

Summer Training at



**Project Concern International (PCI)/India, (PARIVARTAN)
Bihar
(April 3-May 23, 2014)**

**Behavior Changes among Marginalized Community about Early &
Exclusive Breast Feeding and Complimentary Feeding**

**By
Mahesh Kumar Singh**

**Under the guidance of
Mr. N.K. Sharma**

**MBA- Hospital & Health Management (MBA-HM)
2013-2015**

The logo for IIHMR University features a stylized 'i' in a purple square, followed by the letters 'IIHMR' in a large, bold, serif font, and the word 'UNIVERSITY' in a smaller, sans-serif font to the right.
**The IIHMR University, Jaipur
2014**

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CERTIFICATE

This is to certify that **Mahesh Kumar Singh**, student of Post Graduate Programme in Health Management, Institute of Health Management Research, Jaipur, batch 2013 – 15. He has done his summer training for the period of **April 1st to May 31st, 2014 under Project Concern International Patna** under my guidance. During this period he has completed his study as a part of partial fulfillment of the course requirements, recommended for the Post Graduate Diploma in Health and Hospital with specialization in Health Management. Topic of study given, during his summer training was **“Assess behavior changes among marginalized community about Early and Exclusive breastfeeding and Complimentary feeding”**. All the data related to the study is the Primary data. His approach to the projects has been sincere, scientific and analytical.

I wish him all the best for his future endeavor.



Col. (Dr.) Ashok Kaushik

Dean (Academic & Students Affairs)

IIHMR, Jaipur



Mr. N.K. Sharma

Assistant Professor

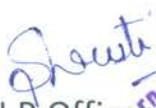
IIHMR, Jaipur

June 6th, 2014

To Whom It May Concern

This is to Certify that Mr. Mahesh Kumar Singh, Student of IIHMR, Jaipur has successfully completed fifty days long (From 3rd april 2014 to 23rd May 2014) internship programme under the guidance of Mr.J B R Chakravarthy, Programme Manager at Project concern International India,Patna Branch. During the period of his internship programme with us he was found punctual, hardworking and inquisitive.

We wish him every success in life


H.R Officer (Private Project)

Project Concern International/India



ACKNOWLEDGEMENT

I extend my sincere thanks to **Dr. Vikash Aggarwal**, Chief of Party of Parivartan Project for the faith shown upon me and allow me to do my summer internship from Project Concern International, Patna.

I also convey my thanks to Dr. S.D. GUPTA, Director, IIHMR, Jaipur and to my mentor Mr. N.K. Sharma, Assistant Professor, IIHMR Jaipur for their unconditional support and guidance throughout during my summer internship.

Most importantly, I would be grateful to Mrs. Rajshree Dash, who gave me an opportunity to work along with her in the project and also for her guidance, support and facilitation which I have received during my internship that gave me an opportunity to understand the Health system. My gratitude also goes to Mr. JVR Chakrabarty and Mr. Brijesh ,Mr. Prakash, for his kind support.

.

Mahesh Kumar Singh

ACRONYMS

BF	Breast Feeding
BEOC	Basic Essential Obstetrics Care
IMR	Infant Mortality Rate
IU	International Unit
IV	Intravenous
MMR	Maternal Mortality Ratio
MoHFW	Ministry of Health and Family Welfare
NGO	Non Government Organization
PCI	Project Concern International
STSC	Skin to Skin Contact
WHO	World Health Organization

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Definitions:-**COLOSTRUM:-**

About the 16th week of pregnancy your body starts producing thick, sticky yellowish milk called colostrum, is anti-body rich and exactly what your baby needs for the first 2-3 days of life. WHO universally recommends colostrum, a mother's first milk or the 'very first food', as the perfect food for every newborn. The sticky, yellowish substance produced by the mother soon after birth is ideal for the newborn - in composition, in quantity and rich in antibodies.

EXCLUSIVE BREAST FEEDING:-

Exclusive breastfeeding has been recognized as an important public health tool for the primary prevention of child morbidity and mortality. Consequently, the WHO and UNICEF have recommended exclusive breastfeeding for the first six months after delivery, followed by introduction of complementary foods and continued breastfeeding for 24 months or more.

COMPLIMENTARY FEEDING:-

The transition from exclusive breastfeeding to family foods, referred to as complementary feeding, typically covers the period from 6 to 18-24 months of age, and is a very vulnerable period. It is the time when malnutrition starts in many infants, contributing significantly to the high prevalence of malnutrition in children under five years of age world-wide. WHO recommends that infants start receiving complementary foods at 6 months of age in addition to breast milk, initially 2-3 times a day between 6-8 months, increasing to 3-4 times daily between 9-11 months and 12-24 months with additional nutritious snacks offered 1-2 times per day, as desired.

INTRODUCTION :- (Organization)

PCI is an integrated health and development organization, working where the need is the greatest—in the poorest communities and least developed nations in the world.

PCI will become a leader in building community capacity, resiliency and self-sufficiency as the preferred partner of private donors, NGO's, communities, businesses and governments.

Parivartan is a 60 month project which is being implemented by PCI-India. Parivartan works to address inequities by ensuring that the poorest of the poor enjoy full access to the same services as all Indian citizens. PCI envisions that the Parivartan model will not only be embraced by and impactful for the target communities, but will also be made sustainable and scalable through systematic documentation, knowledge sharing, diffusion and replication.

Goal

Catalyze collective community action to promote shifts in social norms and behaviour change to increase adoption of key family health and sanitation practices and enhance accountability and equity of health and sanitation services across Bihar by 2016.

Objective:-

- 1: Foster and strengthen community structures in the 8 innovation districts to improve family health and sanitation practices.
- 2: Strengthen accountability mechanisms for health, sanitation and welfare services and schemes through community structures that work to advance equity, service access, quality and utilization in the 8 innovation districts.
- 3: Establish a knowledge base of successful approaches to scale up community mobilization and build partnerships and mechanisms to support state-wide scale up and sustainability of community mobilization interventions.

RESEARCH METHODOLOGY:-

Study approach	Qualitative.
Study type	Exploratory
Study duration	2 Months
Study Area	Saharsha dist.(Bihar)
Population	Marginalized women in the age group 15 y-49 years belonging to SC, ST ,Pasmanda Muslim community.
Sampling Method	Stratified sampling
Sample Size	50 Lactating mothers
Tool	Questionnaire
Data collection technique	Survey

Table no.-1. INFORMATION ABOUT COLOSTRUM FEEDING

	FREQUENCY	PERCENTAGE
YES	50	100

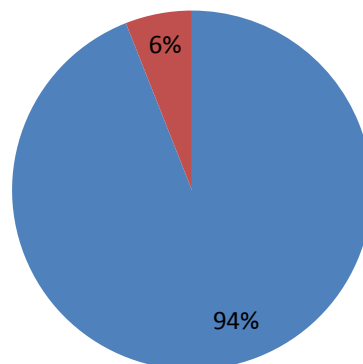
Data shows lactating mothers of group have 100% information about colostrum feeding. They know the importance of first milk for neonates.

Table No.-2. SOURCE OF INFORMATION ABOUT COLOSTRUM FEEDING .

	FREQUENCY	PERCENT
SAHELI	47	94
ASHA DIDI,SAHELI	3	6

Source of information about colostrums**Fig.no:-1**

■ sahelī ■ asha didi,saheli



Majority of lactating mothers of community got information from sahelī workers of about colostrum feeding. Only 6% lactating mothers got information from sahelī as well as asha didi about Colostrum feeding.

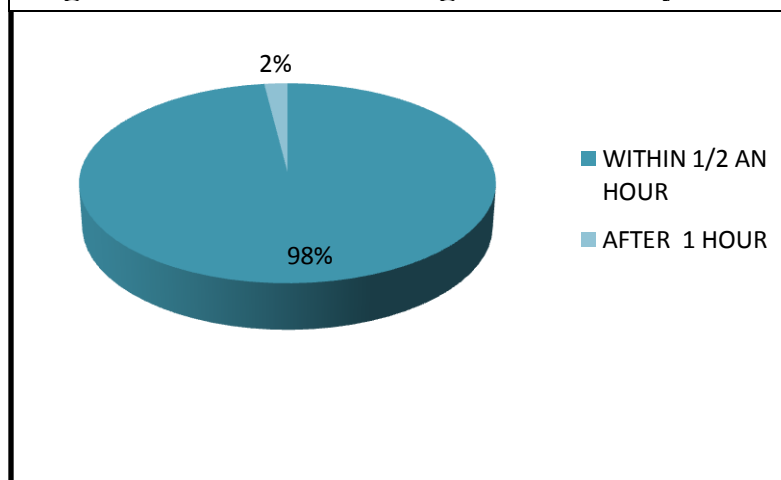
Table No.-3 Colostrum feeding after delivery:-

	FREQUENCY	PERCENTAGE	VALID PERCENT
YES	50	100	100

1. The data shows 100 % awareness about colostrum feeding among marginalizes women in reproductive age and they practiced/ practicing for their child

Table no.4 - Time of colostrum feeding after delivery:-

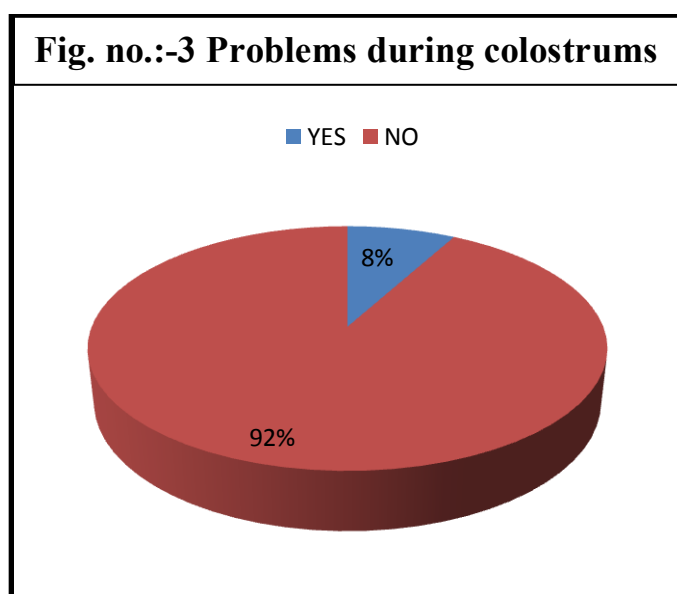
	FREQUENCY	PERCENT
Within 1\2 an hour	49	98
After 1 hour	1	2

Fig no:-2 Colostrum feedig after delivery

98 % lactating mothers of community feed colostrum to their new born baby within 1\2 an hour of delivery. Only 2% lactating mothers of group could not feed colostrum because of some reason.

Table No.5- PROBLEM FACED DURING COLOSTRUM FEEDING:-

	FREQUENCY	PERCENT
YES	4	8
NO	46	92

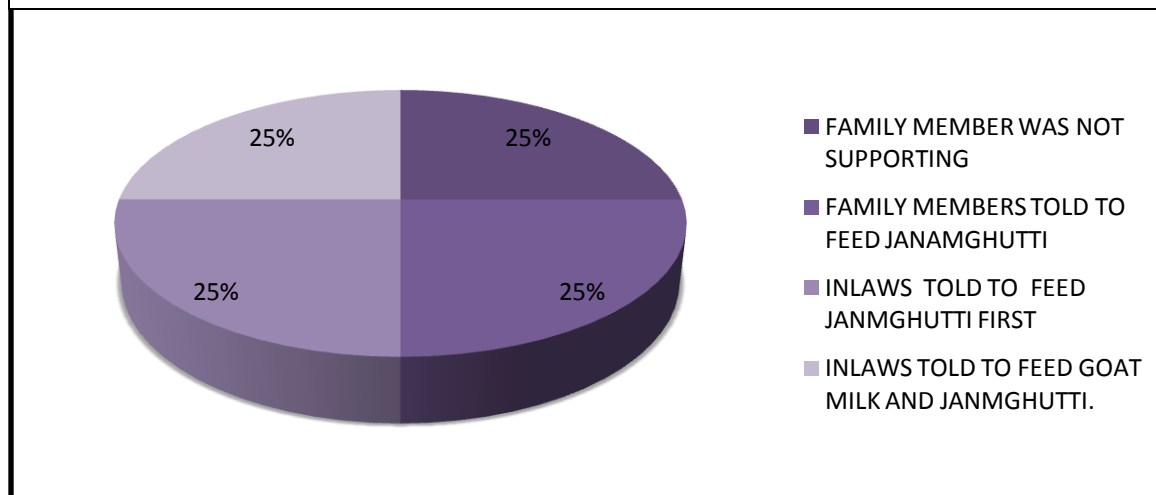


In spite of 100% awareness about colostrum feeding data shows 8% women of marginalized group faced some problem during colostrum feeding.

Table No.:6.IF YES THEN WHAT WAS THAT REASON?

	FREQUENCY	PERCENT
FAMILY MEMBER WAS NOT SUPPORTING	1	2
FAMILY MEMBER TOLD TO FEED JANAMGHUTTI	1	2
INLAWS TOLD TO FEED JANMGHUTTI FIRST	1	2
INLAWS TOLD TO FEED GOAT MILK AND JANMGHUTTI	1	2

Fig.no.-4 Reasons:-



Lactating mother of community are aware about colostrum feeding and its importance but somewhere their family members still give importance to Janamghutti and goat milk. So there is needed to make them understand about the importance of colostrum in the life of neonates.

Table no:-7Information about exclusive breast feeding:-

	FREQUENCY	PERCENT
YES	50	100

Data shows 100 % awareness about exclusive breast feeding.

Table no:-8Source of information about exclusive breast feeding:-

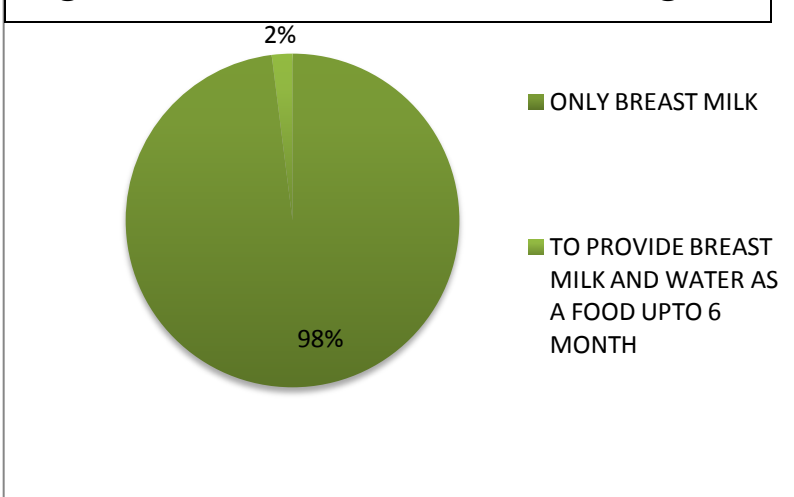
	FREQUENCY	PERCENT
SAHELI	50	

Here data shows 100% information got by community members about exclusive breast feeding through Saheli.

Table no:-9 What is exclusive breast feeding:-

	FREQUENCY	PERCENT
Only breast milk	49	98
Breast milk and water	1	2

Fig.no:-5 what is exclusive breast feeding:-



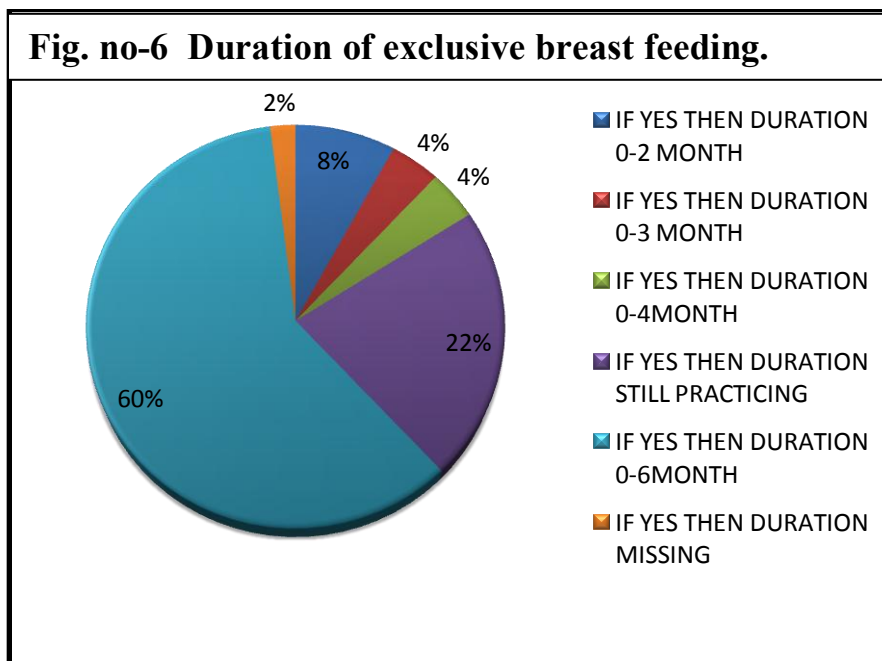
Data shows 100% awareness about exclusive breast feeding.

But here 2% respondent says that exclusive breast feeding is to provide only breast milk and water to child up to 6 month of age.

So there is need to rule out this module among the community time to time by Saheli during meeting of group.

Table no.:-10 Duration of exclusive breast feeding :-

	FREQUENCY	PERCENT	VALID PERCENT
0-2 MONTH	4	8	8
0-3 MONTH	2	4	4
0-4 MONTH	2	4	4
0-6 MONTH	30	60	60
PRACTICING	11	22	22
MISSING	1	2	2



Here data shows after getting information peoples are practicing exclusive breast feeding for their child.

Table no:-11.Frequency of mothers feed breast milk to child in a day:-

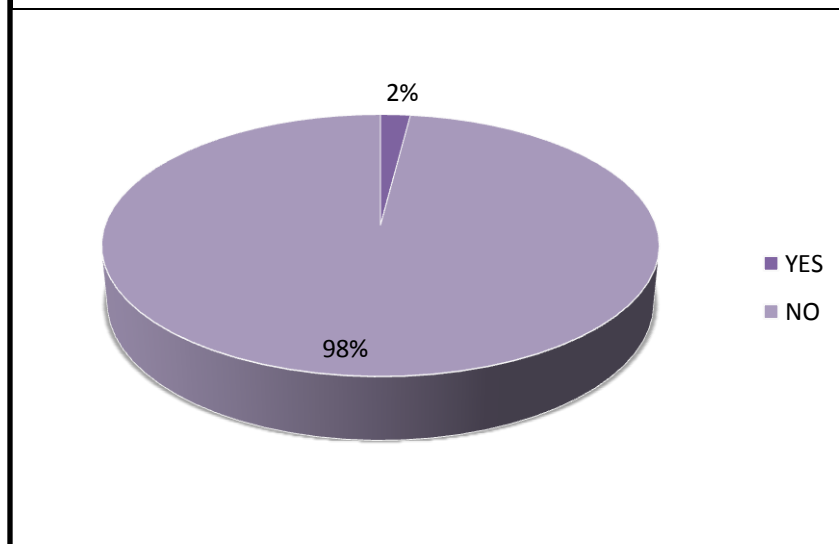
	FREQUENCY	PERCENT
10-12	23	46
12-13	3	6
12-14	1	2
12-15	9	18
15-16	1	2
5-6	1	2
6-7	1	2
7-8	2	4
8-10	2	2
8-12	5	10
8-9	1	2
9-10	1	2

Here data depict majority of peoples of community follows the information that they should feed their baby breast milk at least 10-12 times in a day and very less people are there who feed less than 10-12 times.

Table-no:-12 Problem faced by respondent during exclusive breast feeding:-

	FREQUENCY	PERCENT
YES	1	2
NO	49	98

Fig.no.:-7 Problem faced by respondent-



Data shows very less peoples of community are there who faced some problem during exclusive breast feeding.

Table no:-13 Information about complementary feeding?

RESPONSE	FREQUENCY	PERCENT
YES	50	100

Here data shows lactating mother of community have information about complimentary feeding.

Which type of food they can provide after 6 month of age of their child.

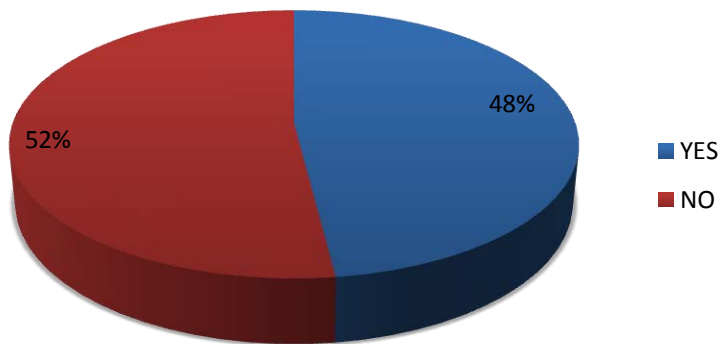
Table no.:-14 Response of mothers regarding source of information:-

	FREQUENCY	PERCENT
SAHELI	50	100

Here sahelis are the source of information about complimentary feeding.

Table no.:-15 Response of mothers regarding complimentary feeding:-

	FREQUENCY	PERCENT
YES	24	48
NO	26	52

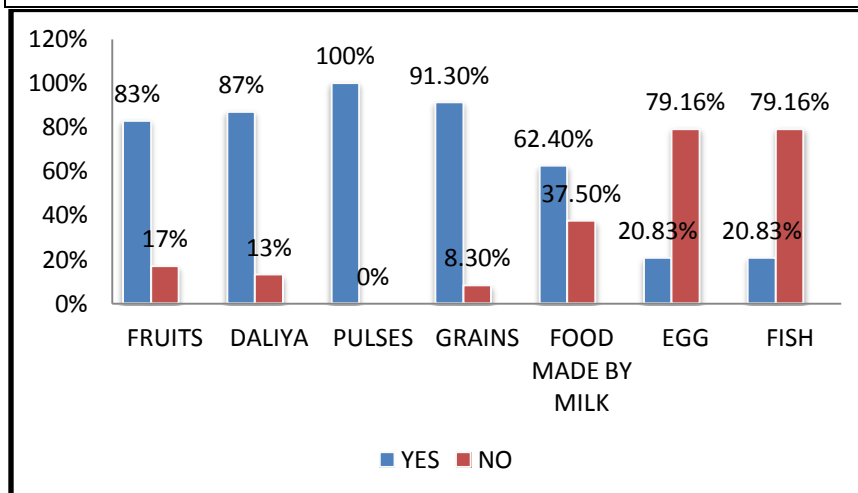
Response of mothers(complimentary feeding)**Fig.no:-8**

Here data shows 48% of the people of community provide their baby complimentary food. 52% peoples of community are there who don't provide complimentary food.

Table no:-16 Preferences of mothers regarding various food items incorporate into complimentary feeding:-

ITEMS	YES	NO
FRUITS	83 %	17%
DALIYA	87%	13%
PULSES	100%	0%
GRAINS	91.6%	8.3%
FOOD MADE BY MILK	62.4%	37.5%
EGG	20.83%	79.16%
FISH	20.83%	79.16%

Fig.no:-9 complimentary foods-



Here data shows what the community people generally give their baby as a complimentary food.

Majority of peoples gives fruits, daliya, pulses; grains very less peoples provide egg and fish as a complimentary food to their Childs.

FOR PREGNANT MOTHERS:-

Table-no:-17 Information about early and exclusive breast feeding and complementary feeding:-

	FREQUENCY	PERCENT
YES	23	46
MISSING	27	54

Data shows 100% awareness about early, exclusive breast feeding & complimentary feeding among pregnant mother of community.

Table-no:-18 Source of information:-

	FREQUENCY	PERCENT
SAHELI	23	46
MISSING	27	54

Pregnant mothers of community got all information regarding early exclusive breast feeding and complimentary feeding from saheli.

Table- no.-19 Response of mothers they would like to follow information about colostrums feeding or not:-

	FREQUENCY	PERCENT
YES	23	46
MISSING	27	54

Pregnant mothers of community have all information about early, exclusive breast feeding and complimentary feeding and they knows the importance of that. So all pregnant mothers would like to follow that all information for their upcoming child.

COLLECTIVE ACTION:-

Table no.:-20 Information about early ,exclusive and complimentary feeding to family members:-

	FREQUENCY	PERCENT
YES	19	38
MISSING	31	62

Family members also aware about early exclusive breast feeding and complimentary feeding.

Table NO.:-21 Changes in the behavior of group members:-

	FREQUENCY	PERCENT
YES	19	38
MISSING	31	62

Data shows 100% behavior changes among community about early exclusive breast feeding and complimentary feeding.

CONCLUSION:-

During field visit the groups whom i visited so much aware about early and exclusive breast feeding and complimentary feeding.

They knows the importance of breast milk and complimentary food.

But in some groups few lactating mothers was not that much aware as good as other members of same group were aware.

Mostly the people of marginalized community got information about early, exclusive breast feeding and complimentary feeding from saheli didi, only few people are there who got information from ASHA as well Saheli. Before getting information they generally use janamghutti, goat milk etc to their baby just after birth but after getting information most of the people practicing early, exclusive breast feeding and complimentary feeding for their child.

But still few peoples are there who gives the importance to feed Janamghutti and goat milk.

Because, lactating mothers have information about early exclusive breast feeding but somehow they could not convince their family members about it.

About complimentary feeding people provide everything to their child other than egg and fish. Only few peoples are there who use fish and egg as a complimentary food for their child.

Sahelis are working well at their level. But there is need to rule out PM3 module time to time among community members during meeting

REFERENCE:-

- 1.Fewtrell MS (2004)** The long-term benefits of having breast-fed.
- 2.World Health Organization (2003)** Global strategy for infant and young child feeding.
- 3.“Phatak Arun” , and “Gupta Arun”** Recommended Duration of Exclusive Breastfeeding and Age of Introduction of Complementary Foods.
- 4.Madhu k., Chowdary Sairam and Masthi Ramesh,** “Breast Feeding Practices and Newborn Care in Rural Areas”.
- 5.Pathak Arun(MD Pd), Gupta Arun MD,** “Recommended Duration of Exclusive Breastfeeding and Age of Introduction of Complementary Foods.”



QUESTIONNAIRE

DISTRICT NAME- _____ DISTRICT CODE _____

BLOCK NAME _____ VILLAGE- NAME _____

GROUP NAME _____ GROUP I.D. _____

PERSONAL- INFORMATION

NAME-	CASTE-
AGE-	EDUCATION LEVEL-

Informed Consent

नमस्कार / प्रणाम |

मेरा नाम महेश कुमार सिंह है ,और मैं अपने शिक्षा के दौरान प्रोजेक्ट कन्सर्न इंटरनेशनल से दो मास की ट्रेनिंग में शिघ्र एवं केवल स्तनपान तथा उपरी आहार से संबंधित व्यावहार के साथ साथ परिवर्तन समूह में आपकी भागीदारी को सीखने का प्रयास कर रहा हू। इस प्रक्रिया में केवल 15 – 20 मिनट लगेंगे और इस दौरान हम आपसे शिघ्र एवं केवल स्तनपान तथा उपरी आहार से संबंधित प्रश्न पूछेंगे | आपके द्वारा दिए गए उत्तर अन्य परिवारों द्वारा दिए गए उत्तरों के साथ रखा जाएगा | यह पूरी तरह से गोपनीय है और परियोजना के बाहर के किसी को नहीं दिखलाई जाएगी | आपका नाम और आपकी पहचान पूरी तरह से गोपनीय रखी जाएगी | इस सर्वेक्षण में आपकी भागीदारी स्वैच्छिक है | अगर आप किसी भी समय भाग लेना नहीं चाहते हैं तो प्रश्नों का उत्तर देना बंद कर सकती हैं | इस सर्वेक्षण में भाग नहीं लेने में कोई हानी नहीं होगी | सर्वेक्षण के दौरान आप किसी भी समय कोई भी प्रश्न पूछ सकते हैं |

क्या आप इस सर्वेक्षण में भाग लेना चाहते हैं | हां () नहीं()

नवजात शिशु को माँ का पहला दूध पिलाने से सम्बंधित:-

(1.)आपके शिशु की आयु कितनी है?

(2.)क्या आपको पहले दूध (खिरसा) के विषय में संपूर्ण

जानकारी है?

(2.1)यदि हाँ, तो आपको इस विषय में जानकारी किससे मिली?

(i) सहेली से

(ii) आशा दीदी से

(iii) किसी स्वास्थ्यकर्ता से

(iv) किसी परिचित से

(3.) क्या आपने अपने शिशु को जन्म के तुरंत बाद अपना दूध

पिलाया था?

(3.1) यदि हां तो जन्म के कितने समय पश्चात :-

(i) जन्म के ½ घंटे बाद

(ii) जन्म के 1 घंटे बाद

(iii) जन्म के 2 घंटों बाद

(4)क्या आपको इस दौरान किसी समस्या का सामना करना पड़ा था ?

(4.1) यदि हाँ तो क्या ?

(5.) और यदि अपने जन्म के तुरंत 1/2 घंटे बाद अपना पहला दूध नहीं

पिलाया था, तो उसका कारण क्या था ?

0-6 माह तक केवल स्तनपान करने से सम्बंधित :-

(1.) क्या आपको 0-6 माह तक के नवजात शिशु के खानपान के विषय

में कोई जानकारी है ?

(1.1) यदि हाँ, तो आपको इस विषय में जानकारी किससे मिली?

(i) सहेली से

(ii) आशा दीदी से

(iii) किसी स्वास्थ्यकर्ता से

(iv) किसी परिचित से

(2.) क्या आप मुझे बता सकती हैं कि नवजात शिशु को 0-6 महीने

तक आहार के रूप में क्या देना चाहियें?

(i) माँ का दूध व पानी

(ii) माँ का दूध और पानी के साथ कुछ मसले हुए नरम आहार

(iii) सिर्फ माँ का दूध

(3.) क्या आपने शिशु के आहार से सम्बन्धित इस जानकारी का पालन

अपने शिशु के लिए किया ?

(4.) यदि हाँ तो कितनी अवधि तक ?

(i) 0-2 महीने तक

(ii) 0-3 महीने तक

(iii) 0-4 महीने तक

(iv) अभी भी कर रही है।

(5.) आप अपने शिशु को 24 घंटे में कितनी बार स्तनपान करती हैं?

(6.) आपको इस दौरान कोई समस्या आई ?

(6.1) यदि हाँ तो क्या ?

(7.) यदि आपने शिशु के आहार से सम्बन्धित इस जानकारी का पालन

अपने शिशु के लिए नहीं किया, तो इसका कारण क्या था ?

शिशु के उपरी आहार से सम्बंधित :-

(1.) क्या आपको शिशु के उपरी आहार से सम्बंधित जानकारी है।

(2.) यदि हाँ, तो आपको इस विषय में जानकारी किससे मिली?

(i) सहेली से

(ii) आशा दीदी से

(iii) किसी स्वास्थ्यकर्ता से

(iv) किसी परिचित से

(3.) आप अपने शिशु को अपने दूध के साथ उपरी आहार के रूप

में क्या देती हैं:-

- पके हुए फल
- दलिया
- दालें
- अनाज
- दूध से बने पदार्थ
- अंडा
- मछली
- फलो का रस

गर्भवती महिला :-

(1.)क्या आपको माँ के पहले दूध के विषय में सम्पूर्ण जानकारी है?

(2.)क्या आपको 0-6 महीने के शिशु के आहार से सम्बंधित

संपूर्ण जानकारी है?

(3.)क्या आपको 6 महीने से ऊपर के बच्चों के आहार से सम्बंधित

संपूर्ण जानकारी है?

(4.)यदि हाँ, तो आपको इस विषय में जानकारी किससे मिली?

(i) सहेली से

(ii) आशा दीदी से

(iii) किसी स्वास्थ्यकर्ता से

(iv) किसी परिचित से

(5.)क्या आप समूह से मिली नवजात शिशु से सम्बंधित सभी जानकारीयों

का पालन अपने होने वाले बच्चे के लिए करना चाहेंगी?

(5.1) यदि नहीं क्यों नहीं ?

समूह के अन्य सदस्य:-

(1.) अगर समूह के किसी सदस्य को स्तनपान में कोई दिक्कत आई

तो अपने उन्हें नर्स दीदी से सहायता दिलवाई ?

(2). क्या अपने सभी परिवारों को तुरंत ,केवल ,लगातार स्तनपान एवं उपरी आहार के लाभों

के बारे में संपूर्ण जानकारी दी ?

(3.) क्या आपने समूह के सदस्यों में स्तनपान या शिशु के उपरी आहार से

सम्बंधित कोई बदलाव का अनुभव किया?

(4.) यदि नहीं तो क्यों नहीं? क्या आप इसका कारण बता सकते हैं?