The present study evaluated the perceptions and practice of 92 final year pediatric residents with regard to breaking bad news. Only 16% of residents had received any training in communication skills. Majority (65%) of the residents were not comfortable while breaking bad news.

**Keywords:** Communication skills, Survey, Training

Breaking bad news to parents, who often are not prepared for it, alters their perceptions of the future of their children suddenly and often irrevocably, with well described consequences for the recipients as well as the doctors [3]. The present study emphasizes that a huge lacuna exists in training of pediatric residents, who generally have no exposure to any formal training in communication skills [2].

Almost two-thirds reported feeling uncomfortable while breaking bad news, and were not familiar with the structure and components of the complex procedure. In a previous study we have found that the communication skills of pediatric residents need improvement [7]. Ascertaining the prior level of understanding of the parents, giving the unpleasant news in small fractions’ and periodic checking for comprehension are essential steps to be followed in the process of breaking bad news [6].

There are reports that communication skills can be improved with short training workshops [8]. Research has shown that communication skills, generally do not improve after residency [9]. Our findings support the need for incorporation of structured communication skills training with emphasis on difficult issues like breaking bad news, in the Postgraduate curriculum.

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Undernutrition Amongst Under-five Children Belonging to High Income Group Communities in India

According to RSOC (2013-2014) data, high prevalence of stunting (26.7%) and wasting (13.0%) exists amongst under-five children belonging to highest wealth index communities. India possibly cannot achieve the 2025 Global nutrition targets for reducing the rate of stunting and wasting amongst Under-five children, unless efforts are also directed towards this group.

Keywords: National Family Health Survey, Global Nutrition targets, Stunting, Wasting, Undernutrition

We found high prevalence of stunting (27%) and wasting (13%) amongst the HWI families as per RSOC. No reduction in the prevalence of stunting and wasting was seen amongst under-five children belonging to HWI families during the decade of 2005-2014 (Table 1).

Inadequate IYCF practices, being an important determinant of stunting and underweight amongst under-five children, may have resulted in high undernutrition amongst HWI families. According to RSOC, only 62% mothers belonging to HWI families practiced exclusive breastfeeding for 6 months. Complementary foods were provided to only 62.1% children aged 6-8 months, and low parental education status, poor infant and young child feeding (IYCF) practices, monetary constraints and other related detrimental factors present in the poor households [2,3]. Since these common etiological factors of undernutrition are possibly missing in the highest wealth index (HWI) communities, the rate of undernutrition is expected to be low.

We conducted a secondary analysis of National Family Health survey-3 (NFHS-3) (2005-2006) [4] and Rapid Survey of Children (RSOC) (2013-2014) [1] data to assess the prevalence of stunting and wasting amongst Under-five children belonging to the HWI families. Socioeconomic status as defined by highest and lowest wealth index was compared with the prevalence of stunting and wasting as defined by Z score below -2SD score amongst under-five children. We further assessed the trend in reduction of stunting and wasting over a decade (2005-2014).

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