

# Developing SPRING Kilkaari, a community-based ECD intervention in Haryana, India

Gauri Divan<sup>1</sup>, Ameya Bondre<sup>1</sup>, Zelee Hill<sup>2</sup>, Raghu Lingam<sup>3</sup>, Kamalkant Sharma<sup>1</sup>, Reetabrata Roy<sup>3</sup>, Neha Hooda<sup>1</sup>, Neha Singhal<sup>1</sup>, Arti Panchal<sup>1</sup>, Jolene Skordis Worrall<sup>2</sup>, Atif Rahman<sup>4</sup>, Betty Kirkwood<sup>3</sup>



## INTRODUCTION

The aim of SPRING is to develop an innovative, feasible, affordable and sustainable culturally appropriate intervention package to maximise child growth and development and evaluate it in two settings: Haryana, India and Rawalpindi, Pakistan.

This poster describes the development of the SPRING intervention in India, where it is called Kilkaari, meaning the happy gurgling of a small child. It is being delivered through home visits by Kilkaari workers (KWs), a new cadre of community based agents working at the village level.

## OBJECTIVES OF FORMATIVE RESEARCH

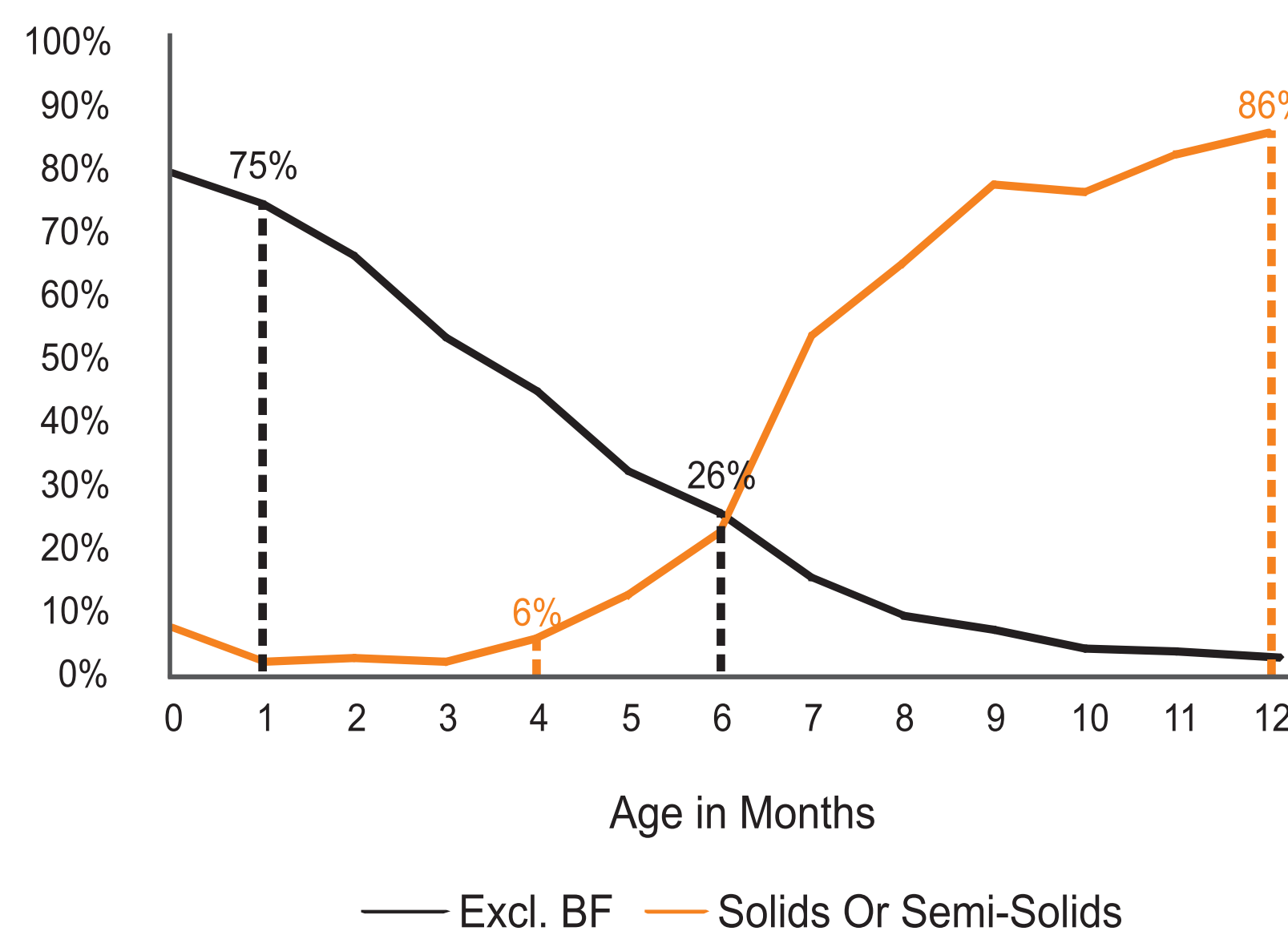
1. To understand local practices and beliefs around pregnancy, delivery, child feeding and child development
2. To determine the desired qualities of the new cadre of Kilkaari workers
3. To design intervention materials and messages which would bring about behavioural change
4. To assess the acceptability of key SPRING messages and promoted behaviours

## METHODS

Methods	Number(n)
In-depth interviews	18
Direct observation	8
Trials of improved practices in homes	
• Child Stimulation	10
• Complementary Feeding	2
Baseline survey (female respondents)	13,528
Anthropometry (18-30 months children)	2,040

## KEY RESULTS

Breastfeeding and Complementary feeding among children aged 0 to 12 months



Weighing at anthropometry



SPRING Site Map

## IMPLICATIONS FOR KILKAARI

Feeding and Growth	
Community Beliefs and Practices	Implications for Kilkaari
51% mothers initiated breastfeeding within one hour	Emphasis on importance of colostrum, support at delivery and importance of the golden hour
Late complementary feeding, stunting rate of 46% in 18-30 months children	Exclusive breast feeding till 6 months; initiation of complementary foods after 6 months of age, specific focus on quantity, frequency and variety
Diet low in protein. Non-vegetarian food not part of the diet.	Key decision makers opinion on egg in the complementary diet introduced. Other high protein foods: e.g. paneer, soya, daal; peanut powder made part of the dietary advice.
Child Stimulation	
Play not considered very important by parents. and not part of daily routines	Play messages integrated into all visits; with coaching for play a key component of the intervention
Intervention Delivery	
Mother-in-law is a key decision maker in family.	All family members made active recipients to garner support for mother to adopt intervention messages
Kilkaari workers should be from the local area, good communicators, patient and empathetic listeners.	Selection of Kilkaari Workers followed these criteria
High rates of sterilisation (59%) and institutional delivery (82%) in study area	Family planning and birth preparedness not relevant to the intervention for this population.



Supported by  
**welcome trust**

1. Sangath, India 2. University College London, UK 3. London School of Hygiene & Tropical Medicine, UK 4. University of Liverpool, UK