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Use of Problem Solving Approach in the Community Health Nursing Practice - Community Coordination for Healthy Action

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Abstract

Background: Nursing students are trained to acquire the knowledge, skills, and attitude required for solving problems of community/family/Individual. In fact, problem-solving skills are the core of effective nursing activities. The aim of present study is to use problem-solving approach using community coordination approach.

Materials and Methods: Descriptive survey approach was used to identify the problem of Anemia among all females of selected J.J cluster community of Delhi. In second phase assessment of knowledge and practice related to prevention and control of anemia with help of structured interview schedule was done for reproductive age group females (15-45years) It was identified that majority (82%) females are married and having 2-3 kids and females(60%) were illiterate. On assessment it was identified that majority of the females were not aware regarding anaemia and its causes specially worm infestation although they have knowledge related to prevention and control of anemia but having lack of self care (67%). They are using mixing procedure to increase the nutritive value but not spouting due to unawareness. Based on assessment Nursing Diagnosis made as lack of awareness, altered nutritional status among women and altered self care. Problem solving approach was used to solve the problem. Possible solutions were identified like Organizing Camp in the community for weight and Hb% estimation, health education during camp regarding prevention and control of anemia and distribution of Iron and Folic acid tables including demonstration of making paushtik Khichari and sprout. All Women in reproductive age group of 15-45 years residing in J.J Cluster Sri Niwas Puri (n = 76).

The camp was organized for three days with use of all available resources in the community like NGOs working in same community provided the space, govt. health centre supported in Hb% estimation and field publicity office for film show on prevention and control of anemia and quiz competition and local tent house for providing table and Chair during the camp.

Majority of the females (75%) were anemic and having Hb. less than 10 gm % and all were provided with therapeutic dose of iron supplement for one week and motivated to continue the treatment from available government facilities in the community.

Keywords: *Anemia, Problem solving approach, Community resources.*

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Introduction

As per World Health Organization (WHO)¹, health care students participate in Community Problem-Solving (CPS), to clearly understand the community in which they will later practice (WHO 1987).problem-solving approach

used in nursing practice at hospital and community setting . As a part of field experience of M Sc(N) Programme the researcher along with her classmate (Mrs. Maitri Chaudhary) were posted in M&CW center in Delhi and did the survey of 500 families to identify the health problem in the community. It was identified that majority of the females were Anemic. Then in second phase we were posted in the community for the use of problem solving approach.

The World Health Organization (WHO)² has recommended operational research on utilization of community-based infrastructures in areas of high anemia prevalence . Government of India’s nationwide, decentralized National Rural Health Mission has emphasized mobilization of the community for addressing local health problems (MOHFW)³

Problem solving approach at grass root level using participatory approach: “Community Coordination for Healthy action”

Problem statement: Lack of knowledge & Practice regarding prevention & control of anemia among reproductive age group (15-45 years) female.

Aim: To implement Problem solving approach for defined community by utilizing & mobilizing community resources

Specific Objective

1. To assess the background data of women (15-45 yrs)
2. To do the Physical assessment related to the nutritional status
 - a) General assessment
 - b) Weight check up
 - c) Hb% estimation
3. To assess the knowledge of women related to prevention & control of anemia
4. To assess the practices of women related to prevention & control of anemia
5. To provide health education regarding the prevention & control of anemia
6. To evaluate the knowledge after health education programme

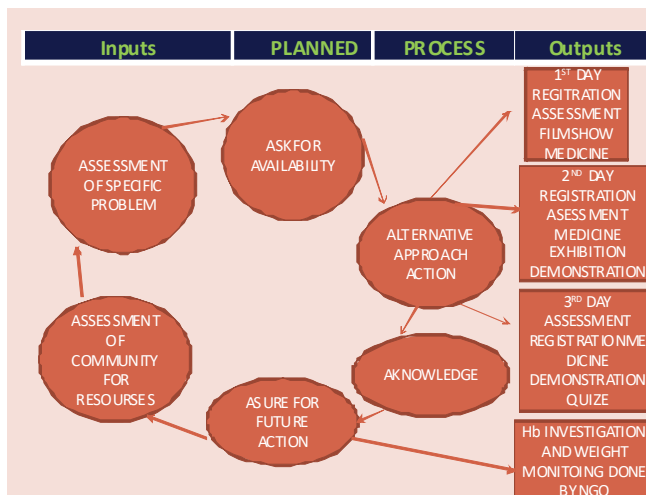
Methodology

1. Target Population-Women in reproductive age group of 15-45 years.
2. Sample size-76
3. Setting-J.J Cluster Sri Niwas Puri .
4. Tools used for Data Collection:
 - Structured interview schedule for the assessment of Knowledge and Practices related to prevention & control of anemia
 - Hemoglobinometer for estimation of HB%
 - Weighing machine for weight measurement

To solve the problem of anemia among females of reproductive age group conceptual framework was adopted from system model modified in 6 “A” approach.

1. Assessment for Specific problem
2. Assessment of community for Recourses
3. Ask for Availability
4. Alternative approach action
5. Acknowledge
6. Assure for future action

Community Co-ordination for Healthy Action



1. **Assessment for Specific problem:** In second phase assessment of knowledge and practice related to prevention and control of anemia with help of structured interview schedule was done for reproductive age group females (15-45years) .

Table 1 presents the frequency and percentage distribution of study sample according to age, marital status, parity, family size, family income, education, occupation, Hb % estimation, weight.

Table 2 and 3 presents frequency and percentage distribution of assessment done for knowledge and practices respectively for study samples detailed below:

Table 1: Frequency and percentage distribution of study sample according to age, marital status, parity, family size, family income, education, occupation (N-76)

S.No	Characteristics	Frequency	Percentage
1	Age group		
	15-25	34	44.7
	26-35	36	47.3
	36-45	6	7.8
2	Marital Status		
	Married	67	88.2
	Unmarried	7	9.2
	Widow	2	2.6
3	Family Size	Frequency	Percentage
	1-3	26	34.2
	4-6	45	59.2
	7-9	5	6.5
4	Income		
	2000-2500	37	48.6
	2501-3000	34	44.7
	3001 & above	5	6.5
5	Education		
	Illiterate	44	57.8
	Up to Primary	11	14.4
	Up to Middle	14	18.4
	10 th	10	5.2
	12 th	3	3.9
6	Occupation		
	Private Job	3	4.3
	Government Job	0	00
	House Wives	66	95.6

Table 2: Frequency and percentage distribution of responses of study samples related knowledge on prevention and control of anemia(N-76)

Item .No	Knowledge Concept	Frequency		Frequency	
		Yes	%	No	%
1	Meaning anemia	25	32.8	51	67.1
2	normal Hb level	1	1.3	75	98.1
3&4	iron rich food items	76&73	100&96	0&3	0&3.6
5	Iron rich diet is essential	76	100	0	-
6	Anemia is preventable	76	100	0	-

Item .No	Knowledge Concept	Frequency		Frequency	
		Yes	%	No	%
7&8	Causes of anemia	60&76	79	16	21
9	Modification of diet	70	92	6	8
10	Food hygiene	76	100	0	-
11&12&14	Personal hygiene	76	100	0	-
13	Bare foot may cause worm infestation	76	100	0	-

Table 3: Frequency and percentage distribution of responses of study samples related practices on prevention and control of anemia(N-76)

Item. No.	Practices	Frequency		Frequency	
		Yes	%	No	%
1	Got Hb checked	1	1.3	75	
2	Making iron rich diet	76	100	0	
3	Eating iron rich food items	25	32.2	51	67.1
4&5	De-warming	11&19	19 & 25	65&58	79 & 75
6	Do Modification of food items	76	100	0	-
7&17	Follow hygienic Practices	76	100	16	21

It was identified that majority (82%) females are married and having 2-3 kids .Majority of the females(60%) were illiterate. On assessment it was identified that majority of the females were not aware regarding anaemia and its causes specially worm infestation although they have knowledge related to prevention and control of anemia but having lack of self care (67%).They are using mixing procedure to increase the nutritive value but not spouting due to unawareness.

Based on assessment Nursing Diagnosis made as below:

1. Lack of awareness
2. Altered nutritional status among women
3. Altered self care

Possible solutions to solve the problem:

1. Camp may be organized for weight and Hb% estimation
2. Health education during camp regarding prevention and control of anemia
3. Distribution of Iron and Folic acid tables
4. Demonstration of making paushtik Khichari and sprout making

After assessment of study samples next assessment was done for available community resources to solve the problem

2. Assessment of community for Recourses

Identified three NGOs

- Savera association
- World vision
- Deepalaya

Three Govt. organization are:

- IPP VIII maternity Home, Defence Colony
- Health Center cum Maternity Home SNP
- Film & Drama Division R.K Puram

coordinated them to get the maximum support for healthy action.

3. **Ask for Availability:** We could get the help from all the above mention organization on formal request which can be documented for record purpose.

Brief Summary of available help by community resources :Place for camp.Tent and furniture,instrument for assessment of weightand Hb %, needle and spirit

swab,kitchen facility for preparation of paushtik khichri, Film show,Prizes for quiz winners, Tea snacks for the females attending the camp and drinking water facility.

4. Alternative approach action: The alternative approach for solving the problem of anemia with in the community and by the community were planned for three days

- **Ist day activities:** Registration of already interviewed females of reproductive age group and weight recording and Hb estimation was done which is proceeded with the face to face health education on anemia and medicine distribution as per the Hb% level for each female. Film show on prevention and control of anemia in Females of reproductive age group.
- **IInd Day activities:** Assessment, registration and medicine distribution as first day along with that display of low cost food material to make the diet iron rich and sprouting procedure was taught to all the females.
- **IIIrd day activities:** Along with the registration, assessment and medicine distribution the Nutritional demonstration was done for procedure of making paushtic khichari then khichari were distributed to all the participants after that quiz competition on anemia was carried out. There were 20 items in quiz and prize for each item if answering right

Table 4: Frequency and percentage for Heamoglobin and Weight of study sample

S.No	Characteristics	Frequency	Percentage
1	Hb %		
	5-6	1	1.3
	7-8	8	10.5
	9-10	48	63.15
	10 and above	19	25
2	Weight		
	25-35	1	1.3
	36-45	24	31.5
	46-55	41	53.9
	56-65	9	11.8
	66 and above	1	1.3

Majority of the females (75%) were anemic and having Hb. less then 10 gm %

5. Acknowledgement: Formal thanks for all the organizations for help and support

6. Assure for future action: Assessment of Hb% estimation and weight recording will be done by Savera association NGO working in community and facilitate in providing iron supplements to all amaemic women.

Conclusion

Majority of the females (75%) were anemic and having Hb. less then 10 gm % and all were provided with therapeutic dose of iron supplement for one week and motivated to continue the treatment from available government facilities in the community .It is concluded that if Health personnel working in the community are aware of health problem of community they can prioritize the problem to solve them by the help of above mention innovative approach. Similar approach was used by Dongra ARet.al⁴ in Community-Led Initiative for Control of Anemia among Children 6 to 35 Months of Age and Unmarried Adolescent Girls in Rural Wardha, India

Ethical Clearance: Taken

Source of Funding: Self

Conflict of Interest: Nil

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