Designing A Social Norms-Based Intervention To Reduce Anemia in India: A Formative Research Protocol

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BACKGROUND

Anemia

- characterized by an insufficient number of red blood cells which are needed to circulate oxygen to vital organs
- 1.62 billion people are affected globally (25% of the population)
- mostly made up of non-pregnant women
- more than half of women of reproductive age in India are anemic
- associated with increased risk of preterm delivery, higher maternal mortality and contributes to fatigue which affects women’s work productivity

- The World Health Organization (WHO) recommends daily oral iron and folic acid (IFA) supplements during pregnancy
- weekly supplements for women of reproductive age
- Despite government programs, both initial uptake and compliance of IFA remain low

- Important determinants: economic and gender inequalities
- Barriers to IFA uptake: knowledge, perceived side effects, poor quality diet, social networks, and social norms

- To our knowledge, this is the first social norms based intervention designed to reduce anemia

PROPOSAL

Our research team proposes to examine why IFA supplement use is low despite recommendations from the government and existing programs promoting its uptake and which existing social norms promote or hamper uptake. After analyzing the results, we will hold a convening in India with stakeholders, participants, interventionists, and researchers to collaboratively design the intervention. Following the intervention design, we will test various components of the intervention, gather user feedback and make edits as necessary.

METHODS

- **Location:** Odisha, India
- **Theory:** Theory of Normative Social Behavior (TNSB)
- **Method:** Mixed-Method Approach
  - Focus group discussions, in depth interviews, Participatory Ethnographic Evaluation and Research (PEER) interviews, observations, and perceptual mapping techniques
  - **Sample:** Reproductive age women (both pregnant and not pregnant), their husbands, their mothers/in-laws, women’s self-help group leaders, local health officials, and health care providers
  - **Length:** The formative assessment will be conducted from March to December 2018. Findings from these pilot evaluations will inform and refine the final intervention, which will be developed by December 2018.

FIGURES

- A photo of women of reproductive age from a village in Angul
- A medicine store that sells IFA where we conducted structured observations

REFERENCES


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