

An assessment of complementary feeding practices in mothers of Udaipur

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■ **ABSTRACT** : Proper feeding practices during infancy are also essential for attaining and maintaining proper nutrition, health, and development of infants and children. Objective of doing this study is to assess the knowledge about weaning food and its practices. The study was conducted among 100 mothers of Udaipur community to assess the knowledge regarding complementary feeding practices on infant. It is good indication that majority (100%) was aware about the immunization of their child. Data depicted that majority of the subjects (80%) started weaning of their infants in 4-6 months and few (10%) were started from 3-4 months. Observations shows that weaned infants were given liquid and semi solid and ready to eat foods. Fruit juice (20%), dal soup (40%), veg soup (10%) and dal (50%) given to infant as liquid form. Most of the subjects were giving their kid soft chapati as solid food form because it's major part of family diet.

■ **KEY WORDS**: Feeding practices, Infant, Knowledge

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Lactation is a normal physiological process that begins soon after parturition, during which the mother starts nourishing her baby. The World Health Organization (WHO, 1978) recommends exclusive breastfeeding for the first 6 months of life and continuation of breastfeeding for 2 yr. But after six months along with the breastfeeding the baby should be introduced to some additional foods in the form of weaning or complementary foods. Malnutrition rates increase between 6 and 18 months, the period of complementary feeding (Patel *et al.*, 2012; Brown *et al.*, 1995 and Butte *et al.*, 2000). As a study carried out by WHO (1981) revealed that breast feeding usually meets the need of young infants up to the age of six months

(Ghosh *et al.*, 1976 and Kalra *et al.*, 1982). After this age mother's milk is no longer sufficient and complimentary semi solid and later solid food should be introduced progressively, while at the same time breastfeeding should be continued for as long as possible. The WHO and the United Nations International Children's Emergency Fund (UNICEF) have articulated global strategy for infant and young child feeding and recommendations in the form of guiding principles for complementary feeding of the breastfeed child (Lawrence, 1994). Good nutrition during infancy forms the basic foundation of health in particular for growth, development, survival and maintenance throughout the life. Weaning is often advantageous in reducing early

infant mortality death. Although timing of weaning varies across societies but is always determined by the mother's characteristics, choices, knowledge and perceptions about child's health or cultural beliefs related to feeding (Bohler and Ingstad, 1996). Additionally, mothers hold the overall responsibilities for the child's health and mothers' knowledge can be the barrier for weaning practice (Dandeker *et al.*, 2014). Proper feeding practices during infancy are also essential for attaining and maintaining proper nutrition, health, and development of infants and children. Results of studies on infant and child feeding have indicated that inappropriate feeding practices can have profound consequences for the growth, development and survival of infants and children, particularly in developing countries (Sethi *et al.*, 2003).

In last decades practice of breast feeding and weaning was influenced by the western culture and proceeding towards modernization. But in the present time the scenario is changing, as people are again adopting the proper practice of breastfeeding and weaning. Therefore the present study was conducted to analyze to what extent the scenario has changed with the following objectives:

- To study awareness about complementary feeding and complementary food practices
- To assess complementary feeding practices.

■ RESEARCH METHODS

Descriptive research among mother's knowledge on weaning was conducted at Kalka Mata Road, Anganwadi centres which are nearby the college of home science, Udaipur. 100 mothers were included by convenient purposive sampling method. Content validity was maintained by reviewing literature, consulting with research advisor, research expertise and subject expert. Content validity was maintained by reviewing literature, consulting with research advisor, research expertise and subject expert. Tool try out was done in similar setting. The questionnaire addressed aspects of mother's socio-demographic characteristics and weaning practices of infants followed by the mother. It included feeding history; weaning practices; sources of information about weaning; and mother's behaviours and knowledge of age at which the child should be weaned. It consisted information regarding pre-lacteal feeds, feeding of colostrum, breast feeding and weaning food. Data collection is done by survey technique followed by

interview method.

■ RESEARCH FINDINGS AND DISCUSSION

The findings of the present study as well as relevant discussion have been presented under following heads :

Background information :

In present study there are 100 respondents which were taken from Kalka mata, Anganwadi of Udaipur city were selected. The data of present investigation was collected and statistically interpreted. Hence as per the objective of the present study, all the pertinent information has been categorized and reported for obtaining the result and presented as follows :

The Table 1 depicts the demographic information of the surveyed families. The results show that around 86% of the families were residing in their own houses, whereas 20% of them were living in rented house. More than half (60%) per cent respondents were from joint families and rest was from than nuclear. All the subjects belong to the Hindu religion in which 70 per cent were of general category. Majority of the respondents (80%) were from middle income group whereas 20 per cent from low income group, respectively. 80 per cent families were vegetarian and 20 per cent families were nonvegetarian.

Sr. No.	Aspects	Categories	Frequency	Percentage
1.	Type of home	Own	80	80
		Rented	20	20
2.	Type of family	Joint	60	60
		Nuclear	40	40
		Extended nuclear	0	0
3.	Religion	Hindu	90	90
		Muslim	10	10
		Other	-	-
4.	Caste	General	70	70
		OBC	20	20
		SC	10	10
		ST	-	-
5.	Income	Low	20	20
		Middle	80	80
		High	0	0
6.	Food habits	Vegetarian	80	80
		Non-vegetarian	20	20

Table 2 depicts the information about the mothers. As data shows that majority of mothers *i.e.* 50 per cent were between the ages of 25 to 30 years, only 10 per cent were in the age group of 31 to 35 years. Most of the respondents (80%) first delivery occurred within 1-3 years after marriage of the couples and 10 per cent children were born after 3 years of marriage of their parents. 60 per cent of mothers were having only one or two pregnancy. Less than one fourth (20%) mothers were having one or two children and more than two children, respectively. Maximum number of mothers was housewife and only 20 per cent of the mother was employed outside the home.

Table 2 : Information about the mothers

Aspects	Categories	f	%
	18-24 y.	40	40
	25-30 y.	50	50
	31-35 y.	10	10
Years after marriage when first child was born	1-3 y.	80	80
	3-5 y.	10	10
	5-7 y.	10	10
No. of pregnancy	1-2	60	60
	2-3	20	20
	3-4	20	20
No. of Children	1-2	60	60
	2-3	20	20
	3-4	20	20
Working status of mother	Working	20	20
Nature of Job	Non-working	80	80

As Table 3 shows more than half (80%) of the infants were under the ages of six to twelve months and remaining were from 12-18 months and 18-24 months, respectively. 70 per cent of the infants born healthy as their birth weight was between two to three kg. It is good indication that majority (100%) was aware about the immunization of their child.

Table 3 : Information about infant

Aspects	Categories	Frequency	Percentage
Age	6-12 months	80	80
	12-18 months	10	10
	18-24 months	10	10
Wt. of child at the time of birth	1-2 kg	20	20
	2-3 kg	70	70
	3-4 kg	10	10
Immunization of child done	Yes	100	100
	No	-	-

Tabulated data showed that 70 per cent subjects breast feed their kid until above 12 months whereas 20 per cent and 10 per cent subjects were breast feeding 6-9 months and 3-6 months, respectively. Further data depicted that majority of the subjects (80%) started weaning of their infants in 4-6 months and few (10%) were started from 3-4 months.

Table 4 : Information regarding feeding and weaning pattern of infants

Aspects	Categories	Frequency	Percentage
Breast feeding until (in months)	0-3	0	0
	3-6	10	10
	6-9	20	20
	Above 12	70	70
Starting of weaning (in months)	3-4	10	10
	4-6	80	80
	Not started	10	10

Observations show good results regarding the practice of feeding and weaning. As Table 5 depicts that 40 per cent infants having only breast feed and as part of weaning practice half of the subjects (50%) providing liquid other than milk and 60 per cent subjects are taking food in solid and semi solid form. Mostly subjects (80%) were providing homemade complementary food as it's easily available and nutritious and rest of them were giving commercially infant formula because they have no time for preparation.

Table 5 : Information regarding feeding types

Aspects	Categories	f	%
Type of feeding (given at present)	Only breast feeding	40	40
	Liquid other than milk	50	50
	Top milk	20	20
Type of complementary food	Foods (solids/semi solid)	60	60
	Homemade	80	80
	Commercially infant formula	20	20

Data in Table 6 reflects various reasons behind starting weaning. Main reason reported that they started weaning as its part of religious practices. 70 per cent knows that it's good for child's health. Half of the respondents (50%) reported elder's advise and insufficient milk secretion and it's followed by advertisement (40%) and lack of time feed (40%), remaining were going out for job (20%) and doctor's advice (20%) that why they started weaning.

Table 6 : Information regarding reason for starting the weaning

Sr. No.	Reasons	f	%
1.	Insufficient milk secretion	50	50
2.	Lack of time to feed	40	40
3.	Going out for job	20	20
4.	Doctor's advice	20	20
5.	Good for the health of child	70	70
6.	Advertisements	40	40
7.	Elder's advice	50	50
8.	Religious practices	90	90

Observations shows that weaned infants were given liquid and semi solid and ready to eat foods. Fruit juice (20%), dal soup (40%), veg soup (10%) and dal (50%) given to infant as liquid form. Most of the subjects were giving their kid soft chapati as solid food form because it's major part of family diet. Rice (40%), Dalia (80%), halwa (90%), vegetable (80%), khichdi (60%) and fruits (60%) were also providing in the form of semi solid food. Majority of the respondents mothers (70%) were giving biscuit to their kids in ready to eat form food and half of the respondent's kid (50%) also having bread in ready to eat form (Table 7).

Instead of above observation results regarding the knowledge of the mothers regarding the significance of breastfeeding, colostrums and weaning was found poor;

Table 7 : Information regarding foods given to the baby other than meal

Types of food		f	%
Liquid juice	Fruit juice	20	20
	Dal soup	40	40
	Veg. soup	10	10
	Dal (well-cooked)	50	50
	Non-veg.	0	0
Semi solid or solid foods	Rice	40	40
	Dalia	80	80
	Halwa	90	90
	Veg.	80	80
	Non-veg.	10	10
	Khichadi	60	60
	Soft chapati	100	100
	Fruits	60	60
	Eggs	10	10
	Ready to eat foods	Biscuits	70
Rusk		30	30
Corn flakes		10	10
Bread		50	50

though they were breastfeeding their infants, weaning was also started by them at right time and homemade weaning foods were given to the infants. On asking that why they had adopted such practices, some answered that they are doing so on doctor's advice, and most of them were following these practices as everyone does.

Conclusion:

The present study was conducted to discover the prevalence of breastfeeding, weaning pattern adopted by the mothers. Hundred subjects were selected for the study and area of study was Kalka Mata, Aganwadi centres, Udaipur city. The collected data shows excellent results regarding the practice of breastfeeding and weaning practices. Almost all the interviewed mothers were breastfeeding. Regarding the weaning pattern the results were very good as most of the infants were introduced to weaning at the right age. But instead of it there was a significant lack of knowledge regarding the adoption of these practices, as mothers were unknown to the importance of weaning and breastfeeding of the infants. Hence, it can be concluded that there is still a need to spread awareness about the facts why breastfeeding and proper weaning practices are important for growing infants. This can only be done by local people participation in awareness programs implemented by our government, NGO's and other organizations working for women and child welfare.

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