CHAPTER VII

INTERVENTION STRATEGIES
As discussed in the earlier chapters, health is an important aspect of overall development of an individual. For a country or state to develop, therefore, the positive health of its people is of utmost importance to achieve the benchmarks of human development. This can be done through appropriate investment in health.

Health investment includes spending on any activity whose main objective is the reestablishment, maintenance, improvement and protection of health in a country during a defined period of time. Investment in health occurs both outside and inside the "Health System". Outside the health system, the most important investments are those related to food production, sanitation infrastructure, potable water and housing. With respect to food production, it is necessary to find mechanisms so that all the elements of the food pyramid are accessible to the general population and micronutrients along with basic foods are readily supplied. With respect to sanitation and potable water, lack of infrastructure is responsible for a large share of health problems, and improvements in this area are needed. Likewise, better housing will contribute to better health. Improving productivity and access to a sanitation infrastructure and housing is not only an investment in health and human capital, but, by increasingly providing non-tradable goods, the economy is made more competitive.

Inside the health system, activities include: health promotion and disease prevention; treatment of pathologies and reduction of premature deaths; providing care for people with chronic illnesses, deficiencies, disabilities, or health-related disabilities; chronic illness care, providing and administering public health; managing health programs, health insurance and other financing mechanisms and the administration of the health system.
Many times at national and state level the focus is on the 'outside' the health system as it is seen to be directly related to economic growth. But it is equally important to develop strategies to improve the 'inside' of health systems. Such a strategy must include a spectrum of services like providing scientific knowledge and information with regard to health care, nutrition, child care and mother craft, causes and prevention of deadly diseases like AIDS and cancer and so on. This can be effectively done through health education.

Health education which is concerned with the quality of life is a wider and more global concept. Health education is a relatively inexpensive intervention, which is widely acceptable to the communities in which it takes place and has greater potentialities to reach and influence those at risk (Kenchappanavar, R. N, 1997). Health education will mainly depend on the assessment of health related attitudes, knowledge and practices.

In the present research attempts were made by the researcher to identify the dark areas and misconceptions prevalent in the other Goans and fisher folks sub groups, so as to design a suitable educational intervention.

The statistical analysis of the data clearly indicated the prevalence of gross misconceptions and lack of scientific knowledge and proper attitude towards health related issues amongst sample sub groups of other Goans and fisher folks. Except for the dimension AIDS, the sub groups showed the presence of misconceptions and superstitions with regard to all the dimensions. This suggests a need for an intervention in order to provide the sample sub groups with adequate scientific knowledge about the various dimensions. An intervention strategy was formulated based on the item-wise percentages of 'modern' scores in other Goans and fisher folks sub groups. Also the analysis clearly indicates that it is the uneducated, low
SES, rural residents that require intervention, with regard to health, the most as they displayed gross misconceptions on various dimensions of health modernity.

In order to increase the existing level of information and knowledge about health and diseases and to bring about a more positive change in attitudes towards health, an intervention strategy aimed at educating the sub groups and to bring about behavioural change needs to be formulated. These interventions can be formulated by using the various psychological principals like reinforcement, observation, modeling, communication process and so on. Thus information with regard to causes and treatment of various diseases and also information about healthy behaviours and maintenance of health can be provided to the participants.

Various methods of imparting knowledge should be used in combination so as to enhance the understanding of the subject matter. Using appropriate tools to create effective intervention is extremely important.

Following methods can be used to make the intervention interesting and meaningful for the participants.

1. Lecture by experts in the field of health and medical field
2. Group Discussion
3. Role Play
4. Demonstration
5. Screening of Health related films and documentaries
6. Posters and Flip-charts

1. Experts from the field of health and medical fields can be invited to impart relevant knowledge to the participants of the intervention programme. Lectures by experts can have an influence on the subjective norms of the participants and that in turn can influence and promote the intentions to practice healthy behaviour. The
experts can also provide specific knowledge and information with regard to various dimensions of health modernity. For example, experts can speak on topics like HIV/AIDS, child care, care during pregnancy, family planning and related topics.

2. Group discussions with regard to various health related aspects can be organised for the sample in order to help them identify misconceptions and facilitate awareness about scientific knowledge and create positive attitude towards health. The group discussions will also promote sharing of information. The discussion may be supervised by an expert so as to give correct direction to the groups with regard to the health related information. Through group discussions a give and take of varied health related information is possible. Group discussion should be under the supervision and guidance of health workers and volunteers so as to avoid give and take of invalid information. For example, group discussion on topics like health related problems of women and children, advantages of immunization and exercise, importance of nutrition and related topics.

3. Role play can help participants understand certain unhealthy practices and also help them practice healthy behaviours. Role play should be adequately performed under the guidance and supervision of intervention programme Incharge. The participants could be divided into various groups and given certain health related situations to perform their role plays on. For example, role plays can be organized on topics like superstitions and misconceptions with regard to health and related topics.

4. Demonstration of health related behaviour by experts can also have an impact on health related behaviour of the participants. Huge information about health related behaviour can be conveyed through demonstrations. Demonstrations of healthy behaviour can also be displayed with the help of role plays, where the role play is performed by health workers and volunteers. For example, demonstrations
about stress management techniques, meditation and yoga, certain family planning methods, checking lumps in breasts.

5. Screening of health related films and documentaries are effective methods to spread information about health through entertainment. Documentaries can be taken from various governmental and non governmental organizations. For example, documentaries on how to prevent certain diseases and care to be taken during illnesses can enhance the understanding of the participants.

6. Posters and flip charts can be used during lecture method, role plays and demonstrations. The main objective is again to simplify the information and make it further meaningful. For example, posters on ways HIV spreads or a flip chart showing how a person can be prone to malaria can be displayed.

It is important to focus on the participants' perception of the susceptibility, severity and consequences of a particular health related problem. If a participant is convinced that he or his family member are susceptible to a particular disease or disorder which is perceived to be severe and at the same time the perceived consequences are negative then the intervention programme will create a strong impact on the participants health related knowledge and behaviour. For example if a participant is convinced that if his child is not immunized at correct point of time then the child may be susceptible to various illnesses as a consequence of which the child may be rendered disabled for lifetime or the development of the child may be severely hampered then there is more possibility that the participant will apply the knowledge imparted to him during the intervention programme. The success of an intervention programme can be determined by the actual application of information and knowledge gained by him/her during intervention and also by the maintenance of the healthy behaviour for a considerable period of time.
Physical Health

The percentages of ‘modern’ scorers under the dimension physical health were already discussed in the chapter on extent of ‘modern’ scorers. The sample group has various misconceptions with regard to physical health dimension. The very first item showed a percentage of 28% for other Goans sub group and 17.3% for fisher folks sub group, which indicated that majority of the sample in other Goans and fisher folks sub groups believed that life and death depends upon God; medical treatment cannot do anything. Which shows that a large number of sample has no faith in medicine. Majority of the sample had faith in saints, prayers and witchcrafts than medical treatment. This kind of attitude can be extremely harmful as the medical treatment is delayed and the disease can get aggravated leading to either permanent damage or even death of the person.

41.8% of other Goans sub group and 26% of fisher folks sub group sample believed that good or bad health depends on the constitution of body. If the constitution of a person is good he will keep good health even if he does not care for it. The results indicated that the percentage of ‘non-modern’ scorers with regard to this item is very high. Maintenance is key factor in health care. The focus in health care should change from ‘illness’ to ‘well being’. Cancer is perceived as contagious disease by 41% of fisher folks sub group. Such misconceptions change the focus from the actual cure of disease to fear in the mind of people with regard to cancer as it is seen as contagious. 51.2% of other Goans sub group and 54% of fisher folks sub group believe that one should try to keep away from a hospital, unless there is some emergency or helplessness. This kind of misconception can again be related to the ‘illness-wellness’ model, where some kind of intervention needs to be developed in order to help the sample sub groups make a shift from illness to wellness and help.
them develop correct attitude towards health. 45.8 % of other Goans sub group were ‘modern’ scorers for the statement that some types of leprosy do not spread by contagion. The results indicate lack of knowledge about the spread of leprosy amongst the sample sub group.

Thus it can be clearly seen that the sample has large number of misconceptions with regard to physical health, which needs to be clarified with the help of a suitable educational intervention. The fact that health is not merely the absence of disease but a state of physical, mental, emotional balance that is determined by both internal factors and external environment needs to be imbibed in the lives of the people. Also awareness with regard to various aspects of physical health and illnesses should be organized.

Thus the intervention with regard to physical health should focus mainly on:

1. The scientific understanding of health related issues, developing positive attitude towards healthy behaviours, hygiene and cleanliness.

2. The maintenance of health and healthy behaviours.

3. The participants should be helped to develop faith in the medical treatment.

4. The participants should also be given clarification and information about the causes and spread of various diseases.

5. The approach should focus on preventive aspects rather than curative.

Mental Health

The sample group are to a great extent ill informed on most of the ten items under mental health dimension. Majority of the participants had misconceptions about
the causes and cure of mental illnesses. The other Goans sub group had a percentages of ‘modern’ scorers above 50% for the first item, which stated that evil spirits causes insanity, where as 55.2% of fisher folks sub group believed in the statement and can be termed as ‘non-modern’. 53.7% of other Goans sub group and 59.2% of fisher folks sub group believed that Insanity is the result of the sins of past lives. With regard to the next item that breaking of a religious vow results in insanity is believed by 52.2% and 61.2% of the other Goans and fisher folks sub groups respectively. 58.7% of the fisher folks sub group believed that persons become insane under the influence of bad stars. 58.5% of fisher folks sub group believed in the statement that once insane, one can never become a normal person. A majority of sample, 68% of other Goans sub group and 82.2% of fisher folks sub group believe that too many abortions cause insanity in woman. With regard to the next item, persons who have been once insane should never be trusted with a responsible job, is believed by 68.2% of other Goans sub group and 75% of fisher folks sub group.

The theme of this dimension is mainly the causes of mental disorder/insanity. The results indicated that the sample sub group has gross misconceptions about this dimension and they believed that mental disorder is caused due to evil spirits, sins of past, position of planets. More over a majority of people believe that there is no cure for mental disorder/insanity. This kind of attitude and ignorance on the part of sample sub group can be highly misleading, as the person suffering from mental disorder will be devoid of appropriate treatment.

Mental illnesses are often considered by many as being associated with violence and bizarre behaviour. However, these types of “severe” mental disorders account for less than 10% of all the mental illness in the community. The wide range of illnesses which are included under the group of mental disorder include depressive
and anxiety disorders, dependence on drugs and alcohol, schizophrenia, bipolar affective disorders and child and adolescent mental health problems (Patel, Vikram, 2001).

Maximum misconceptions were found in this dimension. The fisher folks sub group in fact was ignorant on all the ten statements of this dimension. The intervention with regard to this dimension should mainly focus on:

1. The etiology and treatment of mental disorders.
2. Eliminating stigma towards mentally ill.
3. Intervention should stress the importance of mental health as a public health issue.

Nutrition and Diet

57.2% of the other Goans sub group and 44% of fisher folks sub group believed that drinking alcohol in public is not decent, but one may drink in his house. 49.8% and 36.8% were percentages of ‘modern’ scorers for other Goans and fisher folks sub groups respectively for the item stating that traditional habit of eating more rice and less vegetables and lentils makes a proper meal. 51.2% of other Goans sub group and 51.5% of fisher folks sub group believed that the fresh raw milk of cow is healthier than boiled milk. For the next item stating that the worries in life are due to hunger and food, therefore, there should not be any restriction on eating was believed by 44.3% for the fisher folks sub group. The fisher folks sub group (49.8%) had percentages of ‘modern’ scorers slightly less than 50% on the item stating that a pregnant woman does not need any special diet; she should eat regularly and in time usual daily meals.

The intervention with regard to this dimension should focus on:

1. The importance of balanced diet and nutrition and the nutritional
requirement of pregnant, nursing women and children.

2. The importance of eating right food in right quantity should be inculcated in the participants.

3. Also the significance of hygienic food and drinking water should be emphasized.

**Breast Feeding**

60.7% of other Goans sub group and 70% of fisher folks sub group believed that the mother should not breast-feed her child when she is ill as it may harm the child. Only 41% and 42% of other Goans and fisher folks sub groups respectively believed that breast feeding helps avoid pregnancy. 45% of other Goans sub group and 58.5% of fisher folks sub group believed that breast feeding spoils the figure of the mother. Only 45.8% of other Goans sub group and 39% of fisher folks sub group believed that mothers with Caesarean operation should breast-feed the child. The percentages of ‘modern’ scorers was just 39.3% and 25.3% for other Goans and fisher folks sub groups respectively with regard to item stating that breast feeding the child during its illness may harm the child as well as the mother. With respect to the item stating many bottle-fed babies fall ill because the powder milk is not dissolved in clean water, the percentages of ‘modern’ scorers for other Goans was 49.8%, which is slightly below 50%. The initial growth of a child depends upon the duration and frequency of breast feeding it receives, since the breast milk provides important nutrients to infants and young children and protects them against certain infections. Although the practice of breastfeeding is universal in India, some studies have pointed out gender differences in duration of breastfeeding of children (Wyon and Gordon, 1971; World Bank, 1991). Thus it becomes extremely important that the participants are updated with the knowledge with regard to breast feeding.
The intervention can be based on:

1. The breast feeding practices, supplementary food and advantages of breast feeding.
2. The intervention should attempt to clarify certain misconceptions regarding breast feeding.

**Family Planning**

On the item stating that one needs a son to do the last rites/rituals so that the soul may rest in peace, the fisher folks sub group had only 44.5% of 'modern' scorers. With regard to whether it is proper to have only two or three children, but they should be born in the first three or four years after marriage so that they can be brought up together, the ‘modern’ scorers for the fisher folks sub group was only 41.8%. 47.3% of other Goans sub group believed that the sex of the child is determined entirely by the sperm of the father; the mother has no role in it. 5.5% of fisher folks sub groups respectively believed that if necessary, it is right to abort, either by operation or by taking medicines, the foetus in the womb.

The percentages of ‘modern’ scorers was, 47.3% for other Goans sub group and 36% for fisher folks sub group for the item stating that children are blessings from God; hence their birth should not be prevented irrespective of the number of children in the family,

One needs a son to keep the continuity of the family. Hence even after having many girls, childbirth should not be prevented until one has a son was believed by 56.7% of the fisher folks sub group. The use of nirodh’ or other contraceptive devices for family planning puts an end to the joys of marital life was believed by 51.5% of fisher folks sub group. The item stating vasectomy makes a man impotent had a
very low percentage of ‘modern’ scorers, 34.5% and 2.8% for other Goans and fisher folks sub groups respectively.

The intervention strategy with regard to this dimension should focus on:

1. The elimination of negative attitude towards females by dealing with gender discrimination.
2. It should also take into consideration scientific understanding of conception, child birth, sex determination and contraceptives available for men and women.

**Child Care**

The sample sub groups were grossly ill informed about the first three items. They had no knowledge about the weight of a normal child at birth and at later stages, and about immunization of infants and pregnant women. 36.3% of other Goans sub group and 29.3% of fisher folks sub group were aware about the proper weight of a normal child. With regard to immunization of infants the percentages of ‘modern’ scorers was 22.3% and 25.3% for other Goans and fisher folks sub groups respectively. Only 33.5% of other Goans sub group and 33% of fisher folks sub group had knowledge about the immunization of pregnant women.

With respect to the next items, the sample sub groups were grossly misinformed. 51.7% of other Goans sub group and 65.2% of fisher folks sub group wrongly believed that at birth child is only a bundle of bones and flesh; the development of the brain actually starts after birth. 48% and 35% were percentages of ‘modern’ scorers of other Goans and fisher folks sub groups respectively for the item stating that children who stammer continue to do so as adults. A staggeringly high percentage of 71.5% for other Goans sub group and 88% for fisher folks sub group believed that diarrhea is a common disease among children and one need not be
The intervention should focus on:

1. The immunization, developmental process of a child, common diseases in infancy.
2. The information about child care can be given to the participants by experts in the child care area.
3. The participants need to be updated about not only physiological development, but also psychological development of a child, so as to enable them to take adequate care of the child and meet his developmental needs.

**Mental Retardation**

The themes covered in this dimension are knowledge of epilepsy, its relationship with mental retardation, language problems, age of mother and mental retardation, malnourishment of the mother and other causes of mental retardation.

Children with epilepsy are generally mentally retarded was believed by majority of the sample subgroups. 60.2% of other Goans sub group and 67% of fisher folks sub group believed in the statement, indicating that the sample sub groups were not aware about the difference between Mental Retardation and epilepsy. 52% and 67% of other Goans and fisher folks sub groups respectively believed that every child is born with equal amount of intelligence. Only 39.5% of other Goans sub group and 43.8% of fisher folks sub group were 'modern' scorers with regard to the item stating that a child is likely to be mentally retarded if he does not talk by two years. 70% of other Goans sub group and 62.7% of fisher folks sub group believed that if a child does not walk by 18 months (1 1/2 years) he might be mentally retarded. The percentages of 'modern' scorers for the next item pertaining to relationship between mother's age and mental retardation in children were 40.8% and 42.3%.

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The results indicate that the sub groups are partially ignorant about the aspects of this dimension. They have a clear idea about certain causes of mental retardation, while they have misconceptions about other causes. Thus, depending on the percentages of 'modern' scorers on each item of this dimension, a strategy can be formulated in order to update the knowledge about mental retardation possessed by the sample sub groups.

The main aspect of the intervention for this dimension should be:

1. The difference between mental disorders and mental retardation.
2. The causes of mental retardation should also be made clear so that the participants are well equipped to identify mental retardation and carry out effective measures to deal with it.

**Attitude towards Females**

The main theme covered in this dimension is gender discrimination. Fisher folks sub group had incorrect attitude towards women with regard to various statements. Only 45.8% believed that working women could make a happy family. The percentages of 'modern' scorers for the next item stating that God has made women such that they can never equal men was 38.5% for fisher folks sub group, which can be said to be low, indicating that women are still not given equal status in society with men, with regard to the fisher folks sub group. The same is reflected in the attitude with regard to the next item stating that the son has more claim than the daughter on his parents because he will look after them in their old age as only 41.5% did not agree with the statement. 55% of the fisher folks sub group also believed that parents should give more education to their sons than to their daughter and 51.5% agreed that Men are more intelligent than women. The fisher folks sub group is having an incorrect attitude with regard to the status of a son and daughter in families.
in particular and society in general. Sons are perceived as more intelligent and also superior when compared to daughters. Though the other Goans sub group did not show any misconceptions with regard to this dimension, which shows that they do not require any intervention. Suitable interventions need to be formulated in order to deal with this kind of attitude on the part of the fisher folks sub group. Such an attitude may lead to a negative impact on the education and development of the girl child and thus will also hamper the overall development of the society.

The intervention for this dimension will be mainly designed for the fisher folks sub group which shows ignorance with regard to 5 statements of this dimension.

The intervention should stress on

1. Eliminating gender discrimination and developing a positive attitude towards education of women and working women.

2. Awareness regarding general and reproductive health related problems in women.

Cancer

Both the groups had misconceptions pertaining to various items under this dimension. Only 41.5% of other Goans sub group and 39.8% of fisher folks sub group believed that excessive consumption of alcoholic beverages may lead to oral, laryngeal and oesophageal cancer. Misconception also existed with regard to the next item stating that early marriage leading to sexual intercourse at a very young age and having multiple sex partners may lead to cervical cancer in females, as only 45.3% and 47.5% of other Goans and fisher folks sub groups agreed with the statement. 56% of other Goans sub group and 60% of fisher folks sub group were ignorant about the fact that Viral Infections of the genitalia due to unhygienic menstrual and child-birth practices may lead to cancer in females. Only 48.8% and 40% were the percentages of
‘modern’ scorers for the item pertaining to Cancer being contagious. 47.5% of the fisher folks sub group believed that abstinence from tobacco and alcohol is the easiest way to prevent cancer.

The intervention can focus on:

1. The etiology of cancer as also on consumption of alcohol, tobacco and drugs.
2. It can also stress on importance of correct diet and hygiene.

AIDS

On AIDS dimension, both the sub groups had percentages of ‘modern’ scorers above 50% on most of the items, which indicated that the majority of the sample had correct knowledge and right attitude towards AIDS related information. The other Goans sub group had high percentages of ‘modern’ scorers on all the items. But the fisher folks sub group had low ‘modern’ scorers on two items. Firstly on the item stating that, a person can get AIDS by wearing clothes used by an AIDS patient, the percentages of ‘modern’ scorers was 48.8% and 56.2% of the fisher folks sub group believed that if a member of the family is infected with AIDS, he may pass the infection to other members by living in the same house with them.

The least misconceptions were found with regard to this dimension. The other Goans sub group had no misconceptions at all, whereas the fisher folks sub group were ignorant with regard to two statements.

The intervention should focus on:

1. The transmission and spread of HIV/ AIDS.
2. Preventive measures with regard to HIV/ AIDS