

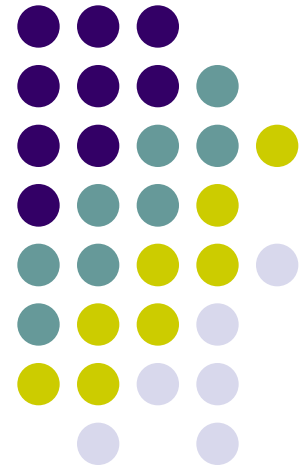
A need of mothers' awareness & knowledge about oral rehydration salt (ORS) in the aim to reduce childhood diarrhoeal mortality in Kamala village, India



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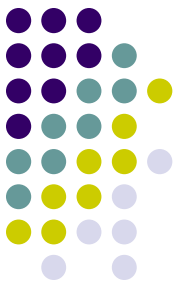
Early childhood diarrhoeal mortality



Dehydration

- Most severe & deadly consequence of acute childhood diarrhoea (WHO, 2008)
- Effective (clinical & cost), immediate & best home management: ORS (Rehydration Project, 2007)

National Diarrhoeal Diseases Control Programme in India



- Initiation in 1978 (Gareth *et al.*, 2006)
- Major health policy reform: National Rural Health Mission (NRHM), Reproductive & Child Health Phase-2 (RCH-2) Programme & expansion of the Integrated Child Development Services (ICDS) (Gareth *et al.*, 2006)
- Enhancement of maternal awareness & knowledge regarding ORS: Through Information, Education & Communication (IEC) activities

Significance of the study



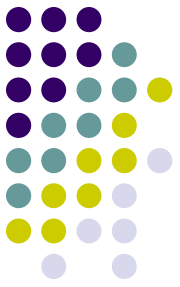
- Acute childhood diarrhoea: ↑ Incidence & mortality cases in Kamala (Government of West Bengal, 2006)
- Poor access to minimum healthcare services in Kamala (Government of West Bengal, 2006)
- ORS usage rate in under-five children in India: 26% (IIPS, 2007)

Significance of the study



- Lack of community-based studies to assess the awareness of ORS among mothers (Jain *et al.*, 2006)
- No formal study on assessing the awareness of ORS among mothers of under-five children in Kamala
- Improvement of existing health promotion Programmes + Initiation of new programmes

Awareness of ORS: A cross-sectional study



Study design

Cross-sectional study: Complete census of the study population

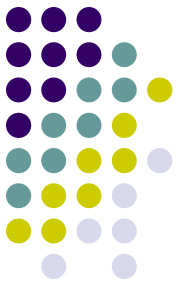
Study participants

Mothers of under-five children in Kamala village,
West Bengal, India

24 mothers of under-five children: Interviewed

Data collection tool

Pre-designed, translated (into Bengali) & pre-tested
quantitative (structured) questionnaire



Kamala village

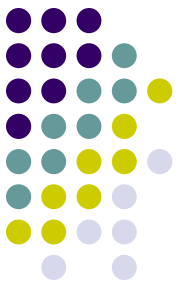


Interview session



Results

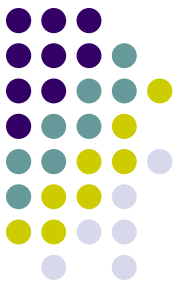
24 mothers of under-five children



18 mothers: Were aware of ORS (standard pre-packed formula sachets to make 1 liter of solution)

- 12 mothers: Boiled water cooled in a clean pot should be used for preparing an ORS solution
- 2 mothers: 1 liter of water should be added to a standard packet of ORS

Correct dilution of ORS: Essential for rehydration & prevention of hyponatremia, hypernatremia or osmotic diarrhoea (Editorial, 1978; Santosham *et al.*, 1991; Meyers, 1995; Ireland, 1997; & Nazarian, 1997)



Results (2)

24 mothers of under-five children

- 4 mothers: ORS solution should be used within 24 hours of its preparation
- 4 mothers: ORS solution should be administered till a child drinks it after an episode of acute diarrhoea & should not be administered if the child refuses it

Child's thirst prevents over-hydration except in patients with shock (Avery, 1999)

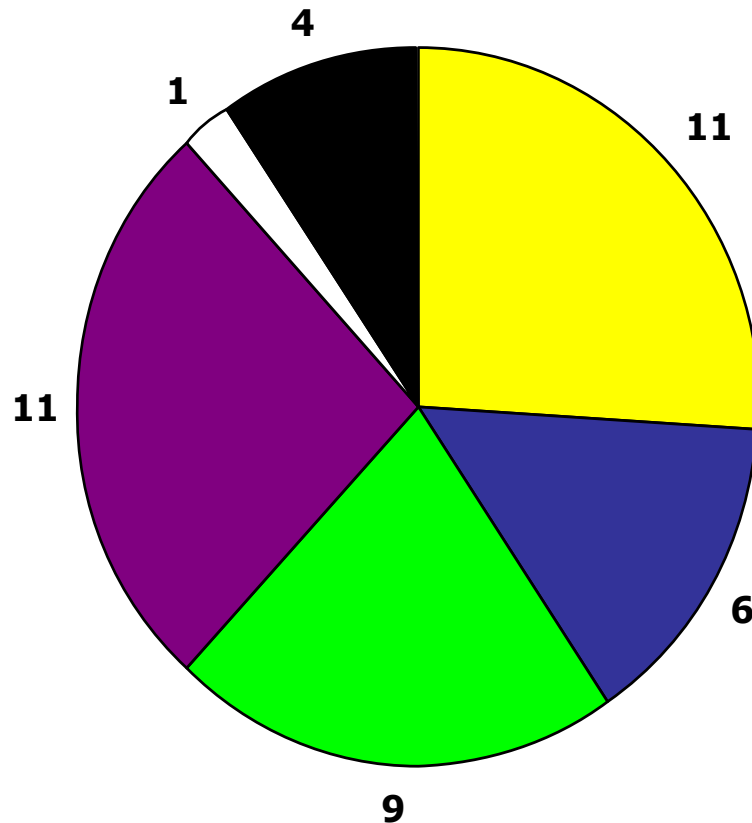
- 11 mothers: ORS solution should be administered until diarrhoea of the child stops: Indicates poor knowledge about the function of ORS solution

Function of ORS solution: To rehydrate (& not to stop diarrhoea, which stops by itself) (Rehydration Project, 2007)

Results (3)

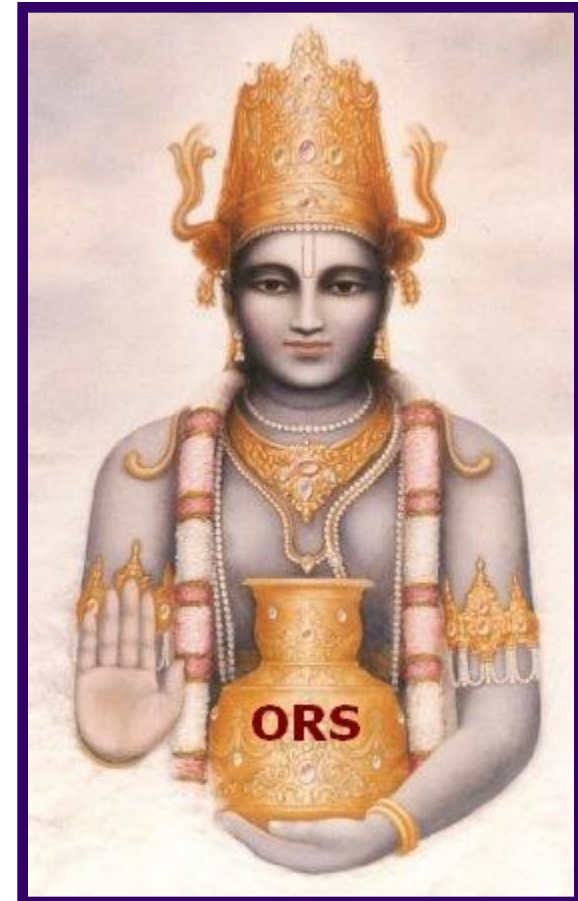
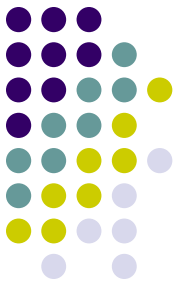


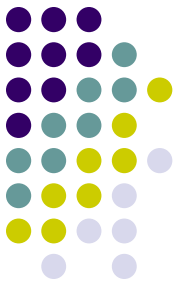
Sources of information about ORS



Conclusion

- Awareness of ORS: Among many mothers of under-five children
- Exact knowledge of ORS solution preparation & administration: Unsatisfactory
- Effectiveness of relevant national health promotion programmes: ?
- Reevaluation, implementation & strengthening of the content & method of imparting these programmes





Thank You!