

Department of Primary Health Care, FHCS/EUSL

Field based Project Analysis:

Sixth Batch(2011/2012) - No of Students : 43

Introduction

The Department of Primary Health Care (PHC), at its inception, planned to have field based projects based on the curriculum (PH 14). This module was initially adopted for this purpose. The components in the field based projects were identified as Community Activity (CA), Family Attachment (FA), Community Clerkship (CC) as well as research.

Community Activity (CA)

This project was carried out in a selected area, as a trial with the guidance of Dr.K.Arulanandem, Coordinator of PHC. The 6th batch of students who were with much enthusiasm and commitment carried out this project successfully in Manmunai North Divisional Secretary division at Palameenmadu GN division on 17th of November 2011.

| Population group | Selected Topic |
|--|-------------------------|
| Mothers of under 05 years old children | Malnutrition |
| Students of Grade 6 – 11 | Tobacco Prevention |
| Students of Grade 11 | Nutrition |
| Fisherman community | Alcohol Prevention |
| Elders | Elder wellbeing |
| Village common public | Dengue prevention |
| Adult Females | Breast Cancer awareness |

*Each member in a student group was instructed to perform on selected health problem in the population.

Results

The students performed the activities successfully on individual basis in their groups. The description of the project has been tabulated below.

It was reported under the subheading of introduction and rationale, objectives, approaches, achievements and setbacks. The students had documented their prepared leaflets, photographs for evidence.



Group 01 - Health Awareness program

| Group Members | Covered Topics | Outcomes |
|---------------------|-----------------------|---------------------------|
| 1. D.P.N.Sanjeevani | Prevention of Alcohol | - Discussed that how |
| 5 | | |
| 2. W.P.R.Erangika | related harms among | alcohol affects human |
| 3. S.Thasanthy | Fishermen community | health |
| 4. R.M.S.Rathnayake | | - Discussed about media |
| 5. A.L.M.Mahir | *Leaflet | influence on alcohol |
| | | promotion |
| | | - Enabled them to feel |
| | | that how much they |
| | | spend for alcohol |
| | | - Measured their BP and |
| | | identified the risk group |
| | | and ask them to follow |
| | | the clinic |

Group 02 - Health awareness and Distribution of health related goods.

| Group Members | Covered Topics | Outcomes |
|---------------------|----------------------|--------------------------|
| 6. PCN.Perera | Promotion of Hygiene | -Used two games to the |
| 7. R.Thusani | and Sanitation | children understanding |
| 8. ARW.Sifran | | about hygiene practices |
| 9. KGDC.Ekanayake | | 1. Loodo |
| 10. KGDC.Ekanayake | | 2.Musical Chair |
| 11. AMM.Madusani | | -improved knowledge |
| 12. PRPM.Paranagama | | about good hygiene |
| | | practices |
| | | - gave awareness and |
| | | knowledge about negative |
| | | outcomes of bad hygienic |
| | | practices and poor |
| | | sanitation. |



Group 03 - Health awareness program

| Stoup 05 Theath dwareness program | | | | |
|-----------------------------------|------------|------|--------|------------------------|
| Group Members | Covered To | pics | | Outcomes |
| 13. S.Mayura | Promotion | of | Elders | -Did screening program |
| 14. P.Pavithera | Wellbeing | | | for BP, Eye checkup, |
| 15. R.M.M.E.Rathnayake | | | | Capillary Blood sugar |
| 16. J.A.P.Anuradh | | | | checkup |
| 17. S.M.S.K.Galagoda | | | | -Discussed about |
| | | | | HT and BP and |
| | | | | empowered them to |
| | | | | overcome DM and HT |

Group 04 - Health awareness program

| Group Members | Covered Topics | Outcomes |
|--|--|---|
| 18. Chamalka Abeykoon119. Nilaksi Sivalingam120. P.M.Sirisena1 | Promotion of strategies to prevent endemic and possible epidemic diseases | -Gave awareness about Dengue, early diagnosis and treatment |

Group 05 - Health awareness program

| Group Members | Covered Topics | Outcomes |
|------------------------|-----------------------|------------------------|
| 24. S.Mayura | Prevention of Tobacco | -Gave Knowledge the |
| 25. P.Pavithera | | harms of Tobacco usage |
| 26. R.M.M.E.Rathnayake | | -Gave knowledge about |
| 27. J.A.P.Anuradh | | how media influence |
| 28. S.M.S.K.Galagoda | | tobacco use among each |
| | | age group population. |
| | | |

Group 06 - Health Promotion awareness program

| Group Members | Covered Topics | Outcomes |
|--|--|---|
| 29. NMST.Navarathna30. MRN.Nashana31. AF.Rafaha32. HAH.Eranda33. AMF.Samrina | Awareness Program on Non- Communicable Diseases | -Calculated BMI to participated population -Gave knowledge about correct amount of sugar ,salt and oil that need to consume per day by a healthy person. |



Group 07 - Health Promotion awareness program

| Group Members | Covered Topics | Outcomes |
|---|--------------------------------------|--|
| 34. P.Luxchanya 35. ABF.Rukshana 36. RF.Hasnas 37. WMDGK.Weerasinghe 38. JMSR.Jayasighe | Awareness Program on Malnutrition | -Gave knowledge about CHDR to mothers -measured wait of all the children who participated and identified the children who are underweight -empowered Mothers to overcome their children from Malnutrition and also gave knowledge about that. |

Group 08 - Health Promotion awareness program

| Group Members | Covered Topics | Outcomes |
|-------------------|---------------------------|------------------------------|
| 39. TMSD.Silva | Awareness Program on Non- | -Gave knowledge about Breast |
| 40. ABF.Rifka | Communicable Diseases | cancer |
| 41. V.Niroshanth | | 1.Symptopms |
| 42. AGIU.Jayalath | | 2.Cause Factors |
| 43. GGL.Sarange | | 3. How to overcome |
| | | |
| | | |



Conclusion:

This program has created much awareness among School population and community participants while the program led to develop skills among students in imparting valuable health related messages in community settings. The department is in the position to appreciate the team.

The students have clearly achieved the student learning objectives of the field based project module while fulfilling the following:

- 1. Exhibited leadership skills and team spirit to function as a doctor in community settings.
- 2. Developed and maintained personal characteristics and attitude for a career as a health professional.
- 3. Learned to plan and implement intervention to improve health awareness, health related behavior and control of communicable and non-communicable diseases.
- 4. Demonstrated communication skills in interacting with people in relation to health and disease.

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Department of Primary Health Care

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