

Original article:

Study of infant feeding practices from birth to 1yr of age in Rural area in Maharashtra

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Abstract:

Introduction: Nation marches on the tiny feet of the infants nurtured by the mothers. Infants that are children in the age group of 0-1 year constitute 2.92% of the total population in India. With this back ground a study has been conducted to know the difference in infant feeding practices among rural and urban mothers .

Methodology: The study was conducted on infants of mothers who visited and those admitted in a tertiary care rural hospital of Maharashtra from January to 31st December 2016..Assesment was done by questionnaire method

Results : In the present study 88.1% of mothers were literate with it was also found that upper income group was 5%, upper middle 8.2%, lower middle 31.8%,

Conclusion: Exclusive breast feeding practices are possible with intervention (85.4%) in spite of institutional set up, urbanization, and high rate of cesarean section deliveries.

Introduction:

Nation marches on the tiny feet of the infants nurtured by the mothers. Infants that are children in the age group of 0-1 year constitute 2.92% of the total population in India.¹ Health of these infants is quite fragile with increased vulnerability to infections and other diseases. Hence the major responsibility of a mother is to maintain and improve her child's health. Optimal infant feeding practice ranks first among the most effective interventions to improve child health. Infants feeding practices are infinitely varied in a country like India, some are appropriate while others are not. A great asset in India is that an average Indian Mother although poor in nutritional status, has a remarkable ability to breast feed her infant for prolonged periods.

Appropriate infant feeding practice means early intuition of breast feeding, no pre lacteal feeds, feeding colostrums, giving only breast milk till 6 months of age, initiating semisolid complementary foods at 6 months of age followed by various mixes (double, triple and quadruple) subsequently with continued breast feeding till at least 2 years of age.^{2,3}

Many studies have been done in this regard in different places. However, no such study has been done in the below mentioned study area. With this back ground a study has been conducted to know the difference in infant feeding practices among rural and urban mothers .

Methodology:

The study was conducted on infants of mothers who visited and those admitted in a tertiary care rural hospital of Maharashtra from January to 31st December 2016..Assesment was done by questionnaire method.

Sample size : 1000 babies with simple random sample method.

The study was conducted among mothers who visited and those babies admitted in a tertiary care rural hospital of Maharashtra , using a pre-designed, pre-tested questionnaire (Annexure III) regarding socio-demographic factors and infants feeding practices.

Inclusion criteria:

1. Mothers, having children aged less than 1 year visiting a tertiary care rural hospital of Maharashtra.
2. Mothers, whose babies less than 1 year have been admitted to a tertiary care rural hospital of Maharashtra

Codes were prepared for each options of the questionnaire. Data was entered in Excel Sheet to prepare master chart.

Exclusive Criteria:

All those patients more than 1 year and those below 1 year whose parents have not given consent for enrolment in study excluded.

Study design: An observational clinical study

Results:

Table 1: Age distribution of mother studied

Age in years	No. of mothers	%
<20	188	18.0
21-30	766	76.6
31-40	44	4.4
>40	2	0.2
Total	1000	100.0

Table 2: Gender distribution of informants studied

Gender	INFORMANTS	%
Male	97	9.7
Female	903	90.3
Total	1000	100.0

Table 3: Distribution of Occupation of mothers studied

Occupation	No. of mothers	%
Yes	97	9.7
No	903	90.3
Total	1000	100.0

Table 4: Distribution of Education of mothers studied

Education	No. of mothers	%
Literate	881	88.1
Illiterate	119	11.9
Total	1000	100.0

Table 5: Socio economic status

Socio economic status	No. of mothers (n=1000)	%
Upper	50	5.0
Upper middle	82	8.2
Lower middle	318	31.8
Upper lower	506	50.6
Lower	44	4.4

Table 6: Working mother

Working mother	No. of mothers	%
Yes	13	1.3
No	987	98.7
Total	1000	100.0

Discussion:

The discussion of feeding practices is done in the order of tabulation of results and not in the order of the importance of factors influencing feeding practices. In this study 1000 mothers were interviewed majority were in age group of

21 to 30 years. A similar study conducted by Kullkarni et.al.⁴ comprised of mothers in age group of 18 to 32 years. In this questionnaire method, 90% subjects interviewed were mothers and female attendants like grandmother. Hence the information is quite reliable. In this present study 90.3% of mothers were house wife. A study conducted by Faziliet. al⁵ in Kashmir showed 61.53% of mothers were house wife in another study Ray et.al showed 65% mothers were housewives.

In the present study 88.1% of mothers were literate, another study done by Agarwal et.al⁶ showed that 78.5% mothers were illiterate. . In our study it was found that upper income group was 5%, upper middle 8.2%, lower middle 31.8%, Upper lower were 50.6%, Lower were 4.4%.A

study done by Boyde et.al⁷⁰ it was found to be 10% of were given exclusively breast fed among the upper socio economic status. We had majority of mothers in low socioeconomic age group. The effect of socio economic status on excusive breast feeding practices will be discussed further in Table No 16.

Conclusion:

Exclusive breast feeding practices are possible with intervention (85.4%) in spite of institutional set up, urbanization, and high rate of cesarean section deliveries.

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