Study on Knowledge and Practice of Home Based New Born Care Among ASHAs in Banaskantha, District of Gujarat

By

Yogesh Kumar Lahari

Dissertation submitted for the partial fulfillment of the

MBA Hospital and Health Management

Academic year, 2015-2017

The IIHMR University, Jaipur

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INSTITUTE OF HEALTH
MANAGEMENT RESEARCH
(WHO Collaborating Centre for District Health System Based on Primary Health Care)

IIHMR UNIVERSITY

TO WHOMSOEVER MAY CONCERN

This is to certify that Yogesh Kumar Lahari student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at NHM, Gujarat (Banaskantha) from 2nd February to 1st May.

The Candidate has successfully carried out the study designated to him during internship training and his approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish him all success in all his future endeavors.

Dean, Academics and Student Affairs

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To be obtained on official stationary

The certificate is awarded to

Name –Yogesh kumar lahari

In recognition of having successfully completed her
Internship in the department of

Name of Department -NHM GUJARAT-Banaskantha

And has successfully completed her Project on

A Study on KnowledgeAnd practice of Home Based New Born Care among ASHAs in Banaskantha

Date-: 2 February 2017 to 2 May 2017

Organization -NHM GUJARAT

He/She comes across as a committed, sincere & diligent person who has a strong drive and zeal for learning

We wish him/her all the best for future endeavors

Zonal Head-Human Resources

District Health Society Banaskantha
Palanpur

THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled A Study on knowledge & practice of Home-based New born care among Asha's of Banaskantha District of Gujarat and submitted by Yogesh kumar lahari Enrollment No. 0368 under the supervision of Dr. Suresh Joshi for award of MBA in Hospital and Health of the University carried out during the period from 2nd February to 1st May embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.

Yogesh Kumar Lahari
Signature

THE IIHMR UNIVERSITY, JAIPUR

CERTIFICATE BY SCHOLAR

This is to certify that all ethical issues have been considered while collecting data for my dissertation titled A Study on Knowledge and Practice of Home Based Newborn Care among Asha's of Banaskantha District of Gujarat.

Yogesh Kumar Lohan

Signature of student

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It is a matter of immense privilege for me to express my genuine thanks to all those who helped me through their skilled guidance, active co-operation and goodwill in completion of this study even at the cost of their problem.

My hearty gratitude is towards my guide Dr. Suresh Joshi, Professor, IIHMR Jaipur, for guiding this work. I am particularly indebted to him for providing the conceptual and theoretical background of this study as well as for suggesting me the line of approach. He has not only provided me stimulation off and again to collect and analyze me data but also shown his unique capacity of tolerance and direction to guide me at every crossroads. Without his keen interest and constant encouragement, this study would not have seen the light of the day. It is really a subject of great pride for me to work under such a learned expert. I pay my respects to him.

I express my gratitude towards my parents for their blessings. I am as well thankful to my friends for helping me and the encouragement that they provided to me for carrying out this dissertation work.

Finally yet importantly, I am very much thankful to CDHO Banaskantha ,ADHO Banaskantha, , EMO Banaskantha along with all THO,TPA, FA ,PHC MOs, NCD cell Banaskantha, MPWs,FHWs, & ASHAs of distBanaskantha and beneficiaries of the field area for their co-operation and participation, without which my study would not have been possible.

Yogeshkumarlahari

List of Figures:

ABBREVIATION

ANC	Antenatal Check-Up
ANM	Auxiliary Nurse Midwife
ASHA	Accredited Social Health Activist
HBNC	Home based new born care
FRU	First Referral Unit
IMR	Infant Mortality Rate
JSY	Janani Suraksha Yojana
LBW	Low Birth Weight
NMR	Neonatal Mortality Rate
NRHM	National Rural Health Mission
PHC	Primary Health Centre
SC	SUB CENTRE

Introduction-

In India, over 26 Million babies are born each year and about 940,000 Babies pass away Before 1 month of life currently, the infant mortality rate (IMR) for India is 39 per 1000 live births(SRS-2014), furthermore the neonatal mortality rate (NMR) is 26 per 1000 live births(Niti aayog-2013). The NMR contributes to 68% of the IMR, and any additional reduction in IMR can only come from a decline in NMR. a variety of studies on distribution of Neonatal deaths reveal that the most vulnerable time in the newborns life is during birth and the initial week of life. For this, effective interventions for the care of the mother and the baby during and immediately after delivery and in first few weeks of life are essential. Home based New born Care is one such intervention, aimed at improving new born survival by providing Care for both the mother and newborn from conception till the initial 42 days after delivery at the home/community levels, institutions wherever delivery takes place and again at home after discharge from the facility by means of ASHA workers who act as connecting link among the health services and the community

The main causes of neonatal mortality are supposed to be complications of prematurity (21%), birth asphyxia plus injury (23%), neonatal tetanus (7%), congenital anomalies (7%) and diarrhea (3%) with low birth weight contributing to a huge proportion of deaths. the majority of these newborns die at home as being cared by mothers, relatives and traditional birth attendants. Despite proven cost-effective solutions such as promoting ante natal tetanus toxoid immunization, skilled attendance during delivery, immediate and exclusive breast-feeding, and clean cord care, there has been relatively small change in neonatal mortality rate

In India, the Home Based Postnatal Newborn Care programme by Accredited Social Health Activists (ASHAs) under the National Rural Health Mission was started in 2011 to decrease neonatal mortality rates (NMRs). ASHAs get cash incentives intended for six postnatal home visits for newborn care.

Literature Review-

A study on new born care practices and home based postnatal care new born care program Mewat, Haryana, India ,2013 shows that mothers adopted a few safe practices, ASHA seems to have play a key role in facilitating the acceptance of safe practices, however the quality of services can be more improved. Study suggests that routine clinical assessment and Observation of the woman and her baby, routine infant screening help to detect potential disorders, support for infant feeding and ongoing provision of information and support. It provides maternal and child health services, including health counseling, Vaccination, physical examination of women, nutrition, immunizations, as well as weighting of children less than five year of age, all conducted on a monthly basis. Study concludes that knowledge-practice gaps existed in mother counseled by ASHAs. Reduced utilization of reproductive and child health services decreased opportunities for ASHA- mother dialogue on protected practices. Recommendation included training ANMs, training TBAs as ASHAs, innovative communication strategies for ASHAs and superior referral system.

A study to assess the Knowledge & Practices about Home Based Newborn Care among Accredited Social Health Activist (ASHA) in Rural Area. The cross-sectional exploratory research design with survey approach was used, where 37 ASHA of rural area of Maharashtra were assessed. The tool, knowledge questionnaire & practices checklist on the subject of Home Based Newborn Care was used for data collection of study. After consent data collection had done of Total 37 ASHA. They were assessed for knowledge & practices about home based newborn care, the majority of ASHA were belonging to the (31-40) years of age group (48.6%), educated up to the SSC (43.2%), had experience (59.5%) between (5-10 years), 94.6% of them had finished their training, 67.6% need not done the HBNC training. The 5.41% of the ASHA had poor level, 83.78% had average and 10.81% had good level of knowledge score correspondingly. The 16.22% of the ASHA had poor, 72.97% had average and 10.81% had good level of practice score correspondingly The study show that the majority of the ASHA's had average knowledge and Practices regarding home based newborn care and recommend that there is need for the competency based training to get better their skills

Rationale

Post natal care is established in response to concern regarding the contemporary high maternal mortality rate. A considerable proportion of mother prefer to return home within a only some hours after delivery, which means that home care is have to to be available even for such babies born in institution to tide them over the first day and later.

Furthermore after training of module 6 and 7 of ASHAs completed in Banaskantha district of Gujarat there has been no attempt to have a systemic assessment of Knowledge retained on different variables and activities being carried out by ASHA for HBNC or on any assessment on correct practice. In order to initiate any program intervention to provide effective HBNBC it was imperative to assess the current situation of knowledge and practice of ASHAs hence this study is performed as knowledge and practice of ASHA is one of the critical aspects of health system to improve the coverage of community based new born health care Program.

Research Question

What are the Current Knowledge and Practices of ASHAs in Providing Home Based Newborn Care at Banaskantha District of Gujarat?

General Objectives-

- To assess the Knowledge of ASHAs regarding Home based New born care.
- To assess the Practice of ASHAs regarding Home based New born care

Specific Objectives-

- To assess the Knowledge of ASHAs on HBNC kit.
- To assess the Knowledge of ASHAs on HBNC visit.
- To assess the Knowledge of ASHAs on kangaroo mother care.
- To assess the Practice of ASHAs on measuring temperature.
- To assess the Practice of ASHAs on weighing the baby.
- To assess the Practice of ASHAs on hand washing.

RESEARCH METHODOLOGY

Study Design

The study design is Cross sectional descriptive study**.**

Study Duration

3 months (February TO April 2017)

Study Area

The study were conducted in three blocks of Banaskantha district named as **Amirgarh, Deesa and Danta**

Study Participants

ASHAs of **Amirgarh,Deesa and Danta** block who have **undergone Modules 6&7 training.**

Sample selection process-

Amirgarh,Deesa and Danta block selected out of 12 blocks by simple Random sampling and from each block 36 Sub-Centre selected randomly and one working ASHAs selected randomly of this Sub-Centre were taken as Sample and interviewed (Total 108 sub-Centre)

Sample size- 108

Total ASHAs- **108** (one working ASHAs selected randomly of total 108 Sub-Centre, As there are 2-6 ASHAs in 1 sub-centre of banaskantha)

Data collection- Around 20 visits undertook for complete data collection**.** The tool for assessing knowledge of ASHAs was structured questionnaire by personal interview data was collected and for assessing practices and skills by observing ASHAs during home based neonatal services.

Parameters for Assessment–

- Weighing the newborn
- Measuring new born temperature
- Promoting Hand washing

Data Analysis– Data of knowledge of ASHAs regarding hand washing, skin and eye care and practice of ASHAs in weighing new born, measuring new born temperature collected, then it will be crosschecked for any incomplete or partial filling then will be entered in excel and analyze with the help of Pivot Function.

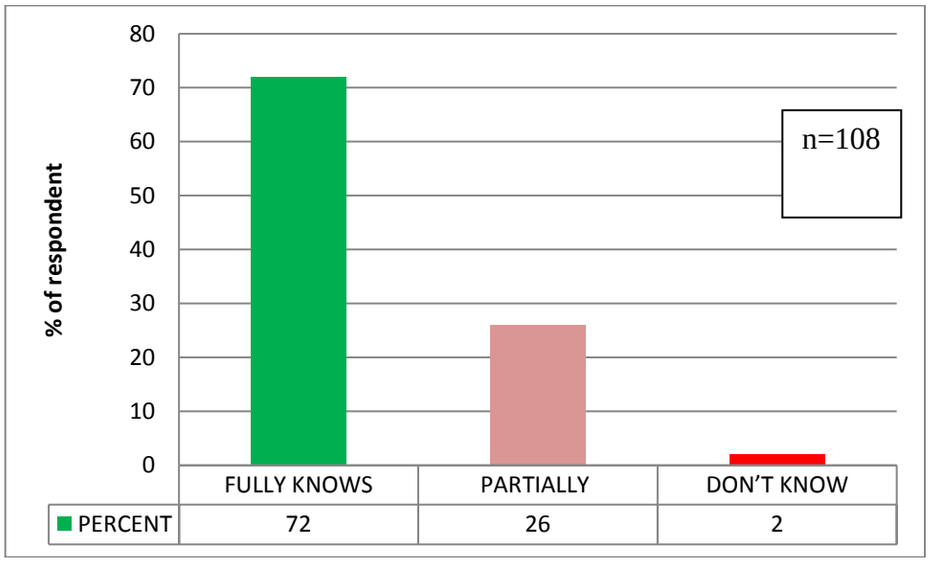
Ethical Consideration- an Informed consent will be obtained before asking for information and confidentiality will be ensured. The participation will be kept voluntary and the ASHAs will be given the liberty to withdraw participation at any point during the study. The information collection would be purely unbiased and unpressurised. The results and conclusion will be conveyed honestly to the organization and transparency will be maintained with the subjects also

RESULTS-

2.7.1 Number of ASHAs has HBNC kit

Almost100% of ASHAS has HBNC kit

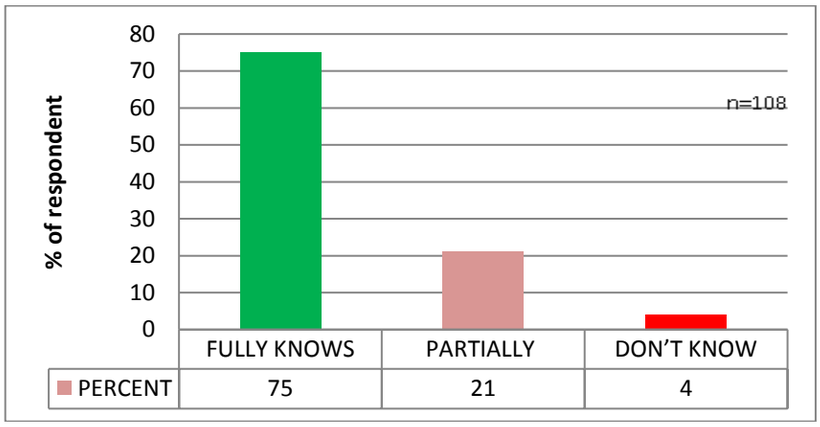
Chart 1-The Knowledge of ASHAs regarding Home visit in case of Home Delivery



- Fully knows- know about all 7 visit(1st day,3rd day.7thday,14TH day,21st,day,28th day,42th day after birth)
- Partially correct Answer- know about less than 7 correct visit
- Don't know-not know about any visit of HBNC

The chart no.1 shows that 72% ASHAS knew correctly when to visit in case of home delivery while 26% ASHAs partially knew the correct answer and 2% don't know

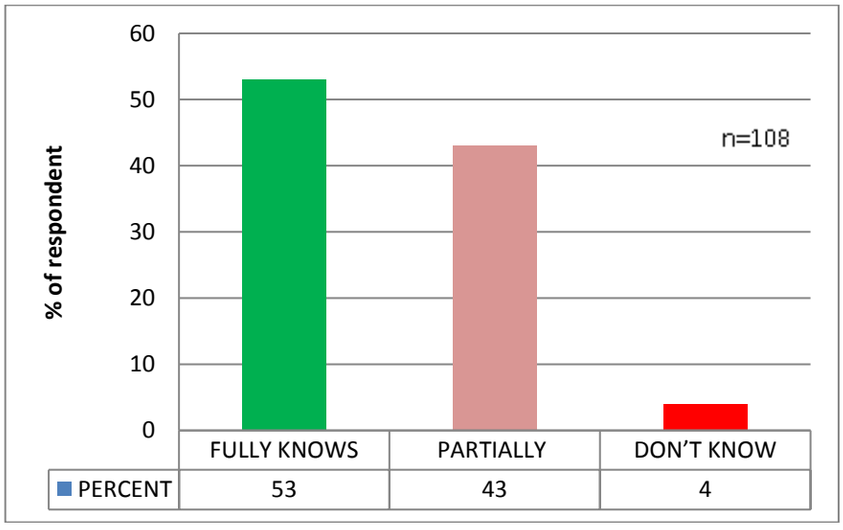
Chart 2 - the Knowledge of ASHAs regarding Home visit in case of institutional Delivery.



- **Fully Knows**- Know about all visit(3rd day,7thday,14TH,day,21st,day,28TH day,42th day after birth)
- **Partially knows**- know only few correct visits
- **Don't know**- these ASHAs don't know about any visit of HBNC

The chart no.2 shows that 75% ASHAs knew when to Visit in case of Institutional Delivery while 21 % ASHAs partially knew the correct answer and 2% ASHAs don't know when to visit

Graph-3 The Knowledge of ASHAs regarding things carried during HBNC visit



- **Fully Knows**- Know about all things need to carry like Weighing Machine, Thermometer, Baby Blanket ,Timer, Gentian violet, PCM Syrup, cotton gauze, soap and soap case
- **Partially knows**- know about few things
- **Don't know**- these ASHAs don't know any thing

The chart no.3 shows that 53% ASHAs fully knew about things carry during HBNC while 43 % ASHAS partially knew the correct answer and 4% ASHAs don't know what to carry

Graph-4 Knowledge of Information related to mother after delivery

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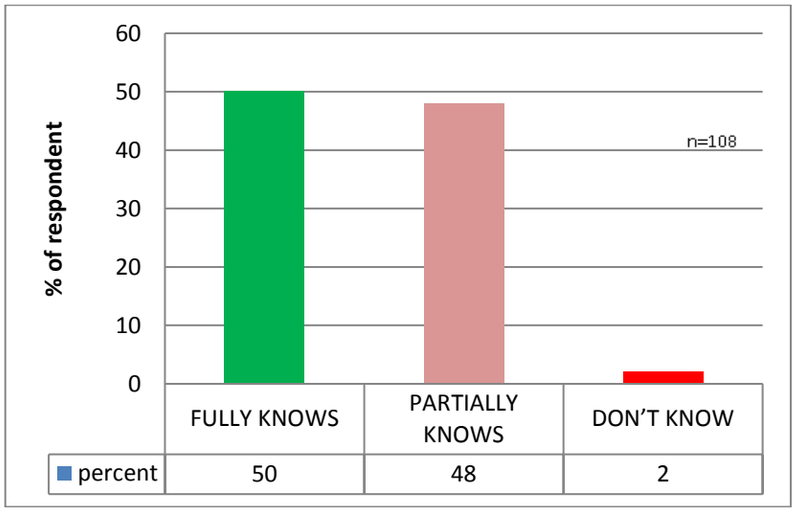
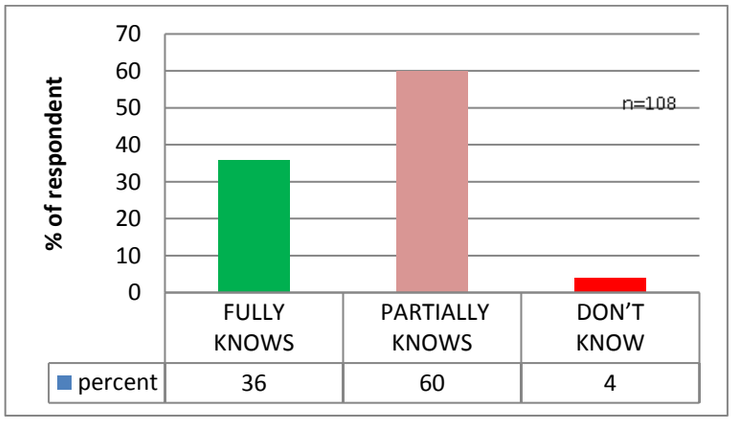


- **Fully Knows**- Know about all correct answers-Exclusive breastfeeding (min.8 times a day), Hand washing, Family planning.
- **Partially knows**- know only few information
- **Don't know**- these ASHAs don't know any information

The graph no.5 shows that around 50% ASHAs fully knew what Information to give mother after delivery while 48 % ASHAs partially knew the correct answer and 2% ASHAs don't know

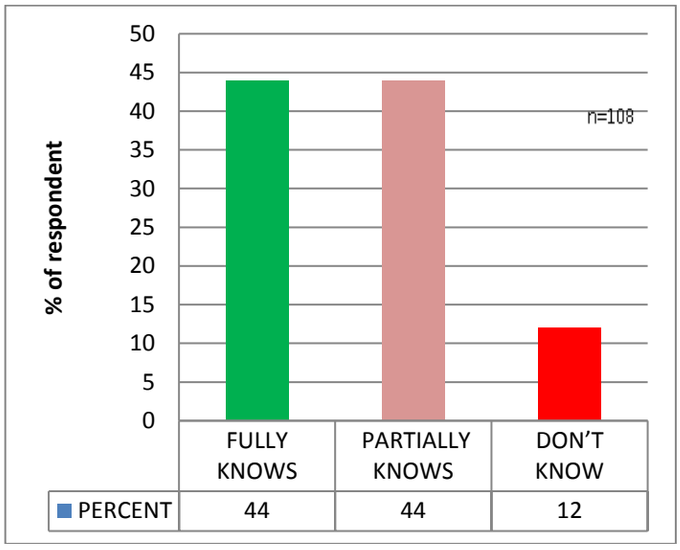
Graph 5- Knowledge regarding what expected to do during the new-born visits



- **Fully Knows**- fully know all the answer - Enquire and fill mother information, Wash your hand well as taught, Examine the baby, Provide care of eyes, skin and cord
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph no. 5 shows that 36% ASHAs fully knew what expected to do during the new born visit while 60 % ASHAs partially knew the correct answer and 4% ASHAs don't know

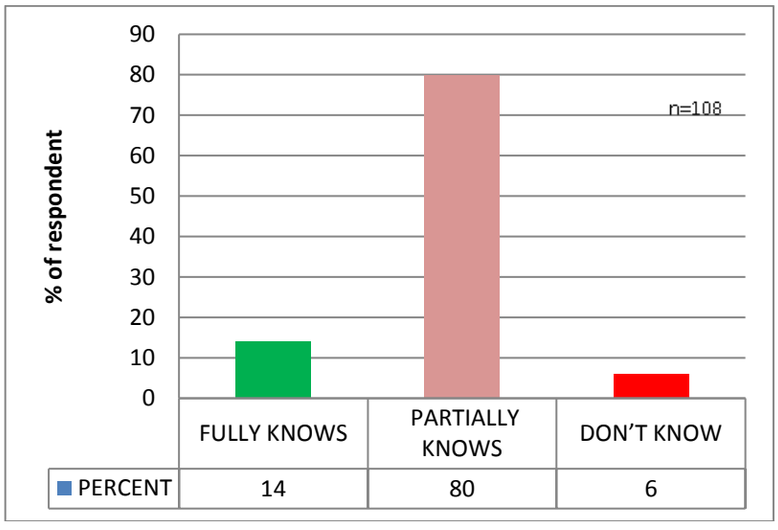
Graph-6 Knowledge of precautions observed in baby during HBNC visit



- **Fully Knows**- fully know all the answer - Bathing the baby, Keep the baby away from persons who are ill, Not be taken to place where large gathering,
- **Partially knows**- know only few precautions
- **Don't know**- these ASHAs don't know any precautions

The graph no.6 shows that 44% ASHAs fully knew about precautions observed in baby during HBNC visit while 44% ASHAs partially knew the correct answer and 12% ASHAs don't know

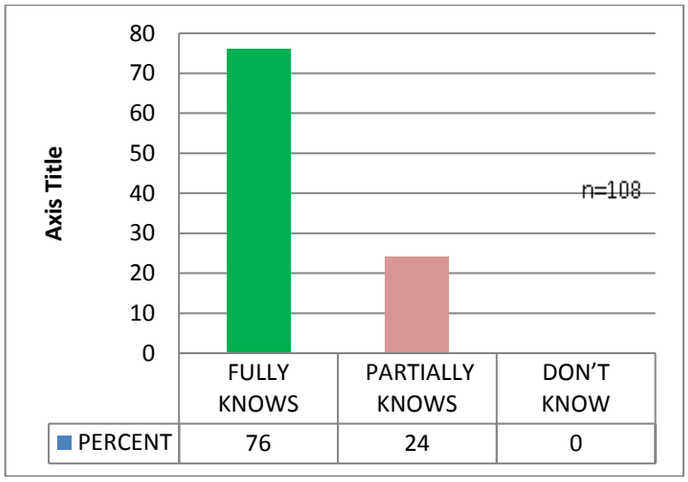
Graph 7- KNOWLEDGE OF COMPLICATION OBSERVED IN BABY DURING HBNC VISIT-



- **Fully Knows**- fully know all the answer – Diarrhoea, pneumonia, Pallor/jaundice, High fever/,sepsis/infection/,pimples/rashes
- **Partially knows**- know about few complication
- **Don't know**- these ASHAs don't know any complication

The graph shows that 14% ASHAs were have full knowledge of complications need to observed in baby while 80% ASHAs partially knew the correct answer and 6% ASHAs don't know

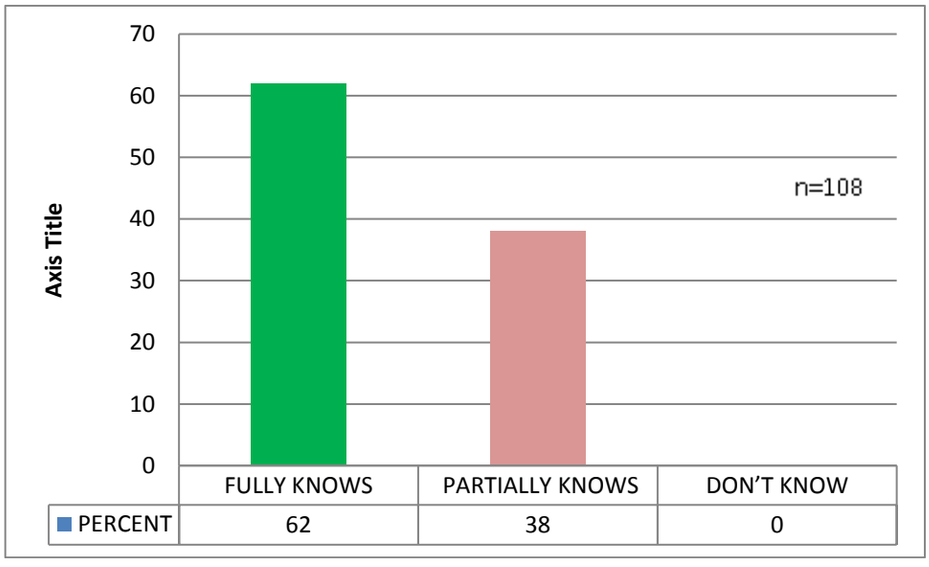
Graph 8-KNOWLEDGE OF ASHAs regarding When to be breastfeeding Initiated



- **Fully Knows**- fully know all the answer Within 1 hour and immediately
- **Partially knows**- know only few information
- **Don't know**- no information about initiation of breastfeeding

The graph shows that around 76% ASHAs were have knowledge when to be breast feeding initiated while 24% ASHAs partially knew the correct answer

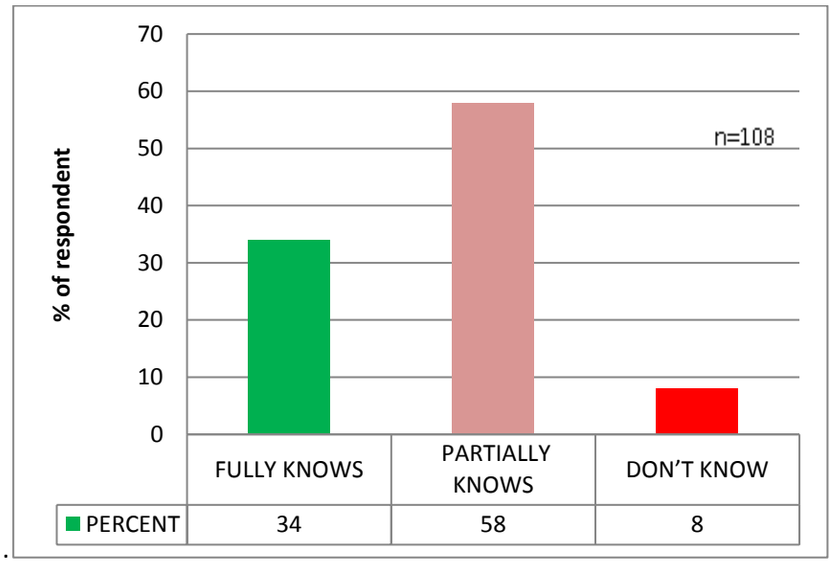
Graph 9-KNOWLEDGE OF ASHAs IN ADVICING MOTHER ABOUT FEEDING PRACTICES-



- **Fully Knows**- fully know all the answer –initiation of feeding within 1 hour, Intake of colostrums, Exclusive breastfeeding, Positioning of baby
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph shows that Around 62% ASHAs were have full knowledge In advising mother about feeding practices while 38% ASHAs partially knew the correct answer and 0% ASHAs don't know

Graph 10- KNOWLEDGE OF ASHAS REGARDING SIGNS IN BABY OF NOT GETTING MILK-

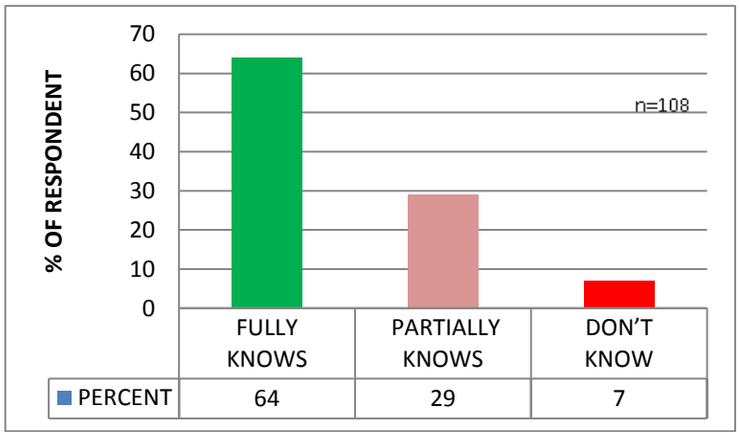


- **Fully Knows**- fully know all the answer - Poor weight gain, Passing small amount of concentrated urine
- **Partially knows**- know about few information

  Don't know- these ASHAs don't know about any sign

  Around 34% ASHAs were having fully knowledge of benefits of breastfeeding 58% ASHAs partially knew the correct answer and 8% ASHAs don't know.

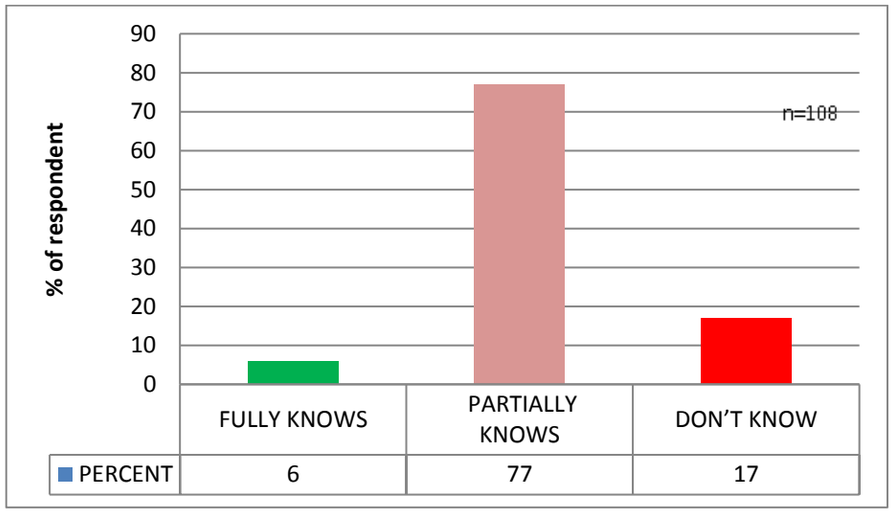
Graph 11- KNOWLEDGE OF BENEFITS OF BREASTFEEDING-



- **Fully Knows**- fully know all the answer Helps womb to contract plus the placenta is expelled easily, Reduce the risk of extreme bleeding following delivery
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph shows that Around 64% ASHAs were have fully knowledge of benefits of breastfeeding 29% ASHAs partially knew the correct answer and 7% ASHAs don't know

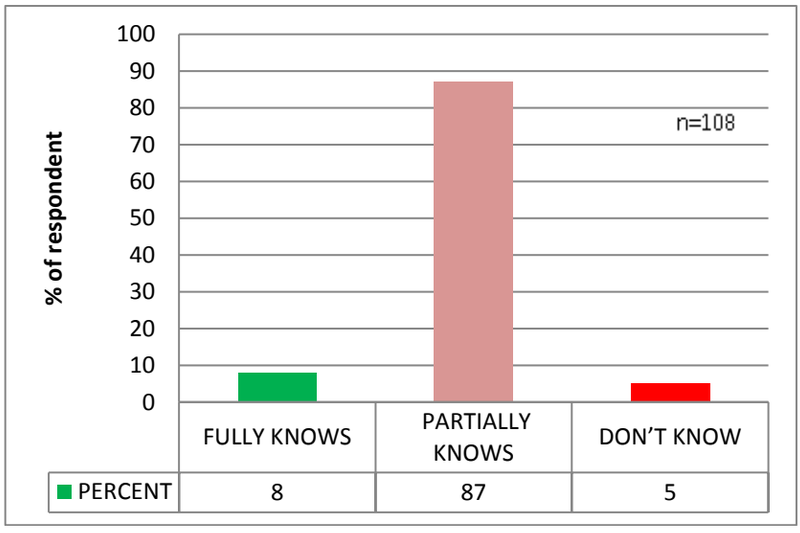
Graph 12- KNOWLEDGE OF BENEFITS OF KMC



- **Fully Knows**- fully know all the answer- Reduces risk of hypothermia in baby, encourage lactation and weight gain, Reducing infection and hospital stay
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph shows that Around 6% ASHAs were have full knowledge of benefits of kangaroo mother care while 77% ASHAs partially knew the correct answer and 17% ASHAs don't know

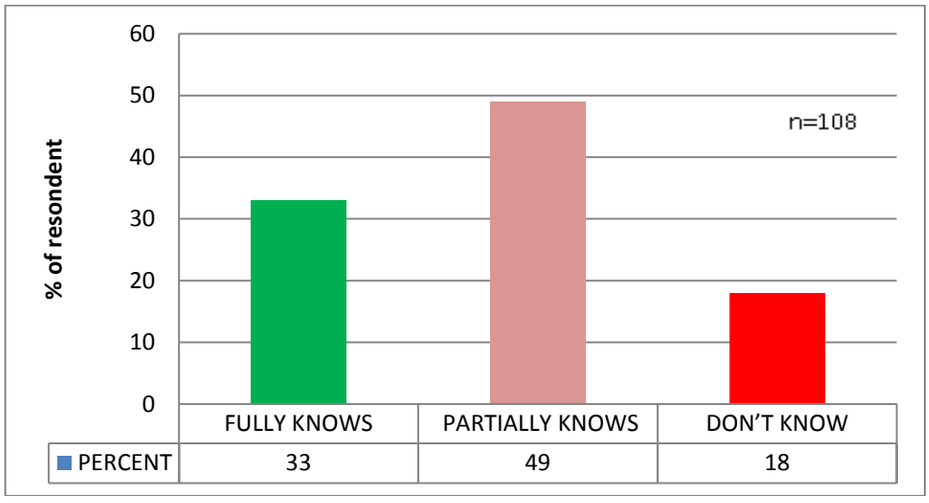
Graph 13- KNOWLEDGE OF CORD CARE



- **Fully Knows**- fully know all the answer- Cord should be kept dry, Nothing should be applied to cord
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

Around 8% ASHAs were have full knowledge of practice for cord care while 87% ASHAs partially knew the correct answer and 0% ASHAs don't know

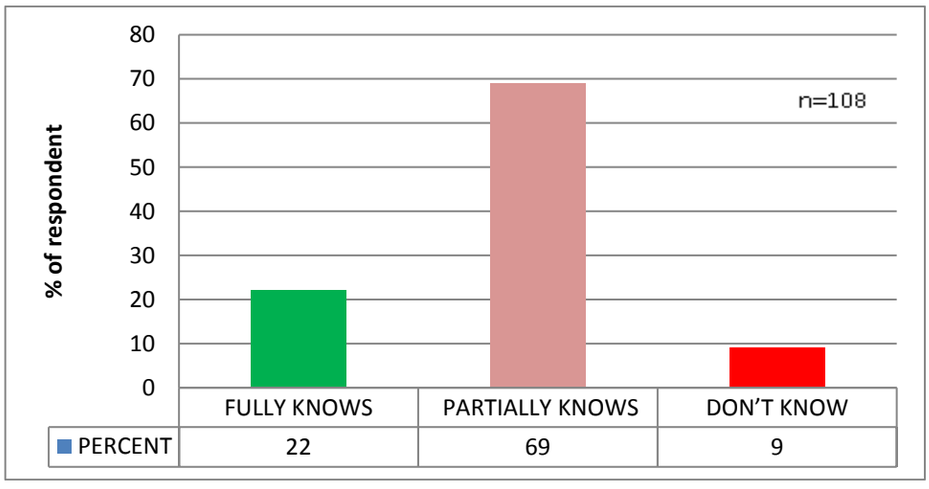
Graph 14-KNOWLEDGE ABOUT ASPHYXIA



- **Fully Knows**- fully know all the answer - No cry of baby, weak cry of baby, No breathing in baby or weak breathing, Any one of above
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph shows that around 33% ASHAs were have full knowledge about asphyxia while 49% ASHAs partially knew the correct answer and 18% ASHAs don't know

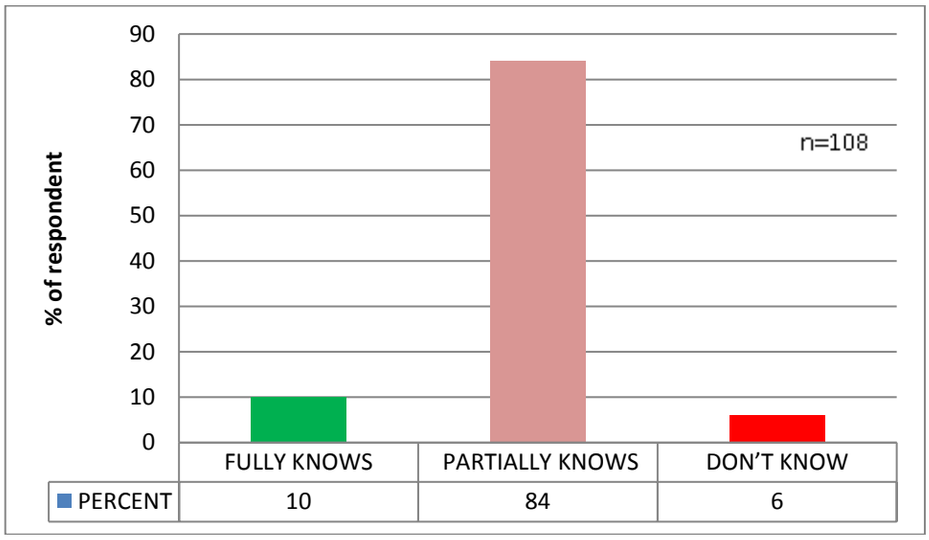
Graph 15- KNOWLEDGE ABOUT HIGH RISK BABY-



- **Fully Knows**- fully know all the answer - Birth weight less than 2000 gram, Pre-term, Baby not taking feeds on day one
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph shows that Around 22% ASHAs were have full knowledge about high risk baby while 69% ASHAs partially knew the correct answer and 9% ASHAs don't know

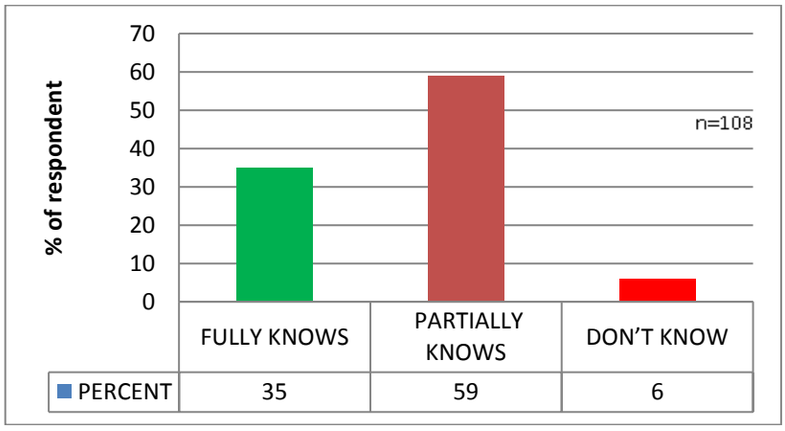
GRAPH-16 KNOWLEDGE OF MAINTENANCE OF TEMPERATURE IN BABY-



- **Fully Knows**- fully know all the answer - Cover head and extremities ,Keep near to mother, Kangaroo mother care
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph shows that Around 10% ASHAs were have full knowledge of maintenance of temperature in baby while 84% ASHAs partially knew the correct answer and 6% ASHAs don't know

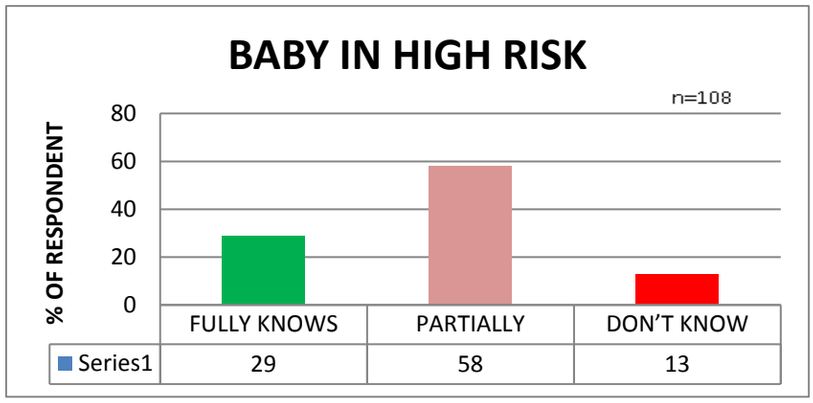
Graph 17-KNOWLEDGE OF SIGNS TO BE EXAMINED



- **Fully Knows**- fully know all the answer - Swelling And Pus In Eyes, Weight/temperature, pus filled pimples, Crack and rashes on skin
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph shows that around 35% ASHAs were have full knowledge of signs to be examined in child while 59% ASHAs partially knew the correct answer and 6% ASHAs don't know

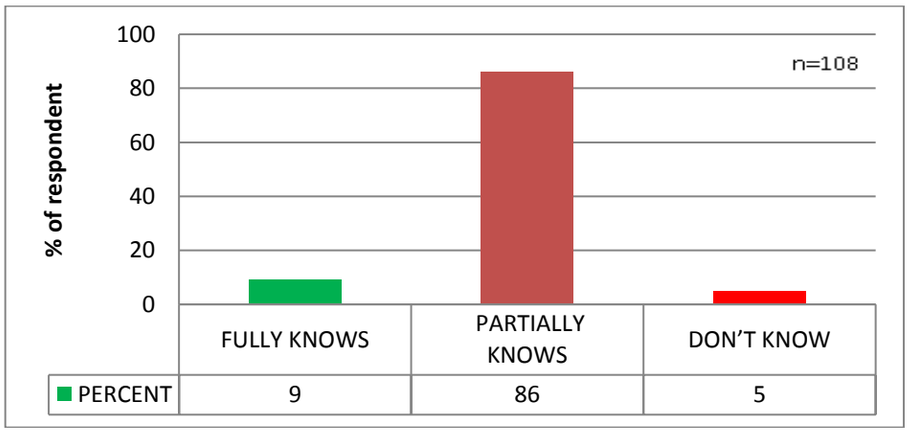
Graph 18- KNOWLEDGE OF PRACTICE OF ASHA WHEN SHE FOUND HIGH RISK BABY-



- **Fully Knows**- fully know all the answer - add to the number of home visits after delivery from 5 to 13. A daily visit if possible for the initial week, Explain the high risk issue to the parents and family of Baby.
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

Around 29% ASHAs were have fully knowledge regarding practice when she found high risk baby while 24% ASHAs partially knew the correct answer and 13% ASHAs don't know

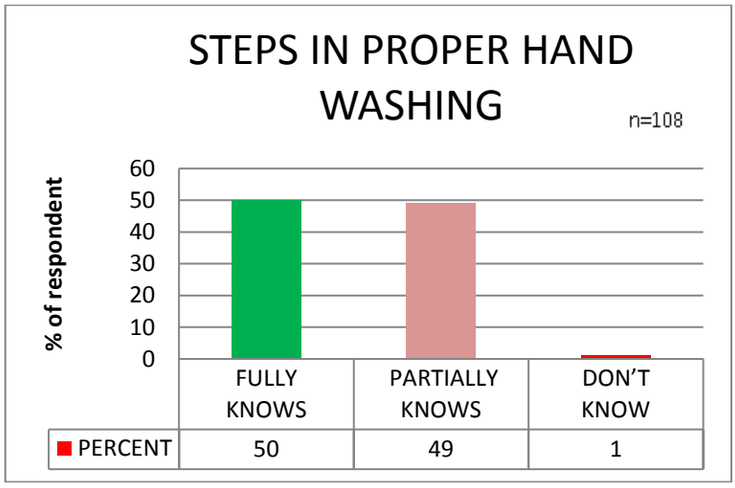
Graph 19-KNOWLEDGE OF PREVENTION OF SEPSIS



- **Fully Knows**- fully know all the answer - Good hygiene: frequent hand washing; clean instruments during delivery; clean clothes, Keeping the baby warm during the cold season, Breastfeeding (early initiation and on demand, and exclusive),Keeping the umbilical cord clean and dry
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

Around 9% ASHAs were have full knowledge of sepsis prevention while 86% ASHAs partially knew the correct answer and 5% ASHAs don't know

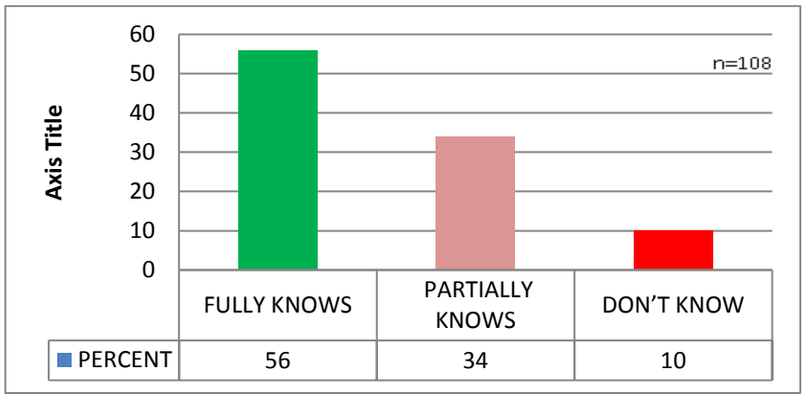
Graph 20- KNOWLEDGE OF STEPS IN HAND WASHING



- **Fully Knows**- fully know all the answer Wet hands and forearm up to elbow with dirt-free water, Apply soap in addition to scrub forearm, hands and fingers, Rinse with dirt-free water, air dry with hands up
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

Around 50% ASHAs were have full knowledge of hand washing while 49% ASHAs partially knew the correct answer and 1% ASHAs don't know

Graph 21-KNOWLEDGE OF KEEPING NEW BORN WARM



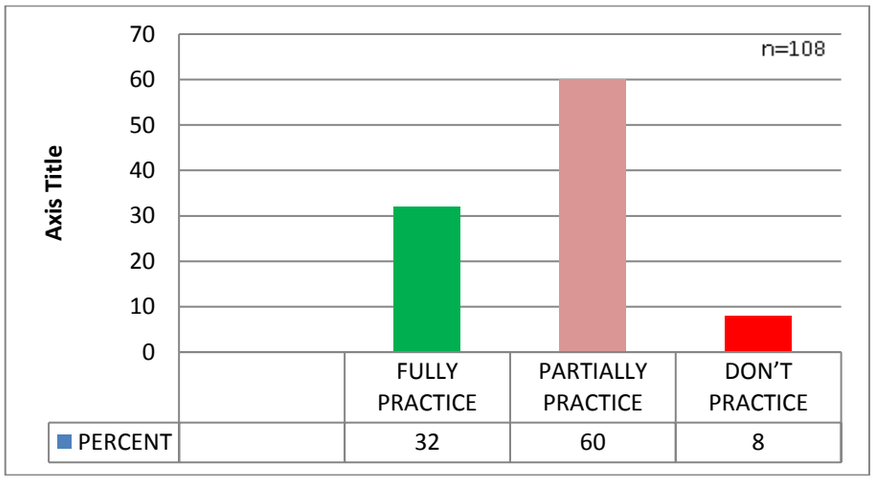
- **Fully Knows**- fully know all the answer - Before delivery, warm up the room, Immediately after delivery dry the baby, place a cap on the baby, Place skin to skin contact with mother, Put clothes on top of the baby
- **Partially knows**- know about few information
- **Don't know**- these ASHAs don't know any information

The graph shows that around 56% ASHAs were have full knowledge of keeping new born warm while 49% ASHAs partially knew the correct answer and 1% ASHAs don't know

KNOWLEDGE ABOUT INCENTIVES

Around 96% ASHAs were aware about incentive while 4% ASHAs don't know about incentives

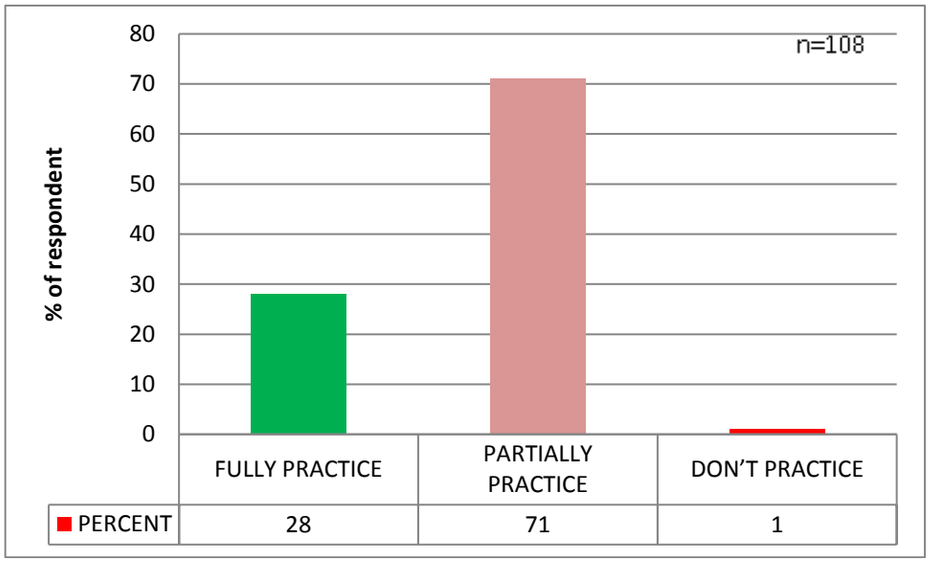
Graph 22-PRACTICE OF MEASURING TEMPERATURE AMONG ASHAs



- **Fully Knows**- fully practiced all the steps of measuring temperature -
  - Take thermometer out, grasp at broad end and clean the shining tip with cotton
  - push the pink button one time to turn the thermometer on
  - Hold thermometer upward and place the shining tip in the middle of armpit
  - When you listen to 3 short beeps look at the display
  - Read the figure in display window
  - Record the temperature reading on the form
  - Turn the thermometer off
  - Clean shining tip
- **Partially knows**- practiced few steps
- **Don't know**- these ASHAs don't practice measuring of new born temperature

Around 32% ASHAs were have doing full practice of measuring temperature while 60% ASHAs partially doing practice of measuring temperature and 8% ASHAs don't practice measuring temperature of new born baby in HBNC visit.

Graph 23-PRACTICE OF MEASURING WEIGHT OF NEW BORN AMONG ASHAs-



- **Fully Knows**- fully practiced all the steps-.
  - ✓ Place sling on scale
  - ✓ Hold scale with top bar off the floor, keeping the adjustment knob on eye level
  - ✓ Turn the screw until its apex fully cover the red and o is noticeable
  - ✓ Remove sling on hook and place it on a dirt-free cloth on the ground
  - ✓ set body with minimum clothes on, in sling and substitute the sling on hook
  - ✓ Holding top bar cautiously, as you stand uplift the scale and sling with baby off the ground, until the knob is at eye level
  - ✓ Read the baby weight
  - ✓ Gently put the sling with baby in it, on the ground as well as unhook the sling
  - ✓ Remove the baby as of the sling and hand it over to its mother
  - ✓ Record the baby weight
- **Partially knows**- practiced only few steps

Don't know- these ASHAs don't practice measuring weight of new born baby

The graph shows that Around 28% ASHAs were have fully practicing measuring of weight while 71% ASHAs partially practicing and 1% ASHAs don't practice measuring of weight in HBNC visit

Graph24 -PRACTICE OF HANDWASHING AMONG ASHAs

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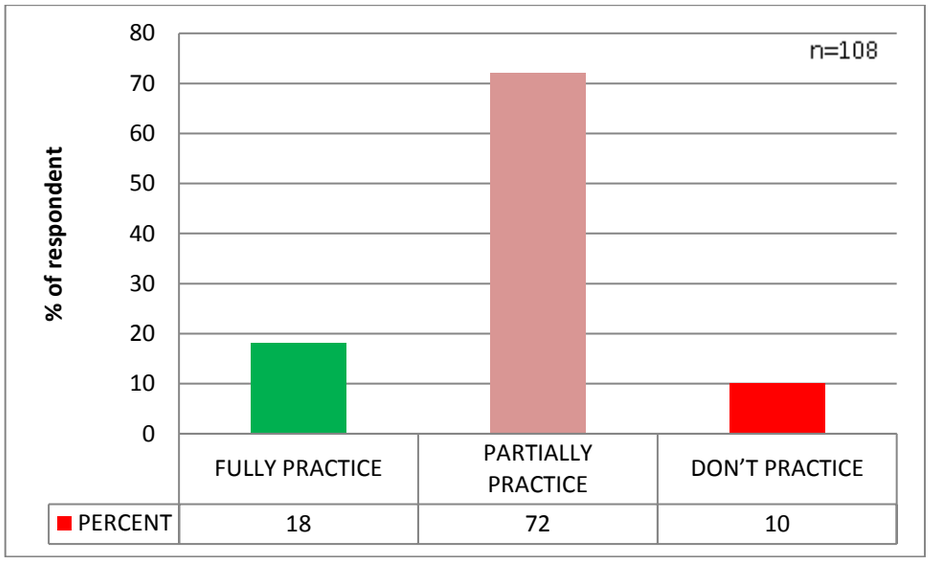

FIGURE- 2.7.25

- **Fully Knows**- fully practiced all the steps of hand washing -
  - ✓ take away bangles and wrist watch
  - ✓ Wet hands and forearms up to elbow by dirt-free water
  - ✓ Apply soap and scrub forearms, hands and fingers (especially nails) thoroughly
  - ✓ Rinse with clean water
  - ✓ Air-dry with hands up and elbow facing the ground
  - ✓ Do not contact with your hands the ground, floor or unclean objects after washing your hand

- **Partially knows**- practiced few steps

Don't know- these ASHAs don't practice hand washing

Around 18% ASHAs were having fully practicing hand washing while 72% ASHAs partially practicing and 10% ASHAs don't practice hand washing in HBNC visit.

DISCUSION-

- Almost100% of ASHAS has HBNC kit
- Almost 72% ASHAS knew correctly when to visit in case of home delivery while 26% ASHAs partially knew the correct answer and 2% don't know
- Around 75% ASHAs knew when to Visit in case of Institutional Delivery while 21 % ASHAs partially knew the correct answer and 2% ASHAs don't know when to visit
- Around 53% ASHAs fully knew about things carry during HBNC while 43 % ASHAS partially knew the correct answer and 4% ASHAs don't know what to carry
- Around 50% ASHAs were have full knowledge of hand washing while 49% ASHAs partially knew the correct answer and 1% ASHAs don't know
- Around 10% ASHAs were have full knowledge of maintenance of temperature in baby while 84% ASHAs partially knew the correct answer and 6% ASHAs don't know
- Around 36% ASHAs fully knew what expected to do during the new born visit while 60 % ASHAs partially knew the correct answer and 4% ASHAs don't know
- Around 56% ASHAs were have full knowledge of keeping new born warm while 49% ASHAs partially knew the correct answer and 1% ASHAs don't know
- Around 50% ASHAs fully knew what Information to give mother after delivery while 48 % ASHAs partially knew the correct answer and 2% ASHAs don't know
- Around 6% ASHAs were have full knowledge of benefits of kangaroo mother care while 77% ASHAs partially knew the correct answer and 17% ASHAs don't know

Conclusion-

The study aimed to assess the knowledge and practice of three block of banaskantha district.It is evident from the result that thorough knowledge level is average and they are not efficient when it comes to practicing the services. Almost 72% of ASHAs had a correct knowledge regarding the no. of visits to be made for HBNC. Around 10% ASHAs were have full knowledge of maintenance of temperature in baby while 84% ASHAs have partial knowledge, similarly Around 6% ASHAs were have full knowledge of benefits of kangaroo mother care while 77% ASHAs partially knew the correct answer and 17% ASHAs don't know. Only 9% ASHAs were have full knowledge of sepsis prevention while 86% ASHAs partially knowledge 5% ASHAs don't have any knowledge. During home visits only checking of weight and temperature is done by most of ASHAS in which Around 32% ASHAs were have doing full practice of measuring temperature while 60% ASHAs partially doing practice of measuring temperature and 8% ASHAs don't practice measuring temperature of new born baby in HBNC visit. Only 18% ASHAs were having fully practicing hand washing while 72% ASHAs partially practicing and 10% ASHAs don't practice hand washing in HBNC visit. Ensuring refresher training, regular supportive supervision can make HBNC effective and thus help in achieving the goal of reduction of maternal mortality ratio and neo-natal mortality.

LIMITATION OF THE STUDY-

- This study is done in 3 blocks of total 14 blocks of banaskantha district and sample collected is small, hence cannot be generated over a large population
- Time constraints for the various activities of the project.

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- National Health Mission. ASHA Training Modules. Available from: *http://nrhm.gov.in/communitisation/asha/resources/asha-training-modules.html*
- Srivastava SR & Srivastava PS. Evaluation of trained Accredited social Health Activist (ASHA) workers regarding their knowledge, attitude, practices about child health. Rural and remote health12:2099(online) 2012 Dec 3: Available from: www.rrh.org.au

Questionnaire

INTRODUCTION

Hi/Namaste. My name is Dr.Yogesh Kumar lahari. I am doing job in NHM Gujarat in Banaskantha district as a DPC. I am conducting a survey in your area to understand the current status of knowledge and practice of Ashas in providing home based new born care Services. To undertake and complete the survey, I require your cooperation and support. You have been chosen for the survey. I will ask you a few questions about knowledge and practice it would take 20 – 30 minutes to complete the interview.

I assure you that your responses would be held confidential and will not be shared with anyone except for data analysis.

You can take part in the survey as per your own will. If you don't want to answer any question, you can tell me so that I can skip to the next questions. If you wish to then you can stop discussion at any moment of time.

May I begin the interview now?

Respondent agrees to interviewed -1 respondent doesn't agreed to be interviewed-end

Identification details

a)Name of SC _____

b)Name of block _____

c) Interview date: Timings of interview : Start _____ End: _____

Instructions

- The set of questionnaire is divided into two sections.
- You have to encircle the response in the coding category.

Section A
General Information about Respondent

Coding category
(Encircle theresponse)

I. Name _____
II. Age _____
III. Designation _____
IV. Address _____
V. Mobile No _____
VI. Education level: 1. Middle-a2. Secondary-b

3. Higher secondary-c 4.Graduation and above-d
7. Any other (Please specify)……..

I. Work Experience (in years): 1. 0-5-a

2. 6-10-b
3. 10 & above-c

Section-B

Instruction-

- You have to encircle the response in the coding category
- Multiple response required for some questions
- Probing is allowed
- Only Spontaneous response

Responses of ASHAs regarding knowledge of Hbnc

Q.No.	Question	Coding category (Encircle only response)		INSTRUCTION	Skip
1.	Do you have HBNC Kit?	• Yes • no	a b	Encircle the one response	If No, End of Interview
2.	When should you visit new born in case of Home delivery?	• 1st day • 3rd day • 7thday • 14TH day • 21st,day • 28th day • 42th day after birth • Don't know	a b c d e f g h	Multiple response required and encircle all response	
3.	When should you visit new born in case of institutional delivery?	• 3rd day • 7thday • 14TH,day	a b c d	Multiple response required and encircle all response	

		• 21st,day • 28TH day • 42th day after birth • DONT KNOW	e f g		
4.	What are the things you carry along with you during HBNC visits?	• Weighing Machine • Thermometer, • Baby Blanket • Timer, Gentian • violet, PCM Syrup, • cotton gauze, • soap and soap case, • Don't know	a b c d e f g h	Multiple response required and encircle all response	
5.	What information related to mother you gives to mother?	• Exclusive breastfeeding(min.8 times a day) • Hand washing • Family planning • Don't know	a b c d	Multiple response required and encircle all response	

6.	What Are you expected to do during the new-born visits?	• Enquire and fill mother information • Wash your hands well as taught • Examine the baby • Provide care of eyes, skin and cord • Don't know	a b c d e	Multiple response required and encircle all response	
7.	What general precautions you explain the family?	• Bathing the baby • Keep the baby away from people who are sick • Not be taken to place where large gathering • Don't know	a b c d	Multiple response required and encircle all response	
8.	What complications you need to observe in baby during home visit?	• Diarrhoea • pneumonia • Pallor/jaundice • High fever/ • sepsis/infection/ • pimples/rashes • Don't know	a b c d e f g	Multiple response required and encircle all response	
9	When should the Breastfeeding be initiated after birth?	• Within 1 hour • immediately • Don't know	a b c	Multiple response required and encircle all response	
10	What advice you give to mother regarding feeding practices	• initiation of breast feeding within 1 hour • Intake of colostrum • Exclusive breastfeeding • Positioning of baby • Don't know	a b c d e	Multiple response required and encircle all response	

11.	What are the signs that baby is not getting enough milk?	• Poor weight gain • Passing small amount of concentrated urine • Don't know	a b c	Multiple response required and encircle all response	
12.	What are benefits of breastfeeding for mother?	• Helps womb to contract and the placenta is expelled easily • Reduce the risk of excessive bleeding after delivery • Don't know	a b c	Multiple response required and encircle all response	
13	What are benefits of kangaroo mother care?	• Reduces risk of hypothermia • Promote lactation and weight gain • Reducing infection and hospital stay • Don't know	a b c d	Multiple response required and encircle all response	
14.	What practice for cord care do you advice mother?	• Cord should be kept dry • Nothing should be applied to cord • Don't know	a b c	Multiple response required and encircle all response	

15	Which condition is called asphyxia?	• No cry • weak cry • No breathing or weak breathing • Don't know	a b c d	Multiple response required and encircle all response	
16	When baby will be called as high risk baby?	• Birth weight less than 2000 gram • Pre-term • Baby not taking feeds on day one • Don't know	A b c d	Multiple response required and encircle all response	
17	What advice do you give mother regarding maintenance of temperature of the baby?	• Cover head and extremities • Keep near to mother • Kangaroo mother care • Don't know	a b c d	Multiple response required and encircle all response	
18	What are the signs to be examined in child during HBNC?	• Swelling And Pus In Eyes • Weight/temperature • Pus filled pimples • Crack and rashes on skin • Don't know	a b c d e	Multiple response required and encircle all response	

19	What should you do if the baby is at high risk?	• Increase the number of home visits after delivery from 5 to 13. • A daily visit, if possible, for the first week. • Explain the high risk issues to the parents and family • Don't know	a b c d	Multiple response required and encircle all response	
20	How sepsis can be prevented?	• Good hygiene: frequent hand washing; clean instruments during delivery;clean clothes • Keeping the baby warm during the cold season • Breastfeeding (early initiation and on demand, and exclusive) • Keeping the umbilical cord clean and dry • Don't know	a b c d e	Multiple response required and encircle all response	
21	What are the steps in proper hand washing?	• Wet hands and forearm upto elbow with clean water • Apply soap and scrub forearm, hands and fingers • Rinse with clean water • air dry with hands up • don't know	A B c d e	Multiple response required and encircle all response	
22	How to keep new born warm?	• Before delivery, warm up the room • Immediately after delivery dry the baby • Put a cap on the baby • Place skin to skin contact with mother • Put clothes on the baby • Don't know	a b c d e f	Multiple response required and encircle all response	

23	Are you aware of the incentives you are entitled for?	• Yes • no	a b	Encircle the one Response	

Signature of investigator

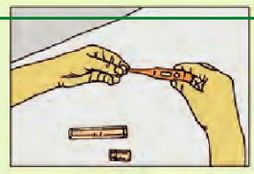
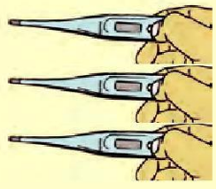
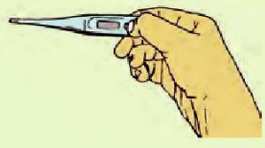
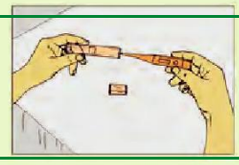
Prepared By: yogeshkumarlahari

Skills Checklist: Measuring Temperature

Instructions-

: Use the checklist while observing the skills being implemented.When a step is performed correctly, place a tick (ϒ) in the box.

When a step is not performed correctly, place a cross (X) in the box

Picture/Illustration	Skills Checklist	Check box
	1) Take thermometer out of its storage case, hold at broad end, and clean the shinning tip with cotton ball soaked in spirit.	
	2) Press the pink button once to turn the thermometer on. You will see “188.8” flash in the centre of the display window, then a dash (-), then the last temperature taken and then three dashes (- - -) and a flashing “F” in the upper right corner.	
	3) Hold the thermometer upward and place the shinning tip in the centre of the armpit. Place arm against it. Do not change the position.	
	4) You will hear a beep sound every 4 seconds while the thermometer is recording the temperature. When you hear 3 short beeps, look at the display. When “F” stops flashing and the number stop changing, remove the thermometer.	
	5) Read the number in the display window.	
	6) Record the temperature reading on the form.	
	7) Turn the thermometer off by pushing the pink button one time.	
	8) Clean the shinning tip of the thermometer with a cotton ball soaked in spirit.	
	9) Place thermometer back in its storage.	

Skills Checklist: Weighing the Baby

Instructions-

: Use the checklist while observing the skills being implemented.When a step is performed correctly, place a tick (ϒ) in the box.

When a step is not performed correctly, place a cross (X) in the box

Picture/Illustration	Skills Checklist	Check box
	1. Place the sling on scale	
	2. Hold scale by top bar off the floor, keeping the adjustment knob at eye level.	
	3. Turn the screw until its top fully covers the red and 'O' is visible.	
	4. Remove sling on hook and place it on a clean cloth on the ground.	
	5. Place body with minimum clothes on, in sling and replace the sling on hook.	
	6. Holding top bar carefully, as you stand up, lift the scale and sling with baby off the ground, until the knob is at eye level.	
	7. Read the weight.	
	8. Gently put the sling with baby in it, on the ground and unhook the sling.	
	9. Remove the baby from the sling and hand it over to its mother.	
	10. Record the weight.	

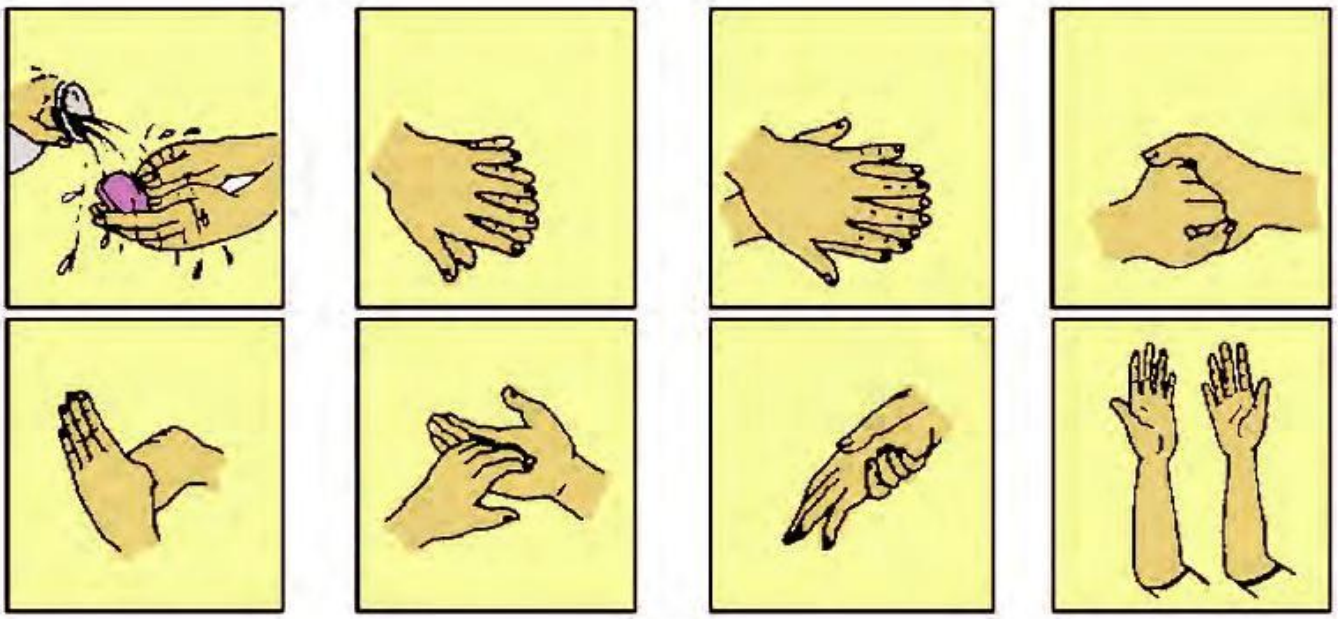
Skills Checklist: Hand washing

Instruction-

: Use the checklist while observing the skills being implemented.When a step is performed correctly, place a tick (ϒ) in the box.

When a step is not performed correctly, place a cross (X) in the box

1) Remove bangles and wrist watch	Check-box
2) Wet hands and forearms up to elbow with clean water	
3)Apply soap and scrub forearms, hands and fingers (especially nails) thoroughly	
4)Rinse with clean water	
5)Air-dry with hands up and elbow facing the ground (	
6)Do not touch with your hands the ground, floor or dirty objects after washing your hand	



Annexure 3: Skills Checklist: Hand wash