

ID 276

## Knowledge, Attitudes, and Practices about Responsive Care in Early Childhood among Public Health Midwives in Kandy District, Sri Lanka

WWR Hasanthika $^{1\#}$  and RM Mudiyanse $^2$ 

<sup>1</sup>Faculty of Nursing, KAATSU International University, Battaramulla, Sri Lanka <sup>2</sup>Faculty of Medicine, University of Peradeniya, Peradeniya, Sri Lanka

#rangani@kiu.ac.lk

## **Abstract**

The process of watching/picking a child's interests, curiosities, and cues, to find out what they mean and promptly responding to them sensitively is known as responsive care. The aim of this study was to investigate the knowledge, attitudes, and practices about responsive care in early childhood among Public Health Midwives (PHMs) in Kandy District, Sri Lanka. A descriptive, cross-sectional study was conducted among 213 PHMs in the Kandy District. Data were collected using a validated, pre-tested selfadministered questionnaire. Data analysis was done by using SPSS Version 26. The data were interpreted by calculating the frequencies and Chi-square tests. Computed knowledge scores were graded into "Good (26-29)", "Average (25-26)", and "Poor" (20-25)". Attitudes scores were graded into "Positive (64-80)", "Neutral (61-64)", and "Negative (34-61)". Practice scores were graded into "Good (45-50)", "Average (41-45)" and "Poor (25-41)". Among the total participants (n=213), 25.8% of them had good knowledge, 33.8% of participants had positive attitudes, and 31.9% of participants had good practices toward responsive care. There was a significant association between the level of education with the knowledge score (p<0.01). The chi-square test exhibited there was no association between socio-demographic data with attitudes (p>0.01) and practices (p>0.01) related to responsive care in early childhood. According to this study, the knowledge, attitudes, and practices about responsive care in early childhood among PHMs in Kandy District need improvement. However, repeating the self-reported assessment after an interval and evaluating actual practices by observations or by parents' reports would be essential steps in future research. Further validation of the knowledge, attitudes, and practices tool developed for this study could be done by conducting qualitative studies and triangulation of results.

Keywords: Responsive care, Early childhood, PHM