

LALITPUR: B.F.H.I PROJECT

VISIT TO: Lalitpur(U.P)

VISITOR: Nupur Bidla (Intern. BPNI)

DURATION: 26TH MAY'09 TO 28TH MAY'09 (3 DAYS)

PURPOSE: To review the BFHI Project in lalitpur and to seek the role of lactating counselor s in Women's life .

ACTIVITIES:

- Visited 3 blocks out of 6 blocks (Birdha, Mehroni and Jakhora)
- Villages (Aganwadi) visited: Khitwas and rasoi (Birdha Block)
Silgan (Jakhora)
Sahadpur,Nadipura, nainwara and khiria (Mehroni Block)
- Visited the primary health centre
- Visited the district hospital and met the Chief Medical Officer(CMO, Lalitpur)
- Met the DDO(District dev. Officer ,Lalitpur)
- Conducted a meeting with all the monitors, supervisors and the project co-coordinator for B.F.H.I Project.
- Interviewed women in the above mentioned villages regarding the role of monitors and supervisors in their lives.

OBSERVATIONS:

- The lactating counselor follow the strategy of influencing the family members first than the woman regarding exclusive breastfeeding, which has been successful in influencing the values and beliefs of people in villages regarding breastfeeding.
- The basic food given to the children in **complementary feed** after 6 months is home cooked **dal, roti(with ghee), rice, sattu(chana flour with water and sugar) , khichdi, boiled patato, banana, kheer, dalia, vegetables and corn grinded with curd and salt.** Initially not much emphasis was given on complementary feeding.
- **Many women don't recognize the lactating supervisors and even denied their presence in Jakhora and Mehroni Block.**
- **The mother support groups don't disseminate the information properly to women about breastfeeding. They just tell them that women need to feed only breast milk for 6 months but don't inform them about the benefits in details.**

- **The monitors and supervisors lack unity among them. Conflicts were evident when one supervisor visited other's block.**
- Women mostly know about the characteristics of exclusive breastfeeding. Like no water has to be given to the child for 6 months along with any other top feed.
- Most Women know about the benefits of exclusive breast feeding for their babies but are not sure about the benefits it does to them.
- Most women know about the illnesses children can get if not exclusively breastfed. Eg . pneumonia, diarrhea etc
- Families do support women to breastfeed (statements are given by the women themselves)
- **During the district hospital visit 3 cases of low birth weight babies were spotted(newly born). According to the aganwadi workers an average of 2 to 3 cases of malnourishment still exist in each Of the village..**
- Most women breastfed their children in the first hour of birth.
- **Few cases of giving water to the child below 6 months were spotted, reason behind was lack of information.**
- The supervisors use their skills well when they teach the positive and negative attachment; they are even successful in reaching out to the target group to a significant extent.
- Aganwadi do follow the menu given to them by the ICDS scheme.
- Few household in Jakhora block complained about the the rude behavior of aganwadi worker. The women even complained that the aganwadi worker does'nt distribute 'panjiri' for pregnant women properly therefore they avoid going to aganwadi.
- Nobody complained about the quality of food given in aganwadi.

ROLE OF LACTATING COUNSELLORS IN WOMEN'S LIFE:

- Before lactating counselors started their work the women in the village were unaware about the concept of exclusive breastfeeding. They used to feed water , honey and ghutti to their children but now they have stopped giving any kind of top feed.
- Many mothers refused exclusive breastfeeding initially due some cultural notions and beliefs but after seeing the improvements in the malnourished cases after exclusive breastfeeding they believed the counselors and adopted the practice.
- There is an evident improvement in the health of children i.e. children are getting less ill after the adoption of exclusive breastfeeding practice by mothers.
- People in the village even call the counselors when they have any doubt or problem regarding feeding.
- The mothers now think that they can take care of their children better because they have all the information which was required to upbringing their children at least upto 2 years.
- The mothers even mentioned that their children used to get ill frequently before the counselor arrived but now things have improved.

- Women have also become quite vocal about their problems now ,like problems with feeding the child.

LEARNINGS:

- The student social worker learnt to influence the family members before influencing the target . (woman) as the family members play significant role in the social life of any human being and the influence on family help the worker or counselor to create a support system at home for desirable change.
- Learnt the significance of cultural aspect in influencing behaviors.
- Learnt that team spirit and sense of unity should be revitalized frequently to keep the group working for a cause efficient.

SUGESSTIONS:

- Quality and frequency of monitoring need to improve.
- More emphasis need to given on participatory approach when sessions are conducted. Methods like ice breaking games can be used.
- The team of counselors and monitors require session on team work , conflict resolution and self evaluation.
- Folk media like puppetry and street plays can be used to attract more attention towards the issue. The counselors and monitors should participate as this would give the team members a sense of relativity with the target group and would also build team spirit among the group members.