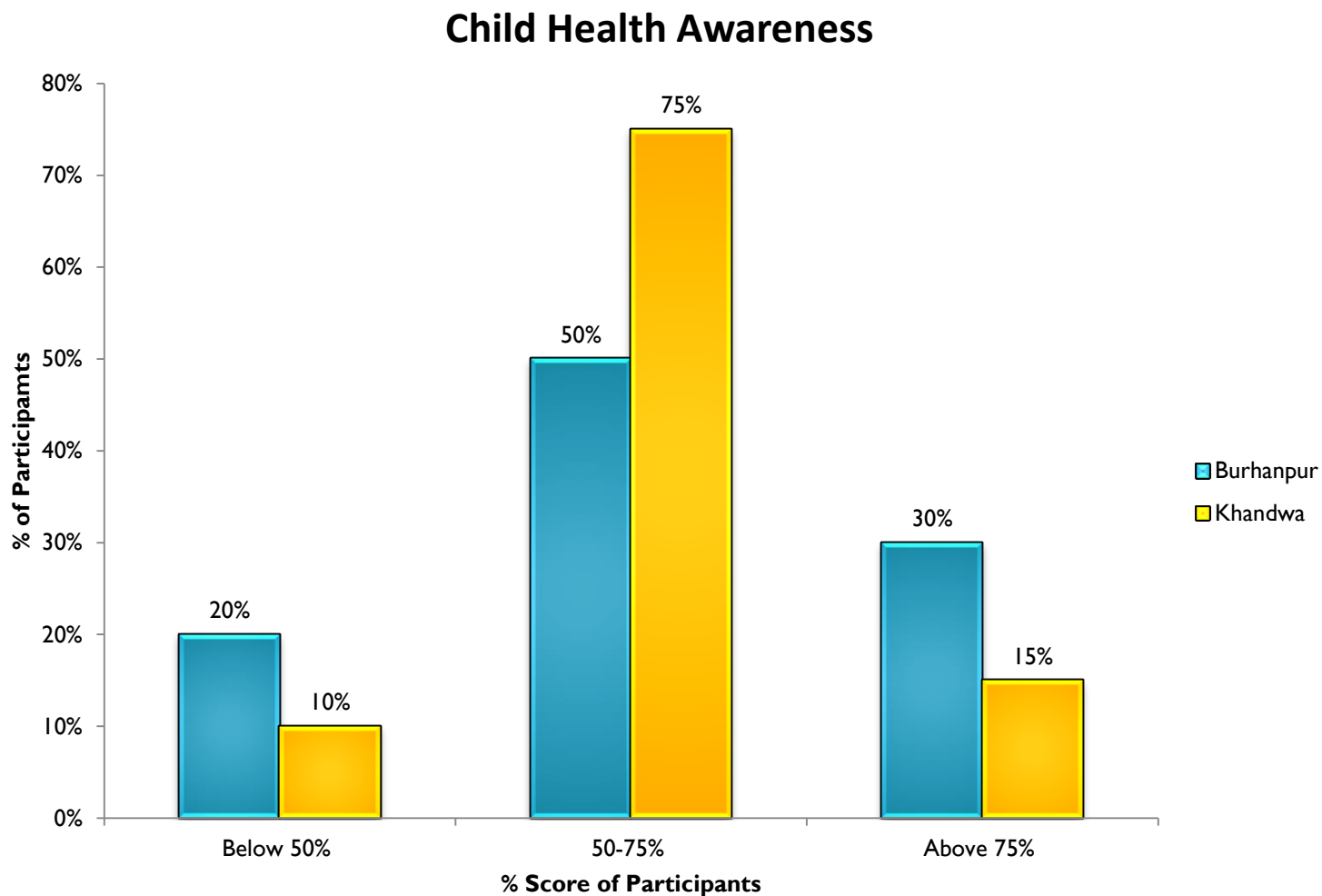
- Primarily the data i.e. the questionnaire was filled by the study objects during the extensive field visits done in Burhanpur as well as Khandwa district.
- The investigator introduced him and briefed to the participants about the study and its methodology.
- The structured questionnaire was administered to all the health care personnel at a time under the supervision of the investigator.
- Personal discussion and Interview was conducted to explore more details.

Result

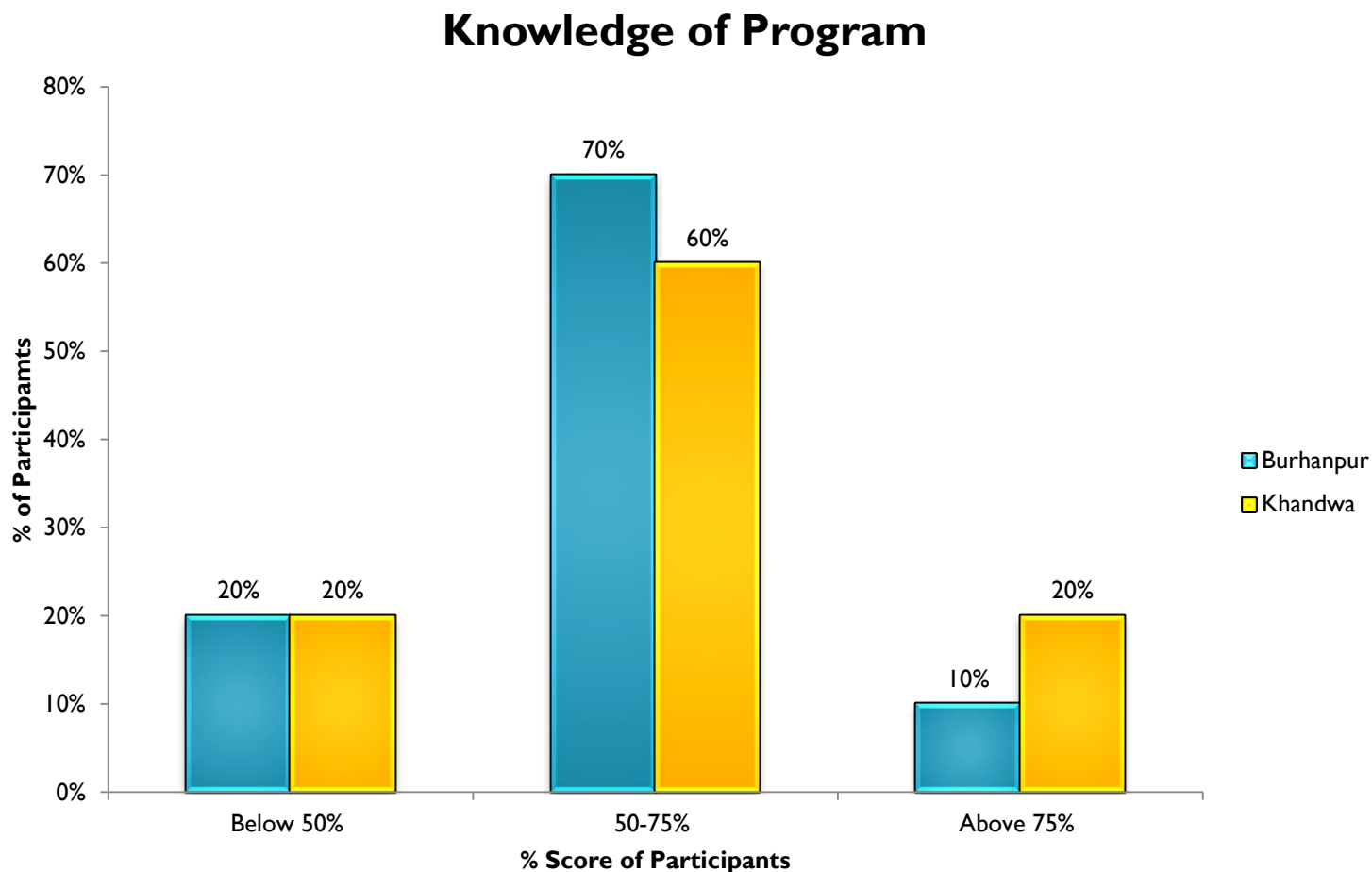
Graph 1:- Showing Knowledge attitude and practice study of RBSK among team members of Burhanpur and Khandwa district.



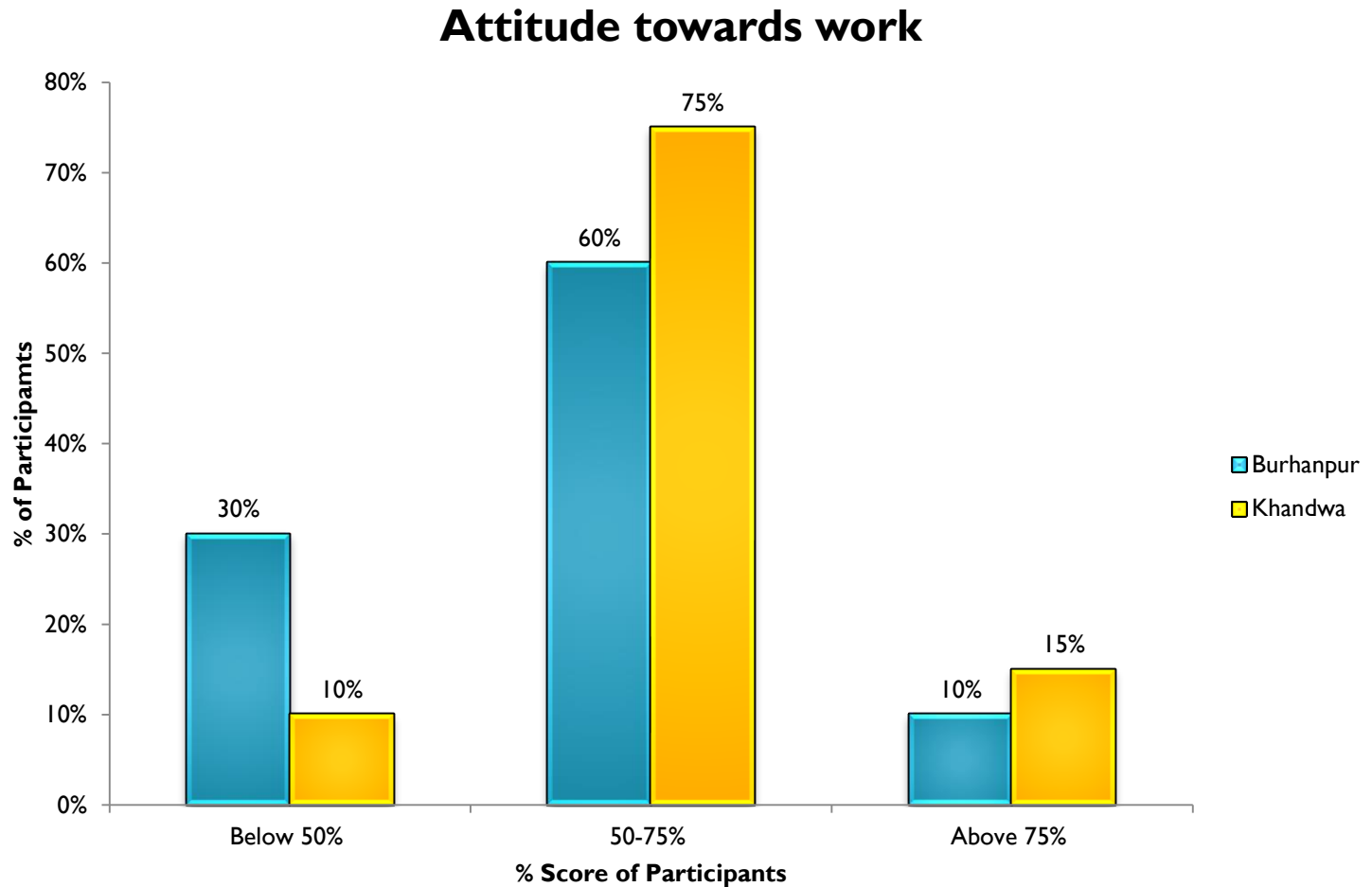
Graph 2:- Showing Child Health Awareness among MHT members of Burhanpur and Khandwa district.



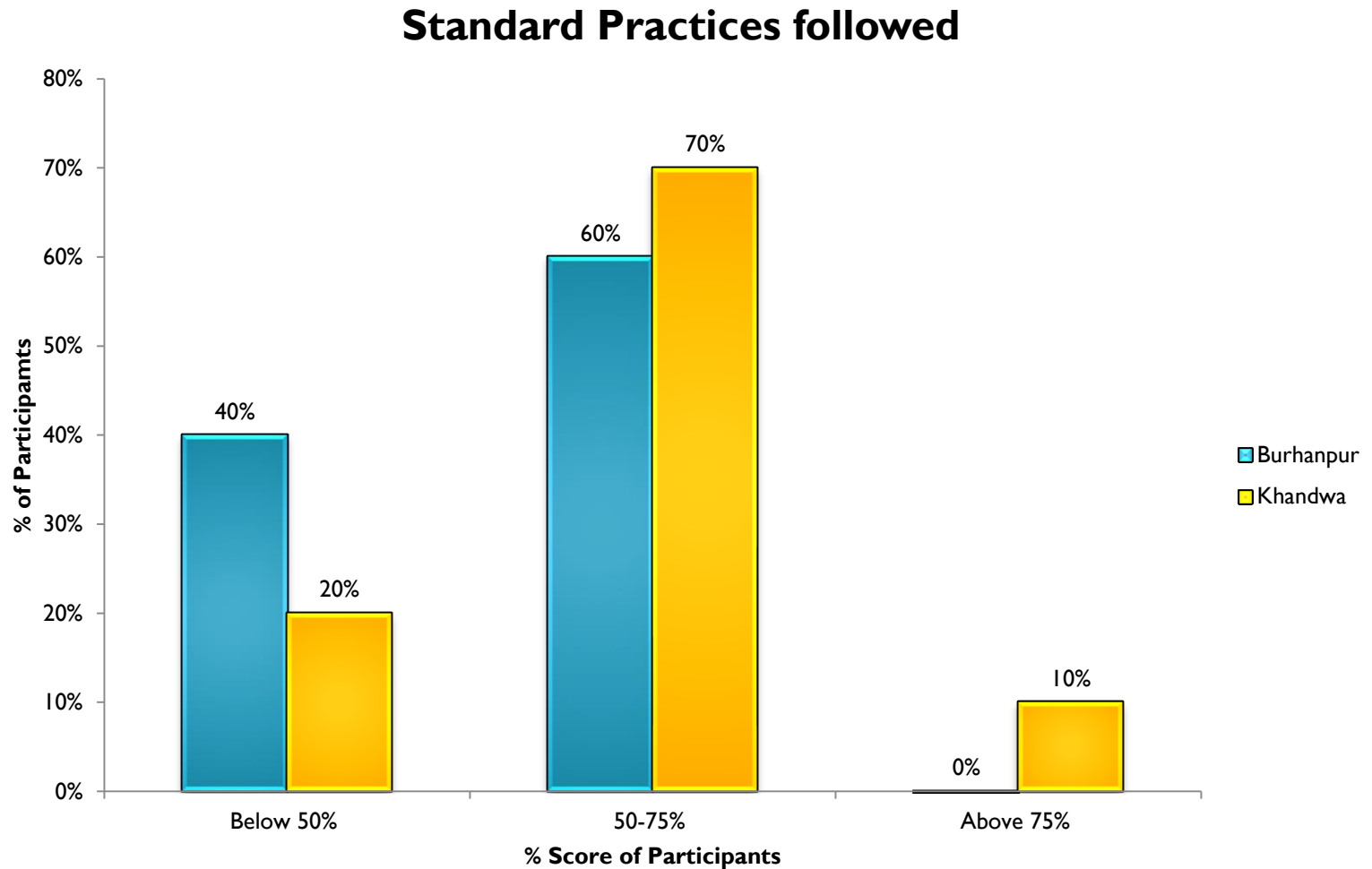
Graph 3:- Showing knowledge of the Program among MHT members of Burhanpur and Khandwa district



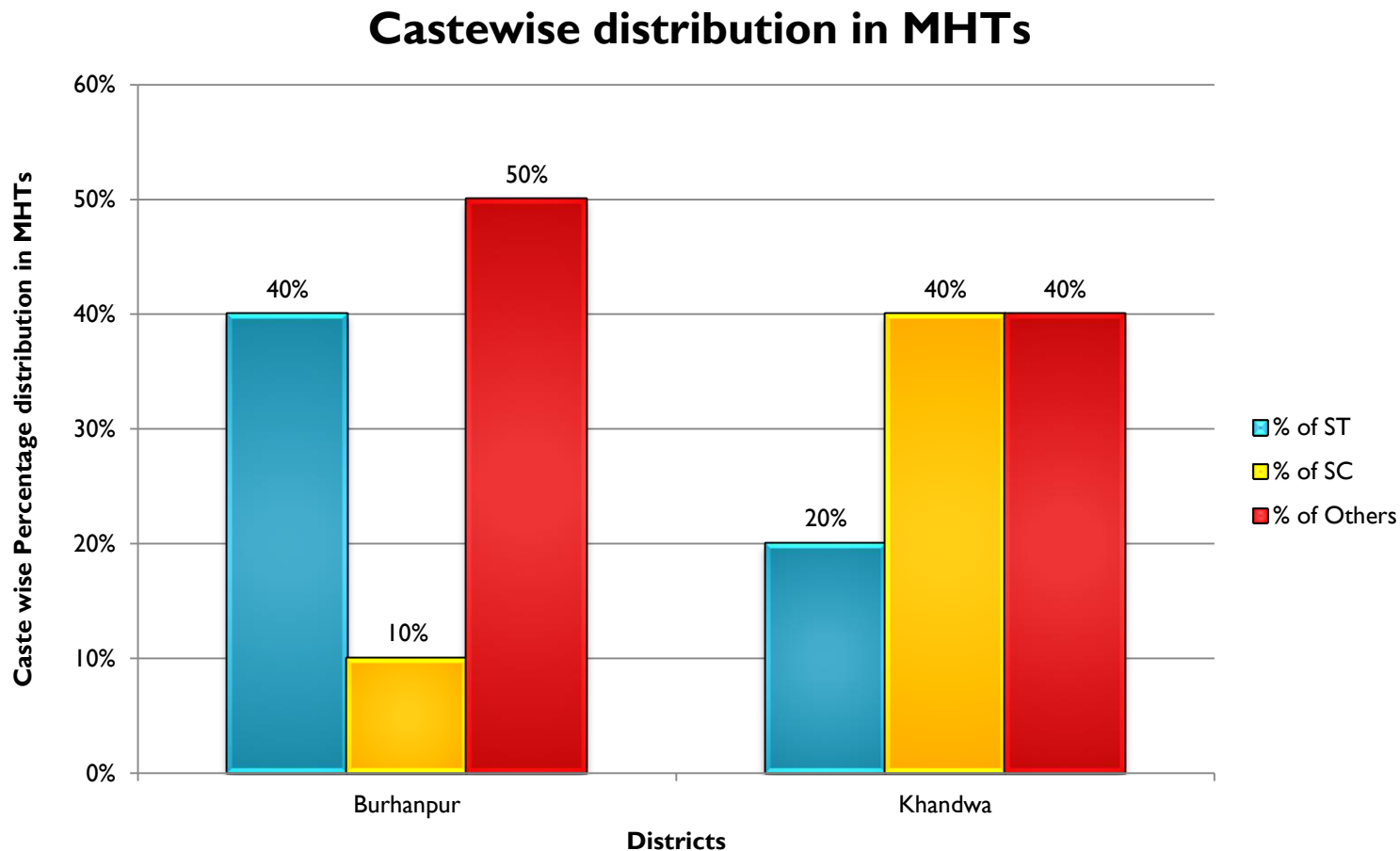
Graph 4:- Showing Attitude towards work among MHT members of Burhanpur and Khandwa district.



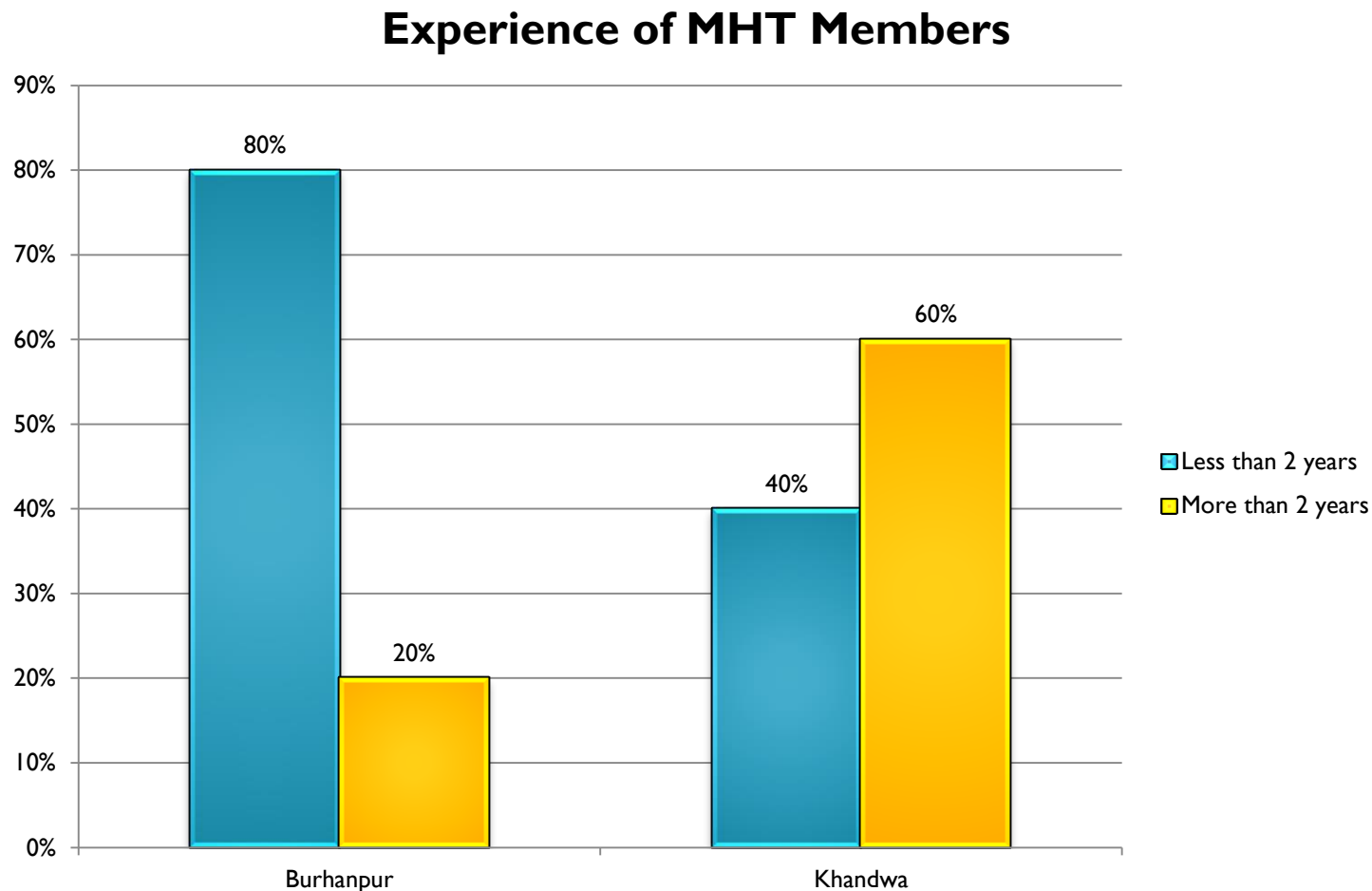
Graph 5:- Showing Standard practices followed by MHT members of Burhanpur and Khandwa district.



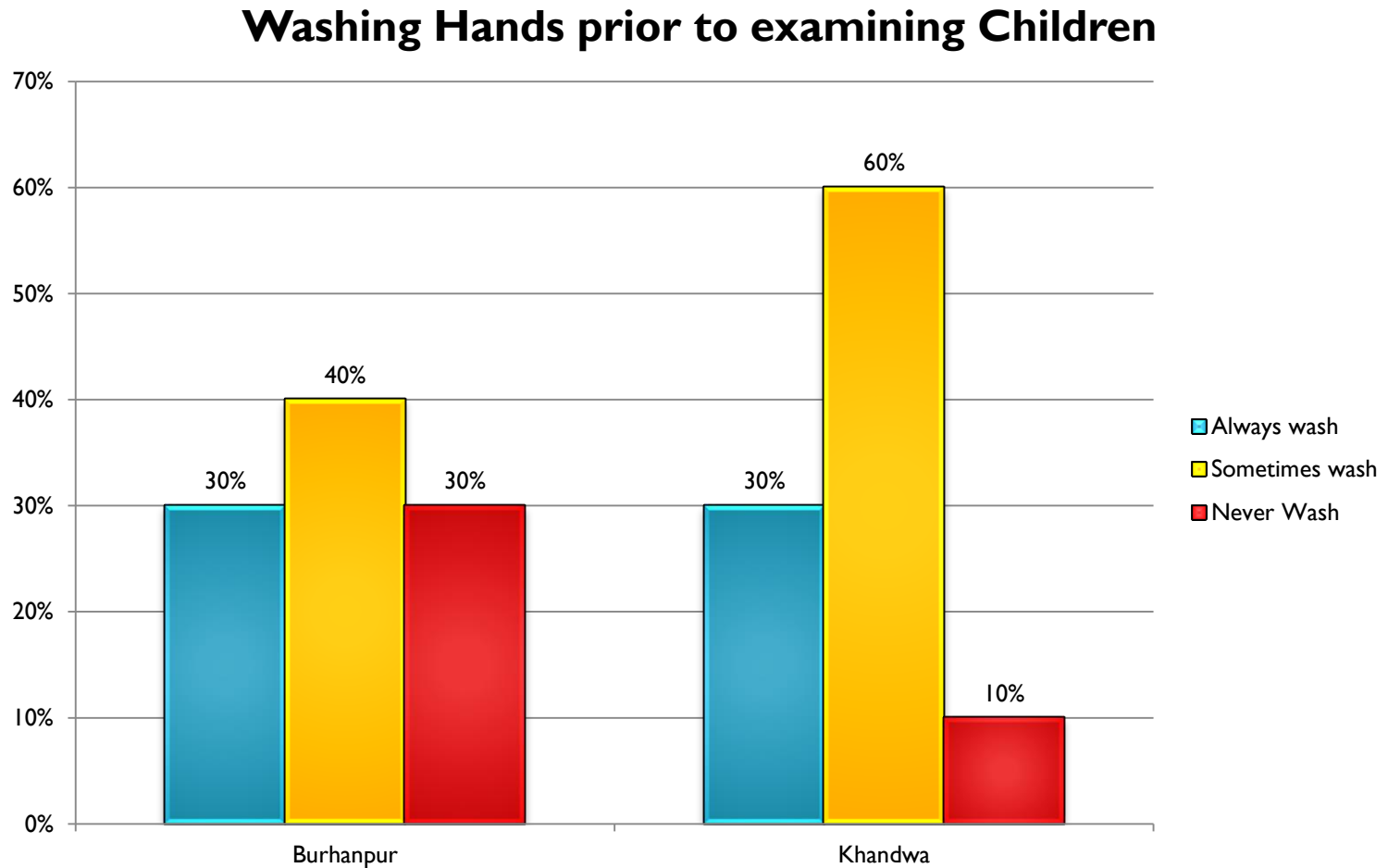
Graph 6:- Showing Caste wise distribution of Mobile Health Team members of Burhanpur and Khandwa district.



Graph 7:- Showing Experience wise distribution of Mobile Health Team members of Burhanpur and Khandwa district.



Graph 8:- Showing Hand washing practice among Mobile Health Team members of Burhanpur and Khandwa district



RECOMMENDATIONS

- 1) Monitoring of Mobile health teams (MHT)
- 2) More and More on the Spot Treatments by MHTs.
- 3) Take Private Medical and Dental Colleges on
Panel of RBSK.
- 4) By Changing the Disease Format of Reporting.

References:

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Thank You