

PH : 032390 : MAJOR HEALTH SYSTEMS DEVELOPMENT PROGRAMME
 KEY WORD : EVALUATION/COMMUNITY BASED/EDUCATION/WOMEN
 OF REPRODUCTIVE AGE GROUP/PARO DISTRICT/BHUTION

PANDUP TSHERING: EVALUATION OF COMMUNITY BASED
 EDUCATION FOR WOMEN OF REPRODUCTIVE AGE GROUP IN PARO
 DISTRICT, BHUTAN. THESIS ADVISOR: ROBERT SEDGWICK
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A community-based education program on recognizing five danger signs of pregnancy was given to women of reproductive age group (15-49 years) in Paro, Bhutan. The five danger signs were bleeding, fever, prolonged labor pain >12 hours, severe headache with blurring of vision and fits. The education program also encouraged women to come to hospital for treatment of these danger signs and for delivery. The education program was conducted from June 2002 to May 2003. The main objective of the education program was to increase knowledge of women on danger signs of pregnancy, and to increase hospital utilization for treatment of complications of pregnancy and delivery. The main objective of this study was to evaluate whether the education program increased the level of knowledge of women on danger signs of pregnancy, and increased hospital utilization for treatment of complications of pregnancy and delivery. Both primary and secondary data were collected. For primary data, a cross sectional study was carried out in Paro (intervention area) and Punakha (control area) The primary data included information on socio-demographic characteristics and knowledge level of the sample population. The secondary data included information on socio-demographic features and diagnosis of women who utilized the hospital. The secondary data were collected for three years (2001-2003). Descriptive statistics were used to describe the socio-demographic characteristics for primary and secondary data. Statistical tests were used on the primary data to assess associations of knowledge with place, program attendance and other independent variables. Statistical tests were also used on the secondary data to assess hospitalization before vs. after the program. The net intervention effect on hospital utilization was also calculated. The association of knowledge with place was statistically significant. ($p < .001$, Paro > Punakha). In Paro, the association of knowledge with program attendance was also statistically significant. ($p < .001$, attended > not attended). Difference in Hospital utilization for treatment of complications of pregnancy was statistically significant in Paro ($p = 0.022$) but not in Punakha ($p = 0.301$). For delivery it was not statistically significant in Paro ($p = 0.172$) or Punakha ($p = 0.310$). For both combined it was statistically significant in Paro ($p = 0.007$) but not in Punakha ($p = 0.775$). The net intervention effect on hospital utilization for delivery was 1%, for treatment of complications of pregnancy was 24% and for delivery and complications treatment combined was 16%. In conclusion, the education program appears to have resulted in increased knowledge of the danger signs of pregnancy. However, baseline (pre-program) knowledge level was not measured, and some degree of confounding by socio-demographic factors cannot be ruled out. The program was evidently successful in increasing hospitalization for complications of pregnancy, but not for delivery.

Field of study Health Systems Development Student's signature

Academic year 2003 Advisor's signature