

## PREFACE

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Knowledge, Attitude and Practices are important component of a people's way of life. Influenced by the norms and values that communities uphold, these attributes have immense implication on the well-being of children, and on their overall health understanding the level of Knowledge, Attitude and Practices of the people of Badroan block (Mau) will enable a more efficient process of awareness creation that will form a strong basis for effective Behavior Change Communication (BCC) programme tailored more appropriately to the needs of the community.

The chapter one describes the rationale and conceptual framework of the Knowledge, Attitude and Practices regarding the Maternal and Child Health Care Practices. World Health Organization (1983) has defined health as "state of complete physical mental and social well-being not merely absence of any disease", there are also some queries regarding this definition of health traditionally, absence of disease or infirmities has been viewed synonymous to health. In other words, like in many others an area of human endeavors, in the area of health, too, absence of negative has been regarded as positive. It is the interaction of these two factors with specific social, political, economic and ecological conditions in which families live that determines actual health outcomes.

Chapter Two deals with the review of relevant literature related to the KAP and Maternal Health and Child Health. The literature reveals that, while the mothers may have correct knowledge, their accompanying practices are not always appropriate Knowledge, Attitudes and cultural beliefs underlying child care practices and some traditional home care practices can delay the seeking of medical care gaps between knowledge and practice.

Chapter third presents the Information about the data used in the present study, it also provides the brief description about the secondary data used, and afterwards it explains the rationale behind using primary data and information collected through qualitative survey.

Chapter four presents the details of respondent's background characteristics. Only woman (15-49yrs) of with at least one child aged less than 24 months were eligible for interview. All information pertaining to maternal practices concerning child health was taken in reference to the youngest child only.

Chapter five deal with the status of KAP about Maternal and Child Health Care Services among the Married Women.KAP of matters regarding child health diarrhea, immunization, Breastfeeding practices and nutrition for their children as well as focused on maternal health, reproduction health and full ANC for their own health. Awareness that certain environmental factors, such as contaminated water and negligence of nutrition status are harmful for children must existent (**Knowledge**). The mothers must then become engaged by and decide to act upon this knowledge (**Attitude**). Finally the mother is action upon the issue and possibly working her way to maintain this action (**Practice**).

Chapter six provides the features of the findings and limitations of the present study. The data analysis supports literature that KAP impact child and maternal health practices in terms of disease, nutrition it also supports the fact that mothers or maternal education is an important factor in child health and their own health practices.