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ROLE OF LHWS IN PROVISION OF NUTRITIONAL SERVICES IN CHILDREN UNDER 5 IN PERI URBAN AREAS OF KARACHI

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Globally, one of the major risk factors for child morbidity and mortality is considered to be malnutrition. Malnutrition is attributable for nearly half of all deaths in children under 5 years of age and every year there is a loss of about 3 million lives unnecessary. However, studies have shown that Lady Health Worker (LHW) plays an important role and can deliver nutrition services to underserved populations, despite the fact that working in a weak health system is a challenge for LHW to provide services. The exploratory qualitative research design was used for the research. Our target populations were mothers, LHWs and the nutritional expert, behavior change communication expert (BCC), LHW program experts, field officer, and lady health supervisor. The data collection methods that were used for the study were focus group discussion (FGDs) and key informant interviews (KIIs). The analysis of this study reveals that LHWs are not skill-trained to address the nutritional component according to their mandates. The main associated factors from the health care provider perspective were found to be lack of intersectoral approach that is the integration of the LHW program with the other vertical program, low morale of LHWs, knowledge gap among the LHWs, lack of awareness among the community, beliefs of the community and excessive workload. From mothers perspective; inappropriate communication, unavailability of logistics are the factors that affect the performance of LHWs. It was concluded that training of the LHWs on the nutritional services is an issue. Thus, LHWs are unable to provide their services to the community. In this regards implementation and coordination among the stakeholders, continuous education and awareness for the community and LHWs, overcoming the logistic issue are the key solutions for improving the role of LHWs and quality of nutrition services.



Note:

ENVIRONMENTAL AND FAMILIAL FACTORS IN DRUG USE AMONG COMMERCIAL DRIVERS IN SUBURBAN PUBLIC TRANSPORT

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Environmental and family factors play an important role in the use of drugs among drivers of public transport. A study was conducted in 2013 on the lack of accurate statistics on the environmental and family factors behind the use of drugs by drivers. Overall, 1176 drivers of buses, mini-buses, vans, all kinds of trucks, and cars were randomly selected proportionately according to the type of vehicles. The capture-recapture sampling method was used to determine the prevalence rate of drug use among commercial drivers. Trained experts collected data regarding the environmental and family factors behind the use of addictive drugs. Urine samples of the participating drivers were taken at police checkpoints. Urinalysis was performed by the Rapid Test method (ACON, San Diego, USA). The mean age of the subjects was 39.9 ± 9.7 years. The results of the experiment were positive in 14.1% of the drivers. A significant difference observed between addicted and non-addicted drivers related to cold and heat ($P < 0.001$) and lack of facilities ($P = 0.006$) as the most influencing factors. The most important environmental factor was family poverty ($P < 0.001$), followed by marital status and its problems ($P = 0.002$), a large number of children ($P = 0.006$), and family disputes ($P = 0.012$). A family history of addiction was 2.5 times more among addicted drivers. Prevalence of addiction was 14.1%. Among the environmental factors, cold and heat, lack of facilities, family factors, and a family history of addiction greatly influenced addiction.