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Knowledge of Rural Mothers Regarding Infant' Feeding (Birth-2 Years)

KEYWORDS: Knowledge, infant feeding, rural mother

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ABSTRACT *This research paper addresses the knowledge of rural mothers regarding infants' feeding (birth–2 years). The objectives of the study were: to study the socio-demographic characteristics of respondents, to assess the knowledge regarding infants' feeding among rural mothers; to determine the association of knowledge responses with selected socio–demographic variables. Study was conducted on hundred rural mothers of Silao, Nalanda (Bihar).The self-constructed interview schedule was used to analyse the knowledge of mothers about infant feeding (birth-2 years). Statistical analysis was performed using frequency and percentage & chi–square. Results showed that majority of mothers have knowledge regarding infant feeding.*

Introduction
Poor infant feeding practices and their consequences are one of the world's major problems and a serious obstacle to social and economic development. Breastfeeding is one of the most important determinants of child survival, birth spacing, and the prevention of childhood infections.

Breast-feeding is an unequalled way of providing ideal food for the healthy growth and development of all normal infants. This shows the importance of good nutrition during lactation. The first milk or colostrums is of particular value to the infant due to its high content of proteins and fat – soluble vitamins , and its anti – infective properties .It is the infant's first immunizations .However, many rural folk discard this precious material. Ideally, exclusive breast – feeding should be the norm for the first 4-6 months of life and homemade soft foods should then be added to the infant's diet. UNICEF advocates optimal breastfeeding in first six months of age as having the single greatest potential impact on child survival of all preventive interventions and can save 1.4 million under five deaths in developing world. The world Health organization (WHO) recommends exclusive breastfeeding for the first six months of life. Exclusive breastfeeding is defined as the practice of feeding an infant with breast milk only excluding water, other liquids, breast milk substitutes and solid foods.

An exclusive breastfeeding practice reduces infant morbidity and mortality in resource – constrained society. Numerous studies **(M and Das, 2014; Ray, 2015)** have underlined the advantages of exclusive breastfeeding for growth, immunity and prevention of illness in young infants a exclusive breast feeding apart from being beneficial to the baby, has also been shown to have significant short and long term health benefits for the mother. (**Subbaiah, 2005)** that "breast is best" as rightly embedded in Indian Health policy. It is endorsed by "baby friendly" a joint WHO / UNICEF initiative to promote breast – feeding over artificial feeding. Although the number of woman initiating breastfeeding has increased significantly, its continuation has not improved much over the last 25 years.

- **Objectives**
- To study socio-demographic characteristics of respondents
- To study the knowledge regarding infants' feeding among rural mothers
- To determine the association of knowledge responses with selected socio- demographic variables

Methodology
The study was conducted at Silao village Nalanda (Bihar). Self-constructed interview schedule 'Gramin Mataon ka Shishu Aahar ke Prati Jankari (birth-2 years)'was used to assess the knowledge of 100 rural women regarding infants' feeding.

Results and discussion
Results and discussion has been presented under the following heads:

(A) Socio-demographic characteristics of respondents

(B) Knowledge regarding infants' feeding among rural mothers

(c) Association of knowledge responses with selected socio-demographic characteristics

(A) Socio-demographic characteristics of respondents
Table 1: Socio – Demographic Characteristics of Respondents

S. No.	Variables	Category	f (%)
1.	Age of Mother (in years)	15 -19 Years	2
		20 -24 Years	39
		25 – 29 Years	43
		30 – 35 Years	15
		36 – 40 Years	1
2.	Religion	Hindu	93
		Muslim	7
		Others	-
3.	Occupation of Mother	House Wife	82
		Service	3
		Labour	2
		Others	13
4.	Occupation of Husband	Business	56
		Service	19
		Labour	20
		Others	5
5.	Types of Family	Nuclear	84
		Joint	16

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6.	Age of Male Child	Birth – 5 Months	15
		6 -11 Months	24
		12 – 24 Months	34
	Age of Male Child	Birth -5 Months	5
		6 -11 Months	8
		12 – 24 Months	14
7.	Child Birth Weights	Less than 2.5 K.gm.	14
		More than or equal to 2.5 K.gm.	86
8.	Place of Delivery	Hospital / Nursing Home	87
		Home	13

Majority of respondents 43% are in 25-29 years age group and minimum 1% in 36-40 years. Majority of them 93% are Hindus and only 7% mothers are Muslims. Table indicates that 82% mothers are house wives and 2% mothers work as a labour while 56% husbands are involved in business and 5% husbands are involved in other occupation such as carpentry, Barber and Gardening. Majority of mothers 84% belong to nuclear family and 16% mothers belong to Joint family. Thirty four per cent male children are 12 – 24 months old. Table shows that 86% children weighs more than or equal to 2.5 Kilograms and 14% child have weight less than 2.5 Kilograms. Table also indicates that 87% mothers gave births in hospitals/ nursing home and 13% mother's gave birth in their own homes.

(B) Knowledge Regarding Infants' Feeding among Rural Mothers

Table 2: Knowledge of Mothers among Infant Feeding

S.no.	Questions	Response	f (%)
1.	What should be the first food for a new-born?	Breast feeding	71
		Honey	12
		Ghutti	7
		Water	10
2.	When should breast feeding be initiated after normal delivery?	Within half an hour	35
		1 hour after birth	48
		24 hour after birth	17
3.	How do you prepare formula milk?	Warm / Hot water	51
		Water	42
		Mild Water +Milk	5
		Cold Water +Milk	2
4.	What foods are to be give to a baby of months of age?	Liquid food	98
		Semi – Solid food	2
		Solid food	-
5.	Which supplementary food you feed your baby?	Liquid supplementary food	15
		Semi – Solid foods	-
		Solid Supplementary food	-
		All food	85
6.	At what age semi-solid foods are started to infant?	3-5 months	34
		6-7 months	53
		8-1 years	13
7.	Name some semi solid foods that can be offered to infants during period of weaning?	Exclusive milk	16
		Semi – Solid Supplementary food	59
		Solid Supplementary food	25
8.	During illness breast feeding should be	Discontinued	-
		Give much less than normal	40
		Continued normally	60

Majority of study population knew that breast feeding is important for babies. Seventy one per cent mothers responded that first food of new born should be breast feeding. Only 7% mothers gave Ghutti as first food to new born. Table indicates 48% mothers initiated breast feeding after 1 hour of normal delivery and 17 % mothers said breast feeding be initiated after 24 hours after normal delivery. Majority of mother's (51%) said warm / hot water should be used in preparation of formula milk and 2% said cold water and milk be used in preparation of formula milk. Table indicates that 98% respondents reported that liquid food should be given as baby food after 3 months .Eighty five per cent mothers knew that all food can be offered to infants supplementary food .Fifty three per cent mothers knew that at 6 – 7 months semi solid foods can be offered to infants. Fifty nine per cent mothers knew that semi solid foods (daliya, suji ki khir) can be offered to infants during period of weaning. Surprisingly, 60% mothers knew that even during illness breast feeding should be continued.

(C) Association of Knowledge Responses with Selected Socio-Demographic Characteristics

Ho: Knowledge of mothers is independent of socio-demographic characteristics

Table 3: Association of knowledge regarding first food of new born with socio-demographic characteristics

Variables	Chi – square value	df	Table value
Age and Knowledge	28.88 **	12	26.21
Religion and Knowledge	4.03 NS	3	7.81
Occupation of mother and Knowledge	13.95 NS	9	16.91
Occupation of husband Knowledge	37.69 **	9	21.66
Types of family and Knowledge	1.13 NS	3	7.81

Table 3 shows that out of five chi -square value calculated only two chi- square values (Age and occupation of husband with knowledge) are significant. Other chi-square values of religion, occupation of mothers and types of family with knowledge are not significant. It implies that knowledge regarding breastfeeding is significantly associated with age of respondents as well as occupation of husbands whereas not significantly associated with religion, occupation of mothers and type of family

Table 4: Association of knowledge regarding initiation of breastfeeding after normal delivery with socio-demographic characteristic

Variables	Chi – square value	df	Table value
Age and Knowledge	20.87 **	8	20.1
Religion and Knowledge	3.924 NS	2	5.99
Occupation of mother and Knowledge	16.58 *	6	12.6 16.8
Occupation of husband and Knowledge	19.39 **	6	16.8
Types of family and Knowledge	0.88 NS	2	5.99

Table 4 shows that out of five chi – square values calculated only three chi – square (Age, occupation of mothers and occupation of husbands with Knowledge) are significant. Other chi- square values of religion and types of family with knowledge are not significant. It implies that knowledge regarding initiation of breast feeding after normal delivery is significantly associated with age of respondents as well as occupation of mothers and occupation of husbands whereas not significantly associated with religion and type of family.

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Table 5: Association of knowledge regarding preparation of formula milk with socio-demographic characteristics

Variables	Chi – square value	df	Table value
Age and Knowledge	18.3804 NS	12	21.02
Religion and Knowledge	23.715 **	3	11.34
Occupation of mother and Knowledge	30.106 **	9	21.66
Occupation of husband and Knowledge	13.936 NS	9	16.91
Types of family and Knowledge	0.4581 NS	3	7.81

Table 5 shows that out of five chi- squares calculated only two chi- square values (religion and occupation of mothers with knowledge) are significant. Other chi-square values of age, occupation of husbands and types of family with knowledge are not significant. It implies that knowledge regarding preparation of formula milk is significantly associated with religion of respondents as well as occupation of mothers whereas not significantly associated with age, occupation of husbands and type of family.

Table 6: Association of knowledge regarding baby food after three months of age with socio-demographic characteristics

Variables	Chi – square value	df	Table value
Age and Knowledge	3.192 NS	4	9.49
Religion and Knowledge	0.153 NS	1	3.84
Occupation of mother and Knowledge	2.506 NS	3	7.81
Occupation of husband and Knowledge	6.316 NS	3	7.81
Types of family &and Knowledge	0.388 NS	1	3.84

Table 6 shows that all five chi-square values calculated are not significant. It implies that knowledge regarding baby food after 3 months of age is not significantly associated with age, religion, occupation of mothers, occupation of husband and type of family.

Table 7: Association of knowledge regarding supplementary food with socio-demographic characteristics

Variables	Chi – square value	df	Table value
Age and Knowledge	21.17 **	4	13.3
Religion &and Knowledge	0.003 NS	1	3.84
Occupation of mother and Knowledge	3.579 NS	3	7.81
Occupation of husband and Knowledge	2.0344 NS	3	7.81
Types of family and Knowledge	0.003 NS	1	3.84

Table 7 shows that out of five chi-square value calculated only one chi-square (age with knowledge) is significant. Other chi-square of values religion, occupation of mothers, occupation of husband and types of family with knowledge are not significant. It implies that knowledge regarding supplementary food is significantly associated with age of respondents whereas not significantly associated with religion, occupation of mothers, occupation of husbands and type of family.

Table 8: Association of knowledge regarding introduction of semi solid food to infant with socio-demographic characteristics

Variables	Chi – square value	df	Table value
Age and Knowledge	22.0508**	8	20.1
Religion and Knowledge	0.3293 NS	2	5.99
Occupation of mother and Knowledge	10.556 NS	6	12.6
Occupation of husband And Knowledge	13.8758 *	6	12.6 16.8
Types of family and Knowledge	2.459 NS	2	5.99

Table 8 shows that out of five chi-square value calculated only two chi-square values (Age and occupation of husbands with knowledge) are significant. Other chi-square values of religion, occupation of mothers and types of family with knowledge are not significant. It implies that knowledge regarding introduction of semi solid foods to infants is significantly associated with age of respondents as well as occupation of husbands whereas not significantly associated with religion, occupation of mothers and type of family.

Table 9: Association of knowledge regarding semi solid foods to be offered during period of weaning with socio-demographic characteristics

Variables	Chi – square value	df	Table value
Age and Knowledge	13.407 NS	8	15.5
Religion and Knowledge	9.489**	2	9.21
Occupation of mother and Knowledge	13.543*	6	12.6 16.8
Occupation of husband and Knowledge	16.054*	6	12.6 16.8
Types of family and Knowledge	8.205*	2	5.99 9.21

Table 9 shows that out of five chi-square value calculated only four chi- square (Religion, occupation of mothers, occupation of husband and type of family with knowledge) are significant. Chi-square values of age with knowledge are not significant. It implies that knowledge regarding semi solid foods to be offered during period is significantly associated with religion, occupation of mothers, and occupation of husbands of respondents as well as types of family whereas not significantly associated with age.

Table 10: Association of knowledge regarding feeding during illness with socio-demographic characteristics

Variables	Chi – square value	df	Table value
Age and Knowledge	5.8631 NS	4	9.49
Religion and Knowledge	3.097 NS	1	3.84
Occupation of mother and Knowledge	4.7607 NS	3	7.81
Occupation of husband and Knowledge	13.558**	3	7.81 11.34
Types of family and Knowledge	0.607 NS	1	3.84

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Table 10 shows that out of five chi-square value calculated only one chi-square values (occupation of husbands with knowledge) are significant. Other chi-square values of age, religion, occupation of mothers and types of family with knowledge are not significant. It implies that knowledge regarding feeding during illness is significantly associated with occupation of husband whereas not significantly associated with age, religion, occupation of mothers and type of family.

Suggestions

In general results show that though mothers have knowledge regarding infant feeding but they are not practicing in actual life.

- The study found that though majority of mothers have the knowledge on infant feeding so they should be advised and convinced for practicing it in actual life in light of the benefits of healthy and nutrious infant feeding practices. so, there is need for Some innovative strategies consisting of both monitoring and strengthening the existing infant feeding programme should be planned.
- For those who does not have the knowledge.
- Proper information should be provided to the women regarding exclusive breast feeding. Programme should be planned for in – laws and family member to adopt the knowledge on infant feeding for positive attitudinal and behavioural change to promote infant feeding practices in their families .

Implication of the study

The findings of the study could be useful to health personnel and policy makers. Some innovative strategies consisting of both monitoring and strengthening the existing infant feeding programme should be planned.

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