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## Assess the awareness and utilization of selected child welfare services among parents

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### Abstract

As strong pillars are needed for the better foundation of building, so are healthy children needed for the development of country. Therefore, various child welfare services are started by the government for comprehensive development of children. Mid-Day Meal Scheme and Integrated Child Development Services are important services started by government for child welfare. Awareness among parents regarding child welfare is very important for better utilization. The present study is titled as "A descriptive study to assess the awareness and utilization of selected child welfare services among parents in selected areas of Pune city".

**Purpose:** The purpose of the study was to assess the awareness and utilization of selected child welfare services among parents and to associate the findings with selected demographic variables.

**Material and Method:** The quantitative research approach was used for this study and descriptive research design was applied. Using non-probability purposive sampling technique 300 parents were selected in selected areas of Pune city.

**Result:** The results showed that maximum 239(79.7%) parents were aware regarding selected child welfare services and average utilization was reported by maximum parents 248 (82.6%). No proper preschool education for the children is the maximum factor 224 (74.7%) and non-availability of the health worker at the health center is the minimum factor that is 33 (11%) which affects the utilization of selected child welfare services. Statistically there is significant association between awareness and utilization at 5% level of significance [ $\chi^2$ , df (4) = 14.16,  $p$  services with selected demographic variables (age of parents, educational status and no. of children in the family)

**Conclusion:** The study concluded that parents have inadequate awareness regarding selected child welfare services and average utilization was reported. There is significant association between awareness and utilization of selected child welfare services.

**Keywords:** Selected child welfare services, awareness, utilization

### Introduction

As children are our country's backbone, the government should also look at their health/welfare as prime concern. For holistic development of children, child welfare services are started by government. Child welfare services can be either done through providing necessary support to families to care for their children in a successful manner or through direct focus and intervention with children<sup>[1]</sup>.

Comprehensive child welfare services are provided to the children to meet the whole sphere of their needs such as physical, social and emotional care. It also provides support to children living within the families, so the involvement of family in the child welfare services is an important responsibility of society and state<sup>[2]</sup>.

To meet children's health needs, all the aspects of child care are being covered by child welfare services, such as preventing diseases and illness, health promotion, curative aspect, meeting developmental needs, providing palliative care and rehabilitative facilities<sup>[3]</sup>. These services are titled under various schemes such as Mid-Day Meal Scheme, Integrated Child Development Services Scheme etc.

Mid-Day Meal Scheme was launched on 18<sup>th</sup> August 1975 and was centrally sponsored for increasing the enrolment, retention, increase attendance and nutritional status will also increase simultaneously. Mid-Day Meal is provided free of cost to the school-going children up to 8<sup>th</sup> standard<sup>[4]</sup>. Child education and health can be greatly achieved through Mid-Day Meal<sup>[5]</sup>.

Along with Mid-Day Meal Scheme, Integrated Child Development Services is another Scheme that was launched by Indian government on 2<sup>nd</sup> October 1975, to meet the developmental needs of children in a more effective manner.

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It is one of the important steps taken in order to achieve proper development in early childhood. The services provided under Integrated Child Development Services Scheme include- Supplementary nutrition, giving immunization, doing health- check-ups, referral services, non-formal pre-school education, nutrition and education regarding health.

A study was conducted in rural areas of Orissa (2012) and results revealed that ICDS has achieved great favours in the community and more than 95% of mother became aware about six Integrated Child Development Services packages and were utilizing most of them [6].

**Need for the study**

India holds second position in the world in terms of population with 1.21 billion people. As per the census 2011, children comprise of 39% of total population. One of the major health issue among Indian children is malnutrition. The percentage of underweight children in India is 44% and that of infant mortality rate and under five mortality ratios 34 and 55 respectively [7].

As per the report of study conducted in 2012 at Khurds, Orissa on mid-day meal scheme. There is a great increase in socialization between children and also the afternoon attendance has increased due to the implementation of cooked mid-day meal in schools [8].

A study was conducted by Patil KS *et al.* in 2016 on knowledge and utilization regarding Integrated Child Development Services and it showed that maximum 91.30% women were aware of Integrated Child Development Services and they revealed that these services were good and whereas utilization rate was 77.48%. however, lack of awareness which is 28%, 24% women busy in household work and 80% women were not in need of benefit of services were identified as reasons for non-utilization [9].

Since the researcher have revealed that lack of awareness regarding welfare services affects the utilization of these services. Therefore for better utilization of child welfare services, awareness is very important. And also, there is a gap between awareness and utilization of child welfare services. It means there are different factors which affects the utilization of child welfare services.

**Objective of the study**

To assess the awareness and utilization of selected child welfare services among parents.

**Methodology**

A non-experimental descriptive survey research design was adopted to conduct the study among 300 parents of selected areas of Pune city with non-probability purposive sampling technique.

**Sample criteria**

**Inclusion Criteria**

Parents with children up to 12 years of age.

**Exclusion Criteria**

Parents those who are working with/in child welfare services.

**Description of Tool**

The tool consisted of four sections

**Section I:** Demographic data Structured questionnaire was developed to collect demographic data.

**Section II:** A structured questionnaire (yes/no type) was developed to assess the awareness about selected child welfare services. It consists of 25 questions which includes two types of schemes

1. Mid -day meal scheme
2. Integrated child developmental services scheme

**Section III:** 3-point scale (often, sometimes and never) was developed to assess the utilization of selected child welfare services.

**Section IV:** A structured questionnaire (yes/no type) was used to assess the factors affecting utilization of selected child welfare services.

**Results**

300 parents were selected for data collection from selected areas of Pune City.

**Section I**

**Table 1:** Distribution of samples according to demographic characteristics

S. No.	Demographic variables	Frequency (f)	Percentage (%)
1	<b>Gender</b>		
	Male	70	23.3
	Female	230	76.7
2	<b>Age of parents (in years)</b>		
	20-30	220	73.3
	31-40	66	22
	41-50	14	4.7
3	<b>Educational status</b>		
	Primary	33	11
	Secondary	138	46
	Higher Secondary	118	39.3
	Graduate & Above	11	3.7
4	<b>Occupation</b>		
	Homemaker	167	55.6
	Government service	5	1.7
	Private service	60	20
	Laborer	35	11.7
	Any other	33	11
5	<b>Number of the children in the family</b>		
	1	82	27.3
	2	182	60.7
	3	36	12
6	<b>Type of school in which child goes</b>		
	Government	229	76.3
	Private	71	23.7
7	<b>Are you aware of Child Welfare Services</b>		
	Yes	239	79.7
	No	61	20.3

Table No 1 presents the distribution of demographic data where Majority 76.4% of samples were Female, maximum 73.3% parents were in the age range of 20 to 30 years of age, maximum 46% parents studied till secondary educational level, maximum parents (women) 55.6% were homemaker, majority of parents 60.7% were having 2 children, majority of children 76.3% seeks education in government schools and maximum 79.7% parents were aware about child welfare services.

**Section II:** Findings related to awareness among parents regarding selected child welfare services.

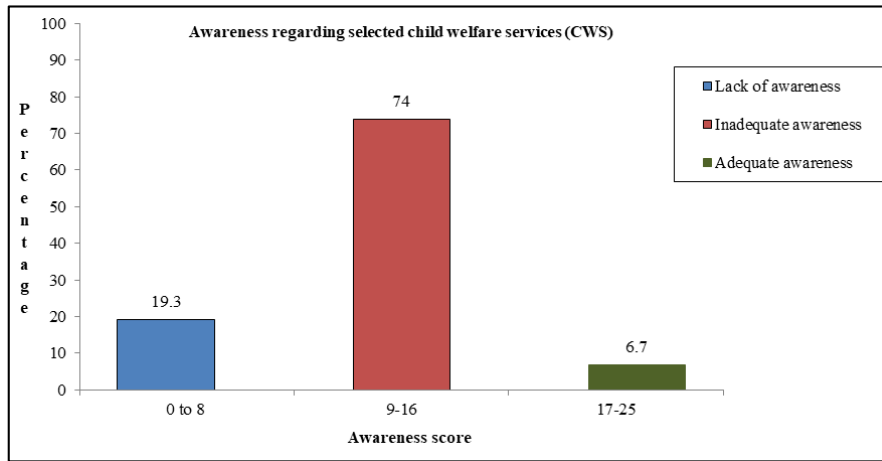


Fig 1: bar diagram showing distribution of samples according awareness of selected child welfare services

Figure No. 1 above shows that maximum parents 222(74.0%) had inadequate awareness, 58(19.3%) had lack of awareness and only 20(6.7%) parents had adequate awareness regarding selected child welfare service.

**Section-III**

Findings related to utilization of selected child welfare services among parents

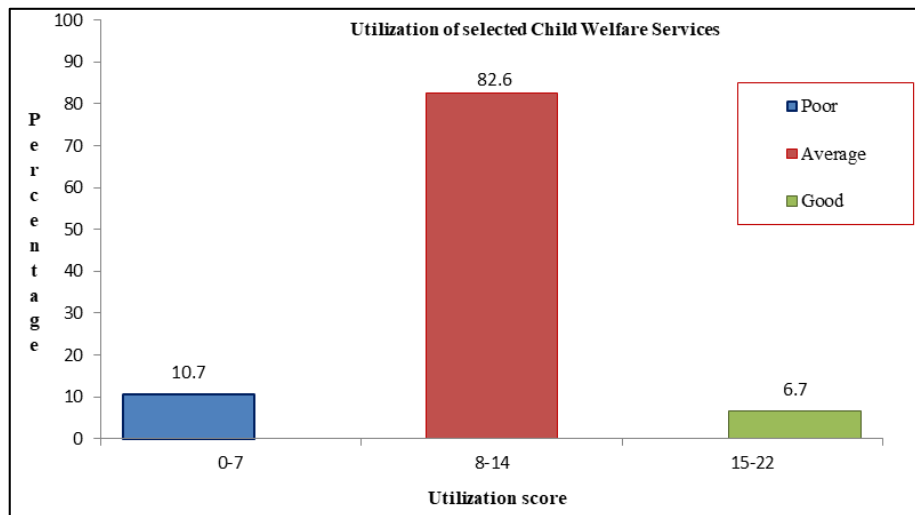


Fig 2: Illustrates that 32 (10.7%) have poor utilization, average utilization was reported by maximum parents 248 (82.6%) and very small number of parents 20 (6.7%) have good utilization of selected child welfare services.

**Section IV**

Findings related to identification of factors affecting utilization of selected child welfare services. Findings shows that maximum 74.7% of the factors were related to improper pre-school education, and only 11%parents gave factors about on- availability of the health worker at the health center, are service related factors, which affects the utilization of selected child welfare services. Among factors related to parents, maximum 58.30% parents are busy in household work and 21% parent reveals that their children are not registered at Anganwadi.

**Section V**

Findings related to association between awareness of parents and utilization of selected child welfare services

The calculated chi-square test value 14.16 demonstrates the significant association between awareness of parents of selected child welfare services with utilization of selected child welfare services, as  $p < 0.05$ .

**Section VI**

Findings related to association between awareness of services with selected demographic variables- Awareness of Child Welfare Services is significantly associated with selected demographic variables like gender ( $df=2, \chi^2=8.5, P=.002$ ), age of parents ( $df=4, \chi^2=11.8, P=.01$ ), educational status ( $df=6, \chi^2=17.4, P=.005$ ), and number of children in the family ( $df=4, \chi^2=10.2, P=.02$ ) because calculated chi-square test values is greater than tabulated value at 5% level of significance, as  $p < 0.05$ .

**Section VII**

Findings related to association between utilization of services with selected demographic variables-There is significant association between utilization of selected child welfare services with selected demographic variables like age ( $df=4, \chi^2=11.2, P=.02$ ), educational status ( $df=6, \chi^2=16.4, P=.005$ ),

**Table 2:** Association of awareness of parents of selected child welfare services with utilization of selected child welfare services

S. No.	Variables	df	$\chi^2$	P
1	Awareness of selected child welfare services	4	14.16	.01*
2	Utilization of selected child welfare services			

\*Statistically Significant at 5% level i.e.,  $P < 0.05$

and number of children in the family ( $df=4$ ,  $\chi^2=13.3$ ,  $P=.001$ ) because calculated chi-square test values is greater than tabulated value at 5% level of significance, as  $p<0.05$ .

### Discussion

The outcome of the study has been discussed based on objective and hypothesis for association as well as major finding of related to studies.

It was found that maximum parents i.e. 73.3% were in the age range of 20 to 30 years ages. Similarly, a study done at slum areas of Kolkata in 2014 and finding revealed that majority of mothers that is 64.4% were in the age range of 20-29 years.<sup>10</sup> The results showed that majority of parents (women) 55.7% were homemakers. The present study is supported by Sivanesan S. *et al.* (2010), their study on utilization of services which is provided under Integrated Child Development Services scheme for children which resulted that maximum 77.7% mothers were housewife<sup>[11]</sup>.

In this study, majority of parents (79.7%) were aware about child welfare services. For the support, there was a study conducted in West Bengal in 2018 among mothers to find out the awareness level and their perception regarding various services of ICDS, finding showed that maximum 84.2% mothers were aware regarding ICDS services<sup>[12]</sup>.

Maximum 74.7% parents gave factors about improper pre-school education in Anganwadi centers. In contrast to present study, research done at Agartala in Tripura (2015) and findings exposed that 53.8% children attended private schools is major factors for non- utilization<sup>[13]</sup>.

For supporting present study, a study was done at Amritsar in 2014 and results showed that awareness of mothers were significantly associated with their educational status<sup>[14]</sup>.

### Conclusion

Maximum 222(74%) parents had inadequate awareness regarding selected child welfare services, whereas average utilization was reported by maximum parents 248(82.7%). There is significant association between awareness and utilization of selected child welfare services among parents. Demographic variables (age, educational status and no. of children in the family) are significantly associated with awareness and utilization of selected child welfare services

### Limitations

- 1) Limited time available for data collection.
- 2) Non- probability purposive sampling technique was used.
- 3) The relevant and appropriate literature was less, as hardly any nursing study has been conducted on the under investigation

### Recommendations

- 1) This study can be replicated on large sample in order to generalize the findings.
- 2) A study can be done in different settings. i. e. Rural area.
- 3) Further study can be done with the help of randomized sampling technique.
- 4) A comparative study can be conducted in rural and urban areas regarding the same topic.
- 5) A comparative study can be conducted in rural and urban areas regarding the same topic.

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