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A critical study to assess the teaching practices and problems faced by AWW in Trivandram district

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Abstract

Aim: To assess the teaching practices adopted and the constraints faced by the anganwadi workers in Trivandrum district. **SAMPLE:** Twenty five anganwadi workers working under the anganwadi centers of the urban project area II of Trivandrum district were studied.

Study Design: A critical study was done to assess the teaching practices and constraints faced by the anganwadi workers of the anganwadi centers in the Urban 2 project areas of Trivandrum district, Kerala. They were selected randomly from sector 1 and sector 4.

Locale of Study: The present study was conducted in Trivandrum Urban Project II. 175 anganwadi centers are there in this project which is further subdivided into five sectors. From the five sectors under the Urban Project No: II, sector I and IV was selected randomly.

Methodology: Interview method using a questionnaire was used in the present study to assemble information on teaching practices and constraints faced.

Results: Scoring was done to rate the teaching practices adopted by the anganwadi workers. Majority of the anganwadi workers scored in the category of medium score (64.00%). 20.00per cent of the anganwadi workers scored high and 16.00per cent scored low.

Conclusion: Only 12% had high score related to their practices in anganwadi centers. It reveals the need for improving the practices of AWW. Less wage was the major problem for 71.00 per cent of the anganwadi workers.

Keywords: Anganwadi center, anganwadi worker, practices, constraints, questionnaire, scoring

1. Introduction

In 2nd October 1975 GOI initiated: Integrated Child Development Services to improve the health, nutrition and overall development of children among the deprived population of 33 blocks (including 4 rural, 18 urban and 11 tribal blocks) through network of AWC in India.

ICDS is the foremost symbol of country's commitment to its children and nursing mothers, as a response to the challenge of providing preschool normal education on one hand and breaking the vicious cycle of malnutrition, morbidity, reduced learning capacity and mortality ^[1].

Anganwadi centre is the central point for the delivery of services to children and mothers. Anganwadi worker is the essential tool for India to fight against child malnutrition, lack of child education, health problems at the community and helps in prevention of preventable diseases. She will be assistant by an Anganwadi Helper (AWH) in growth monitoring ^[2]

In such a circumstance it is necessary to study the teaching practices adopted and also there is need to know about the problems faced by them, since they are actually doing a herculean task for the welfare of our nation.

2. Materials and Methods

2.1. Local of Study

The present study was conducted in Trivandrum Urban Project II. 175 anganwadi centers are there in this project which is further subdivided into five sectors like the other three project sectors such as Urban I, III, & V. Among the five sectors under the urban project no: II, sector I and IV was selected randomly.

2.2. Plan of Action

A critical study was done to assess the teaching practices and constraints faced by the anganwadi workers of the anganwadi centers in the Urban 2 project areas of Trivandrum

district, Kerala. They were selected randomly from sector 1 and sector 4.

2.3. Selection of Samples

Twenty five anganwadi workers working under the anganwadi centers of the urban project area II of Trivandrum district were randomly selected and were studied.

2.4. Selection of Methods of Study

Interview method using a questionnaire was used in the present study to assemble information on knowledge and attitude of 25 anganwadi worker and their teaching practices. The constraints faced by both of the groups were assessed through a suitably structured and pretested questionnaire. There are many constraints faced by anganwadi workers and helpers in the anganwadi. Constraints faced by anganwadi workers and helpers were examined. Six main problems were

given to them and asked to rate them as most important, important and less important.

3. Results

Teaching practices adopted by the Anganwadi Workers for providing preschool education, and the constraints faced by them were assessed through a suitably structured and pretested questionnaire.

3.1. Practice of Anganwadi workers

To access the teaching practices adopted by anganwadi workers 12 statements were given. One score for positive answers and zero for negative response.

Those who are having a score of twelve and eleven were included under high score, score of ten and nine in the category of medium score and less than nine in the low score category.

Table 1: Distribution of AWW with respect to teaching practices.

Category	Number	Percent
High score	5	20.00
Medium score	16	64.00
Low score	4	16.00

(Minimum score: 0; Maximum score: 12 and Mean score: 9.5)

As revealed in the table 1, majority of the anganwadi workers scored in the category of medium score (64.00%). 20.00per cent of the anganwadi workers scored high and 16.00per cent scored low.

3.2. Constraints faced by the AWW and AWH.

There are many constraints faced by anganwadi workers and helpers in the anganwadi. Six main problems were given to them and to rate them as most important, important and less important. As revealed in the table 2, 71 per cent anganwadi workers said that their remuneration is not satisfactory. It is the major constraint. 57 percent AWW felt difficulty in maintaining too much records. 54 per cent AWW felt their duties as heavy. 29 per cent AWW found difficulty due to the improper infrastructure facilities. 31 percent AWW were having a lack of support from the community. 29 per cent AWW were unable to perform their duties within the

provided time.

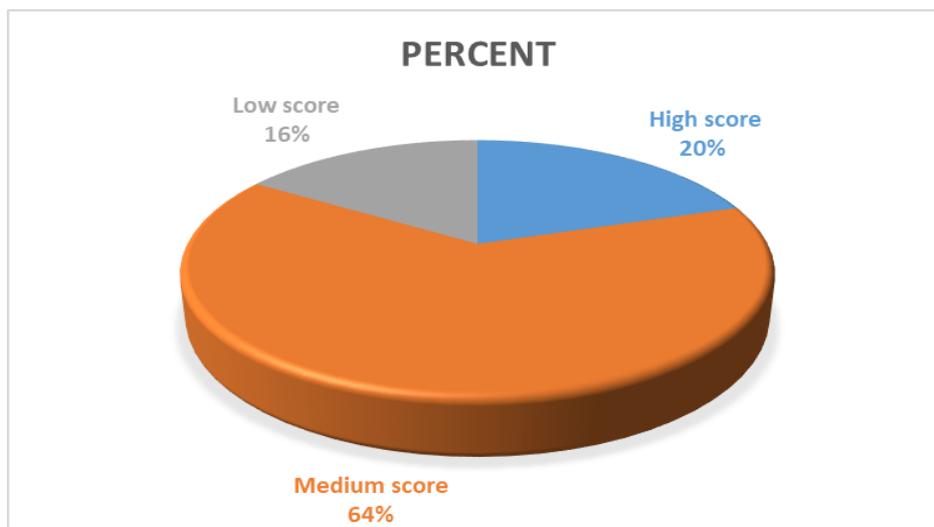
Table 2: Constraints faced by the AWW and AWH.

Constraints	AWW
Less wage	71
Difficulty to maintain too much records	57
Heavy workload	54
Improper infrastructure facilities	29
Lack of community support	31
Unable to perform duties with in the given time	29

Values in given under the headings AWW indicates percentage AWW: Anganwadi Worker

4. Discussion

Only 12% had high score related to their practices in anganwadi centers. It reveals the need for improving the practices of AWW.

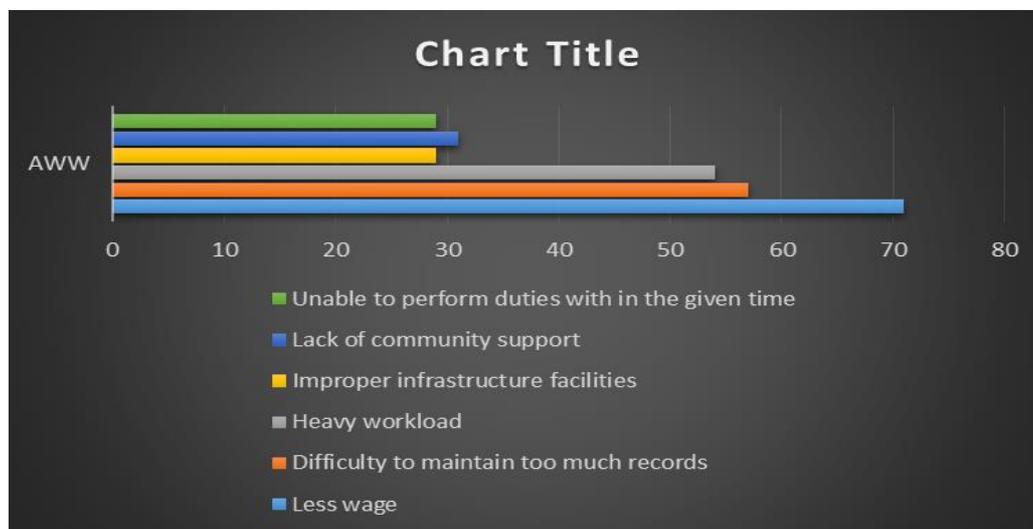


Less wage was the major problem for the anganwadi workers. Unsatisfactory honorarium results in inactive performance of their duties which negatively affects the operational changes in the programs [3]. The study conducted by Thakur *et al.*

(2015) to assess the knowledge and practice of anganwadi workers and helpers in Himachal Pradesh presented that when they are asked questions in the knowledge parameter they were unable to answer properly. Unlikely all of the anganwadi

workers and 97% of the helpers were trained. 27% of the anganwadi workers were unsatisfied with the given salary. 57% of the anganwadi workers find to be difficult in maintaining too much records and 54% experience a feel of heavy work load. Similar results were observed by Vijayavardhini and Kumari (2016), and suggest that in order to reduce their work load one more worker or teacher shall be

incorporated to share the work. Bhatnagar and Bhadra (2015) reported that anganwadi workers are not satisfied with the present wages given to them. It will reflect in their duty performance and inactiveness. They cause negative effects on the proper care for the beneficiaries. Operational changes are needful in the programme for the wellbeing of children.



An investigation study conducted by Choudhary and Sharma (2017) reported that inadequate remuneration is the main problem faced by anganwadi workers followed by work overload and improper infrastructure facilities. Many of them complained about maintenance of too much records because along with that they have to assist other health programs. Results of a cross sectional study conducted by Asha (2014), shown that job status of anganwadi worker, infrastructure facilities, supervision and proper community support are significant components in the proper and efficient functioning of anganwadi centers.

The study documented that majority of the anganwadi centers are functioning in rented building. Anganwadi workers and helpers are forced to pay the rent. And they are not able to initiate kitchen gardens. According to Chauhan (2015), kitchen gardens have positive impact on the dietary diversity of child. Crop diversity practices will increase dietary diversity.

In a critical study conducted by Chudasama *et al.*, (2014) documented that, majority of the anganwadi workers put forward certain issues such as lack of storage facility, improper space for children to play out door, lack of availability of separate kitchen. There is a need for improvement in all of the anganwadies and services. It was found that there remains a gap between what is said and what being done.

5. Conclusion

Only 12% had high score related to their practices in anganwadi centers. It reveals the need for improving the practices of AWW. According to the number of children there is a need to increase the number of teachers, in order to provide individual attention to all of the children.

Less wage was the major problem. Fifty seven per cent of the anganwadi workers find to be difficult in maintaining too much records and 54.00 per cent experience a feel of heavy work load. There is a need to increase the wages of anganwadi workers since they are doing really a herculean task.

Records are a burden but introduction of smart phone are a boon to them. Their work load is heavy during the times of surveys. So at that time that need to be assessed or better to appoint some other people for the survey purposes. Or else the impact of all these problems will be reflected in the nutritional outcome of the children attending anganwadi centers. Increasing the remuneration will be a motivation to have a good interest in looking after the children.

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