

# CHAPTER: 04

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## ASSESSMENT OF ASHAS KNOWLEDGE ON NATIONAL IRON PLUS INITIATIVE PROGRAM AT NARMADA DISTRICT, GUJARAT

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**DOI: <https://doi.org/10.52458/9788197040887.2024.eb.ch-04>**

**Ch.Id:- IIHMR/NSP/EB/SAHHE/2024/Ch-04**

## **INTRODUCTION**

Anemia, indicative of inadequate nutrition and insufficient dietary iron intake, poses a significant public health concern among pregnant women, infants, young children, and adolescents. The data from the National Family Health Survey 4 (NFHS 4) underscores a heightened prevalence of anemia, particularly among children and women of reproductive age, within our country [1].

Recognizing the real-world challenges highlighted above, the Ministry of Health and Family Welfare (Government of India) has made a strategic policy decision to establish the National Iron+ initiative. This initiative aims to amalgamate existing programs, such as iron and folic acid (IFA) supplementation for pregnant and lactating women and children aged 6-60 months, while also incorporating new age groups. Consequently, the National Iron+ Initiative will extend its reach to various age groups, implementing supplementation and preventive measures through a comprehensive Life Cycle Approach [1].

A recent assessment of the National Iron+ Initiative (NIPI) program, conducted by the National Health Systems Resource Centre (NHSRC) in eight states of India, revealed that 73 percent of beneficiaries received guidance on iron tablets, with 65 percent consulting Accredited Social Health Activists (ASHAs) during pregnancy. However, the study also highlighted that ASHAs are less effective in influencing crucial health behaviors related to proper diet, thereby diminishing their impact on health outcomes. This deficiency has been recognized as a key area for improvement by the fourth review of the National Rural Health Mission (NRHM), emphasizing the necessity for all ASHAs to acquire skills in the NIPI program, including interpersonal behavior change [2].

During Antenatal Care (ANC) visits, one of the primary responsibilities of ASHAs is to provide counseling to mothers regarding the consumption of iron tablets and maintaining a nutritious diet. Survey data indicates a significantly higher number of beneficiaries in districts where the NIPI program has been implemented, receiving counseling and advice from ASHAs on all NIPI components. Notably, the results demonstrate the significance of advice received from trained

ASHAs for iron and folic acid tablets for anemic mothers. The survey findings revealed that mothers who consulted with trained ASHAs in the community reported improved health outcomes. For instance, in Orissa, 55 percent of mothers reported receiving counseling [3].

## **RESEARCH QUESTION**

What was the level of knowledge regarding the National Iron Plus Initiative Program among Accredited Social Health Activists (ASHAs) in Narmada district of Gujarat?

## **RESEARCH OBJECTIVE**

To evaluate the extent of knowledge regarding the National Iron Plus Initiative Program among Accredited Social Health Activists in Narmada district of Gujarat.

## **RESEARCH METHODOLOGY**

The study utilized a cross-sectional descriptive design, specifically a non-experimental observational approach, to evaluate the knowledge of Accredited Social Health Activists (ASHAs) regarding the National Iron Plus Initiative Program. Conducted in all blocks (Nandod, Tilakwada, Sagbhara, Dadiapada, and Garudeshwar) of Narmada District, Gujarat, the research encompassed the entire ASHA population over a three-month period from February 5 to May 6, 2018.

Purposive sampling was employed, with 70 ASHAs selected from each block, constituting 10% of the district's total ASHA population (14 from Nandod, 21 from Tilakwada, 11 from Sagbhara, 12 from Dadiapada, and 12 from Garudeshwar). Data collection involved face-to-face interviews utilizing a structured schedule with two parts covering basic information and ASHAs' knowledge of the National Iron Plus Initiative.

The procedure included the selection of 70 ASHAs from all blocks, with personal visits made to anganwadi centers for data collection, and registers were scrutinized to ensure program implementation accuracy. Subsequently, data analysis was performed using Microsoft Excel following data collection.

## **RESULTS & DISCUSSION**

The knowledge of ASHAs regarding medicines employed in the National Iron Plus Initiative Program was analyzed using five key indicators. The findings indicate varying levels of awareness among ASHAs about different iron and folic acid (IFA) supplements for various age groups. For instance, 51.14% of ASHAs are knowledgeable about IFA for children aged 6 months to 5 years, 61% about IFA for children aged 5 to 10 years, 54% about IFA for adolescents aged 10 to 19 years, 74% about IFA for pregnant and lactating women, and 67% about IFA for women in the reproductive age group of 15 to 49 years.

An assessment of ASHAs' knowledge concerning the dosage of medicines used in the National Iron Plus Initiative Program was conducted using six indicators. The results reveal that 61% of ASHAs have knowledge about the dosage for children aged 6 months to 5 years, 35% about the dosage for children aged 5 to 10 years, 32% about the dosage for adolescents aged 10 to 19 years, 84% about the dosage for pregnant women, 45% about the dosage for lactating women, and 50% about the dosage for women in the reproductive age group of 15 to 49 years.

The results indicate that 61% of ASHAs possess knowledge about the regime of dosage for children aged 6 months to 5 years, 32% for children aged 5 to 10 years, 31% for adolescents aged 10 to 19 years, 72% for pregnant and lactating women, and 48% for women in the reproductive age group of 15 to 49 years. The results showed that 54% of ASHAs have knowledge about where to avail medicines, while 44% are aware that tablets are provided to schools.

## **CONCLUSION**

The general understanding of the NIPI program among ASHA workers in Narmada district appears positive, as indicated by the results. While a majority of ASHA workers possess adequate knowledge about the dosage and regimen of IFA medicines, there is room for improvement in their awareness of the potential side effects associated with IFA, as well as the appropriate actions to take during such side

effects and complications. Additionally, there is a need for enhancement in the counseling aspect of their training. ASHA workers demonstrate proficiency in recording and reporting, but periodic training is recommended to refresh their knowledge. Recognizing NIPI as a crucial initiative in combating anemia throughout the life cycle underscores its importance.

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