A STUDY ON ASSESSMENT OF THE KNOWLEDGE OF "WEEKLY IRON FOLIC SUPPLEMENTATION" PROGRAM AMONG ADOLESCENT GIRLS IN JAMNAGAR DISTRICT

Dissertation

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Introduction:

As RMNCH+A is a new approach in health system and "A" represents adolescents in it as a approach to life cycle.
Anemia- a major cause in maternal death and infant death.
WIFS - important component

Two channels :

1. Education department:
    - At every school level two teachers are the respondent officer for the program.
    - On every Monday after the lunch they need to give tablets to the students and make sure that the students consume it in their presence.
    - Teachers need to fill the attendance sheet and left out students need to be covered on the next day.
    - Reporting is done on monthly basis to FHW(Female health worker) and she will provide a copy to health department and a copy to taluka education officer.

2. ICDS (Integrated child development services):
    - In this the services are provided from Aanganwadi and they play an important role in it.
    - SABLA program is run in anganwadi and 11-19yr girls are a part of it.
    - SABLA girls coming to center are given iron tablets. Report is generated on monthly basis and reported to CDPO and followed to districts and than to state.

Research Question:

What is the knowledge among the adolescent girls about WIFS program (why, what, where, who, when and how)?

Objectives:-

- ✓To review the operational process of the WIFS program; and

- ✓To study knowledge of WIFS (why, what, where, who, when and how) among the girls aged between 11-19 years;

Methodology:- Study design: The present study is an analytical study.

Study area and duration: The study was carried out from February to April, 2014 in Jamnagar.

Study Subject: Adolescent girls

Sample size: 200 AGs

Table 1: Respondent distribution in different Taluka's of Jamnagar district.

Taluka	Proposed SABLA girls at the center to be assessed	No. of girls interviewed	Difference (in no of girls assessed and to be assessed)
Bhanvad	20	20	0
Dhrol	20	20	0
Jamjodhpur	20	15	-5
Jodiya	20	20	0
Kalavad	20	30	10
Kalyanpur	20	20	0
Lalpur	20	15	-5
Khambhaliya	20	10	-10
Okhamandal	20	15	5
Jamnagar	20	35	15
Total	200	200	

FINDINGS:

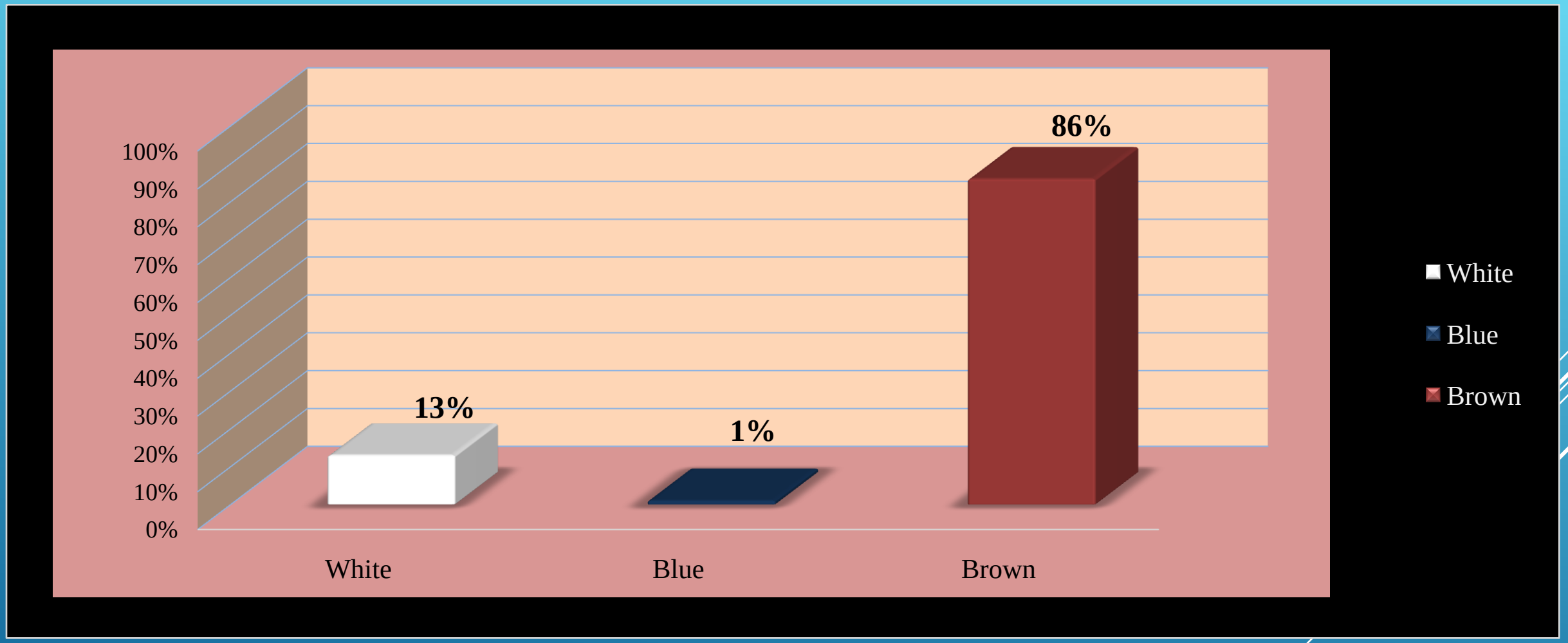
Table 2: Socio economic status of Adolescent girl's family

	Age	No. of Girls	(%)
Age of the adolescent girls participated in the survey	11	21	10.5
	12	29	14.5
	13	20	10
	14	41	20.5
	15	29	14.5
	16	18	9
	17	20	10
	18	14	7
	19	08	4
Type of house girls were residing in.		83% (Pakka house)	17% (Kachcha House)
Main source of income in their houses		65% (Farming / labor)	35% (Job/ Business)
School going status of the participant girls		75.5% (Go to school)	24.5% (Non-school going)
Frequency of school going in the participant girls		74% (Regularly)	26% (irregular/ enrolled and not going)

Table 3: Knowledge related to health and program: (n=200)

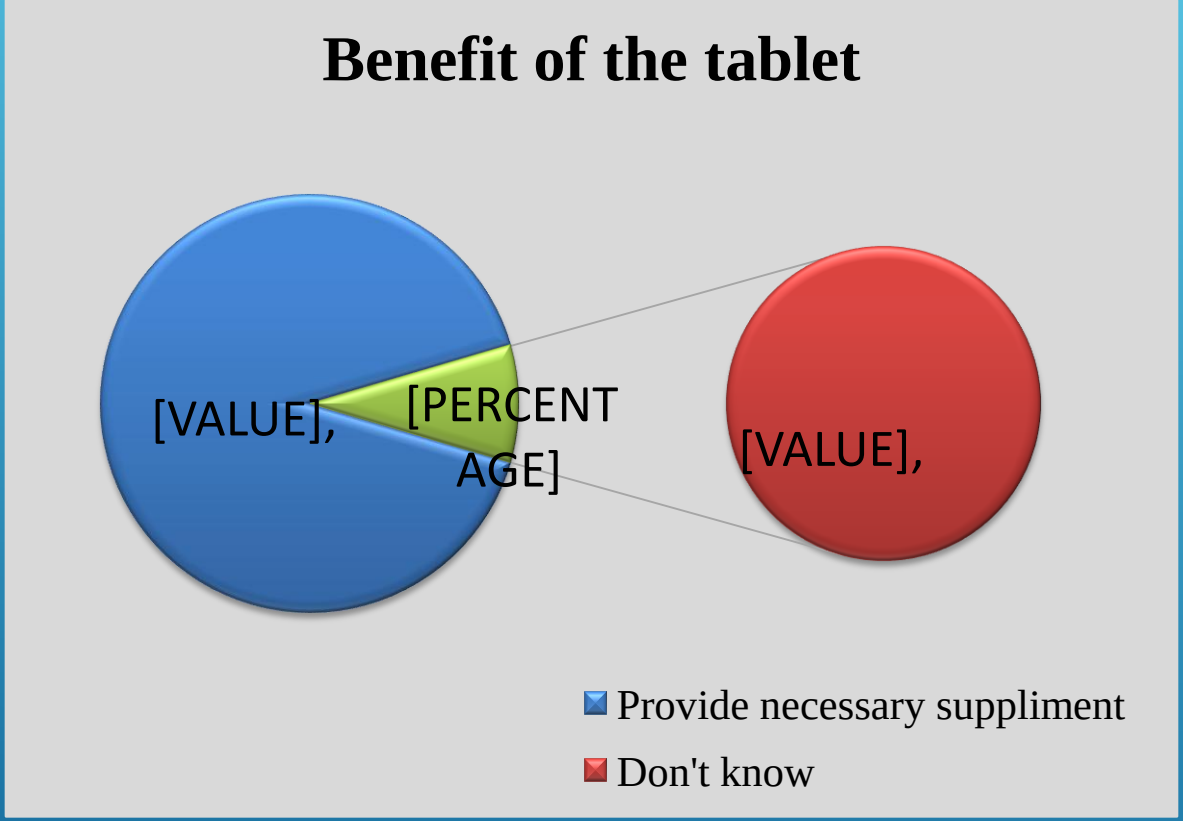
Item	Frequency (%)	
Number /% of AGs Know about health related disorder in adolescence	149 (75.5)	
Number /% of AGs Know anemia	142 (71)	
Number /% of AGs Know about program running related to anemia	139 (69.5)	
Number /% of AGs Know the name of the program	144 (72)	
Number /% of AGs know about the location of the program (where it runs)?	193 (96.5)	
Number /% of AGs received the tablet and consumed	172 (86)	
Number /% of AGs received tablet by (n=172)		
Teachers	85 (49.4)	
AWW	85 (49.4)	
FHW	2 (1.2)	
Number /% of AGs Know the Day of the program (n=172)	166 (97)	166(83) (When n=200)

Figure 1: AGs who Knew about Color of the Tablet: (n=172)



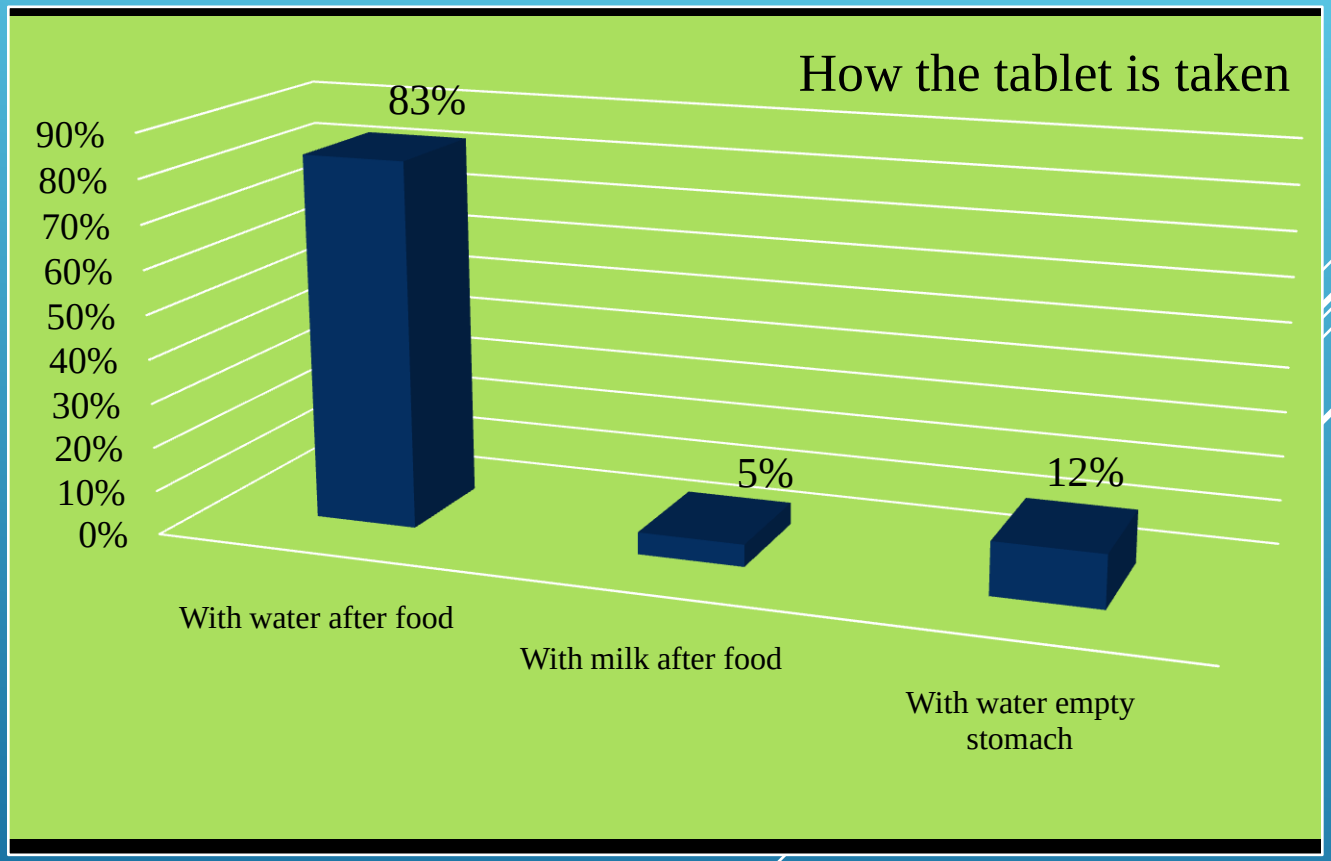
As the static's show 86% replied correctly for tablet color and 14% AGs are responded wrong. There is a bias in the result.

Figure 2: % distribution of AGs know benefit of the tablet: (n=172)



Nine percent don't know the benefit of the tablet which raises a question whether they are consuming it or not.

Figure 3: % distribution of AGs know how the tablet is taken: (n=172)



AGs (83%) are consuming the tablets in a proper way but 17% who consume it wrong need to be considered again.

Table 4: % distribution of AGs who underwent blood test, instruction given and feedback taken regarding the program: (n=172)

item	No. of girls	(%)
Blood test/ Hb done	106	62
Any instruction given to the adolescent about anemia	135	78.5
Any feedback taken regarding the program	110	64

Conclusion: It's been more than a year since Weekly Iron Folic acid Supplementation program (WIFS) have started (January 2013).

- A majority of AGs were given the supplement and were taking it. There is still a need to deliver proper instructions about the program for those 14% girls left out and need to find out the reason behind it.
- A regular system of feedback from AGs is needed to know the success of the program
- Hemoglobin test for all need to be ensured (including those 38% left-outs).
- Most of the responses are above 70% and that shows encouraging scenario in the Jamnagar district.
- There is a contradiction in color of the tablet as we can see 24 (14%) AGs responded wrong tablet color and that makes the response biased so it adds up to a count of 52 (28 - not received tablet). Hence it makes 26% left outs and need to concentrate on.

THANK YOU