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Dr Anaswara Karthika Padmini

Assistant Professor, Department of Community Medicine, Dr SMCSI Medical College, Karakonam, Triyandrum, Kerala, India.

Dr Girija. Viswanathan

Retired Professor, Department of Community Medicine, SreeGokulam Medical College and Research Foundation, Venjaramoodu, Trivandrum, Kerala, India.

Correspondence: Dr Anaswara Karthika Padmini

Assistant Professor, Department of Community Medicine, Dr SMCSI Medical College, Karakonam, Trivandrum, Kerala, India.

Child Rearing Beliefs and Practices Among Rural Mothers in South Kerala

Dr Anaswara Karthika Padmini, Dr Girija. Viswanathan

Abstract

Background: Child rearing beliefs and practices are detrimental to the healthy upbringing of the child. Faulty practices can sometimes be harmful to the newborn. Thus child rearing beliefs practices are a major determinant of infant morbidity.

Objective: To find out the child rearing beliefs and practices among mothers in a rural village in the Kerala State in India.

Methods: Community based cross sectional study was done in the Nellanad Panchayath in the Trivandrum district in the state of Kerala, South India. 100 Mothers of children in the age group of one to three years were studied. Details regarding Socio-demographic profile, Feeding practices, Immunization, Cultural beliefs, Hygiene and Medication practices were collected by visiting the houses and conducting a survey, using the interview method. Analysis of the collected data were done using the trial version of SPSS 20. Descriptive statistics were used to summarize the data. Results: In the study, 99% mothers initiated breast feeding within four hours of delivery and 96% children received exclusive breast feeding in the first six months. While 10% mothers practiced self-medication for common ailments in children, 33% have used some kind of amulet for their children. All the children were fully immunized. Only 13 children have got at least one optional vaccine Conclusion: The majority of the study participants are following proper child rearing practices. Although the proportion of mothers following faulty practices are less in this study, these practices needs to be further discouraged.

Keywords: Child rearing practices, Mothers, India, Exclusive breast feeding, Immunization.

Introduction

Childrearing practices is the "transmission of the tradition, beliefs, culture and cognitive actions from parents to their off-spring" as described by Bouchard. [11] Child rearing practices includes feeding practices as well as traditional beliefs and practices which are detrimental to the proper and healthy upbringing of the off-spring. Religion, literacy and economic status of the family are some of the factors influencing the practices of child rearing in India. Kerala is well known for its good health indicators, particularly those related to mother and child health. (2) The knowledge regarding these child rearing practices is always beneficial to plan and implement child health programmes and to ensure their healthy upbringing. The aim of this study was to find out the child rearing beliefs and practices among mothers in the Nellanad Grama Panchayath, a rural village in Kerala.

Materials and Methods:

Study design: Community based cross sectional study.

Study population: 100 Mothers of children in the age group 1 to 3 years belonging to Nellanad, a panchayath in the Trivandrum district in Kerala.

Study period: One month during January 2019.

Tools and Data collection method: By visiting the houses and conducting a survey, we collected the data using the interview method with the help of a semi-structured questionnaire. Mothers who were available at home during the visit were included in the study and the details of the youngest child was collected from mothers having more than 1 child in the selected age group. Information regarding Age of mother, Age at marriage,

Religion, Educational qualification, Occupation, Type of family, feeding practices, Cultural beliefs, Immunization, Medication practices and Hygiene were collected.

Statistical analysis: Analysis of the collected data were done using the trial version of SPSS 20. Descriptive statistics were used to summarize the data.

Results:

Total study participants (N) were 100 Mothers. The mean age of the study participants was found to be 27.98 years (SD = 3.45). The mean age at their marriage was 22.69 years (SD = 3.17). The Mean age of children was found to be 2 years (SD = 0.80).

The socio demographic details of the study participants is given in table 1.

Table 1: The socio demographic profile of the study participants (The total number of study participants, N= 100).

Sociodemographic Factors		Frequency
Religion	Hindu	54
	Muslim	18
	Christian	28
Type Of Family	Nuclear	63
	Joint	37
Education of The Mothers	Illiterate	0
	Upto Higher Secondary Level	60
	Graduation And Above	40
Occupation of The Mothers	Employed	36
	Unemployed	64

Details regarding various feeding practices, traditional beliefs followed, health care and hygiene related practices were collected and analyzed to assess the child rearing practices (Table2).

Table 2: Distribution of study participants based on child rearing practices (N=100).

Child maning museting	Number of study participants		
Child rearing practices	Yes	No	
Feeding practices			
Prelacteal feeds given	12	88	
Ever given artificial feeds	29	71	
Feeding on demand	78	22	
Bottle feeding	62	38	
Continued breast feeding when the child had illness	100	0	
Continued breast feeding when mother had illness	20	80	
Traditional beliefs and practices			
Kajal used during infancy	52	48	
Oil massage given	100	0	
Amulets used	33	67	
Seeking service from traditional healers	1	99	
Health and hygiene practices			
Self-medication practiced	10	90	
Deworming of the child done	84	16	
Modern medicine was preferred	99	1	
Utilization of public health care services for the child	20	80	
Boiling of drinking water	100	0	
Giving Bath daily	100	0	
Trimming of nails regularly	86`	30	

Breast feeding was initiated within 1 hour of child birth by 95% of the study population. 96% mothers exclusively breast fed the infant upto 6 months of age. All the children were found to be fully immunized for the age. And 13% children had received at least one optional vaccine. All mothers continued breast feeding even when child had illness. All the mothers practiced sanitary method of disposal of faeces of their child by flushing it in the toilet.

Discussion:

This study was done to find out the various child rearing beliefs and practices among rural mothers in South Kerala and it showed that the overall performance of participants in parenting was found to be good compared to studies from other states in India.^[3,4] In a study done by MKC Nair on Parenting practices in Kerala, positive attitudes were

observed in key indicators of child-rearing practices among the study population, which is in line with findings of this study^[5]

Child rearing practices like feeding practices are the major determinant of infant morbidity. [6] And it was observed that 95% mothers initiated breast feeding within 1 hour of child birth which is in accordance with guidelines by the WHO. [7,8] Here, 96% participants reported that they practiced exclusive breast feeding of the infants up till 6 months of age. In a study done in rural Goa it was found that only 74% mothers initiated breast feeding within 1 hour of child birth and, only 37.59% mothers breast fed the infants exclusively up till 6 months of age. [9]

In a study to Explore Cultural Child Rearing Practices among Women in Village Manakpura, Patiala, breast feeding initiation was delayed in almost all cases(> 50%)

did not even initiate within 48 hrs). [10] Exclusive breast feeding only continued through 2 months in a study by Deshpande while in the present study, early initiation of breast feeding was done by 63%. Only 12% mothers gave prelacteal feeds. In two studies done in rural Goa, and Maharastra, prelacteal feeds were given by 25% and 27% of the mothers respectively. [9,11] 96% mothers gave prelacteal feeds in the study from Patiala. [10,11] In our study, 62% children were bottle fed while only 16% mothers used bottle feeding in the study from North India. (11) this difference in the prevalence may be due to the fact that more mothers in our study were employed and were unavailable at home to breastfeed the babies.

All the children were fully immunized for their age in this study. [12,13]) Only 98.37% children completed Immunization for age in another study done in India. [9] The practice of using amulets for the babies was found among 33% participants in this study while it was 74% in the study from North India and 63.8% in a study from South India. [10] It was also found that Self-medication for common childhood illnesses were practiced by 10% mothers in the study from rural area in Punjab which was similar to the observations in the current study. [10,14] Another important finding is that all the mothers practiced sanitary method of disposal of faeces of their children by flushing it in the toilet which is a safe and healthy practice as compared to open defecation which is highly prevalent in many states in India. [15,16]

Recall bias may have influenced the results and that is the limitation of this study.

Conclusion:

The results related to feeding practices, immunization and hygiene practices in the study shows that the majority of the study participants are following child rearing practices according to the current guidelines. Although the proportion of mothers following faulty practices are less in this study, these practices need to be further discouraged as many of them can lead to under nutrition, infections and poor health. Since child rearing practices directly influence the health of the child, healthy practices must be emphasized, and the faulty ones need to be corrected by educating the people. As child rearing practices are influenced by socio-demographic and cultural factors, the best cost-effective method of intervention is to provide health education to young mothers to replace faulty age-old practices with sound and scientific methods.

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