

Effectiveness of the Training Programme on “Infant Feeding Practices” in Terms of Gain in Knowledge of Rural Women

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Paper Received on February 02, 2017, Accepted on March 12, 2017 and Published Online on April 01, 2017

ABSTRACT

The present study was an attempt to assess the effectiveness of the training programme on “Infant feeding practices” in terms of gain in knowledge of rural women as they have lack of awareness and knowledge about proper infant feeding practices. The study was conducted in purposively selected two villages (Rampur Untii, Narvariya) of purposively selected Sanganer Panchayat samiti of Jaipur district. In all 50 rural women (30 from Rampur Untii and 20 from Narvariya) who had at least one child in the age of 0-2 year, were selected as a sample for present investigation. A two days intensive training programme was organized to train selected respondents on “infant feeding practices”. Pre and post-test experimental research design was used for present study. Data were collected through interview method. Findings revealed that, the training programme was found to be very effective in providing knowledge regarding infant feeding practices. Significant improvement in the knowledge of respondents was found as a result of exposure of training, as the pre-test scores increased 37.35 to 58.60 per cent with gain in knowledge of about 21.25 per cent. Study further indicated that age and ordinal position of infant had negative and significant association with their gain in knowledge and type of family and family income were not significantly associated with their gain in knowledge. Education was significantly associated with their gain in knowledge.

Key words: Training effectiveness; Infant feeding practices; Knowledge; Rural Women;

Adequate nutrition during infancy and early childhood is essential to ensure the growth, health, and development of children to their full potential. It has been recognized worldwide that breastfeeding is beneficial for both the mother and child, as breast milk is considered the best source of nutrition for an infant. The World Health Organization (WHO, 2009) recommends that infants be exclusively breastfed for the first six months, followed by breastfeeding along with complementary foods for up to two years of age or beyond. Globally, optimal breastfeeding could prevent 13 per cent of deaths of children aged less than five years while appropriate complementary feeding (CF) practices might result in an additional 6 per cent reduction in under-five mortality, especially in developing countries as ours. Poor feeding practices, coupled with high rates of infectious diseases, are the proximate causes of malnutrition during the first two years of life. The second half of an infant's first year is especially a vulnerable time when breast milk alone is no longer sufficient to

meet his /her nutritional requirements and CF should be started. Importance of breast feeding and complementary feeding was also depicted by Motee *et al.* (2014). According to (WHO), if every child has breastfed within an hour of birth, given only breast milk for their first six months of life, and continued breastfeeding up to the age of two years, about 800000 child live would be saved every year. Globally, less than 40 per cent of infants fewer than six months of age are exclusively breastfed. Adequate breastfeeding counseling and support are essential for mothers and families to initiate and maintain optimal breastfeeding practices.

Moreover previous studies have shown that rural mother have lack of knowledge about proper infant feeding practices and are more traditional bound and are steeped in superstitions, ignorance and false beliefs specially with regard to infant feeding. Mallick (2005) reported that, rural mothers giving food and water to their infants at too early of an age. Motee *et al.* (2013) concluded that, despite a high breastfeeding initiation

rate of 61 per cent, only 18 per cent succeed to give exclusive breastfeeding until 5- 6 months. The mean duration of exclusive breastfeeding is 2 months, with adding water as the main reason for not continuing exclusiveness. Awareness of the health benefits of breastfeeding was noted in 65 per cent, a percentage that may be increased by further breastfeeding education and support. *Saleh et al. (2014)* also reported that, recommended infant feeding practices were not followed in selected slums of Dhaka city. And there was a considerable gap between the recommendations of WHO and the energy intake among this group of children. *Saha et al. (2008)* also depicted that inappropriate feeding practices can have profound consequences for the growth, development, and survival of infants and children, particularly in developing countries. Study suggested that, intervention programs should strive to improve conditions for enhancing current infant feeding recommendations, particularly in low-income countries. *Madhu et al. (2009)* also emphasizes the need for breastfeeding intervention programs especially for the rural mothers. Hence, there was a need to educate rural women about adequate infant feeding practices and training is a medium which can bridge the knowledge gap of rural women.

Training is a planned communication process which result in change of attitudes, skills and knowledge in accordance with specialized objectives relating to desired patterns of behavior. Therefore a two day's training programme was organized for rural women to impart knowledge regarding proper infant feeding practices and their effectiveness was assessed in terms of gain in knowledge of rural women.

METHODOLOGY

The study was conducted in purposively selected two villages (Rampur unti, Nrvariaya) of purposively selected Sanganer panchayat of Jaipur district. In all 50 rural women (30 from Rampur unti and 20 from Narvariya) who had at least one child in the Age of 0-2 year were selected as a sample for present investigation. A two days intensive training programme was organized to train selected respondents on "infant feeding practices". The effectiveness of training was evaluated in terms of gain in knowledge of trained respondents. Pre and post training knowledge about infant feeding practices was measured and compared to draw

inference. Data were collected through pre tested structured interview schedule. Data thus collected were statistically analyzed.

RESULTS AND DISCUSSION

Perusal of data presented in Table1 indicate that in pre-test majority of respondents (70%) had medium knowledge with mean per cent score of 36.64 followed by 16 per cent respondents had low knowledge with mean per cent score of 21.88 and only 14 per cent respondents had high level of knowledge with mean per cent score of 58.57 per cent. The data presented in Table 1 also shows that in post-test majority of the respondents (76%) had medium knowledge with mean per cent score of 56.71 per cent followed by 14 per cent respondents had high level of knowledge with mean per cent score of 80.36 per cent and 10 per cent respondents were possessing low knowledge with mean score 42.50 per cent.

Table 1. Distribution of respondents according to knowledge level in the pre and post test (N=50)

<i>Knowledge level in pre test</i>			
Knowledge score	No.	%	MPS
Low (0-10)	8	16.00	21.88
Medium (11-19)	35	70.00	36.64
High (20-40)	7	14.00	58.57
<i>Knowledge level in post test</i>			
Knowledge score	No.	%	MPS
Low (0-18)	5	10.00	42.50
Medium(19 - 28)	38	76.00	56.71
High(29 - 40)	7	14.00	80.36

Breast Feeding : Table 2 indicate that majority of the respondents 72 per cent were in the category of medium level knowledge with mean per cent score 33.75 per cent and 14 per cent were in the category of high knowledge with mean per cent of 60.71 per cent followed by only 14 per cent were in low knowledge level category with mean per cent score of 11.43 per cent.

Complementary feeding : Table 2 also revealed that majority of the respondents 70 per cent were in the category of medium knowledge with mean per cent score 38.29 per cent and 18 per cent were in the category of high knowledge with mean percent of 66.11 per cent followed by only 12 per cent were in low knowledge level category with mean percent score of 13.33 per cent.

Breast Feeding : Table 3 indicate that majority of the respondents 64 per cent were in the category of medium

level knowledge with mean per cent score 55.47 percent and 14 per cent were in the category of high knowledge with mean per cent of 84.29 percent followed by only 22 percent were in low knowledge level category with mean percent score of 37.73 per cent.

Complementary feeding: Table 3 also depicts that majority of the respondents 70 per cent were in the category of medium knowledge with mean percent score 60.86 percent and 16 per cent were in the category of high knowledge with mean per cent of 84.38 per cent followed by only 14 per cent were in low knowledge level category with mean percent score of 39.29 per cent.

The comparison between pre and post test scores finds out effectiveness of training programme in terms of gain in knowledge. Paired ‘t’ test was applied to find out whether there was significant gain or not in the knowledge level of respondents. Table, 4 revealed that there was significant difference in the pre and post-test scores of the respondents as calculated ‘t’ value was found to be significant at 0.01 level of significance indicate that there was significant gain in knowledge after intervention of the training programme. Initial knowledge of the respondents was very poor as their pre test score was only 37.35. Significant improvement in the knowledge was found after exposure of the training programme as the pre- test scores was increased 37.35 to 58.60 per cent with gain in knowledge of about 21.25 per cent. *Vijayalaksmi (2008)* reported that after the exposure of training programme, significant improvement was found in knowledge regarding infant feeding practices. Effectiveness of the training was also indicated by the study of *Shukla and Singh (2010)* *Dixit et al. (2014)*, *Kulkarni and Kulkarni (2016)* and by *Gavine et al. (2017)*. These studies suggested

Table 4. Overall gain in knowledge of the respondents. (N=50)

Items	MPS	‘t’ value
Pre-test	37.35 %	26.20**
Post-test	58.60 %	
Gain	21.25 %	

**Significant at 0.01 level of significance

Table 5. Mean per cent scores of pre and post test and gain in knowledge of the respondents in different aspects of infant feeding practices (N=50)

Aspects	Pre-test	Post-test	Gain in knowledge	‘t’ value
Breastfeeding	34.40	55.60	21.20	11.604**
Complementary feeding	40.30	61.60	21.30	11.476**

**Significant at 0.01 level of significance

Table 6. Association of selected independent variables with gain in knowledge (N=50)

Independent factors	‘t’ value
Age	-9.581**
Family type	1.108 NS
Family income	1.042 NS
Respondent education	9.315**
Ordinal position of infant	-2.237*

**Significant at 0.01 level of significance, *Significant at 0.05 level of significance, NS -Non significant

that the frequencies of such short duration training programme should be increased.

It is evident from the Table, 5 that there was significant different in pre test and post test scores of respondents in all the aspects of infant feeding practices as calculated ‘t’ value was found to be significant at

Table 2. Distributions of respondents by different aspect wise knowledge and mean per cent score of each category in pre-test (N=50)

Different aspects	Distribution of respondents			Percent mean score			Overall percent mean score	Rank
	High No. (%)	Medium No. (%)	Low No. (%)	High (%)	Medium (%)	Low (%)		
Breast feeding	7 14.00	36 72.00	7 14.00	60.71	33.75	11.43	34.40	II
Complementary feeding	9 18.00	35 70.00	6 12.00	66.11	38.29	13.33	40.30	I

Table 3. Distributions of respondents by different aspect wise knowledge and mean per cent score of each category in post-test (N=50)

Different aspects	Distribution of respondents			Percent mean score			Overall percent mean score	Rank
	High No. (%)	Medium No. (%)	Low No. (%)	High (%)	Medium (%)	Low (%)		
Breast feeding	7 14.00	32 64.00	11 22.00	84.29	55.47	37.73	55.60	II
Complementary feeding	8 16.00	35 70.00	7 14.00	84.38	60.86	39.29	61.60	I

0.01 level of significance. Gain in knowledge was found highest in 'complementary feeding' with mean per cent scores of 21.30 and in breast feeding gain in knowledge was 21.20 per cent.

Efforts were made to find out association between the personal variables of women with their gain in knowledge. Data presented in Table 6 reveals that respondent's age and ordinal position of infant were negatively and significantly associated with their gain in knowledge. It shows that lower age group mothers were more eager to learn. And education had positive significant association with their gain in knowledge. It is clear that education influence the gain in knowledge. Similar results were reported by *Panwar and Singh (2007)*. Table further depicts that, type of family and income had non-significant association with gain in knowledge. The findings

supported by *Badodiya, et al. (2011)*.

CONCLUSION

On the basis of results obtained from the study it can be concluded that the planned training program related to infant feeding practices was found to be very effective and significant in terms of gain in knowledge of rural women. Research showed that in both pre and post test the majority of the respondents were in category of medium level of knowledge. The net knowledge gain was highest in aspect "Complementary feeding" and lowers in "Breast feeding. Study further indicated that respondent's age, education and ordinal position of the infant influenced the gain in knowledge, whereas family type and family income were not significantly associated with gain in knowledge of rural women regarding infant feeding.

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