

STRATEGIES OF COMMUNICATION FOR PROMOTING THE ADOPTION OF ORAL REHYDRATION THERAPY (ORT) BY PRODUCTIVE WOMEN IN NIGERIA.

BY

K. Y GORAH

DEPARTMENT OF HEALTH AND PHYSICAL EDUCATION
FEDERAL COLLEGE OF EDUCATION, PANKSHIN.

ABSTRACT

Some years back, diarrhoea was the major killer of the World's children, claiming almost 4 million lives each year. Today more than 1.5 million lives are being saved each year - 4,500 every day by administering ORT. No other single medical breakthrough of the 20th century has the potential to prevent so many deaths over such a short period of time. Nigeria incorporated ORT into her primary Health care system since 1985. In Nigeria convincing mother to trust and practice the use of ORT has been a slow and difficult task. The major hurdles to acceptance and use ORT include:-

1. Illiteracy
2. Lack of awareness
3. Inadequate information
4. Lack of understanding, and
5. The option for other forms of diarrhoea management by mothers instead of ORT.

This paper highlights some communication strategies to be used by health workers to promote the adoption of ORT by the mothers.

INTRODUCTION.

The term communication as it relates to public relation, is the interchange of information or conveying thought from one party or group to another, (Lesly, 1991). Communication as a concept or word has its origin in the latin word "communicare". According to Nwosu and Idemili (1992). "communicare" mean to share or to establish commonness. They described communication as a process of establishing commonness of ideas, feelings, desires or thoughts among human beings. That, this sharing of thought or establishment of commonness can be from person to person, person to group or even from group to group. Based on the above, communication could be referred to as the interconveyance, inter-transmission or inter-exchange of message between and among individuals or groups using mutually understood symbols, codes or languages. The aims of this exchange in health programmes are, to teach a common understanding and to change or reinforce certain behaviours that promote health, for example, the adoption of oral rehydration therapy by Nigerian mothers.

Oral Rehydration Therapy (ORT) is the process by which salt, sugar solution (SSS) is given or taken through mouth or nose to prevent or treat dehydration due to acute diarrhoea. It is defined as home-made fluids such as salt-sugar solution (SSS), cereal gruel,

soup fruit juices (unsweetened and diluted) and water. (Federal Ministry of Health (FMOH) and social services (SS) (1992). ORT has also been described as increased intake of acceptable fluids (including plain fluids available in the home, food-based fluid) and continued normal breastfeeding (UNICEF 1993). This addresses promptly at home, the prevention and management of dehydration caused by acute diarrhoea. According to FMOH, (1986) and UNICEF, (1997) the fluids that can be used are of two kinds:-

1. Home-made available fluids, for example, fruit juices, weaktea, pap, fura, soups, yoghurt, coconut water and rice porridge.
2. Solutions containing known concentrations of salt and sugar, examples of which are salt-sugar solutions (SSS) and oral rehydration therapy solution (ORT)

These forms are used to prevent or manage dehydration due to diarrhoea.

GUIDELINE FOR COMMUNICATING DIARRHOEA AND ORT.

The dictionary meaning of dehydration is to deprive water chemically or excessive loss of water from the tissues of the body. UNICEF (1997) affirmed that there is loss of large quantities of water and salt from the body through vomiting, stooling, urinating, sweating and respirating. In addition, that diarrhoea (which is the discharge of loose faecal matter from the bowel) is the major cause of dehydration. In another development, they stressed that diarrhoea can lead to malnutrition which in turn can be a predisposing factor to diarrhoea also. Therefore, when communicating ORT that can effectively reduce dehydration due to acute diarrhoea, it is very important to education mothers on the cause of diarrhoea. FMOH and UNICEF (1988) stressed that diarrhoea is caused by:-

- a. A rota virus,
- b. Drinking dirty or contaminated water
- c. Eating food prepared with unwashed hands or in unhygienic condition, and which is associated with measles, poor food preparation, teething infections and malaria.

In addition the feeding bottle is a frequent source of infection, hence diarrhoea is a common feature in infants and children below six months who are bottle fed and with proper communication by the health worker, mother will be able to take precautionary measures. To this end, Nigerian mothers should be educated, made aware and be persuaded through adequate communication to adopt ORT to reduce this mortality rate. Adoption in this sense is as defined by Kirkpatrick (1993), as the act of accepting a new innovation and putting same into use. Health workers should as a matter of urgency make sure that mothers know how to prepare and administer the solution at home. This will motivate them to adopt ORT.

Communicating home-made ort preparation.

It is essential that every health worker be familiar with the preparation of ORT so that he or she can teach the mothers. FMOH, (1986) provided the formulae that is most appropriate for Nigeria as outlined below:-

- Obtain a clean beer bottle or cocacola bottle, a teaspoon and a clean bowl.
- Wash your hand and dry them
- Measure out one leveled teaspoon of salt and ten leveled teaspoons of sugar into the bowl. If sugar is available only in cube form, one cube is equivalent to two leveled

teaspoons of granulated sugar; therefore use five cubes,

- Add one beer bottle or two coke bottles of clean water into the bowl.
- Mix thoroughly and taste it. The solution should taste like coconut water and this is the correct salt-sugar-solution.
- Discard the remaining part of the solution after twenty-four hours and prepare a fresh one if it is still required, and this solution should not be boiled at any time.

Communicating administration of ort at home.

FMOH (1986) explained that the following instructions be adhered to by mothers whenever diarrhoea starts:

- Continue feeding the child (including breast feeding).
- Let the child drink more fluid - use available fluid at home (water, light pap or gruel, light soup, fura etcetera).
- Prepare the salt-sugar-solution as described and give this slowly using a cup and teaspoon.
- Give as much fluid as the child can drink, exercise patience with this treatment. A child who is vomiting will take and retain the fluid provided it is given slowly, about 3 teaspoons every ten minutes.
- Do not give antidiarrhoea mixture, and
- Do not give antibiotics unless for specific reasons determined by a medical doctor or physician.

LEVEL OF AWARENESS AND ADOPTION OF ORT.

Studies have shown that the inability to adopt ORT by many mothers in developing countries such as Nigeria is due to many factors. Prominent among such factors include:-

1. Lack of awareness about ORT.
2. Illiteracy
3. Cultural beliefs.
4. Taboos
5. Inadequate information.
6. Inaccessibility, and
7. Preference for other forms of diarrhoea management.

A study by Coreil and Genece (1988) among Haitian Mothers on adoption of ORT indicated high rate of infant mortality from diarrhoea illness. Out of three hundred mothers, 68 per cent were proved knowledgeable. But only 8 percent of them cited ORT as effective prevention of dehydration. Also Ekanem and Benebo, (1988) carried out a study in Lagos on level of mothers' awareness, practices and acceptability of ORT. Out of two hundred and sixty- seven mothers, 61 per cent indicated they had never heard about ORT, 39 per cent proved aware, 87 per cent recommend antibiotic for diarrhoeal management and the 39 per cent mothers who proved aware of ORT 2.2 per cent opted for SSS. The study indicated a very low level of awareness and acceptability of ORT.

Another study on management of childhood diarrhoea at house hold level aimed at disseminating knowledge about ORT was conducted in 1991 by Borros, Victoria, Forsberg,

Maranna O, Stegeman, Gonaliz - Richmond, Martins, Neuman, McDuliffe and Bronco. Their study indicated high level of illiteracy, however, there was a high indication of management of diarrhoea at home by 65 per cent of nine hundred and eight-two mothers. Okeibunor, Asobie and Igboeli (1995) conducted a study associated with the use of SSS among mothers in Nsukka. The study indicated that out of six hundred and fifty-two respondents, 83.4 per cent showed awareness but 63.4 per cent had never used ORT. Some mothers used other forms of treatment like purgative, panadol, antibiotics and medicinal chalk. Their sources of information about ORT ranged from friends, traditional healers and health workers.

From the fore-going studies, it is evidently clear that ORT has not been given its rightful place by the Nigeria mothers. A bulk of them are not aware, ill-informed, have little knowledge about ORT, unaccessible to it, and even not willing to use it for managing dehydration due to diarrhoea. These factors called for effective communication of ORT to the mothers.

Therefore, if ORT is to fulfill its potential of saving the lives of millions of infants and children of this country, it is essential that knowledge about the therapy permeate through health professionals to the village-based health workers and to the grassroots of communities. This can be achieved through various strategies of contact and communication. For instance, the goal of creating awareness, knowledgeable and adoption can be done through wide spread dissemination of information and social marketing of rehydration salt packets.

COMMUNICATING THE ORT MESSAGE.

Communication in all its ramifications, has been recognised internationally as an effective instrument for behaviour modification. For example, Valyasevi and Atting (1994) affirmed that United Nations Agencies and other international organizations have firmly acknowledged that many nutritional problems can be covered if effective communication is used not only to educate people, but also to change their behavioural pattern which could lead to adoption. The aim of nutrition communication is to use innovation techniques founded on behaviour change theories and experiences to encourage individuals to try, adopt and sustain new behaviours relating to food and nutrition. Achterberg, (1991) stressed that there was the dare need for strengthening education systems and social communication mechanisms to improve and implement nutritional knowledge, especially at individual, family and community levels. These are clear indications that the use of communication approach by health workers will promote ORT adoption by the Nigerian mothers.

In communicating the ORT message therefore, families are the first to be advised on the defense against the threat of diarrhoea dehydration. The mother in particular because she is usually the first person in the home to seek advice when her child has diarrhoea. She is also the one who either administers treatment, withholds milk or food, or continues feeding the child. But because her behaviour is often influenced by those around her, knowledge, attitudes and skills of all family members are crucial factors in determining

whether ORT is used at all or not or whether it is used effectively. Communicate the ORT message in such a way that parent understand it, are willing to use it and are also willing to prepare and administer it safely and effectively.

Political Commitment to ORT

The Head of State and Senior Government Officials can play an important role in bringing national attention to ORT. When national leadership is committed, control diarrhoea disease (CDD) programmes can produce significant result in a fairly short period. For example, UNICEF (1995) affirmed that the Morocco Head of State's personal commitment in 1992 lifted ORT use in Morocco from 13 per cent in 1991 to 60 per cent in 1994. Also, in Phillipines, the President launched a special CDD campaign on ORT and personally administered it to a four - year old child suffering from dehydration. This promotion of ORT by the Phillipines highest official gave instant credibility to ORT in communities across the country. ORT use leapt from 55 per cent in 1994 to 80 per cent in 1995. Nigeria should borrow a leaf from these to promote mothers' adoption of ORT.

Winning Approval of Physicians and Pharmacists

Before the public can trust ORT, the therapy needs to become an integral part of the country's public health care system. Physicians and Pharmacists should encourage ORT use by discouraging mothers from using antibiotics for treatment of diarrhoea. All public health facilities must be equipped to treat diarrhoeal diseases correctly with adequate supplies of ORT and health workers properly trained in appropriate case management. It is essential that health workers prescribe ORT for their own children for it is not possible to convince others expect the health workers are convinced themselves. Since individuals trust their advice, physicians are one of the most important group to the convinced of ORT efficacy.

ORT Education Communication.

Education process is necessary to create the level of awareness that will enable people understand their socio-economic realities and gain sufficient technical knowledge for taking part in decision making over issue that affect their health. Mothers and parents should be properly enlightened on the efficacy of ORT in the management of dehydration. The mechanisms for providing information range from pastors to slick radio and television spots to non- participatory group counseling sessions where a teacher provides knowledge to target group members (mothers). The mother that is aware and understands the purpose of a given health programme will be motivated to accept and look forward to the implementation.

Communicate ORT through the Mass Media.

In many countries, especially where illiteracy rates are high, television and radio, when used as part of a larger communication campaigns, have successfully increased overall awareness about the dangers of diarrhoeal diseases and the effectiveness of ORT. A strictly mass media approach may be used to persuade mothers to adopt a new product, service and / or behaviour. This strategy as Smitasiri, Atting and Dhanamitta, (1992) stressed that they do not only impart information on ORT but are also generating an overall awareness about child's right. This will reinforce the adoption of ORT since mothers

receive health messages through the media and some from health workers. This idea is further strengthened by the fact that UNICEF, (1997) affirmed that Mexico used the television to communicate and can now boast of an 81 per cent ORT use rate across the country. Also, that Egypt used the television to campaign which led to increased knowledge of ORT among parents from 17 per cent in 1980 to 98 per cent in 1988.

Communicate ORT Through Traditional and Folk Media.

A country richest resources are often its local traditions, customs and beliefs. Some of the most effective communication campaigns therefore, have capitalized on local cultures and have used these traditional channels to educate societies about ORT. Nigeria is very rich in cultural activities and theatre troupes can be used to translate ORT message into a variety of performance styles to reach the many indigenous communities (mothers). This can be done through drama, music (songs) and poetry to promote mothers adoption of ORT.

ORT Education Through International Communication.

While the media offer the quickest and easiest way to reach people on a massive scale, the most effective way to change behaviour is to combine media with personal contact. Interpersonal contact always enhances confidence and clarifies doubts. When mothers learn about ORT through health workers or volunteers in their homes (through home visits) or in schools or churches, they are able to ask questions, with privacy in a comfortable environment.

Intensify ORT Weeks Year-Round.

Nigeria should organise national ORT days and ORT weeks. This should be observed especially during season when diarrhoeal diseases are at their height. This will reinforce year-round efforts in rural villages and urban neighbourhoods. Besides Promoting ORT use, the week will increase awareness about dangers of diarrhoeal diseases among decision makers at National and Local level. The efforts will also strengthen commitment to ORT among health professionals and improved access to ORT through massive distribution of ORT packets. Furthermore, ORT days and ORT weeks will highlight the media's role in making the public aware of issues. Finally, they will also provide opportunities to mobilize mothers to adopt ORT. For most successful days and ORT Weeks, they should be well planned with defined measurable objectives during such days or Weeks.

Use Community Health Workers to Communicate ORT.

Health workers should recognise the home-economists and agric extension workers' importance as community Health Agents and use them to communicate ORT. The community Health agents serve as a critical link between the community and the health services. They emphasize prevention and also bring the population to formal health services when need be. They provide health education, encourage safe water projects and refer serious cases to the nearest clinics. Community health agents communicate with their neighbours easily in familiar non-technical terms and very much equated with traditional health practices. These qualities make them a force to be reckoned with in the promotion and adoption of ORT by the Nigerian mothers.

Communicate ORT Through Religions Organizations

Religions leaders are among the most influential members of the community. Their endorsement of ORT can have significant impact in getting the mothers to accept it. Also, their network of clergy, often working in the most remote regions of the country, can play an important role in educating community mothers to prepare and administer the life-saving ORT solution correctly.

Communicate ORT Through Schools.

Students at both primary and secondary schools should be taught about the menace of dehydration due to diarrhoea by their teachers. Efforts should be made also to include ORT in the curriculum to promote its use. When mothers receive printed information on ORT from their ward's school or watch a drama on ORT during a price giving day at school, it will influence and promote their adoption.

SUMMARY AND CONCLUSION.

Nigeria which incorporated ORT in her primary health care services since 1985 is still facing problems of high rates of infant morbidity and mortality due to diarrhoeal diseases. There are factors that militate against the adoption of ORT by mothers. Such factors include, illiteracy, lack of or inadequate information, lack of awareness and understanding the efficacy of ORT in the prevention and management of dehydration due to acute diarrhoea, lack of knowledge of preparation of ORT, option for other forms of diarrhoeal diseases management due to taboos and cultural beliefs which are diversified in Nigeria.

Experiences have shown that the most effective way to create awareness, and first step along the path of changing behaviours, attitudes and practices is to develop a communication strategy that is based on community's knowledge, attitudes and practices that respect cultural preferences.

An integrated communication approach to convince mothers about ORT efficacy, should use all possible communication channels - mass media, traditional and folk media and interpersonal channels to reach mothers with message in different forms but on the same subject, so that the messages are mutually reinforcing.

REFERENCES.

- Achterberg, C. (1991). *Effective Nutrition Communication for Change. Report of the sixth International Conference of the International Nutrition Planners forum*, Washington, D.C. Nutrition Foundation, Human Nutrition Institute, International Life Sciences Institute.
- Achterberg, C. (1995). *Update of Nutrition Communication Unpublished report of the Inter-country Workshop on Nutrition Education for South and East Asian Countries*. Thailand, 11 - 26 February.
- Anyawu, S.U (1993). *Community Mobilization and use of groups in Health Education*. Unpublished Seminar Paper.

- Attig, G. (1993). *Participatory action for Nutrition Communication Social Marketing Vitamin A rich foods in Thailand*. Unpublished report of the inter-country workshop on Nutrition Education for South and East Asian Countries, Thailand, 22 - 26 February.
- Barros, F.C Victor, C.G. Forsberg, B, Maranhao A.G.K. Stegeman, M. Gonzalez-Richmond, A. Mathins, R.M. Neuman, Z.A. McAuliffe, J.and Branco J.A. (1991). Management of Childhood diarrhoea at the household level: a population based survey in North East Brazil. *Bulletin of vol. 69 (11)*, 50 - 55.
- Ekanem, J. & Benebo N.S (1988). A community - Based Survey of the awareness and acceptability of oral rehydration therapy (ORT) as a treatment for acute diarrhoea in *Children. Early Childhood Development and Care*, 34: 95-102. Gordon and Breach Science Publishers.
- Coreil, J. & (Nov. 1993). Adoption of Oral Rehydration Therapy among haitian mothers. *Social Science Medicine*, 27 (1), 87-96.
- FMCH & UNICEF (1986). *A Manual on Management of acute diarrhoea: Oral Rehydration Therapy for Nurses and other Health Workers*. Pp.1- 18. Nigeria.
- FMCH & (1988). Morbidity and Mortality of diarrhoea in Nigeria. *Primary Health Care Clinical basis of Oral Rehydration 0.2*.
- Kirk Atrick, E.M (Editor). Chambers Universal Learners' *Dictionary International Students' edition*, Ibadan: Spectrum Books Ltd.
- Lesly, P. (1991). Current use of terms. *The Handbook of Relations and Communication*. (Rev. Ed) (4th ed) p.7 McGrawa Hill Book Company U.K Limited.
- Nwosu, I.E and Idemili S.O (Eds). *Defining and Explaining Communication*. Public Relations Speech Media Writing and Copy: P. 49 Enugu: ACENA Publishers.
- Okeibunor, J.C. Asobie, F.C and Igboeli, C.C (1995). Factors associated with the use of SSS among mothers in Nsukka Zone *A Journal of Policy and Applied Research 15 (2)*, 127 - 136.
- PAHO / WHO (1996). Some techniques of good communication. *Nutrition Handbook for Community Workers in the Tropics*. Jamaica: Macmillian Publishers.
- Smitasiri, S., Attig, G. & Dhanamitta, S. (1992). Participatory action for nutrition education: Social Marketing Vitamin A rich foods, in Thailand. *Ecology of Food Nutrition*, 28: 199 - 200
- UNICEF (1997). Oral rehydration therapy: Elixir of Life. *UNICEF Annual Report*. Pp.1 - 41 New York: UNICEF.
- Valyaservi, A. and Attig, G. (1994). Nutrition Communication in South and East Asia: Experiences and Lessons Learned. *Food, Nutrition and Agriculture, Alimentation*, 25-29 F.A.O.
- Woltheim, O. (Sept. - Nov. 1994). Advising Mothers. Dialogue on Diarrhoea: *The International Newsletter on the Control of Diarrhoeal Disease 58: 1 - 8*.