

Knowledge and Attitudes of Anganwadi Workers About Infant Feeding in Delhi

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To many health professionals, the practice of breastfeeding appears to be a natural process as to them it seems ironical that there should be a need to create awareness about it and to carry out intervention programmes in this matter(1). However, the past two decades had seen decline in breastfeeding followed by a positive trend owing to a number of efforts to promote the breastfeeding(2,3). Anganwadi worker (AWW) is the key functionary in the ICDS scheme operating at the most peripheral level (1,000 population). Her work includes health and nutrition education on various aspects of mother and child health.

It is thus of utmost importance that she has adequate scientific knowledge

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about breastfeeding so that she can impart the correct knowledge to mother beneficiaries (pregnant, lactating mothers and women in reproductive age group). The objective of the present study was to assess knowledge and attitude amongst AWWs to identify gaps in their knowledge so that the same be removed during the routine administrative monthly meetings organized for review of the programme.

Material and Methods

The present study was conducted in ICDS project Alipur in North Delhi. The project had 100 AWWs of which 83 participated in the study. The remaining 17 were absent on the day of study. The AWWs were briefed about the objectives of the study.

A pretested semistructured proforma was given to all AWWs. All questions were read out and explained by the first author and all queries were clarified. Efforts were made to minimize consultation amongst the AWWs.

Results

The knowledge and attitudes amongst AWWs about breastfeeding are shown in *Table I*. Almost all (98.7%) AWWs had the correct knowledge that breastfeeding should be started immediately after birth and 92.7% had the correct knowledge that colostrum should be given to the child. However, only 56.6% had the correct knowledge that top milk should not be diluted.

Majority (93.9%) of AWWs had the correct knowledge that unhygienic bottle feeds are a major source of diarrhea and that breastfeeding should not be stopped if the child has diarrhea. However, 48.2% AWWs had wrong know-

TABLE I—Knowledge and Attitudes About Breastfeeding and Weaning (n=83)

Beliefs	Desired answer	Response	
		Correct No (%)	Incorrect No. (%)
1. Breastmilk is best food upto 4-5 months of age	Yes	76 (91.5)	7 (8.5)
2. Breastfeeding should be started immediately after birth	Yes	82 (98.7)	1 (1.3)
3. Colostrum should be given to the child	Yes	77 (92.7)	6 (8.3)
4. Weaning should be started from 4-5 months	Yes	59 (71.0)	24 (29.0)
5. Antibodies/protective substances are present in breast milk	Yes	79 (95.1)	4 (4.9)
6. Commercial milk preparations are more nutritious than breastmilk	No	80 (96.3)	3 (3.7)
7. Top milk given to child should be diluted	No	47 (56.6)	36 (43.3)
8. Breastfeeding should be continued as long as possible	Yes	76 (91.5)	7 (8.5)
9. If mother fails to lactate, the best substitute is cow's milk	Yes	82 (98.7)	1 (1.3)
10. Katori & spoon is better than bottle	Yes	78 (93.9)	5 (6.5)

ledge that breastfeeding should be stopped if the mother had fever or tuberculosis (*Table II*). More than a quarter of AWWs had the wrong perception regarding breastfeeding and social considerations. (*Table III*),

Knowledge regarding general belief about breast feeding is shown in *Table IV*. Three fourths of mothers had the wrong knowledge that almonds and dry fruits increase breast milk secretion and only 57.8% agreed that breastfeeding is beneficial for the health of the mother. Only 50.5% had the correct knowledge that bottle feeding should be totally avoided.

Discussion

In the present study 98.7% AWWs had the correct knowledge that breast

Feeding should be started immediately after birth. Similar findings have been reported amongst Medical Officers(4), Child Development Project Officer(5), Auxiliary Nurse Midwives(6), women teachers(7), mothers(8), mother substitutes(9), and adolescent girls(10). This is contrary to earlier findings reported by other workers(11,12). Majority (92.7%) of AWWs favored giving colostrum to the child. However, earlier studies(11,13) have documented contrary results. The encouraging findings in the present study about the breastfeeding may be due to increase emphasis on the importance on teaching of subject of breastfeeding during preplacement training and possibly because of repeated health education messages on this topic through mass media.

TABLE II—Belief About Breastfeeding During Diseases (n =83)

Beliefs	Desired answer	Response	
		Correct No (%)	Incorrect No. (%)
1. Solely breastfed infants are less susceptible to diarrhea than bottle fed infants	Yes	59 (70)	24 (2.9)
2. Unhygienic bottle feeds are a major cause of diarrhea	Yes	78 (93.9)	5 (6.1)
3. During diarrhea breastfeeding should be stopped	No	78 (93.7)	5 (6.1)
4. During diarrhea breastfeeding should be done more frequently to control loss of fluids	Yes	49 (59.0)	34 (4.1)
5. Breastfeeding should not be stopped even if child is having			
(a) Fever	Yes	40 (51.8)	43 (48.2)
(b) Diarrhea	Yes	78 (93.0)	5 (6.1)
6. Mother should continue breastfeeding if she is suffering from			
(a) Tuberculosis	Yes	40 (51.8)	43 (48.2)
(b) Malaria	Yes	66 (79.5)	17 (20.5)
(c) Cancer of breast	No	72 (86.7)	11 (13.3)

TABLE III—Breastfeeding and Social Considerations (n=83)

Beliefs	Desired answer	Response	
		Correct No (%)	Incorrect No. (%)
1. Bottle feeding is more healthy for the mother	No	62 (74.6)	21 (25.4)
2. Breastfeeding is an embarrassing activity outside the house	No	57 (68.6)	27 (31.4)
3. Wet-nursing is harmful	No	43 (51.8)	40 (48.0)
4. Prolonged breastfeeding disfigures the breast	No	60 (72.2)	23 (27.8)

The figures in parentheses indicates percentages.

TABLE IV—General Beliefs About Breastfeeding (n=83)

Beliefs	Desired answer	Response	
		Correct No (%)	Incorrect No. (%)
1. There is no significant difference in quality of milk of health, and malnourished mothers	Yes	71 (85.5)	12 (14.5)
2. Size of breast determines quantity of breastmilk secretion	No	54 (65.0)	29 (35.0)
3. Bottle feeding should be totally avoided	Yes	42 (50.6)	41 (49.4)
4. Almonds and other dry fruits increase breastmilk secretion	No	20 (24.1)	63 (75.9)
5. Lactating mother should consult a doctor before taking medicines as their secretion in milk may harm child	Yes	80 (96.3)	3 (3.7)
6. Mother should breastfeed low birth weight child more frequently	Yes	47 (56.6)	36 (43.4)
7. Child should be burped after every feed, to avoid regurgitation	Yes	65 (78.3)	18 (21.7)
8. Mother and child bond is better with breastfeeding	Yes	81 (97.5)	2 (2.5)
9. Breastfeeding is beneficial for health of mother	Yes	48 (57.8)	35 (42.2)

Only 43% AWWs had wrong knowledge that top milk, given to child should be diluted. Similar findings have been reported by other workers (6,10-12). This could be attributed to traditional beliefs amongst AWWs. Contrary results have been reported in earlier studies (5-7).

In the present study, only half of the AWWs had correct knowledge that bottle feeding should be totally avoided. This has emerged as a very discouraging aspect. It may be due to knowledge gained by the AWWs from the peer

group or by observing the rearing practices adopted by the other working mothers in their localities.

In the present study, only a quarter of AWWs had correct knowledge regarding diet during lactation. Most of them believed that almonds and dry fruits increase breast milk secretion. These foods are considered galactogogues although there is no scientific rationale behind it. The dry fruits are not only expensive but also beyond the reach of poor and middle class mothers. There is a need of developing appropri-

ate messages about this aspect of breastfeeding. Similar finding have been reported by other workers(5-7,10).

While majority of AWWs had correct knowledge that breast feeding should not be stopped during diarrhea, only 52% agreed that breastfeeding should be continued during fever and tuberculosis. The continuation of breastfeeding during illness has been documented by other workers 8150(4,5,7,16). These findings suggest the need of educating the functionaries on the continuation of breastfeeding during diseases.

REFERENCES

1. Narayanan I. Protection, promotion and support of breastfeeding—Role of international agencies. Proceedings of the XXVIII National IAP Conference, Hyderabad, January, 1991, pp 45-67.
2. Walia BNS, Gambhir SK, Sroa SR, Chaudhary S. Decline in the 'breastfeeding practices in urban population of Chandigarh during a decade. *Indian Pediatr* 1987, 24: 879-887.
3. Singh R, Kumar OA, Rana RS. Breastfeeding and weaning practices among urban Muslims of District Lucknow. *Indian Pediatr* 1992,29: 217-219.
4. Sharma P, Dutta AK, Narayanan I, Mullick DN. Attitudes of medical and nursing personnel to breastfeeding practices. *Indian Pediatr* 1987, 24: 911-916.
5. Kapil U, Paul D, Manocha S. Knowledge and attitude amongst Child Development Project Officers towards breastfeeding. *Indian J Pediatr* 1989, 56: 771-774.
6. Kapil U, Manocha S. Knowledge and attitudes towards breastfeeding amongst Auxiliary Nurse Midwives in rural Delhi. *Indian Pediatr* 1989, 26: 1003-1006.
7. Kapil U, Bhasin S. Perception towards breastfeeding amongst working women of a public school in Delhi. *Indian Pediatr* 1992, 29: 753-756.
8. Bahl L. Some aspects of infant weaning practices and beliefs in rural in habitants of district Shimla. *Indian Pediatr* 1982,12: 921-925.
9. Sethi SC, Srivastava DK. Knowledge, attitudes and practices regarding infant feeding among mother substitutes. *Indian Pediatr* 1987, 24: 921-925.
10. Kapil U, Bhasin S, Manocha S. Knowledge and attitude amongst well to do adolescent school girls towards breastfeeding. *Indian Pediatr* 1990, 27: 1277-1281.
11. Kama vat BS, Singh RN, Gupta BD, Chaudhary SP. Knowledge and attitudes of hospital employees regarding infant feeding practices. *Indian Pediatr* 1987, 24: 938-948.
12. Bafna P, Pariha J, Kaul KK. Study of attitudes of practising doctors to infant feeding. *Indian Pediatr* 1979, 11: 563-557.
13. Arora DD, Kaul KK. Feeding practices during first five years in Central Indian communities. *Indian J Pediatr* 1973, 40: 203-207.