Assessment of Knowledge, Attitude and Practice of Women having Children up to 2 years Towards Health Nutrition and Sanitization and Willingness to Work Regarding Health for Society

By

Navnit Nisha

Dissertation submitted in partial fulfillment of the requirements of the degree

MBA Hospital and Health Management

Academic year, 2018-2020

The IIHMR University, Jaipur

1, Prabhu Dayal Marg, Sanganer, Airport
Jaipur 302029, Rajasthan
Ph: 0141 3924700, Fax: 3924738
Website: **www.iihmr.edu.in**

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Jaipur 302029, Rajasthan
Ph: 0141 3924700, Fax: 3924738
Website: **www.iihmr.edu.in**

Abstract

Submitted By: **Navnit Nisha**
MBA HM 23, ROLL NO: 0780
Guided By: **Dr. Susmit Jain**

Introduction- This study is carried out to assess the Knowledge, Attitude and Practices among women of Ratu block of Ranchi and also to see the willingness among women to work in healthcare sector for society among self help group of Ranchi. The study will focus on these things like: ANC visit, IFA tablet consumption, Immunization, Family planning, feeding practices of child, water consumption and hand washing etc. The study will also assess the willingness of women to work in healthcare sector for society and how much effort they are taking regarding this. In this study primary focus is Mother having children up to 2 year. Because during maternal period ANC Visits, IFA tablet consumption, feeding practices are very important it could be preventable from MMR. So this will study will assess the knowledge and attitude of women towards Health, nutrition and sanitization and to observe the practices of women regarding this.

Also as COVID19 is worldwide pandemic and govt. is doing many things to fight with the virus. So, through this study we will assess how much effort these women are taking during this period to give their contribution in this fight. This will ensure the willingness of women to work in healthcare sector for society.

Objective-

1. To assess the knowledge of women having children up to 2 year regarding health, Nutrition and sanitization.
2. To assess the Attitude of women having children up to 2 year regarding health, Nutrition and sanitization.
3. To assess the Practice of women having children up to 2 year regarding health, Nutrition and sanitization.
4. To assess the willingness of women to work regarding health, Nutrition and sanitization.

Methodology-

Study Type- Descriptive Cross sectional study

Study Area- Primary data was collected in Ratu Block of Ranchi secondary data was taken from the report of Ranchi by Jharkhand State Livelihood Promotion Society (JSLPS), Ranchi, Jharkhand.

Study Period- 24 February – 25 may 2020

Sample Size-

- 22 women having children up to 2 respondents for primary data collection and for
- Secondary data we took 11 SHGs group in Ranchi.

Sample technique- Convenience sampling

Data Collection Instrument-

- Primary data: through structured questioner
- Secondary data: Collected from the report of JSLPS

Data Analysis- Through MS Excel

Inclusion Criteria- Individual women who have children up to 2 year were included in the study.

Exclusion Criteria- Responses of individuals who don't have children up to 2 year.

Result-

1. There are 92% women who are in SHG group

2. There are 54.5% women who don't use any method of family planning

3. There are 32% of women who didn't complete even 4 ANC visit.

4. During COVID19 pandemic 49608 mask, 2000 no. of bottles of sanitizer,227 apron were made by 11SHGs in Ranchi.

Conclusion:

In this study we have noticed that there is knowledge regarding family planning, ANC visit, IFA tablet consumption, children's immunization, exclusive breastfeeding is low. Also, practices related to ANC visit, IFA tablet consumption, use of family planning method and feeding practices to children is also low which affect the growth of child. This study also shows the high willingness to work in healthcare sector in those women who are in Self-help group. As many women who are in SHG they are working during the COVID19 pandemic to help the society these efforts ensure the high willingness among women regarding work in Healthcare sector.

Acknowledgements

Firstly I want to thanks, **Mr. Ajay Sirivashtav- M&E division,** and **Miss. Monika Panwar- YP** at SMMU of Jharkhand state livelihood promotion society for tutoring and guiding me for their steady help and support.
Also I would like to thanks**, Mr. Hitendra Singh- HRD Head**, **Mr. Ratan Lal-HR office**, for their help in my dissertation at SMMU JSLPS Ranchi Jharkhand.

Next I would like to express my gratitude to my guide **Dr. Susmit Jain-Associate Professor** of IIHMR University for his significant direction.

I would like to express my gratitude for those **Cluster coordinators** who arranges all the meetings for data collection and all those women of Ratu block who gave their valuable time and supported me & co-operated with me during my study.

I also want to thank the whole placement team of IIHMR University for providing me with the necessary support.

Navnit Nisha
MBA HM 23

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Acronyms/Abbreviations

SHG – Self help group

VO – Village organization

CLF– cluster

MMR – Maternal mortality rate

M & E –Mentoring Evaluation

YP- Young professional

CC- Cluster Coordinator

HR- Human Resource

Chapter 1

Background:

Introduction About the study-

This study is carried out to assess the Knowledge, Attitude and Practices among women of Ratu block of Ranchi and also to see the willingness among women to work in healthcare sector for society among self help group of Ranchi. The study will focus on these things like: ANC visit, IFA tablet consumption, Immunization, Family planning, feeding practices of child, water consumption and hand washing etc. The study will also assess the willingness of women to work in healthcare sector for society and how much effort they are taking regarding this. In this study primary focus is Mother having children up to 2 year. Because during maternal period ANC Visits, IFA tablet consumption, feeding practices are very important it could be preventable from MMR. Also from the birth of child to 2 year during this period the main focus is exclusive breastfeeding, Immunization and adequate feeding practices, which ensure the nutrition for children and their physical and mental growth.

So this will study will assess the knowledge and attitude of women towards Health, nutrition and sanitization and to observe the practices of women regarding this.

Also as COVID19 is worldwide pandemic and govt. is doing many things to fight with the virus. So, through this study we will assess how much effort these women are taking during this period to give their contribution in this fight. This will ensure the willingness of women to work in healthcare sector for society.

Also if we will see the some indicator of Jharkhand then, we will find out:

Indicator of Jharkhand according to NFHS 4 data:	
women who use any method of family planning	40%
women who had at least 4 Antenatal visit	30.3%
people whose BMI is below normal	31.5%
children age 6-23month receiving an adequate diet	7.2
children under 5 year who are stunted(height-for-age)	45.3%
children under 5 year who are wasted(weight-for-height)	11.4%
children under 5 year who are underweight	47.8%

Table 1: Health indicator of Jharkhand

1.2 Rational –

This study will be helpful in getting that how knowledgeable is women towards their health and their child's health, because we know during maternal period if appropriate precaution didn't taken then probably it could be chances of MMR,IMR or underweight child birth or malnourishment. If women will be aware about the health problems and their preventable measures then not only she can improve their health but also she can improve their child's health. Also if one women in the family will aware about the information then she can inspire to other women towards increasing their knowledge regarding health nutrition and sanitation. To ensure a reduction in out of expenditure on medical care, increase in economic productivity and to improve the quality of life of rural women and their families towards Food, Nutrition, Health and Sanitation interventions is very necessary. If one women in family will be aware about the information related to family planning, ANC visit, IFA tablet consumption, child immunization, hand washing, Exclusive breastfeeding & child feeding practices then indicators like Malnutrition , MMR, IMR, Anemia prevalence etc will be improve and out of pocket expenditure on health will reduce.

1.3. Research Question-

What is the existing knowledge, Attitude and Practice of women having children up to 2 year towards Health, Nutrition and sanitization in Ratu block of Ranchi and willingness to work in Health care sector for society in Ranchi Jharkhand?

1.4 Objectives-

1. To assess the existing knowledge of women having children up to 2 year regarding health, Nutrition and sanitization.
2. To assess the existing Attitude of women having children up to 2 year regarding health, Nutrition and sanitization.
3. To assess the Practice of women having children up to 2 year regarding health, Nutrition and sanitization.
4. To assess the willingness of women to work regarding health, Nutrition and sanitization.

Chapter 2

Review of Literature:

1. ***Healthcare and women empowerment: Role of self-help group***

(S. chkarvarty, 2012)

SHGs can play a role in creating awareness of health issues through necessary group meetings with women, by holding specific capacity-building trainings on health issues and facilitating exposure to important up-to-date medical information. The members need to be *au fait* with medical issues and health promotion, this, equally indicating the responsibility of the SHG to fulfill its role for both women and the community. This said, a substantial

Influence on women's health and empowerment can only be achieved when these activities are taken up with a view to improving the public provision of health care facilities and accessibility, particularly in light of the RSBY initiative.

2. ***Effect of combining a health program with a microfinance-based self-help group on health behaviors and outcomes***

(S. chkarvarty, 2012)

Our study found evidence that health programs implemented with microfinance based SHGs is associated with improved health behaviors. With broad population coverage of SHGs and the social capital produced by their activities, microfinance based SHGs may provide an avenue for addressing the health needs of poor women.

Chapter 3

Research Methodology:

Study Type- Descriptive Cross-sectional study

Study Area- Primary data was collected in Ratu Block of Ranchi secondary data was taken from the report of Ranchi by JSLPS.

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Data Analysis- Through MS Excel

Inclusion Criteria- Individual women who have children up to 2 year were included in the study.

Exclusion Criteria- Responses of individuals who don't have children up to 2 year.

Chapter 4

Findings:

1. The following graph is showing that from the whole respondent there is 92% of women are in SHGs and only 8% women are not in the any group(SHGs/VO/CLF).

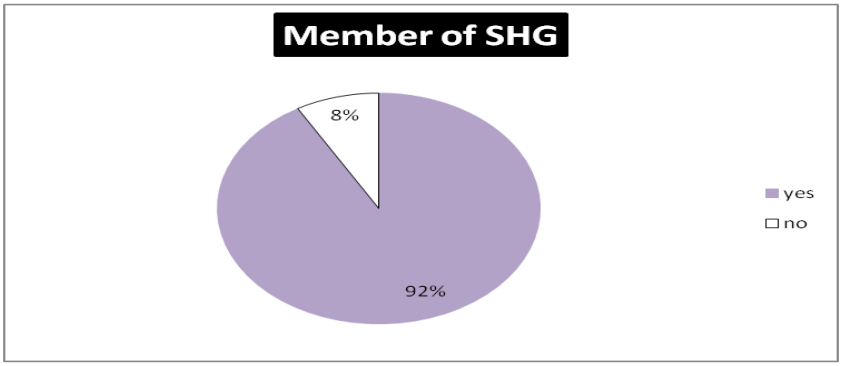

Figure 1: member of SHG

2. The following graph shows the Knowledge about ANC checkup among women. There is 30% women says there should be 3 ANC visit , 15% women says 4 ANC visit should be done, & 30% women says more than 4 ANC visit should be done. But there is 25% women says that they don't know how many ANC visit should be done.

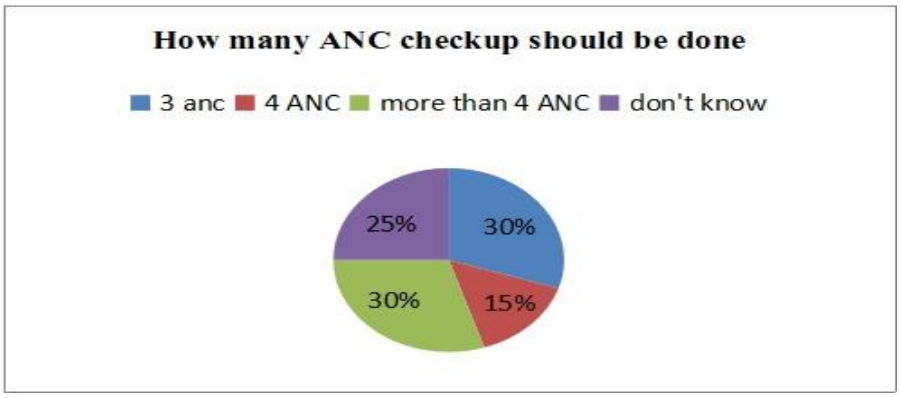

Figure 2: knowledge about ANC visit

3. The following graph shows Knowledge about exclusive breastfeeding among women. There is 64% woman who says exclusive breastfeeding should be done with in 1 hour of birth. 18% women say breastfeeding should be done in 2-5 hour of birth. 4% women say exclusive breastfeeding should be done after 12 hour of birth. And there are 14% women who say they don't when exclusive breastfeeding should be initiated.

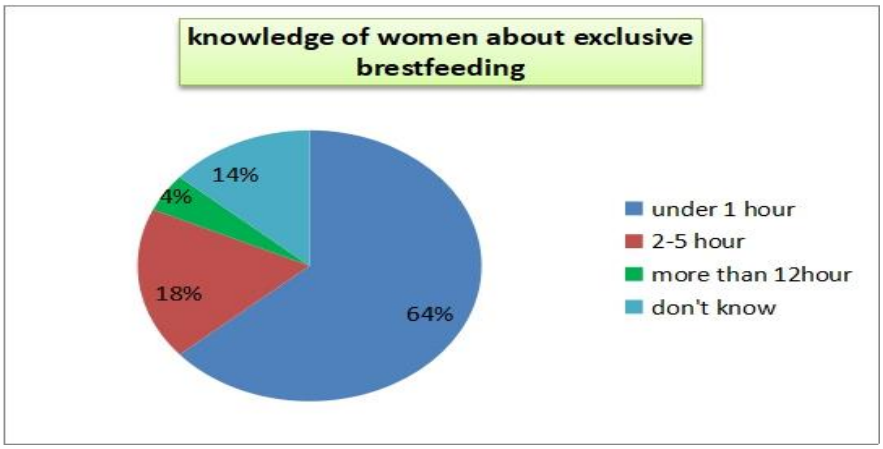

Figure 3: knowledge about exclusive breastfeeding

4. The following graph shows the Knowledge about IFA tablet consumption among women. There is 4.55% women who says less than 100 IFA tablet should be taken, 18.18% women says 100-179 tablet should be take, 27.28% women says 180 or more than 180 tablet should be taken. But there are 50% women who say they don't know how many IFA tablet should be taken.

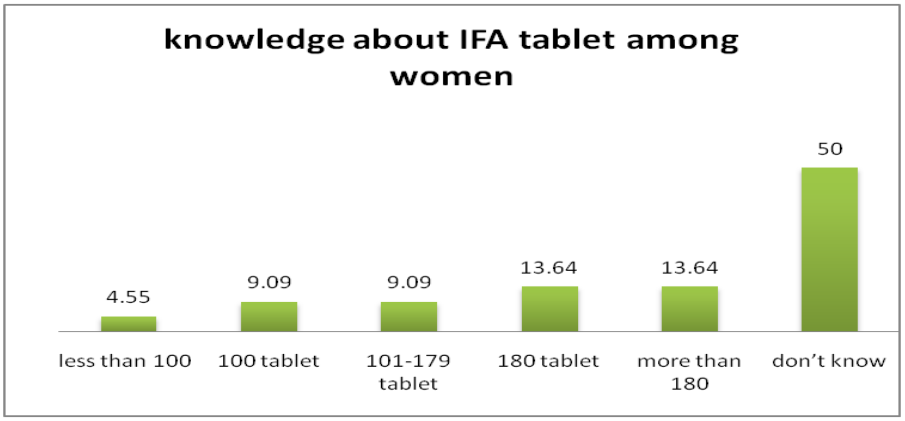

Figure 4: knowledge about IFA tablet consumption

5. The following graph shows Knowledge of family planning method among women. There are 83% of women who knows about family planning method and there are 17% women who don't about family planning method.

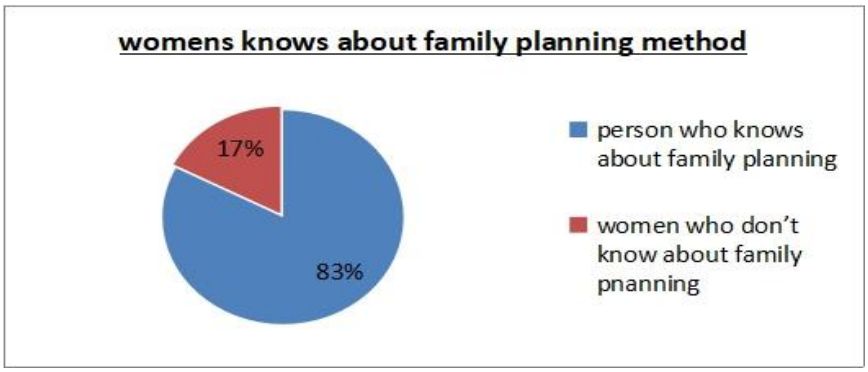

Figure 5: knowledge about family planning

6. The following graph shows the Knowledge among women about vaccination. There are 91% women says children should be vaccinated till 10 year. And 9% women say they don't know till what age children should be vaccinated.

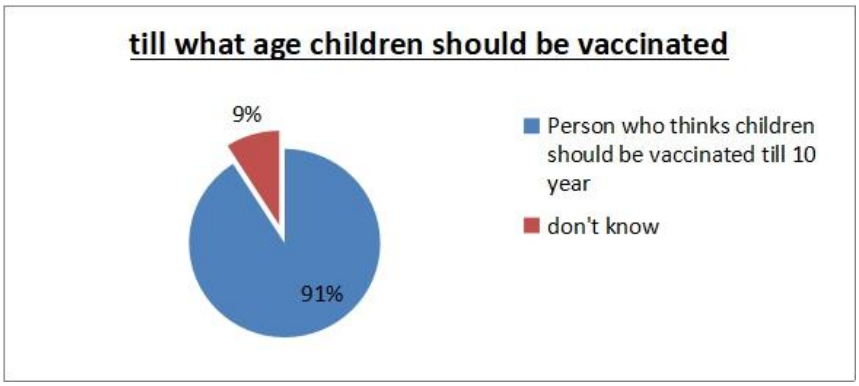

Figure 6: knowledge about children vaccination

7. The following graph shows there is 81.82% women deliver at govt. hospital, 13.64% women deliver child at pvt. Hospital and 4.55% women deliver child at home.

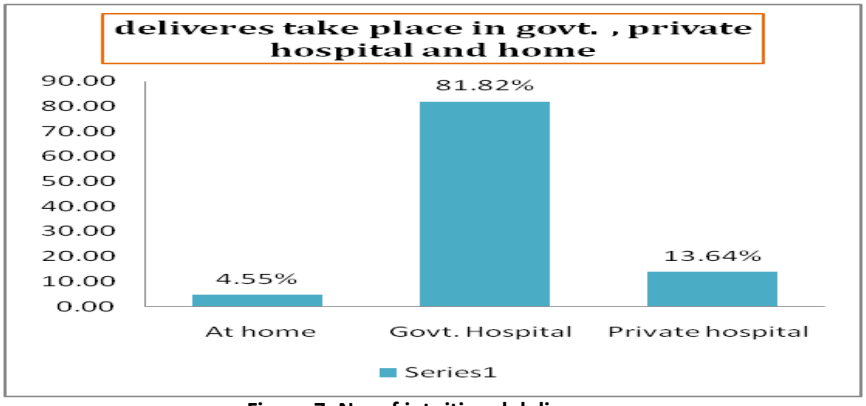

Figure 7: No. of intuitional delivery

8. The following graph shows Women who deliver at govt. hospital among them those women who receive cash assistance. There are 78% women who receive cash assistance and there are 22% women who didn't receive any cash assistance.

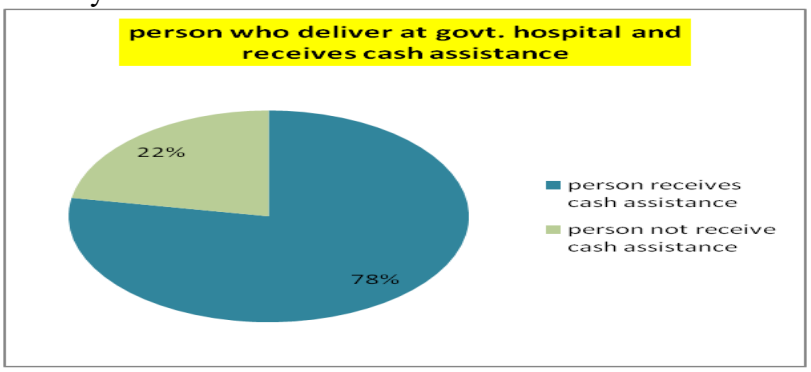

Figure 8: No. of women receives cash assistance by govt.

9. The following graph shows Women who receive cash assistance among them how many spends money after cash assistance. So, there is 43% women who didn't spend money after cash assistance by the govt. and also there is 57% women who receives cash assistance but they spends money.

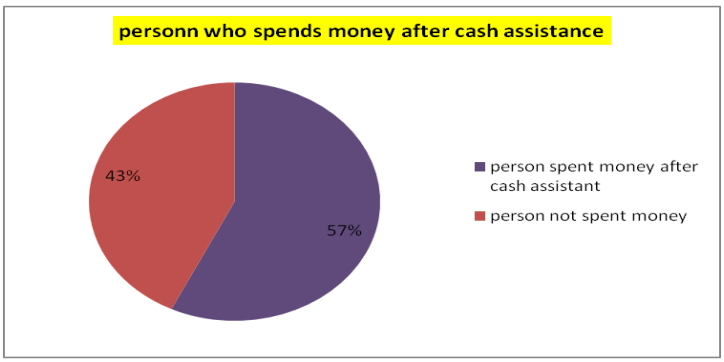

Figure 9: No. of people who have done OOPE

10. The following graph shows there in 72.72% women who took loan among them there is 19% women who took loan for health purpose and 81% women who took loan for household expenditure.

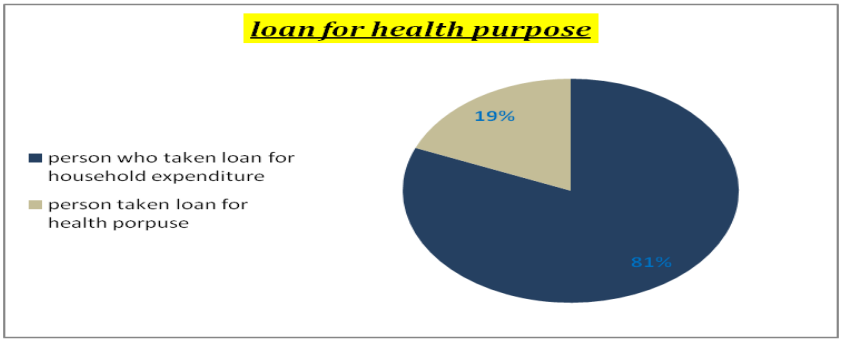

Figure 10: loan for health purpose

11. The following data shows IFA tablet consumption by women. There is 9% women who taken 100 tablet, 19% women who took 101-179 IFA tablet, 10% women who took 180 tablet, 14% women who took more than 180 tablets. But there are 38% women who took less than 100 tablet and 10% women who didn't even taken IFA tablets.

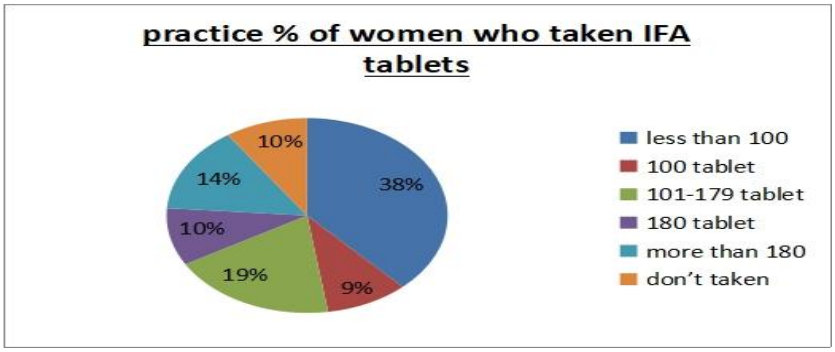

Figure 11: practices of women related IFA tablet consumption

12. The following graph shows how many women have knowledge about anemia among women. There are 33% women who know about anemia and 67% women who don't even know about anemia.

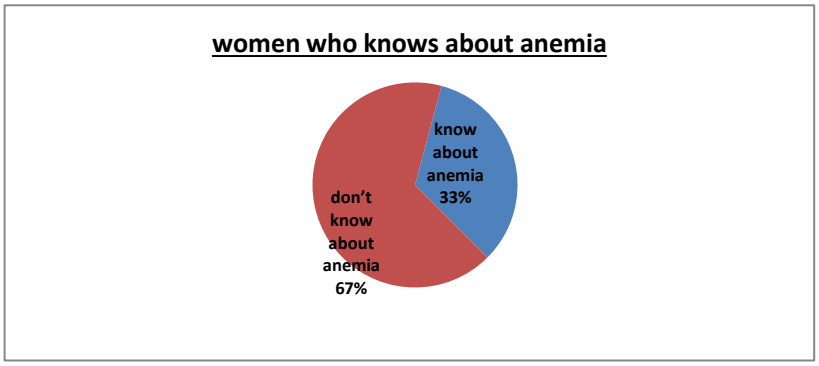

Figure 12: knowledge about anemia

13. The following graph shows how many women visit VHND. There are 55% women who say they visit VHND and 45% women says they don't visit VHND.

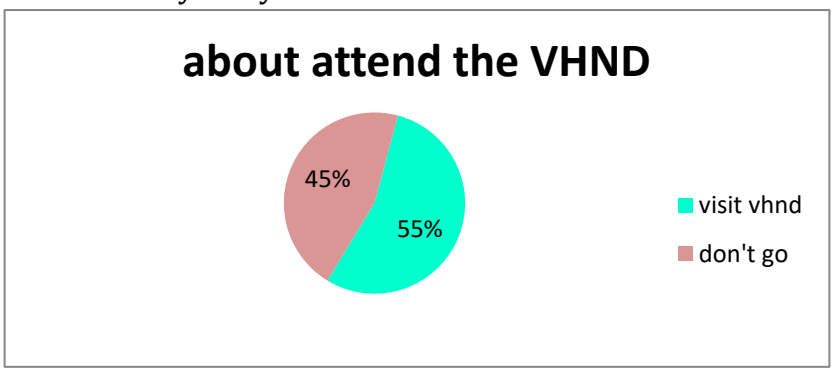

Figure 13: VHND visit

14. The following graph shows how many women boil or filter water before drinking. And there are 73% women who boil water before drink, 4% women who filter water before drink. But there are 23% women who do nothing before drink water.

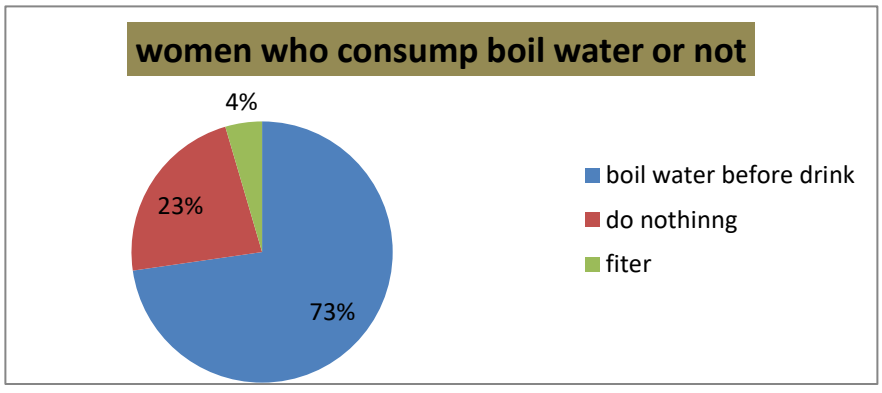

Figure 14: consumption of boil water

15. The following graph shows how ensure healthy food in their meals. So, there are 86% women says they do kitchen gardening to ensure healthy and organic food in their meal and 14% women says they do nothing.

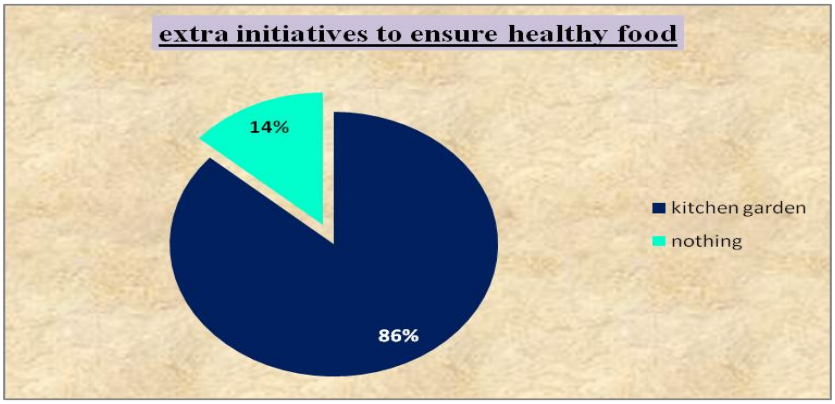

Figure 15: initiative regarding healthy food

16. The following data represent the feeding practices of women who have child more than 6 month and up to 2 year.

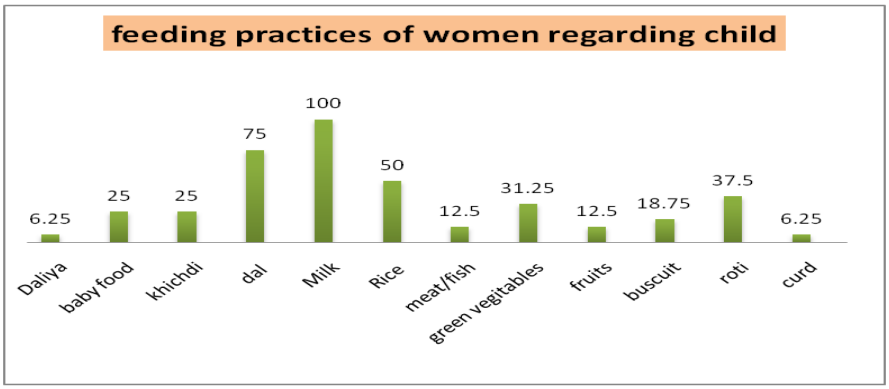

Figure 16: feeding practices of child

17. The following graph shows Willingness regarding working in healthcare sector for better health of society among women. There are 59% women who are very much interested in working regarding better health foe society, 32% of women say they are interested in working in health and 9% of women say they are not interested in doing work.

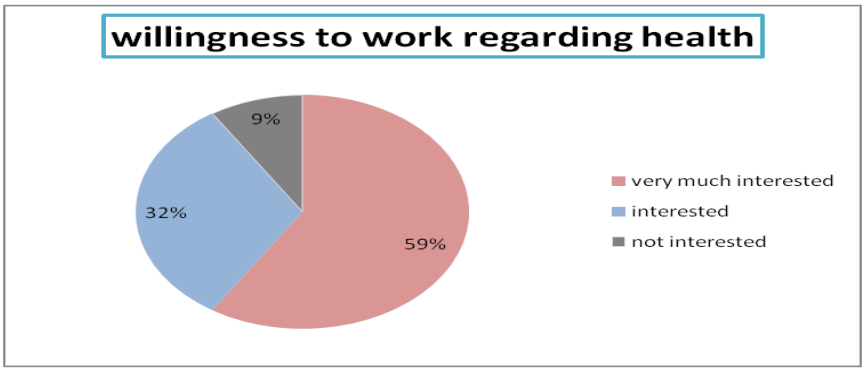

Figure 17: willingness to work in healthcare

18. The following graph shows that there are 68% women who have done 4 or more than 4 ANC visit but there are 32% of women who didn't completed even 4 ANC visit.

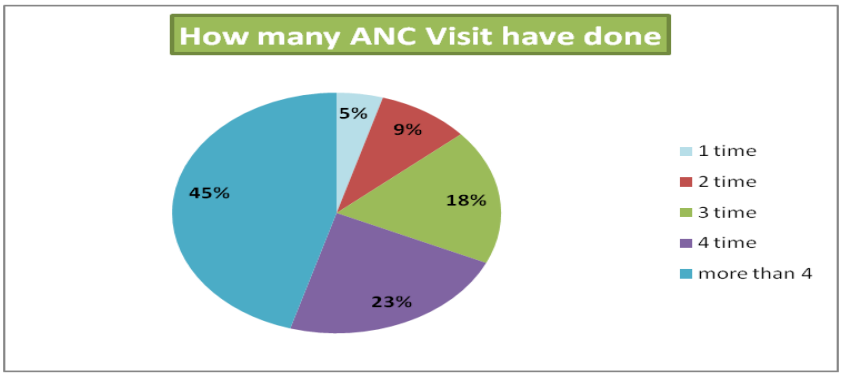

Figure 18: practices of ANC visit

19. The following graph shows use of family planning method among women. There are 18.18% of women who use IUD method, 13.64% condom, 13.64% sterilization and 54.55% don't use any method.

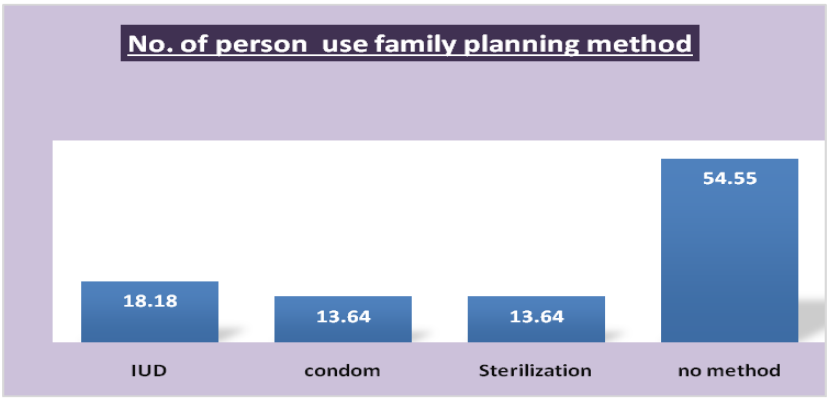

Figure 19: use of family planning

20. The following graph shows No. COVID kits were made by the women who were in SHGs/VO.

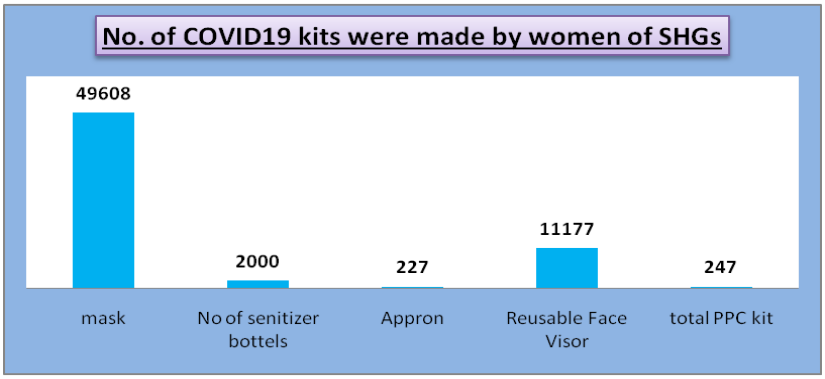

Figure 20: initiatives regarding work for society

21. The following graph shows Attitude regarding IFA consumption among women. There are 40% of women who thinks IFA tablet for fight with against Iron deficiency in body, 40.91% women thinks this is for increase the blood in body, 4.55% women thinks this is for better health of child and 9.09% of women thinks for being strong.

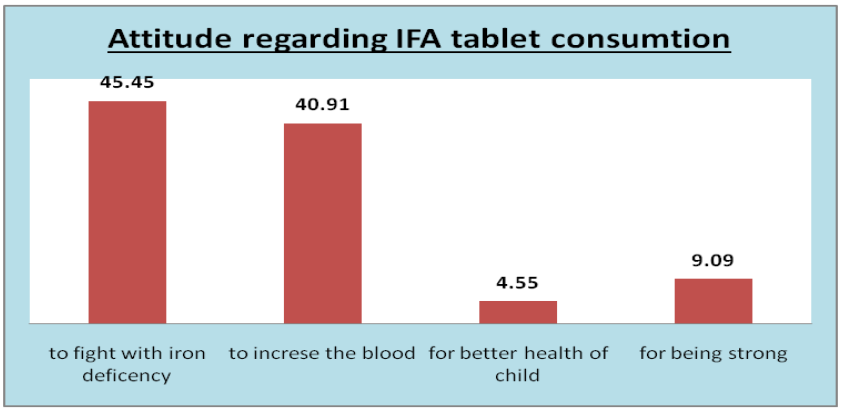

Figure 21: attitude regarding IFA tablets consumption

22. The following graph shows awareness regarding newborn disease among women.

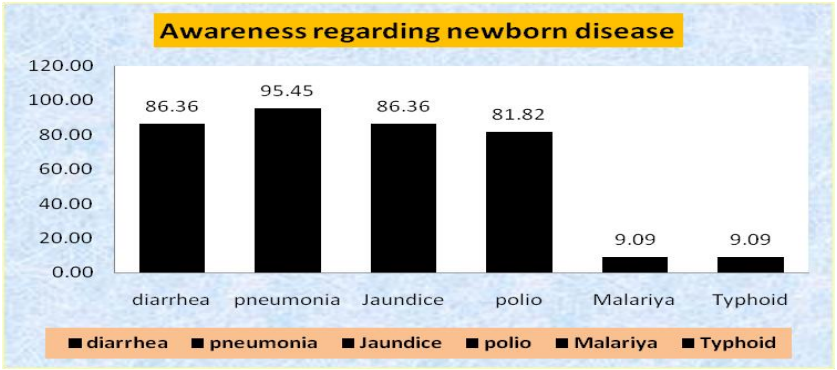

Figure 22: knowledge of newborn disease

23. The following graph shows the awareness regarding Govt. scheme among women.

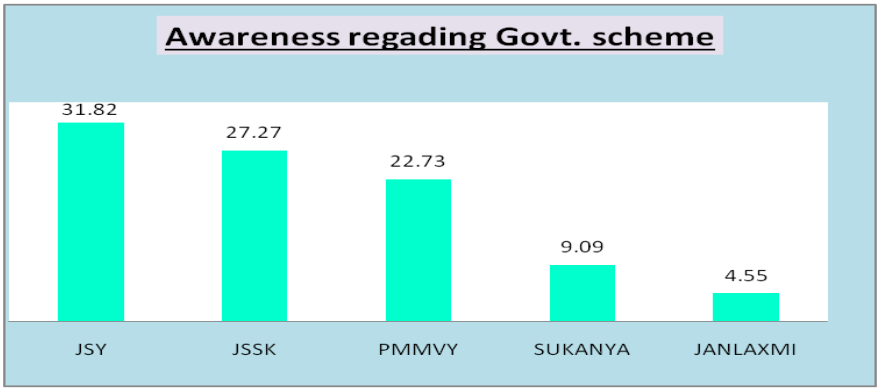

Figure 23: awareness about Govt. scheme

Chapter 5

Discussion:

5.1. In this study the primary focus was mother having children up to 2 year, because we want to assess the knowledge, attitude and practices towards health and their willingness to work regarding better health for society.

So, we can see in the in the fig 1.1 all the women who were respondent among them there are 92% of women who are in group which is known as Self help group. These women are working regarding micro financing and livelihood for being financially stable. And there are only 8% women who were not in the group.

In the next fig 2.1 we can see, there are 45% women who knows that there should be 4 or more than 4 ANC visit. 30% women says 3 ANC visit should be done. But 25% women who don't know how many ANC visit should be done. This data is representing that there is lack of knowledge regarding ANC visit among women which is very necessary for pregnant women and also for their child. But if we will go through the practices of women regarding ANC visit then the following no. will be appear, which is there are 68% women who have done 4 or more than 4 ANC visit and there are 32% of women who didn't completed their 4 ANC visit. It is good that there are no such women who didn't completed even 1 visit.

The knowledge of exclusive breastfeeding is also low among women; there are 64% of women which says the exclusive breastfeeding should be initiated with in 1 hour of birth. 18% women says with in 2-5 hour of birth, 4% says more than 12 hour of birth and rest 4 % says they don't know when exclusive breastfeeding should be initiated. This data shows that there is also lack of knowledge regarding exclusive breastfeeding which is not good exclusive breastfeeding is very important and nutritious for newborn.

Knowledge about IFA tablet consumption is also low among women there is only 27.28% of women who says 180 or more than 180 IFA tablet should be taken, 18.18% women says 100-179 IFA tablet should be taken, but there are 4.55% women who says less than 100 IFA tablet should be taken and approx. 50% women says they don't know how many IFA tablet should be taken. And if we will see their practices regarding IFA tablet consumption then we will get that there are 24% of women who says they have taken 180 or more than 180 tablets, 29% women says they have taken 100-179 IFA tablet. But there are 38% of women who says they have taken less than 100 IFA tablet. And 10% women say they didn't taken IFA tablet. About importance of IFA tablets 45.45% women says IFA tablet is for to fight with iron deficiency, 45.91% women says IFA tablet is for to increase the blood , 4.55% women says IFA tablet is for better health of child and 9.09% women says it is helpful in being strong

If we will talk about Knowledge about family planning method among women so we got 83% of women knows about some method of family planning there are 17 % of women who don't know about family planning method. If we will focus on the use of family planning method then we will get to know there are 18.18% of women who use IUD method, 13.64% condom, 13.64% sterilization and 54.55% women don't use any family planning method. These data shows the there is some women who have less knowledge about family planning method and there is less practices related to family planning.

The knowledge about anemia among women is also low there are only 33% of women who knows about anemia and 67% of women who don't know about anemia. And among all the women there are 55% of women who visit at VHND and 45% of women who don't visit in VHND.

Now the knowledge about children vaccination we will get to know there are 91% of women who says children should be vaccinated till 10 year of age and 9% women say they don't know about till what age children should be vaccinated.

The feeding practices of child is also not so good among women according to the data women who have children more than 6 month to 2 year among all the women there are 31.25% women who give green vegetables to the children, among all the women 75% women include daal in their

children's meal in regular basis, among all the women 12.5% women include fruits in their children's diet and among all the women 25% women use baby food, among all the women 50% women include rice in their child's diet, but there are 100% women include milk in their children's diet.

Also the knowledge about newborn disease among women is also low. Among all the women there is 86.36% of women who says they know about diarrhea, among all the women there are 95.45 % women says they know about pneumonia, among all the women there are 86.36% women says they know about jaundice, among all the women there are 81.82% women says they knows about polio, 9.09% women says they know about malaria and among all the women there are 9.09% women who knows about typhoid.

If we will focus on the how many women go through the institutional deliveries then we will get to know that 81.82% women who deliver child at govt. hospital, 13.64% women who deliver child at private hospital and 4.55%v women who deliver at home. Among all the women who deliver at govt. hospital 78% of women who receives cash assistance and 22% of women says they don't receives any cash assistance. Among all the women who receive cash assistance there are 57% women who spend money during their delivery. This is clearly an out of pocket expenditure. About the knowledge about govt. scheme among women, among all the women there are 31.82% women knows about Janni Suraksha Yojna, among all the women there are 27.27% women knows abou Janni sishu suraksha yojana, among all the women there are 27.73% women who knows about Pradhan Mantri Matritva Vandna Yojana, among all the women there are 9.09% women who says they know about sukanya yojana, among all the women there are 4.55% women who says they know about Janlaxmi yojana.

The most important thing among all the women is- who took loan there are 81% women who took loan for household expenditure and 19% of women who took loan for Health purpose. These data clearly shows that there is high out of expenditure.

5.2. Extra initiatives taken by women for society during COVID19 pandemic:

Practices regarding took the extra initiative to ensure the nutritious food in the diet, there are 86% women who says they doing kitchen gardening for the fresh vegetables and fruits, mostly they use these fresh fruits and vegetables in their diet.
About sanitization there are 73% of women who boil water before drink. According to the JSLPS report women of 1 Self help group are giving hand wash awareness to the 70 persons per day during COVID pandemic 2020.

If we will talk about their willingness to work regarding for society so according to the JSLPS report may 2020. Since the COVID 19 global pandemic times, the Didis of the Sakhi Mandals formed under NRLM by JSLPS have been playing an important role to fight against pandemic with the state government adopting CORONA resistant measures. Together with the local district administration, Sakhi Mandal is involved in various activities to make people aware and rescue.

The Honorable Chief Minister of Jharkhand has launched a programmed in the name of Mukya Mantri Didi Kitchen (MMDK) Programme to ensure the food to vulnerable , marginalize , disabled and needy people of every Panchayat in State of Jharkhand, and accordingly provide them with free of cost meals twice a day provided to these identified vulnerable individuals.

Through MMDK around 6 lakhs marginalize people are getting two meals every day by SHGS/VOs member.
The following detail of work by SHGs/VO of Jharkhand:

Work	Total
Meal to 6 lac people	2 times meal, hand hygiene and social distancing orientation/day
In 1 month 1 SHG	4,200 meal/70 beneficiaries
11 group in one month	770 people, 46,200 meal

Table 2 work by SHGs group in Ranchi

Before serving the food, didis of Sakhimandal demonstrate the hand washing steps to beneficiaries and ask them to wash their hands before having the food and is being made aware to follow social distancing and helping to put it into practice at their home. So, by this we can see that the women who are SHG/VO are very interested in working for society's better health, they learning and implementing that learning towards wellbeing of community.

Also during COVID19 pandemic according to the report of JSLPS in Ranchi there are 49,608 mask, 2000 no. of sanitization bottles, 227 apron, 11177 Reusable face visor, 247 PPC kits were made by the women of Self health group .

These initiatives taken by women clearly indicate the high willingness among women regarding work in healthcare for society.

Chapter 6

Conclusion:

In this study it can be noticed that there are knowledge regarding family planning, ANC visit, IFA tablet consumption is low among women. According to this study the Knowledge about Children's immunization, Exclusive breastfeeding is low in some women but practices regarding exclusive breastfeeding and child immunization are good among women. Also Practices related to ANC visit, IFA tablet consumption, use of family planning method and feeding practices for children is also lacking somewhere which affects the health and growth of the child. But attitude regarding visit at VHND, sanitization practices and interest in working in healthcare sector is very good among women. This study clearly shows that 92% women in this study groups which is known as Self help group (SHG)/Village Organization (VO). As we can see in this study during COVID 19 pandemic mask, sanitizer etc are made by the women of self help group and provided them to the govt. Also they are working regarding to give the information to the people about hand wash and social distancing. So on the basis of this study it can say that women's knowledge are low in some points but the attitude, practices and willingness to work in healthcare is high among those women who are in Self help group.

Chapter 7

Suggestions:

As many women are in self help group so, every woman should inspire to be a member of self help group or any other group who work for wellbeing of society, so they can be more dependable on her, also training facility can enhance the knowledge of women so that practices and attitude will be improve. These things will improve the health indicator of the society and also will reduce the out of pocket expenditure on health and will make women more healthy and empowered.

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