# **CHAPTER V**

## PRESENTATION

I presented the overall view of my thesis on the topic" Nutrition education: an intervention to increase the knowledge and practice of FCHV regarding the prevention of IDA during pregnancy in Nawalparasi district " on 17<sup>th</sup> June to the examination committee. The presentation was dived into four parts: Introduction, essay, proposal and data exercise.

I presented problem addressed in this thesis, reasons and evidences for the problems and the conclusion of the issue.

In the proposal part I presented about my proposal study in 2 villages of Nawalparasi district, Nepal to provide training to FCHVs. The study design and the methodology was presented.

The fourth part of the data exercise was done in Nepal. I presented the objectives of the data exercise and technique of the data exercise. After the oral thesis presentation, the examination committee member asked me question about my thesis, to which I tried to respond with my best ability and knowledge. Similarly the committee members gave me advise to improve my study and incorporated those advise in my thesis.

The overall transparencies were prepared and used for the presentation. The contents of the transparencies are mentioned as follows sequentially as shown to the examination committee.

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#### **Thesis Topic**

Nutrition Training: An Intervention to increase the KAP of Female Community Health Volunteers regarding the prevention of iron deficiency anemia during pregnancy in Nawalparasi District of Nepal Iron deficiency anemia(IDA) is the most common nutritional cause of anemia. IDA is defined as anemia associated with either inadequate absorption or excessive loss of iron.

<u>ISSUE</u>

How can the consumption of iron rich food(IRF) and iron absorbent food(IAF) be increased among the pregnant women of Nawalparasi District?

## **CONCLUSION**

FCHV training can increase the consumption of iron rich and iron absorbent foods by the pregnant women.

#### **REASONS**

- IDA is a major public health problem in Nepal.
- Increases maternal mortality and morbidity.
- Increases low birth weight so high infant mortality rate.

## **EVIDENCES**

- 90 % of all the anemic individuals are anemic in the developing countries(De Mayer, 1985)
- Iron deficiency affects over 2000 million people world wide.(FAO-1995)
- 95% anemia among mothers of children 6-36 months old in Nawalparasi District (JNSP-1986)
- Only 10% pregnant women are taking iron tablets (HMGN-1998)
- Severely lacked train health man power (annual report 1995)
- Maternal mortality from severe anemia has been estimated to be 13% in Sarlahi district (FHD-1996)
  - More than 75% pregnant women are anemic in Nepal( Adlkari, R.K, 1997).

#### **DEFINITION OF ANEMIA**

Anemia is a condition that results in a lowering of hemoglobin level (Hb) below what is considered to be normal for specific demographic groups.

The criteria for determining anemia (WHO) :	
Age/Sex Groups	Haemoglobin level ( g/dl)
• Children 6 months - 5years	<11
• Children 6-14 years	<12
• Adult Male	<13
• Adult Female (Non-pregnant)	<12
• Adult female Pregnant	<11

## **POSSIBLE STRATEGIES**

- Supplementation of iron
- Control of malaria
- · Control of hookworm
- Training of the health workers
- Dietary modification through nutrition education

## **GENERAL OBJECTIVES**

To reduce the incidence of iron deficiency anemia among pregnant women through FCHV training in selected villages of Nawalparasi District

## **SPECIFIC OBJECTIVES**

1. To increase the knowledge of the FCHVs regarding the the causes, signs and symptoms, complications, prevention and treatment of IDA during pregnancy.

- 2. To increase the knowledge of FCHVs about the importance of iron rich and iron absorbent foods to prevent IDA during pregnancy
- 3. To increase the knowledge of the FCHV about the locally available iron rich and iron absorbent food sources which will prevent IDA
- 4. To assess the change in attitude andbehavior of FCHV in relation to health education to pregnant women regarding the prevention of iron deficiency anemia

## **REARCH QUESTION**

• Does Nutrition education training to FCHV improve their KAP regarding the prevention of IDA during pregnancy ?

## STUDY DESIGN

Before and After study design

## STUDY AREA

Two villages from Nawalparasi District of Nepal. Selection Criteria:

- 1. High prevalence of IDA
- 2. Easy access
- 3. Availability of FCHVs

## **INCLUSION CRITERIA**

- Minimum 5 years of work experience as FCHVs
- · Interested in participating in the study
- local resident
- At least 25 years old

## WHAT WE WANT TO MEASURE?

- 1. Change in knowledge of FCHV regarding prevention of anemia.
- 2. Change in attitude and behavior of FCHV in relation to nutrition education to pregnant women regarding IDA.

## Rationale for choosing FCHV training

- 1. There is a severe shortage of trained human resource in the central and at peripheral Health institutions.(Annual Report of DHS 1995-1996)
- 2. FCHV are being used to educate community in in the primary health care components.
- 3. FCHV training curriculum lack course content on IDA during pregnancy

### PROPOSED PROGRAM

The main theme of my study: Nutrition training to FCHV regarding the prevention of IDA during pregnancy.

## TRAINING TO FCHV

- Training to FCHV is vital because FCHVs are considered to be the key to bringing primary health care services and information to the home.
- The program has had mixed success.
- They have routine direct contact at the family level by doing household visit.

- FCHVs are the local women who are trained for two weeks and supervised by the health post staff.
- FCHVs are highly desired in rural communities in providing primary health services.

## PURPOSE OF THE FCHV TRAINING

• The main purpose of this training is to improve the knowledge, attitude and practice of FCHV's regarding the prevention of IDA during pregnancy.

## **OBJECTIVES OF FCHV TRAINING**

- 1. Explain the meaning of IDA.
- 2. Explain the causes of iron deficiency anemia.
- 3. Describe the sign and symptoms of anemia.
- Describe the effects of iron deficiency anemia on mother during pregnancy and labor and postpartum and effects on infants.
- 5. Explain the importance of consuming iron rich and iron absorbent foods during pregnancy.
- 6. State the foods which are rich in iron and which have iron absorbent quality (containing vitamin c).
- 7. Describe the prevention and treatment of iron deficiency anemia among pregnant women in rural community.
- 8. Give adequate nutrition education to pregnant women regarding IDA
- 9. Demonstrate positive attitude towards importance of iron rich food during pregnancy

#### **EXPECTED OUTCOME OF TRAINING**

- 1. Increase in the percent of FCHV knowing causes, signs and symptoms, effects and prevention of IDA.
- 2. Increase in the percent of FCHV knowing the food sources of iron.
- 3. Increase in the proportion of FCHVs demonstrating positive attitude towards prevention of IDA through diet.
- 4.Increase in the proportion of FCHVs giving nutrition education to the pregnant women.

- 5. Increase in the proportion of FCHV giving adequate advise about cause, effects and prevention of IDA through diet
- 6. Decrease in maternal morbidity and maternal mortality.
- 7. Decrease in incidence of the low birth weight infants.

## **TEACHING METHODS**

- Participatory Approach for active learning e.g.
- Short lecture
- Group work
- Group discussion
- Demonstration, role play, field pratice

## TRAINING MATERIALS

• Audio-Visual materials for theoretical and practical session, pamphlets, posters, flip charts and real objects for demonstration.

- Severely lacked train health man power(Annual Report-1995)
- Maternal Mortality from severe anemia has been estimated to be 13% in Sarlahi district(FHD-1996)

## TRAINING MATERIALS

• Audio-Visual materials for theoretical and practical session, pamphlets, posters, flip charts and real objects for demonstration.

## **OBJECTIVES OF THE DATA EXERCISE**

- To find out the level of the knowledge regarding the prevention of IDA among FCHVs and Pregnant Women so that the training materials, and data collection instruments could be refined.
- To find out the willingness of the FCHVs to provide nutrition education on prevention of IDA.
- To modify the intervention based on the lessons learned from data exercise.

### METHODS USED FOR DATA EXERCISE

- Focus group discussion with FCHVs
- Focus group discussion with pregnant women
- Key Informant interview with FCHV Programme Officer and Health post In-charge

# LESSONS LEARNED FROM DATA EXERCISE

- Various sources of information help in getting broader ideas and views.
- Not only qualitative but quantitative method is also important in getting relevant information regarding the prevention of IDA from FCHV.
- FCHV were interested to get training regarding the prevention of IDA.

## LIMITATION OF THE STUDY

- 1. This study is limited to assessment of the training outcome of the FCHV only.
- 2.It is relevant to Dumkibas and Ramnager villages and FCHVs working in these villages.

#### FINDINGS OF THE DATA EXERCISE.

- 1. FCHVs do not have adequate information on IDA and locally available foods which contain iron and vitamin c.
- 2.Pregnant mothers said that they do not know about IDA and locally available foods which contain iron and vitamin c.
- 3.Key informant said that IDA course content is not included in FCHVs training curriculum.