

CHAPTER I

Introduction

The usage of Oral Rehydration Therapy and continuation of foods during Diarrhoeal Diseases among children is very low, which is a serious concern in the country, especially at the household level. Until recently, Control of Diarrhoeal Diseases Program (CDDP) had focused on the promotion of Oral Rehydration Salt as the main remedy of diarrhea. but now, it is well accepted that proper case management of diarrhea starts from household level through the usage of increased amount of fluids and continuation of nutritious foods. Thus, it is necessary to raise the aware the mothers/caretakers of the children towards usage of fluids and foods during each diarrhoeal episodes and the usage of Oral Rehydration Salt for the treatment of existing dehydration. The objective of this study is to intervene a multidisciplinary health education approach (Social Marketing) in Laharepauwa Village, Rasuwa District of the country to make the mothers/caretakers aware of the importance of fluids and foods for the proper case management of diarrhea.

The following chapter, deals with the issue (low usage of Oral Rehydration Therapy and feeding) and the conclusion (need of a multidisciplinary health education approach) of this study. Similarly, this chapter will go through the analysis of the

possible reasons associated with the low usage of Oral Rehydration Therapy and continued feeding practices. The chapter also deals with the public health importance of Diarrhoeal Diseases followed by global and national burden. The importance of Oral Rehydration Therapy and nutritious foods during diarrhea will also be discussed in this part. Finally, this chapter provides some brief information on the concept of Social Marketing including the benefits and limitations of this approach.

The Third chapter is the proposal, which deals with the rationales and methodology related with the proposed study, (such as: the rationale of the study, field application of study, purpose statement of the study etc.) including the conceptual framework, study design and the objective of the study. The proposed study will be a qualitative approach action research. The main data collection technique will be focus group discussions, which shall be conducted in many series during the design, implementation and evaluation process of the study. In addition, key informant interviews and reviews of service statistics will be other data collection techniques, during the impact evaluation. The guidelines for the data collection techniques are given on appendices. Similarly, this chapter gives an overview of the plan of action, budgetary requirement, human resource requirements, sustainability, ethical issues and limitations of the proposed study.

The fourth chapter is the data exercise. This part deals with the process of focus group discussions and key informant interviews, which were conducted as a part of data exercise related to this study. The main objective of the data exercise was to test out the appropriateness of the data collection tools and techniques (to pretest the

interview guidelines among the real respondents of the original study, to test whether the data collection techniques can collect the expected information that requires for the original study). Further, this chapter also deals with the findings of the focus group discussions and key informant interviews followed by the limitation and lessons learned during the data exercise.

Chapter Five is the presentation part of my thesis examination. This chapter deals with some transparencies used during the thesis presentation. Some of these transparencies have been revised based on the advice of the thesis examination committee. Chapter Six is the annotated bibliography. This chapter provides a brief overview of the top eight books/ chapters that were consulted during the thesis writing.

This is the general overview of my study. It is expected that the National Control of Diarrhoeal Diseases Program (NCDDP) and the National Health Education, Information Communication Center ((NHEICC) will benefit from the research results. The findings (research results) will be presented to the planers and programmers of NCDDP and NHEICC, and as a researcher, I am hopeful that they will apply this to design and implement better health education services in the near future to improve the usage of Oral Rehydration Therapy and continued feeding practices in other similar parts of the country.