IIHMR UNIVERSITY®

SUMMER TRAINING REPORT

SUBMITTED BY

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1011

MBA HOSPITAL & HEALTH MANAGEMENT 2019-2021.

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Course title

Training and learning programs for volunteer community health workers

PART I

ONLINE COURSE OFFERED BY JOHN HOPKINS UNIVERSITY, COURSERA

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COURSE DESCRIPTION

THIS VILLAGE HEALTH WORKER-TRAINING COURSE REVIEWS THE PROCESS OF TRAINING AND CONTINUING EDUCATION OF COMMUNITY HEALTH WORKERS AS AN IMPORTANT COMPONENT OF INVOLVING COMMUNITIES IN THEIR OWN HEALTH SERVICE DELIVERY

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Objectives

Key Principles

Apply key principles of learning to the training program.

Identification

Identify and recruit trainees for any program.

Also the existing needs that the program must address

Formulation

Formulate SMART objective for the program.

Designing content for the training program.

Generate a first draft of the course project.

Select & monitor

Select appropriate methods for the training program.

Develop educational materials match with which methods.

Plan a monitoring program

Evaluate

. Evaluate the training program.

Assess trainee performance on an ongoing basis.

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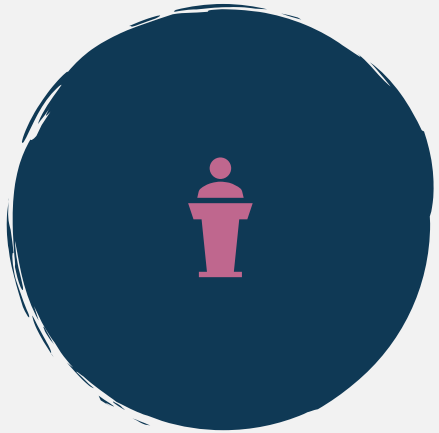
Learning methodology

Power point presentation



Lectures

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Video

Key Learning's

1. **Approaches to training and learning**

Adult learning assumptions, adult learning elements

2. **Identification and recruitment of trainees**

Approach health services, community, train volunteers selected by community.

3. **Diagnosing training needs**

Make SMART objectives, community directed interventions.

4. **Selecting appropriate training methods**

Educating villagers, estimating needs, filer demonstration.

5. **Monitoring implementation**

Monitor the process evaluation

6. **Evaluating training programs**

Pre & post test

Observation, feedback, analysis

7. **Follow up, supervision and continuing education**

Follow up evaluation, effective supervision, group communication

PART-II
RESEARCH
PAPER

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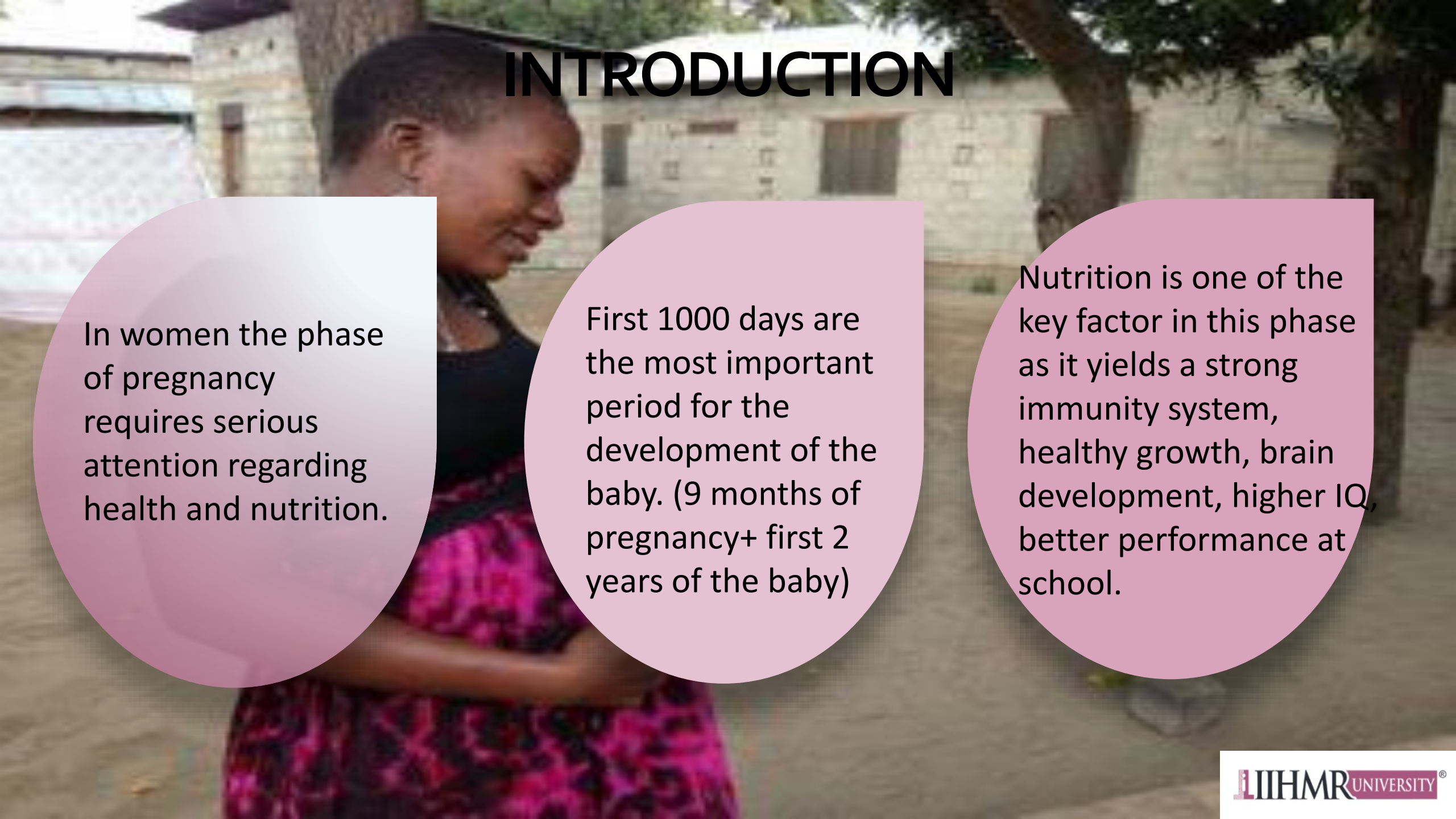
TITLE

A DESCRIPTIVE QUALITATIVE REVIEW STUDY ON SOCIAL DETERMINANTS OF MATERNAL MALNUTRITION

INTRODUCTION



In women the phase of pregnancy requires serious attention regarding health and nutrition.

First 1000 days are the most important period for the development of the baby. (9 months of pregnancy+ first 2 years of the baby)

Nutrition is one of the key factor in this phase as it yields a strong immunity system, healthy growth, brain development, higher IQ, better performance at school.

Implications of poor nutrition in woman leads to complicated pregnancy and undernourished child (mostly suffer from stunted growth & lower IQ)

Globally, maternal and child nutrition is the underlying cause of 3.5 million deaths.

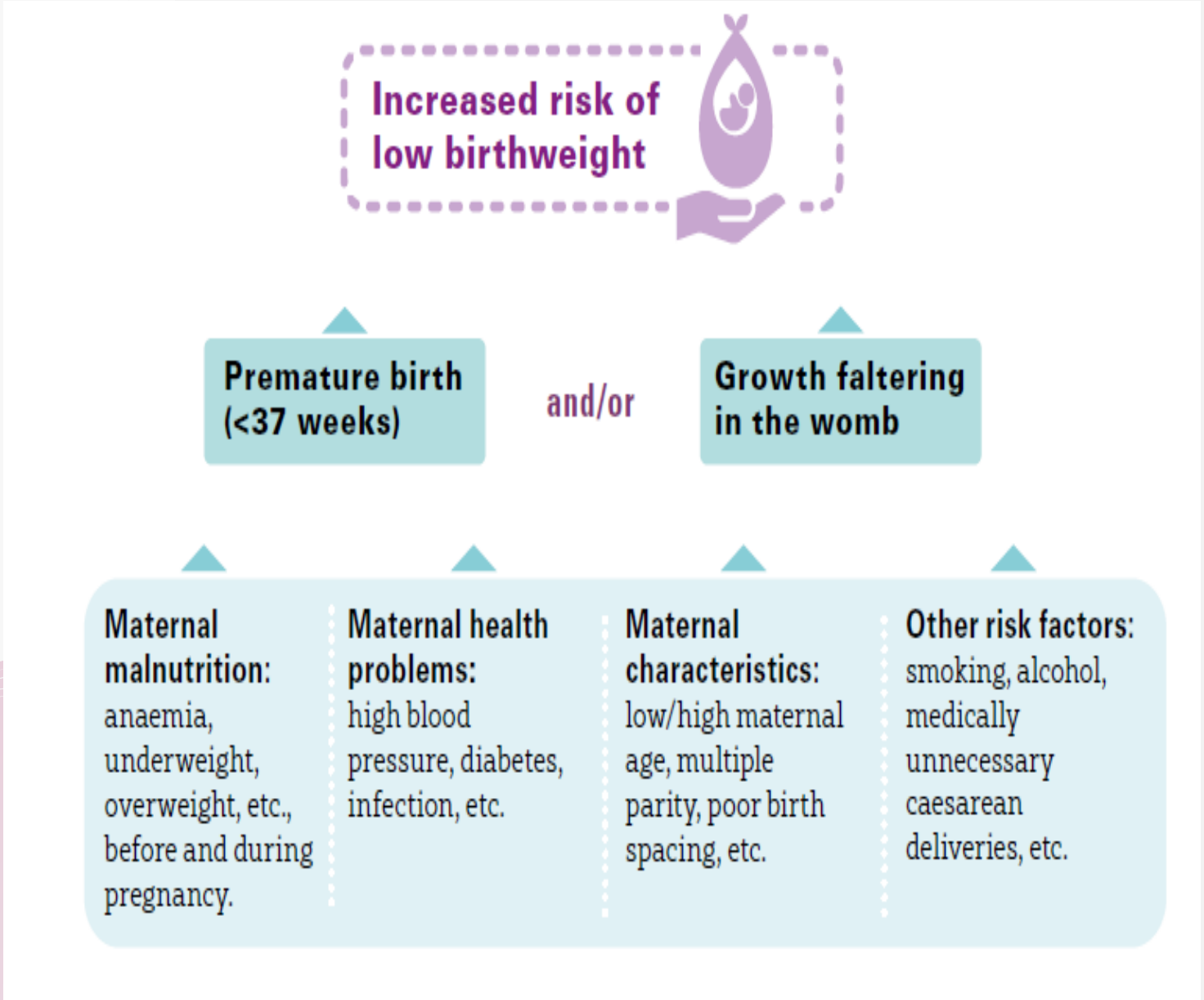
WHO reports suggests that maternal under nutrition is one of the reason leading to higher risk of pregnancy complications. 10 percent of the total global burden of disease is constituted together by maternal and child under nutrition in regions like Southeastern Asia, Sub-Saharan Africa and South-Central

UNICEF-WHO report suggests that Low Birth Weight infants are mainly born from undernourished pregnant women.

Reports from many studies have linked the LBW with under nutrition, greater risk of mortality and morbidity, poor development and growth in children.

Framework for risk factors to low-birth weight babies.

Source: Adapted from UNICEF-WHO Low birth weight estimates levels and trends 2000-2015



Under nutrition in pregnant women can occur due to compounded interaction of multiple factors all together.

The main factors being Food, affordability and accessibility to nutritious food; Care, lack of proper care of both mothers and babies and poor infant feeding practices also having many children of less than 2 years; Health, accessibility to healthcare services and unhealthy household environment.

Major social determinants of maternal under nutrition are education or literacy, socio-economic status, nutrition education or counseling during pregnancy, support natal and marital family and peers, household food security.

NEED FOR THE STUDY

Nutrition is fiercely ignored aspect of maternal and newborn despite the fact that under nutrition is the potential risk factor for disease.

Studies have linked under nutrition with low level of education, maternal illiteracy and lack of support from home.

OBJECTIVES

- How malnutrition is defined in terms of participants, interventions, comparison measures.

- Suggesting some ways to improve maternal malnutrition.

METHODOLOGY

Study Design & Setting

A descriptive qualitative review study was conducted wherein a systematic review of observational studies published at MEDLINE (via Ovid), Pub Med databases and Google scholar was done along with references from various articles and books. The secondary data was assessed and evaluated qualitatively using set criteria.

Data Collection Methods

Various literatures published on the topic burden and determinants of malnutrition among pregnant women published till 2019 were searched in the PUBMED, EBSCO host, Google Scholar using Boolean algebra (AND/OR)

Criteria

Inclusion

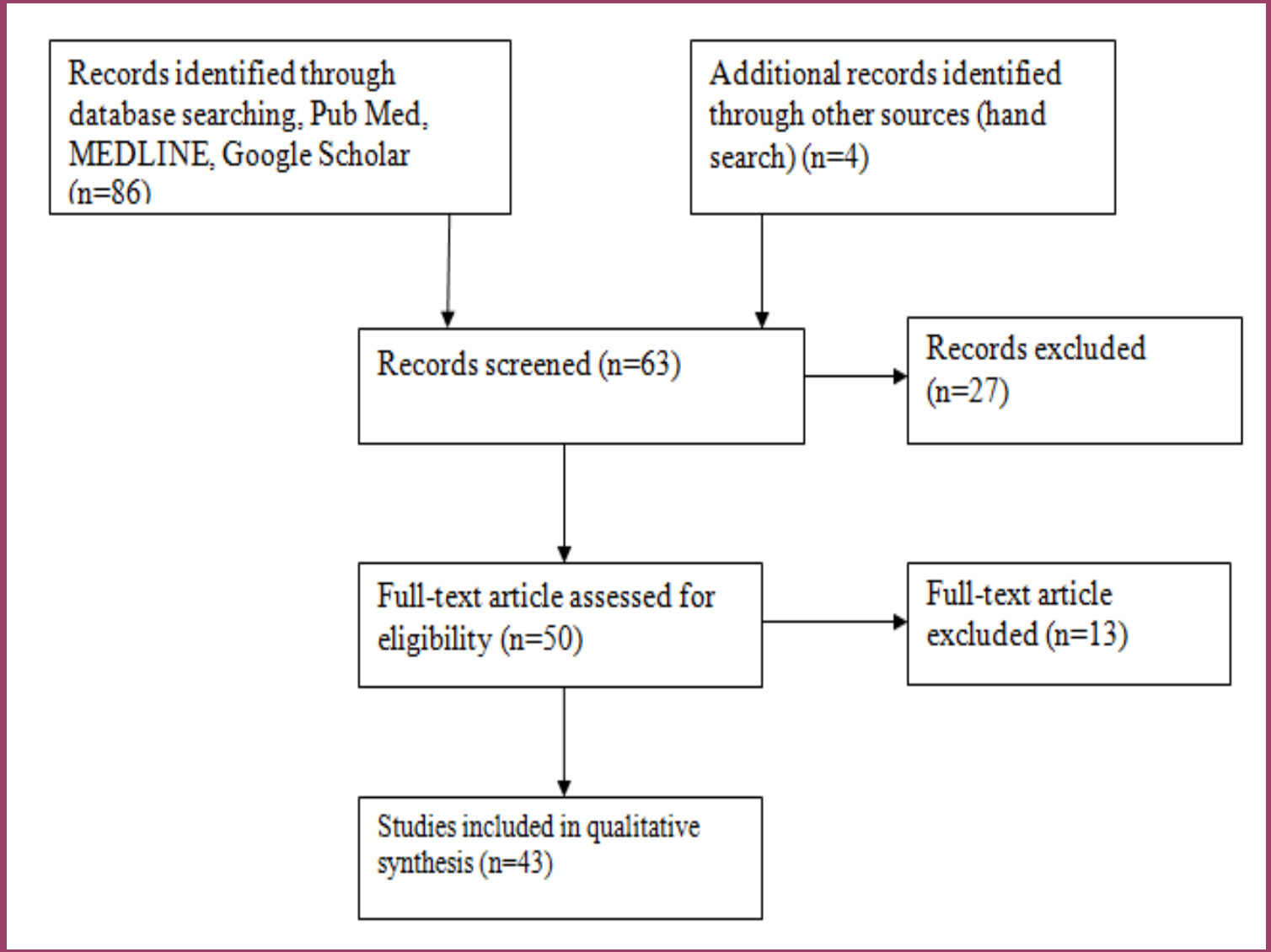
Exclusion

INCLUSION CRITERIA	EXCLUSION CRITERIA
Population/Participants Systematic reviews on malnourished women and child were included in the searches for systematic review.	***Participants/populations*** Studies with participants considered not relevant for the review as studies on male under nutrition, under nutrition of women after reproductive years of age.
Interventions Few interventions in women education, socio-economic status, interventions in household food security, nutrition education and counseling during pregnancy, prenatal care were considered	***Interventions*** Other exclusions were studies on interventions considered not relevant for review such as male education, food and nutrition habits of men, socio-economic status of men, other counseling except nutrition counseling during pregnancy.
Comparison Reviews of studies comparing nutritional status of developing nations to developed nations, review of studies comparing girl's participation at level of education with that of boy's participation at level of education, review of a study comparing on spending in household by women to that of men were included.	***Design*** Reviews considered not systematic were excluded. If the same author had several publications of same reviews, the updated review was selected. Dissertations were excluded.

Languages **No articles were excluded based on languages.**	***Languages*** **No articles were excluded based on languages.**
Year of publication Papers until 2019 were included	***Year of publication*** Papers after 2019 were not considered.

RESULTS & DISCUSSION

After the initial search yielded 90 results, 13 underwent abstract and full text review underwent 43 papers being included in study. A total of 43 articles were included in the review, see figure 2 the articles were published in 38 different journals. The most common field was women status, malnutrition



SOCIAL DETERMINANTS THAT LEADS TO MATERNAL MALNUTRITION

FEMALE EDUCATION

SOCIO-ECONOMIC STATUS

NUTRITION EDUCATION AND COUNSELING DURING PREGNANCY

HOUSEHOLD FOOD SECURITY

PRENATAL CARE

FEMALE EDUCATION

Women's participation at the primary and secondary level of education is not as expected.
It has been seen that retaining girls in school are more challenging than boys because provision of education to boys are preferred more than girls.

All of these results into lack of basic nutrition education, which ultimately hampers the health of girls, and women at the end because they do not know the right kind of food for proper nutrition and the consequence of under nutrition, moreover women are dependent upon their family.
Girls who complete their primary education tend to find better jobs, marry later and have fewer children

Education apparently makes women aware and knowledgeable of nutritional requirements during pregnancy, its benefits for young girls and as well as infants .Education has that power to change the age-old dreadful food habits of people by educating them. It's the right of a woman to take care of her own health and nutrition, become educated and make this world a better place. Education plays an important role and is a key determinants for catering good health and well being of both the mother and the infants

SOCIO ECONOMIC STATUS

Researches have shown that the low socio-economic status in women primarily effects their quality of life, physical health and mental health.

In developing countries there is huge inequality of income, most of the household earn very little to survive. It even affects the standard of living . Studies have suggested that socio economic status affected child malnutrition. As a result, women become a victim of impoverishment. They are less concerned about their own health just focusing on subsistence anyhow.
If the socio-economic condition of a woman is not good that is they are poor they will definitely be poorly nourished thereby implicating serious nutritional status to herself as well as for the yet-to born baby.
The underprivileged status of women has less impact at the time of allocation of resources somehow influencing the ability of decision making power of the household. The UN women report states that in order to achieve SDG1 of ending poverty, SDG2 on zero hunger and SDG3 on ensuring health women empowerment is the key. It increases productivity and equality in income

NUTRITION EDUCATION AND COUNSELING DURING PREGNANCY

Poor women who are undernourished do not get any option to get a proper consultation about nutrition or any healthcare services.

A study suggested that the nutrition education and counseling elevates gestational weight by 450 grams, reduction in risk of anemia in late pregnancy by 30%. The effect of nutrition education and counseling increases when supported by nutritional safety nets, supplements of food or micronutrients.

It has been seen that for pregnant women in Primary Healthcare education for nutrition was lacking.

HOUSEHOLD FOOD SECURITY

Women are considered to be the key to the lock of the household food security. They are majorly responsible for to make decisions that effects the child survival positively. However, this decision making power is totally dependent upon their status and position that they hold in family. They generally engage in resource use such as spending in household income, provision of quality life to their children especially education and nutrition, allocation of food in household. Women tend to spend more on food items than men keeping in mind the nutrition factors. Care provided by women usually contains activities such as care during pregnancy, breastfeeding of babies and feeding of children, supporting at the time of their baby's development, preparation of food and it's storage practices, care for children during illness

PRENATAL CARE

Prenatal care have show to prevent low birth weight among infant, there are three targets which are mostly aimed to prevent low birth weights, (1) nutritional highlighting weight gain and low pregnancy weight, (2) psychological, (3) medical.

One of the important causes of childhood mortality and morbidity is malnutrition. Nigeria is one of the worst countries in this aspect. Few studies have shown a link between childbirth and childhood malnutrition and maternal care at the time of pregnancy.

Hen studies tell us for care of women in pregnancy and childbirth can pose risk to mother as well as the child. A study was conducted stating that there was an increase in incidence of miscarriage, premature and still births in women having poor diet

SOME WAYS TO IMPROVE MATERNAL MALNUTRITION FOCUSING ON THE SOCIAL DETERMINANTS.

FEMALE EDUCATION

Creating accountability
Creating dialogue with communities
Focus on basic education

SOCIO-ECONOMIC STATUS

Most common initiatives for improvement in the status of women are employment opportunities, acquisition of education, equal opportunities and rights, participation in the activities like social, religious, economic, cultural and political.

NUTRITION COUNSELLING AND EDUCATION

Provide them detailed educational materials that helps them understandings the importance of nutrition and its key functioning in pregnancy

Pregnant women to meet their individual needs they prefer nutrition counseling individually rather than in a group setting. So ideal 1-1 sessions can be conducted with the nutrition expert or healthcare professionals

HOUSEHOLD FOOD SECURITY

Girl child must be educated in order to have a control over household and to be able to generate resources as well as direct them such as food, care, preventive and curative healthcare to young children

PRENATAL CARE

Increasing prenatal care access
Referring to guidelines provided by government deliver nutritional care
Put more emphasis on behavioral risk factors (such as screening & intervention

CONCLUSION

A weak woman gives birth to a weak child which is harmful for a precious life. Affecting a woman's dignity by discrimination and by not giving them proper care and nutrition weakens the society from within. In a society where the woman is given equal position and respect, that society is bound to flourish. Also malnutrition affects the economy of region as the women (who are around half the population of a particular place) cannot work there to their optimum capacity, hence resulting into the loss of economy.

A malnourished woman fails to bring maximum wellbeing to family as well because when she is weak, she fails to take care of other people in the home. Hence, proper nourishment should be provided to a women at all stage of her life to prevent under nutrition of both mother and child as a well nourished woman can bring prosperity in lives in an inclusive way.

THANK YOU

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