

## A STUDY ON A HEALTH PROJECT APPLIED BY UNICEF

UNICEF TARAFINDAN UYGULANAN SAĞLIKLA İLGİLİ BİR PROJE ÜZERİNDE ÇALIŞMA

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*Maternal and Child Health Center number 11 of the Şentepe quarter of Yenimahalle-Ankara has been carrying out a project under the auspices of UNICEF. This project has been directed towards the objective of helping the development of shanty towns of Ankara with the cooperations of the Governorship, Mayorship and the Health Directorate of Ankara.*

*In this respect courses have been held on a variety of subjects related to health for the citizens in the regions in question for a time period of 1.5 months.*

*In this project the level of knowledge of the people of the region concerning matters of health prior and posterior to the informative courses has been studied and the results have been a descriptive research. The data found out have been statistically evaluated.*

*Ankara Yenimahalle Şentepe bölgesindeki 11 No lu AÇS/AP merkezi UNICEF'in yardımları ile bir proje yürütmektedir. Bu proje Ankara Valiliği, Belediyesi ve Sağlık Müdürlüğü'nün ortak çalışmaları ile Ankara'nın gecekodu bölgelerinin kalkındırılmasını amaçlamaktadır.*

*Bu amaçla bölge halkına 1.5 ay süre ile sağlıkla ilgili çeşitli konularda kurslar düzenlenmiştir.*

*Bu çalışmada bölge halkının, verilen eğitim öncesi ve eğitim sonrası sağlıkla ilgili bilgi düzeyleri incelenerek tanımlayıcı tipte bir araştırma yapılmıştır. Elde edilen veriler istatistiksel açıdan değerlendirilmiştir.*

**Keywords:** UNICEF; Education; Health

**Anahtar kelimeler :** UNICEF; Eğitim; Sağlık

### Introduction

Government of the Republic of Turkey and UNICEF have been carrying out a series of model projects comprising the main services to be taken to the shanty towns in Antalya, Adana, Ankara, Şanlıurfa and İstanbul with the contributions of the Government Offices City Health, Education and Social Services Directorates, Municipalities and Universities in these cities(1). The objective of the project is to improve the life standards and the environments of women and children and thus to minimize the big differences between the life standards in cities. Basic variables of the project can be summarized as follows (2-4);

- Foundation of a social sub-structure
- Creative activities designed for women
- Improving the environment
- Maternal and child health services

The project has first been implemented in Antalya and carried out in 1991 under the guidance of Turkish Intersectoral Board for Children's Survival and Development with

the contribution of representatives from a variety of Government Organizations. The project is being carried out in Ankara at the Şentepe neighborhood of Yenimahalle including the total of Çiğdem Tepe, Avcılar quarters with a population of 36 000 and a part of the Şehit Kubilay quarter.

In the development of Maternal and Children's Health Center number 11, Ankara Health Directorate had important contributions in basic health issues such as family planning, vaccination,maternity care, control and care of diary diseases.

Maternal and Child Health Center number 11 has given services and planned courses with 3 physicians, 1 dentist and 1 pharmacist on the following subjects;

- Family Planning
- Pregnancy
- Baby Care
- Menopause
- Medicines

In this study the information of the courtiers

concerning the issues of health has been tested statistically with inquiries given before and after the training.

### Materials and Methods

The materials of the study were the questionnaire forms distributed to 52 participants at the training programs held by Yenimahalle Public Training Center for a period of one and half months, from January to April 1995.

In order to test the information levels of participants these inquiry forms with 36 questions were distributed to them before and after the training programme. The findings were evaluated in percentage and by means of  $X^2$  (Chi-square) significance test (5,6).

### Results and Discussion

The results of this study according to the courtiers' educational levels are shown in Tables 1-10. According to the results of this study educational levels of courtiers' between 15-41 ages were; 69.2% primary school, 26.9% secondary school and 3.8% high school graduates.

Table 1. Distribution of courtiers' knowledge on family planning

	Knowledgeed	Not knowledged	TOTAL
Primary School	22 61.1%	14 26.9%	36 69.2%
Secondary School	7 50.0%	7 50.0%	14 26.9%
High School	2 100.0%	-	2 3.8%
TOTAL	31 59.6%	21 40.4%	52 100.0%

$$X^2=7.00 \quad P>0.05$$

59.6% of the courtiers had knowledge about family planning while 40.4% unfortunately had no information (Table 1) and 51.9% used no method against pregnancy (Table 2). Yet 53.8% knew that they had to consult a doctor if they decide to use a method. Only 32.7% of the pregnant women cared for nutrition during pregnancy. There has been a significant difference between the pregnancy care and the education levels of women ( $P<0.001$ ).

Table 2. Distribution of courtiers' using methods for birth conrol

	No Respond	Using	Not Using	TOTAL
Primary School	12 33.3%	6 16.7%	18 50.0%	36 69.2%
Secondary School	5 35.8%	1 7.1%	8 57.1%	14 26.9%
High School	-	1 50.0%	1 50.0%	2 3.8%
TOTAL	17 32.7%	8 15.4%	27 51.9%	52 100.0%

$$X^2=9.91 \quad P>0.05$$

75% of the women with children knew that they had to visit a doctor when their babies were sick. 92.3% of the people interviewed during the survey were found to use medicine

Table 3. Distribution of sick courtiers' drug selection

	Taking doctor's advice	Taking pharmacist's advice	TOTAL
Primary School	35 97.2%	1 2.8%	36 69.2%
Secondary School	11 78.6%	3 21.4%	14 26.9%
High School	2 100.0%	-	2 3.8%
TOTAL	48 92.3%	4 7.7%	52 100.0%

$$X^2=5.15 \quad P>0.05$$

Table 4. Distribution of courtiers' preference for the remaining part of the used drugs

	To give to another person	To discard	To save	TOTAL
Primary School	2 5.6%	19 52.8%	15 41.7%	36 69.2%
Secondary School	-	3 21.4%	11 78.6%	14 26.9%
High School	-	1 50.0%	1 50.0%	2 3.8%
TOTAL	2 3.8%	23 44.2%	27 51.9%	52 100.0%

$$X^2=8.65 \quad P>0.05$$

after consulting a doctor when they were sick (Table 3). 51.9% of the courtiers kept the remaining medicine after recovery, 44.2% of them discarded and 3.8% gave it to somebody else (Table 4).

47 people out of 52(90.4%) had some knowledge about the side effects of the drugs (Table 5). 88.5% of the courtiers consulted a doctor when they encountered side effects and 11.5% stopped using the medicine immediately.

Table 5. Distribution of courtiers' knowledge on side effects of drugs

	Knownledged	Not knowledged	TOTAL
Primary School	32 88.9%	4 11.1%	36 69.2%
Secondary School	13 92.9%	1 7.1%	14 26.9%
High School	2 100.0%	-	2 3.8%
TOTAL	47 90.4%	5 9.6%	52 100.0%

$$X^2=0.87 \quad P>0.05$$

59.6% of the 52 people kept their medicines in the fridge while 40.4% kept them in special boxes.

69.2% of the people interviewed used analgesics in compulsory cases, 21.2% used in any headache while 9.6% used no analgesics.

Table 6. Distribution of courtiers' habit of using analgesics

	1	2	3	TOTAL
Primary School	10 27.8%	23 63.9%	3 8.3%	36 69.2%
Secondary School	1 7.1%	11 78.6%	2 14.3%	14 26.9%
High School	-	2 100.0%	-	2 3.8%
TOTAL	11 21.2%	36 69.2%	5 9.6%	52 100.0%

$$X^2=11.18 \quad P>0.05$$

1: In any type of headache, 2: In compulsory cases, 3: Not using

(Table 6). In cases of illness with high fever, 80.8% of the courtiers used an antipyretic while 19.2% used an antibiotic together with the fever reducer (Table 7).

Table 7. Distribution of courtiers' behavior for fever-disease

	Taking antipiretic	Taking antipyr.+ antibiotic	TOTAL
Primary School	32 88.9%	4 11.1%	36 69.2%
Secondary School	8 57.1%	6 42.9%	14 26.9%
High School	2 100.0%	-	2 3.8%
TOTAL	42 80.8%	10 19.2%	52 100.0%

$$X^2=9.18 \quad P>0.05$$

71.2% of the courtiers in the survey took care of the vitamin amounts in their daily diets (Table 8). 38.5% had more of dairy products and eggs while 34.6% had more vegetables. There has been a significant difference between the courtiers in terms of the education level and the food in daily diets ( $P<0.001$ ).

Table 8. Distribution of cortiers' attention to the level of vitamins in diet

	Attentioned	Not attentioned	TOTAL
Primary School	30 83.3%	6 16.7%	36 69.2%
Secondary School	6 42.9%	8 57.1%	14 26.9%
High School	1 50.0%	1 50.0%	2 3.8%
TOTAL	37 71.2%	15 28.8%	52 100.0%

$$X^2=8.94 \quad P<0.05$$

55.8% of the 52 people in the survey brushed their teeth twice a day (Table 9). When these findings were compared with the education levels there has been a significant difference ( $P<0.001$ ).

Table 9. Distribution of courtiers' habit of brushing teeth daily

	Once	Twice	Three times	None	TOTAL
Primary School	7 19.4%	22 61.1%	4 11.1%	3 8.3%	36 69.2%
Secondary School	5 35.7%	6 42.9%	2 14.3%	1 7.1%	14 26.9%
High School	1 50.0%	1 50.0%	-	-	2 3.8%
TOTAL	13 25.0%	29 55.8%	6 11.5%	4 7.7%	52 100.0%

$$X^2=49.15 \quad P<0.001$$

65.4% of the courtiers knew that menopause was not an illness (Table 10).

Table 10. Distribution of courtiers' on response to menopause

	Menopause is a disease	Menopause is not a disease	TOTAL
Primary School	15 41.7%	21 58.3%	36 69.2%
Secondary School	3 21.4%	11 78.6%	14 26.9%
High School	-	2 100.0%	2 3.8%
TOTAL	18 34.6%	34 65.4%	52 100.0%

$$X^2=15.03 \quad P<0.05$$

When the courtiers were asked the same questions after the training program, it was observed that there were 12% correction in their previously noted misinformation.

According to these findings and analyses, the tendency of the courtiers' caring more about their health and their levels of health informations has increased after the program.

Finally, it can be said that such training programs need to be continued with a better survey among the participants in terms of their preference of subject.

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