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RESEARCH ARTICLE

ASSESSMENT OF KNOWLEDGE, ATTITUDE AND PRACTICES OF MCH COMPONENTS AMONG YOUNG MOTHERS.

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Abstract

A descriptive study was undertaken to Assess the mothers knowledge, attitudes and practices of MCH components at selected urban community, Sriramnagar, UPHC, Hyderabad ,Telangana.

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A sample of 500 mothers was chosen through purposive convenient sampling technique. A structured interview questionnaire was used to collect the data. Findings revealed that majority of mothers scored above average and average knowledge levels. Their practices are very poor that is 80% are below average.

Objectives:

- 1. To assess the mothers knowledge, attitudes and practices regarding antenatal care.
- To examine the attitudes of mothers regarding contraceptive methods.
- 3. To identify/observe the practices about breast feeding and Immunization.
- 4. To study the association between KAP on MCH components and socioeconomic and demographic variables

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Introduction:-

Health is the precious possession of all human beings as it is asset for an individual and community as well. Maternal and child health is recognized as one of the significant components of family welfare. Health of both mother and children is a matter of public health concern because of several reasons.

Women in child bearing age and growing infants and children under 15 years of age together form a large section of our society (19%+40%= 59%), and such majority of public health services would be consumed by them. They are the more dependent and vulnerable members of the society who are at a high risk of morbidity and mortality.

In India 125000(46 per 100000 live births) women die due to pregnancy and child birth related causes. About 1.8 million (74per 1000 live births) infants and 2.65 million (109 per 1000 live births) under five children die every year. Most of these deaths are preventable. Hence a greater priority is given by public health personnel to maternal and child health services to reduce maternal and child morbidity and mortality and improve community health.

Methodology:-

Research design, sample & setting:-

Descriptive study was undertaken to assess the mothers knowledge regarding MCH component (antenatal care, breast feeding, immunization and family planning). A purposive convenient sampling technique was used to select

the sample for the study. 500 mothers was selected from two urban slums, those are Siramnagar and Jawarnagar community. Mothers who are in reproductive age group (15 to 45 years) and having at least one living child, the mother who were able to speak and understand Telugu, English and Hindi. The present study was conducted in Sriramnagar and Jawaharnagar, Urban community, Hyderabad. This is situated 6 km away from NIMS hospital, and attached to UPHC, Sriramnagar. In this community areas belongs to different religion i.e. Hindu, Muslim and Christian.

Instrument:-

A structured interview schedule was used to collect the data.

Data collection procedure:-

The period of data was collected from 13.03.2015 to 15.05.2015, before starting data collection permissions was obtained from DM&HO, Hyderabad, District, Telangana, and medical officer of Sriramnagar, UPHC.

Data analysis:-

Descriptive and inferential statistics were used to analyse the data, correlations was used to determine the relationship between mothers Knowledge, Attitudes and Practices with their demographic variables.

Findings:-

Table-1:- Frequency Percentage Distribution of Socio, Economic & Demographic Variables

S.No.	Demographic Variables	Sriran	Sriram Nagar		Jawahar Nagar	
		F	P %	F	P %	
1	RESIDENCE					
	0-1 year	23	9.2	30	12.0	
	1-5 years	96	38.4	68	27.2	
	> 5 years	131	52.4	152	60.8	
2	AGE					
	21 – 25 years	120	48.0	167	66.8	
	26 – 30 years	130	52.0	83	33.2	
3	RELIGION					
	Hindu	126	50.4	122	48.8	
	Christian	45	18.0	35	14.0	
	Muslims	74	29.6	84	33.6	
	Others	5	2.0	9	3.6	
	EDUCATION					
4	Illiterate	37	14.8	37	14.8	
	Preprimary	55	22.0	27	10.8	
	Upper Primary	73	29.2	107	42.8	
	Intermediate	48	19.2	20	8.0	
	Degree	37	14.8	59	23.6	
5	OCCUPATION					
	House Wife	222	88.8	220	88.0	
	Employee	18	7.2	14	5.6	
	Daily Wage	10	4.0	11	4.4	
	Business	0.0	0.0	5	2.0	
6	INDEPENDENT INCOME					
	No Income	223	89.2	213	85.2	
	Rs. 5000 – 6000/-	10	4.0	19	73.6	
	Rs. 6001 – 7000/-	7	2.8	2	8	
	Rs. 7001 – 8000/-	5	2.0	3	1.2	
	Rs. 8001 – 10000/-	5	2.0	13	5.2	
7	FAMILY INCOME					
	Rs. 10000 – 15000/-	163	65.2	192	76.8	
	Rs. 15001 – 20000/-	49	19.6	19	7.6	
	Rs. 20001 – 25000/-	30	12.0	8	3.2	

	> 25000/-	8	3.2	31	12.4
8	NUMBER OF CHILDREN				
	One	90	36.0	101	40.4
	Two	135	54.0	100	40.0
	Three	18	7.2	48	19.2
	Four	7	2.8	1	0.4
9	TYPE OF FAMILY				
	Nuclear Family	194	77.6	129	51.6
	Joint Family	56	22.4	121	48.4
10	TYPE OF HOUSE				
	Pucca	213	85.2	173	69.2
	Kutcha	30	12.0	75	30.0
	Semihut	7	2.8	2	8.0
11	RENTED / OWN HOUSE				
	Rent House	150	60.0	180	72.0
	Own House	100	40.0	70	28.0
12	ELECTRICITY				
	No	6	2.4	5	2.0
	Yes	244	97.6	245	98.0
13	ROOMS IN HOUSE				
	One	87	34.8	95	38.0
	Two	79	31.6	83	33.2
	Two	84	33.6	72	28.8
14	SEPARATE BED ROOM				
	No	140	56.0	146	58.4
	Yes	110	44.0	104	41.6
15	PRESENT OF SANITARY LATRINE				
	No				
	Yes	2	0.8	4	1.6
		248	99.2	246	98.4
16	DISPOSAL OF SANITARY NAPKIN				
	Burning				
	Dumping	23	9.2	19	7.6
	Rapped in a paper	11	4.4	18	7.2
	Put in dustbin	216	33.6	213	85.2
17	MATERIAL USED				
	Cloth	44	17.6	56	22.4
	Sanitary Napkin	206	82.4	194	77.6
18	SOURCE OF WATER FOR				
	DRINKING				
	Municipal Public Tab	64	25.6	57	22.8
	Municipal Private Tap	183	73.2	192	76.8
	Bore Water	3	1.2	1	0.4
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Discussion:-

Mother's Knowledge, Attitudes and Practices in Sriramnagar:-

The findings revealed that, there is a association between mothers knowledge on MCH components with their religion, education, occupation, family income, type of house, number of rooms in the house, disposal method of sanitary napkins and material used for sanitary napkins.

Association of mothers attitudes on MCH components with their demographic variables like number of children and type of house.

Association of mothers practices on MCH components with their demographic variables such as age, religion, education, occupation, independent income, disposal method of sanitary napkins and source of getting drinking water etc.

Mothers Knowledge, Attitudes and Practices in Jawaharnagar:-

The findings revealed that, there is a association between mothers knowledge on MCH components with their residence, age, religion, education, type of family, presence of sanitary latrine, disposal of sanitary napkin and material used for sanitary napkin.

Association of mothers attitudes on MCH components with their demographic variables like age, education, occupation, independent income, type of house and rent/own house.

Association of mothers practices on MCH components with their demographic variables like age, education, occupation, independent income, number of rooms in the house and material used for sanitary napkins.

Table -2:- Mothers total Knowledge, Attitudes and Practices on MCH components. N=500

Variables	Below average (< 33.3%)		Average (33.4 to 66.6%)	Above average (> 66.6%)	
Knowledge	F	7	216	277	
	%	1.4%	43.2%	55.4%	
Attitudes	F	18	415	67	
	%	3.6%	83.0%	13.4%	
Practices	f	394	73	33	
	%	78.8%	14.6%	6.6%	

Above table-2 reveals that, mothers knowledge scores, out of 500 mothers only 7 (1.4%) were having below average, 216(43.2%) were having average, and 277 (55.4%) were having above average knowledge scores.

Mothers attitudes scores regarding MCH components, out of 500 subjects 18 (3.6%) were scored below average, 415(83.0%) scored average and 67 (13.4%) were scored above average scores.

Mothers practice scores on MCH components, out of 500 respondents 394(78.8%) were got below average, 73 (14.6%) were got average and only 33 (6.6%) were got above average scores.

Conclusion:-

Conclusions were drawn on the basis of the findings of the study majority of the mothers 277(55.4%) were having above average knowledge on MCH components and attitudes of the mothers 415 (83.0%) were scored average and practices of the mothers 33 (6.6%) were scored above average, but 394 (78.8%) of the mothers got below average levels those who were not practising.

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