NUTRITION TRAINING: AN INTERVENTION TO INCREASE THE KNOWLEDGE AND PRACTICE OF FEMALE COMMUNITY HEALTH VOLUNTEER REGARDING THE PREVENTION OF IRON DEFICIENCY ANEMIA DURING PREGNANCY IN NAVALPARASI DISTRICT NEPAL

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ABSTRACT

Maternal mortality in Nepal is very high totalling 539/100,000 live births. The main causes of high maternal mortality are hemorrhage, toxemia, sepsis, obstructed labor and abortion. Iron deficiency anemia (IDA) which is a common and widespread nutritional problem in Nepal is one of the factors contributing to the high maternal mortality rate. IDA can be reduced by high or increased consumption of iron rich and iron absorbent food by the pregnant women.

The main issue of this research is how to increase the consumption of locally available iron rich and iron absorbent foods in Nawalparasi district of Nepal. In developing countries this can only be achieved through the primary health care (PHC) approach. Community health workers, especially FCHV, are the backbone of this program. So, appropriate training regarding the prevention of IDA and community participation and effective supervision of FCHV will be helpful in increasing the consumption of locally available iron rich and iron absorbent food in Nepal.

There is a great need to train FCHV in Nepal because there is a severe lack of trained health manpower in the central and at peripheral institutions. So, the FCHV program was developed and introduced during 1989-1990 in order to expand the coverage of basic primary health care services in the country. Their most important responsibility is to promote community involvement in the primary health center program.

This study proposes a 3 days training program for FCHV on nutrition education regarding the prevention of IDA among pregnant women. Training will be carried out in the Dumkibas health post of Nawalparasi district, Nepal in January 2000, with the help of the Regional Training Center and District Health office in Nawalparasi.

After the training, FCHV will provide nutrition education to the community in Nawalparasi district. Evaluation will be carried after one year of implementation of the program. The methods of data collection will be focus group discussion and survey questionnaire.