

180: USE OF FIRST LINE PERSONNEL (FLP) IN THE PROMOTION OF MATERNAL AND CHILD HEALTH CARE IN A RURAL AREA OF EASTERN UTTAR PRADESH, INDIA

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Objectives:

To assess (1) the impact of training on FLPs, (2) their ability to transmit the health messages among women related to Maternal & Child Health Care.

Place of study: The study was carried out in five villages of Chiraigaon block, District Varanasi, State of Uttar Pradesh, India.

Method:

Fifteen female FLPs (mostly social functionaries) were selected from each village totalling 75, with 45 in 3 experimental and 30 in 2 control villages covering a total population of 5000 (each village has approximately a population of 1000).

From a cluster of 10-15 houses around each FLP, 2-3 mothers were selected randomly totaling to 40 mothers per village, to compare the effectiveness of FLPs to transmit the relevant messages amongst them.

FLPs in the experimental villages were given training for 4-5 hours in one day in batches of 15 (village-wise). Three retraining programmes were also organized for each batch at an interval of 2 months, spread over 8 months. The contents of the training included midwifery, nutrition education, care in diarrhoea, immunization and family planning. Tools used in the training were posters, cassette recorders, chalk board and a prepared booklet in the local language was also distributed to them. The method adopted was lecture cum group discussion helped by visuals and audios.

Pre and post-training assessment of knowledge of FLPs and mothers were done. Post-training assessment was done after the completion of 4 training sessions and during the same period, control group FLPs were also evaluated. Further, FLPs in the experimental group were also evaluated after one year for their residual knowledge.

Results:

After one year, a change in the knowledge between experimental and control FLPs, after training about MCH services at PHC, were compared. A positive, statistically significant change in knowledge about the free availability of delivery services, blood and urine tests, ORS packets, delivery packets, delivery services, iron and folic acid tablets in the experimental group was observed to be ranging between 26.1 and 44.4 percent.

Significant changes in the knowledge about the identification of- high risk mothers in need of referrals to a hospital eg. primipare (4.7%), age less than 18 yrs (28.3%), age more than 35 yrs (30.5%), severe anaemia (33.4%), prolonged labour (37.6%), and screening mothers to-be with bad obst history (35.5%). The proportion of FLP's aware about the adequate spacing between two children (more than 3 yrs) increased from 13.3 to 59.9% in the experimental group. Knowledge about CuT and oral pills as spacing devices also increased by 52.5 and 40.0% respectively.

After interaction with FLPs, proportion of mothers in the experimental villages with correct knowledge of timely initiation of breast feeding and complementary feeding increased significantly. The knowledge about the six vaccine preventable diseases (22.3 to 35%) and family planning with special emphasis on condoms, Cu-T and oral pills also showed a considerable increase.

Assessment of knowledge of FLPs declined within a range of 2.4 to 17.7% for various components of MCH care after one year of training-which were not statistically significant.

Conclusion:

In the present study village level social functionaries called, FLP, were trained about maternal and child health services. Post training evaluation of their knowledge was found to have changed significantly as compared to their control group counterparts. Their efficacy in transmitting the knowledge to mothers was also assessed and the subsequent changes were found statistically significant.