

Infant and Young Child Feeding Counselling Specialists Training

Date: 24th- 30th April 2016

Course Director:- Dr. MMA Faridi.

National Trainers:- Dr. MMA Faridi, Dr. Anita Gupta, Ms. Purna Bhardwaj and Ms. Vibharika Chandola.

Training Coordinator: - Fariha Siddiqui.

Venue: - UCMS & GTB Hospital and College, Delhi.

No. of IYCF Counselling specialist Participants :- 22

This training course was started from 24th April 2016. There were 22 participants who attended the training. This training course was inaugurated by Dr. MMA Faridi HoD Paediatric Department, GTB Hospital, Delhi. Day one of the training also started with Dr. Faridi who discussed the local IYCF situation and practices. Before the commencement of the sessions, participants were given a standard questionnaire as a Pre intervention test to assess the present knowledge levels. The questionnaire comprised of 27 multiple choice and detail questions based on the subject. This phase was led by the four National Trainers (Resource Persons) of BPNI. Here the participants were explained about the course objectives, training methodology, training kit and training tools. They were explained about the differences between teaching and training, principles of adult learning and attributes of organizing such trainings. The training of seven days duration was conducted by the national trainers which involved 7 counselling skills practice sessions, 31 Theory sessions, 5 Clinical Practice sessions and 2 Practical sessions. All clinical practices where the participants had to practice counselling skills with new born baby and mother pair were conducted in GTB, Hospital.

The training course was divided into different sessions, which were distributed amongst the four national trainers. The national trainers used the 'Trainer's Guide to impart the training. The training course has been developed keeping in mind the principals of adult learning. The different ways that were used to conduct the sessions in an interactive manner are explained below:

- ❖ **Didactic Lectures using Power point presentations:** Majority of the sessions like 'What is the need for *Optimal Infant and Young Child Feeding*', '*Production and Intake of breast milk*', Different kinds of '*breast conditions*', Reasons for '*baby's refusal to breastfeed and crying*', Need and Importance of '*Complementary Feeding and how one can fill the nutrient gaps*', '*Breastfeeding in Special circumstances especially HIV*', '*Growth Monitoring*' etc. All these sessions were conducted using the power point presentations. These sessions were conducted with an aim to widespread the immense knowledge about Infant and Young Child Feeding. This way the complete theoretical content of the subject was explained to the participants in a very interactive manner.
- ❖ **Demonstration Sessions:** Few sessions were being planned in a more participatory manner wherein the counselling skills were taught to the participants using innovative demonstrations. These demonstrations made the topic easier to understand in an interesting way. Especially the

skills based sessions like '*Listening & Learning*', '*Building Confidence and Giving Support*', how to '*Position baby at the breast*', '*Feeding techniques and strategies* that a care giver should adopt while feeding a child, etc were taught using the demonstration technique.

- ❖ **Enacting Role-plays to convey important information and messages:** To convey important information and messages, trainers enacted the role-plays in front of the group. Such a method is useful for practicing skills like counselling and for exploring how people react in specific situations. The role-play's objective was to lead to an attitudinal change dealing with feeling and emotions. Role-plays have many advantages like: - The trainees get involved in problem solving; active participation of trainees stimulates interest and helps in understanding and developing behaviour of self and others. The sessions which have the role-plays as their backbone are: how is it possible for a '*working mother to breastfeed*', '*Growth Monitoring: Take Action*', '*institutionalizing skilled Infant and Young Child Feeding Counselling*' etc.
- ❖ **Clinical Practice:** Certain practice sessions required working in the clinical settings that were conducted in the hospital premises of Paediatric/ Gynaecology ward and OPD of hospitals near the respective regional centres. In order to conduct these sessions in a more helpful manner, the participants were divided into four groups, comprising of around 6 participants per group. One National Trainer of BPNI led every group.

In these clinical practice sessions, participants got a chance to work with the mother-baby dyad at the bedside. This helped them to understand how they can use their skills and counsel a mother about the real importance of breastfeeding. The participants were also taught how they can help mothers practically to understand the correct attachment and positioning of a baby, which leads to successful breastfeeding. As already taught in the previous sessions, the participants tried using all their Communication skills in order to learn how to assess and observe a breastfeed and take the child's feeding history from the mother recording feeding habits of a child using a 24 hour dietary recall form and take weight and length (growth measurements) of the child in real situation, plotting them on the growth charts. They were asked to use all the forms that were provided to them. With the help of all this the participants had to finally counsel the mothers on the child's actual growth status, especially motivating the mothers to breastfeed the child exclusively for the initial 6 months, starting with the complementary feed after 6 months and continuing breastfeeding for 2 years and above.

After returning back from each clinical practice session, a detailed discussion was conducted. Using a discussion checklist, the trainers and participants shared the experiences and difficulties faced at the wards. These discussion sessions have been planned to understand the different experiences from each group. During this session the participants were praised for what they did well and encouraged towards using these skills in subsequent sessions and in their everyday life too. Most participants felt a little hesitant in the first clinical practice while talking to the mothers. By the end of the first phase and having done three clinical sessions they began to feel more confident. These Clinical practice sessions were advantageous as trainees could get hands-on experience on the topic, which they had learnt and discussed, in the previous theoretical sessions.

- ❖ **Practice Sessions:** In these specially designed practice sessions, participants learnt to prepare replacement feeds and complementary foods.

Preparing Replacement Feed: During this session the participants were asked to make the replacement feed as per their groups. Each group was given different heating sources (gas stove, chulah, electric kettle depending on availability at the centers) for boiling the water to prepare the feed and a specific quantity (ml) to prepare. This session helped the participants to understand how difficult it is to prepare milk feed under different circumstances. They could identify what minor

mistakes a mother is likely to make while preparing a feed for e.g. not being able to maintain hygiene (clean hands, clean utensils, clean water and clean surface), improper dilution, which may lead to child sickness and increase the financial burden. The participants could also understand how much time does it take to actually prepare one replacement feed and the cost required to formula feed a child in the long run.

Preparing Complementary Feed : During this session the participants were asked to prepare one complementary feed. This session was also conducted within the groups. All the groups were given different age groups of a child (8 months, 11 months etc.) according to which the participants were asked to prepare the feed. The participants were provided with cooked ingredients from almost all food groups like chapatti, rice, bread, dal, boiled vegetables, milk, curd, egg, oil, butter etc using which they had to prepare one meal. This session helped the participants to understand that it is a matter of concern when we are actually preparing a feed for any child. The participants could understand that there is some specific quantity and consistency that plays an important role while feeding a child. Also it was emphasized during the session that there is a real need to maintain hygiene during all times.

These exercises provided them with a first-hand experience of various logistic needs, time consumption, hygiene requirement etc. in preparing these feeds versus the ease and economic benefit of breastfeeding if compared.

At the end of the training, the Participants were also informed about the utility of the flipbook and explained about how they would use it in the community. This flipbook was provided to them in the training material.

Observations made by the trainers

- The trainers felt that the trainees were quite receptive and ready to learn.
- All the participants were quite hardworking and responsive.
- Participants had some previous knowledge regarding breastfeeding and complementary feeding especially the nutrition counsellors thus they were able to relate to those sessions.
- The group was quite energetic and enthusiastic to learn about IYCF which was motivating for everyone and they all were aware about the seriousness of the issue.
- Most of the participants were already working for IYCF Counselling so they were very enthusiastic for more learning.

Comments from Participants

- Participants said that this is the first training where they are being given in-depth knowledge on a topic. They said that it should be extended to 15 days.
- Few participants especially the Doctors said that they have attended many trainings but this is the first time they are being given an opportunity to practice side by side.
- Participants shared that the counselling skills if they can use in their everyday life would also improve their personality as well.
- All the participants said that after this training they feel confident that they can help mothers especially those who have problems related to breastfeeding or complementary feeding.

- Use cordless mikes instead of wire mikes.
- After completion of training most of the participants give feedback on whatsapp group that IYCF Counselling specialist training is really helpful for most of them and they all were very happy to attend this training and want to do such type of courses in future.

Final Analysis of Pre and Post test questionnaire:-

S.No.	Participants	Pre-Test Score	Post-Test Score
1	Ms. Sangeetha	7	15
2	Ms. Farida Anal	7	20
3	Ms. Prachi Shah	10	26
4	Ms. Simran Doel	17	27
5	Ms. Lalita	11	20
6	Ms. Sangeeta Adlakha	14	25
7	Ms. Princy Thomas	11	24
8	Ms. Sahiba Kohli	17	26
9	Ms. Yogita Tehlan	17	26
10	Dr. Chandrakanta Rani	14	24
11	Ms. Khayati Choudhary	11	23
12	Dr. Avinash Paliwal	19	24
13	Dr. Gunjan Aggarwal	21	27
14	Ms. Sabitha Nayak	13	23
15	Dr. Jatin Chhabra	23	29
16	Dr. Ekta Kalra	21	27
17	Ms. Smriti Ratti Kapoor	13	26
18	Dr. Pranthana Nikhil Kharod	23	27
19	Ms. Shweta Sharma	13	25
20	Dr. Subhash Chandra Prajapat	20	27
21	Ms. Sonal Chhabra	19	26
22	Dr. Jyoti Chhabra	8	21
23	Manisha Patil	14	22
24	Deeksha Sehwal	14	20
25	Pinki	6	20
	Total	363	600
	Total Percentage		

The pre and post test analysis revealed that there was a remarkable difference in the knowledge of the trainees after the training was over. A detailed analysis of the questionnaire and responses is given above.

Glimpses of the Training



