

MDGs and SDGs

Mothers teaching mothers: Decreasing childhood diarrhea in rural Uganda

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Background: Diarrheal-related diseases are the second leading cause of postneonatal deaths in children under five years worldwide. Per the World Health Organization, 18.2% of deaths in children under five in Uganda were attributable to diarrhea in 2014. We conducted a needs assessment and developed an educational intervention for mothers aimed to decrease risk factors for childhood diarrhea.

Methods: Conducted at Mpigi Health Center IV in rural Uganda, this three-part study involved: a pre-test to understand childhood diarrhea prevalence and current hand hygiene and food preparation practices; an educational session with women learning and demonstrating proper hygiene techniques; and a post-test to assess mothers' desire to augment household practices. One hundred mothers or female caretakers of small children were approached via convenience sampling, and written, informed consent was obtained. Chi-squared tests were performed to examine household hygiene practices versus childhood diarrheal prevalence.

Findings: Of the 100 women who participated, 67 were mothers, and 39.3% (n = 26) of their children had had diarrhea in the past six months. Of mothers who washed their hands with water only after using the toilet, 21 (48.8%) of their children had diarrhea compared to five (21.7%) children of mothers who washed with soap and water after toileting (p = 0.032). Children of mothers who always washed their hands prior to cooking had less diarrhea compared with those who did not (5[33.3%] vs. 21[41.1%], p = 0.03). Only seven children were reported to always wash their hands after toileting. One hundred women participated in the educational intervention to demonstrate proper hand washing techniques and practice. The post-test found that over 70% of all participants felt that they would change their hand hygiene, food preparation, and cooking utensil use; however, only 56% of respondents felt they would change their children's hand hygiene.

Interpretation: Mothers teaching each other proper techniques for hand washing and food preparation may mitigate known childhood diarrheal risk factors, as most of the women were eager to learn how to prevent diarrhea. However, continued research needs to be done to see if household changes were implemented and sustained.

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Tobacco growing and the United Nations post-2015 development agenda: The example of Malawi

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Background: The negative impact of tobacco is not limited to its consumption but also includes its production, which has mostly moved to lower and middle income countries (LMICs), and has effects beyond those on health. Malawi, the world's largest producer of burley tobacco, and one of the poorest countries in the world, is particularly hard-hit by multiple negative consequences of tobacco. In countries like Malawi, tobacco control does not primarily mean control of tobacco consumption, but rather the control of the supply chain of tobacco. The issues are not only those of preventing tobacco-related diseases and deaths but include a country's economic dependence on tobacco, its negative health impact related to tobacco growing, families trapped in a cycle of poverty, and environmental degradation.

Methods: We review the negative impacts of tobacco cultivation on a country. We use Malawi, the economically most tobacco-dependent country in the world, as an example of the issues that need to be tackled in the health, economic, social, and environmental realms in African tobacco-growing countries. We place these problems in the context of the UN Post-2015 Global Development Agenda and the Sustainable Development Goals (SDGs). We discuss how low-resource tobacco producing countries stand to benefit from being part of that agenda.

Findings and Interpretation: Not only do the SDGs give a prominent position to the Framework Convention on Tobacco Control (FCTC) within health-related goal 3 and act as a catalyst for tobacco control, but many of the remaining 16 goals are directly related to the negative effects of tobacco cultivation on development. Being party to the FCTC might not be a sufficient motivator for successful tobacco control implementation in LMICs. However, the FCTC presents a huge incentive to implement the policies embedded in the treaty. The SDGs stress the importance of the implementation of the FCTC and offer a new opportunity for LMICs that are dependent on tobacco production, and particularly those that have not yet become FCTC parties – like Malawi – to reconsider signing on to the treaty.

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Bangladesh village health workers: Addressing childhood micronutrient deficiencies

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Program/Project Purpose: In Bangladesh, the 2012 under five mortality rate was 44 per 1,000 live births (World Bank, 2013). In rural Chittagong Hill Tracts (CHT), pre-school children are more vulnerable with 51% underweight and 62% anemic compared to national statistics 48% and 49%, respectively. Of these children,