

## **Abstracts of AMS Research Projects 2006-7**

### **Uncovering the 'bad works': a healthy needs assessment of young men in rural north India**

***Mohammad Syafirul Hafiz ABD RAHIM***

Much is still unknown about the health needs of young men in rural India. The majority of public health effort is concentrated on reproductive health, and neglects other relevant health issues affecting young men. Hence, a health needs assessment of young men aged 18-24 years was carried out in a rural area of Uttarakhand, north India. The study utilized group discussions and in-depth interviews with young men to gain a first-hand view of their health needs. In addition, key informants were interviewed for a more comprehensive understanding of the issues. It was found that many young men in the area are involved in behaviours that put health at risk such as unprotected sexual activity, use of tobacco and alcohol, and non-injecting drug abuse. The young men often identified these behaviours as 'bad works'. Factors such as unemployment and lack of information were frequently mentioned as contributing to these behaviours. Furthermore, the health information available for young men through existing sources was often vague and inaccurate. The participants in this study were quite adamant that they need more information about their health. Future health interventions for young men in the community should take into account the findings of the study to ensure unmet needs are specifically targeted.

### **What challenges, if any, do public health midwives in Beruwala, Sri Lanka face? What are their roles and expectations, and what is the impact of their current training and supervision?**

***Nelu JAYAWARDENA***

Public Health Midwives (PHMM) are at the core of the public health system in Sri Lanka. Being the most peripheral and grass root level health care workers, the PHMM are strong contributors to Sri Lanka's notable health outcomes, particularly in maternal and child health.

Despite the fact that these achievements are expanding, there is still room for improvement. An in depth qualitative research study is yet to be carried out directly involving the PHMM. Thus, with the relatively new method of Photovoice, accompanied by in depth interviews and observation, this study was carried out to focus on the roles, training, supervision and most importantly the challenges faced by the PHMM. By tackling these significant issues from perspectives of both the service providers and service managers the study pinpoints discrepancies between these cohorts and identifies areas requiring improvement.

This project aims to take onboard the overdue task of tackling health care provision from its outer most level. It is hoped that upon completion of the study the opportunity will arise to initiate a priority in the health sector to tackle identified problems and to contribute realistic interventions, so that public health provision and outcomes in Sri Lanka can excel further.

### **What factors promote or hinder a successful tuberculosis (TB) control programme in a rural North India community?**

***Khai Lin KONG***

Despite the availability of treatment for most TB cases, TB remains as one of the major infectious diseases killing 5000 people a day worldwide. The detection and subsequent

adherence to a minimum six months of chemotherapy is the cornerstone of TB control. For a TB control programme to be successful, provision of detection and treatment services to all TB patients are crucial. This research investigated the factors that influence the accessibility of patients to these services and hence the success of a TB control programme. The research was based mainly in a community health project (SHIFA) of the Herbertpur Christian Hospital (HCH) in rural North India. In collaboration with the Revised national TB Control Program (RNTCP) of India, the project seeks to increase the awareness of the community regarding TB and to deliver community-based-TB treatment for the patients within the community. In this research, four group activities/discussions were conducted with people who have previously received TB treatment, alongside six interviews with Healthcare Workers (HCW) and three interviews with SHIFA project personnel. The research found that despite the availability of free medication and sputum smear test, most participants found that a financial barrier still hinders care-seeking. However, the collaboration between SHIFA and RNTCP has promoted the overall accessibility of patients to TB treatment, through increasing the community's awareness of TB and availability of free TB medications.

### **Infant feeding in the Kalutara District of Sri Lanka: what is common knowledge and practice among new mothers, and what are the factors that influence them?**

***Rashini KULATUNGE***

Every year 11 million children die before reaching their fifth birthday and a large proportion of these deaths occur in the developing world. Malnutrition is a major cause of many child deaths and can be caused by many things like poverty and unavailability of food, which are often difficult to improve quickly. Incorrect infant feeding practices are easily preventable causes of malnutrition and yet are quite prevalent in the world today. This study looks at infant feeding practices in the Kalutara district of Sri Lanka in the hopes of discovering what, if any, changes need to be made.

Eleven women with an only child under 12 months were interviewed about their infant feeding practices, associated levels of knowledge and things that influence their decisions. Four key informants were also interviewed for further information on infant feeding issues. Findings suggest that while adherence to the WHO breastfeeding recommendations is high, many women have difficulties with complementary feeding. The level of knowledge regarding the appropriate complementary foods is quite poor and many women struggle to feed their children an adequate amount of food resulting in decreased growth rates. The Public health Midwife also plays a central role in the feeding behaviour of mothers.

### **An exploratory study of World Vision Myanmar's health education program for street and working children**

***Jing Jing LIN***

It is estimated that there are 30,000 children working and/or living on the street in Myanmar. There is a complex of social and economic factors that prompt children to leave home; it is common for children to work to help ensure the survival of the family and other may leave due to family breakdown, abuse and neglect. The HIV/AIDS epidemic is also having an impacting with an estimated 7.7% of the total 1.9 million orphans losing one or both parents to the disease.

Against this backdrop, World Vision is the largest non-government organization in Myanmar, and manages the only two programs specifically focusing on street and working children in the country.

This study takes an evaluative approach to explore the health education program provided as part of World Vision's street and working children program. Health education and disease prevention are particularly important for these children as they are denied formal identity in Myanmar and as such cannot attend formal schooling or utilize the public health care system. In addition, they are placed at higher risk of diseases due to poor diet, unsanitary living conditions and hazardous work conditions. Data collection took place in Yangon, Myanmar over a six week period. Semi-structured interviews were held with World Vision staff and Participatory Learning Activities sessions conducted with children from the program. The study explores experiences and opinions about street children's health and the health education program.

**An explorative study to identify determinants of maternal healthcare utilisation and decision making in the rural setting of the Palani Hills, India**  
*Tim PAPALUCA*

The Palani Hills is a remote rural region of Tamil Nadu home to some 17,000 people. This population include 7,000 tribal villagers. The health of the tribal sects continues to be dire; generally they are amongst the poorest, with cultural and social factors lending to poor healthcare knowledge and utilization. 14 years ago, the Christian Fellowship Hospital recognized this short-coming and established the KC Patti Primary health Care Centre, in attempt to improve tribal health.

Substantial progress has been made in maternal health; the latest statistics available indicates ANC coverage of 95%. However, deliveries continue to occur largely at home without an experienced birthing attendant. Last year, only 40% of births were attended by a trained assistant. Maternal deaths have been drastically reduced due to the program over the past 10 years, but some deaths continue to occur. As such, the KC Patti Centre believed it important to understand why people are willing to utilize ANC, but why there is continued resistance to delivery care. As such, this project, including semi-structured interviews and group discussions looks into the determinants leading to decreased delivery care utilization. Decision-making is also explored to understand the process and influential parties in that decision.

**A training needs assessment of Community Health Guides in rural India, Jharkhand**  
*Sing Chee TAN*

In rural India, where 620 million people lack access to basic health care, there is a great need for effective primary health care systems. To address this, The Prem Jyoti Community Hospital, in Jharkhand, India, has set up a system of grass root level health workers, called community health guides. This project examines the training needs of these community health guides, through individual and group interviews conducted with key informants and health guides. It examines needs in medical knowledge and practice, general skills, training quality and work perceptions, and discovered an interesting range of needs, especially in the area of conflict resolution. This presentation will explore such findings, among others, with potentially replicable recommendations in similar rural health care settings.

## **The challenge of matching health provision to community needs: a study of maternal services in KC Patti, India**

***John TAVERNER***

India currently has a considerable burden of maternal mortality with an estimated 132,000 women dying during pregnancy, labour and post-partum in 2005. While policy-makers advocate the need for emergency obstetric care, transport services and skilled attendants at birth to reduce this figure, there are many factors that may prevent access to these services such as high costs, isolation and lack of knowledge.

This project worked out of KC Patti, a community health centre servicing the health needs of a remote, tribal south Indian population. In response to some women not accessing antenatal and delivery services, two years ago a new model of maternal care was introduced. The new strategy moved away from specialist driven delivery care to a model that involves a range of healthcare staff, discussing costs and educating pregnant women so that they can become partners in care.

Ten mothers who had recently given birth and five healthcare staff were interviewed and three group activities were conducted with community members in order to assess attitudes towards this new strategy. Costs were reported as a major barrier to care, especially for isolated women. Those interviewed generally perceived little dangers associated with pregnancy and there was a mixed attitude towards facility deliveries.

The study found that the new model of care was unlikely to achieve universal access to skilled birth attendants unless the issue of high costs was addressed. The need to provide information to mothers is also discussed.

## **Living with Hope for the Future: using Photovoice to explore the needs and experiences of participants of the HIV Care and Support Program of World Vision Myanmar (WVM)**

***Lee Yung WONG***

There is a gap in knowledge regarding the current HIV situation in Myanmar. People with HIV in Myanmar generally face many barriers in receiving care and support such as stigma, poverty and lack of access to anti-retroviral treatment. The WVM HIV program uses a multi-sectoral approach to care and support people with HIV, incorporating financial, psychosocial, educational and material assistance, particularly through their involvement in the self-help groups.

Six key informants were interviewed and Photovoice was conducted among nine people with HIV who participate in the self-help groups. Perspectives of both care-givers and participants of the HIV program were compared. As part of Photovoice, participants discussed their main needs and were given cameras to photograph the themes that they chose. Critical discussion around the photographs and accompanying narratives reflected a positive focus from the people with HIV in contrast to the problem-centred approach of the key informants.

The identification of their felt needs and socio-economic barriers to meeting these needs were important in order to understand how participants perceived the HIV program in meeting their needs. Participants placed a significant emphasis on the role of family and the self-help groups for psychosocial support, and exhibited resilience and empowerment in their photographs and narratives.

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