



doi: <https://doi.org/10.20546/ijcrar.2021.911.003>

## Correlate the Feeding Practice of Mother with Nutritional Status of their Children at Selected Rural Community Kolar, India

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### Abstract

The process of growth and development begins before the baby is born, i.e. in the mother's womb. During the first few months of life, a child's growth and development are fast. As a result, it is even more critical that newborns receive additional food in addition to breast milk at the appropriate age and in adequate quantities to allow them to grow and remain healthy. Breast milk is the best milk, and breast milk is the finest natural nutrition. Mother's milk is an infant's primary source of nutrition. Breast feeding is the most effective technique to give a baby with a loving atmosphere and a balanced diet. It satisfies the newborns' dietary, emotional, and psychological demands. The study's conceptual framework is based on Becker's (1975) health belief model, which was derived from Rosenstochoch's (1974). The study takes a descriptive approach, and data was collected using a non-experimental strategy. A total of 100 moms with children were chosen using the purposive sampling approach. The research variable is moms' feeding practices and children's nutritional status. It relates to chosen demographic factors of women such as age, religion, education, occupation, kind of job, family income, family type, dietary pattern, and sources of knowledge on feeding practice. The Structured Interview Schedule was created in order to collect data. The study confirms that the majority 42 percent of mother's feeding practices were unsatisfactory or moderately satisfactory, while only 16 percent of mother's feeding practices were satisfactory, and the majority 74 percent of children were underweight, while only 26 percent of children were normal weight. However, there is a moderately good association between mothers' feeding practices and children's nutritional health. The individuals acquired the highest mean percentages in the dimensions of length (62.02 percent), chest circumference (43.60 percent), and head circumference (42.24 percent), with the lowest observed in the dimension of weight (6.55 percent). The mean BMI is 16.91, with a standard deviation of 2.60. The total feeding habits were found to be 56.68 percent with a standard deviation of 6.84, implying that BMI is somewhat positively connected with mothers' feeding practices.

### Article Info

Accepted: 15 October 2021

Available Online: 20 November 2021

### Keywords

Feeding practice; nutritional status; mother; children: Body Mass Index.

### Introduction

The birth of a child in a family is a one-of-a-kind and significant event in the life of a Mother. Nothing brings

more joy to a mother than a regular, healthy child. To accomplish this, mothers must be knowledgeable about feeding with clarity. Balanced and sufficient nutritional intake is most important for children to promote optimal

growth and development, to protect and maintain health, to prevent nutritional deficiency conditions and various illnesses, and to reserve for starvation and dietary stress. Breast milk is the natural diet for newborns; it supplies all of the energy and nutrients that the infant need during the first months of life and continues to give up to half or more of a child's nutritional needs beyond that.

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Breast feeding has several advantages since it provides all of the nutrients required for the newborn's growth, it facilitates calcium absorption, it aids digestion, it protects the infant from allergies, and it is cost effective in terms of money, time, and energy. To reap the most advantages, breastfeeding must be exclusive, begun within half an hour of delivery, and sustained for the first 6 months following birth. Breastfeeding should be continued exclusively for 6 months.

Weaning is the slow and steady transition of an infant from breast milk to the typical family diet. Complementary feeding should begin at 6 months since mother's milk alone is insufficient for the child's growth and development.

Supplemental feeding should begin around 6 months of age, which means that the newborn should begin consuming food in addition to breast milk. It should be sufficient in terms of amount, frequency, and consistency. Meals should be prepared and provided in a safe manner when using a range of foods to meet the nutritional demands of a growing child.

Tooth delay, gastro intestinal difficulties such as vomiting, diarrhea, constipation, and malnutrition are all nutritional issues that impact newborns. Malnutrition is a serious health concern in our nation that primarily affects newborns. Malnutrition is defined as a pathological state caused by a relative/absolute shortage or excess of one or more necessary nutrients.

The WHO recommends exclusive breastfeeding for the first six months, which can be accomplished by starting breastfeeding within the first half hour of life, exclusively breastfeeding the infants only with breast milk and without any other foods or drinks, not even

water, breastfeeding on demand (as often as the child wants, day and night), and limiting the use of bottles, teats, or pacifiers.

In 2020, India's infant mortality rate was 29.07 deaths per thousand live births. Over the previous 50 years, India's infant mortality rate has moderated, falling from 139.19 deaths per thousand live births in 1971 to 29.07 deaths per thousand live births in 2020.

Because their mothers did not feed them first milk, 36.8 percent of males and 41.5 percent of girls had stunted growth, compared to 30 percent of boys and 28.9 percent of girls who received it as babies. This concerning discovery stems from a research done in the state. According to the research 'Nutrition and Childhood Diseases in Karnataka,' children who are denied their mothers' first milk have a greater risk of malnutrition.

According to the World Bank, India ranks second in the world in terms of the number of malnourished newborns, trailing only Bangladesh, where 47 percent of infants are malnourished. Underweight infant mortality in India is among the worst in the world, approximately double that of Sub-Saharan Africa, with disastrous effects for mobility, mortality, productivity, and economic growth.

Child mortality rates have been cut in half globally during the previous two decades, a development success storey. Nonetheless, improvement has been unequal, and death rates in certain nations have recently climbed. The current study reveals a slower drop in newborn death rates in India, which deviates from long-term patterns.

The key causes of childhood death are also evaluated, and strategic solutions for India's many states are recommended, taking existing mortality rates and the amount of progress in each states into consideration. The decreasing drop in childhood death rates in India need novel techniques that go beyond disease- and program-based interventions.

Globally, child death rates have been cut in half over the previous three decades, a development success storey. Nonetheless, improvement has been unequal, and in certain nations, death rates have recently climbed.

The current study reveals a slower drop in newborn death rates in India, a break from longer-term patterns. The key causes of childhood death are also examined, and strategic solutions for India's many states are given, taking into consideration existing mortality rates and the

amount of advancement in each states. The sluggish drop in childhood death rates in India need innovative techniques that go beyond disease- and program-awareness.

Because women are entirely responsible for breast-nursing, weaning, and preparing various types of meals for their children, they should be knowledgeable about feeding in order to prevent malnutrition and promote maximum health for their children.

Malnutrition in children is a complicated issue that must be addressed within the context of a broader framework of child care, including eating habits. So that community health nurses may help moms improve or change their feeding patterns as needed to promote the health of their children. As a result, the purpose of this study was to link a mother's feeding habits to the nutritional health of her children in a rural community in Kolar.

The main objectives of this study includes to evaluate the mother's feeding habits and to assess children's nutritional status. Also to link mothers feeding habits to their children's nutritional health.

### **Materials and Methods**

A descriptive research approach with Non-experimental research design was considered appropriate in order to accomplish the objectives of the study.

The Research variable Feeding practice of mothers and nutritional status of children and Demographic variable of mothers includes age, religion, education, occupation, type of work, family income, type of family, dietary pattern, sources of information of feeding practice demographic variables of children include gender, birth weight, type of delivery, place of delivery, delivery conducted by, any birth injuries, and any birth defects.

By adopting purposive sampling technique 100 Primi mothers with children (4-8months) residing at selected rural community Kolar were selected for the present study by following

### **Inclusion Criteria**

Primi mothers who are available to gather data.  
Primi mothers who are willing to take part in the research.

Primi mothers between the ages of 18 and 45.

Primi mothers with children between the ages of 4 and 8 months.

### **Exclusion Criteria**

Primi mothers who have had children adopted.

Primi mothers with physically and mentally disabled children.

### **Data collection tool**

Structured interview schedule was developed to collect data It was is divided into 3 section, Section I: This part of the tool consists of questions related to demographic data. Section II: This part of the tool consists of questions related to feeding practice of mothers. Section III: It consists of nutritional status of the children, anthropometric measurements.

### **Operational definitions**

Following definitions were used in the study

### **Correlate**

It refers to relationship between feeding practice of mothers with nutritional status of their children.

### **Feeding practice**

It refers to the pattern of feeding that are commonly practiced by mother includes breast feeding, feeding technique, number of feeds per day, weaning diet and quality and quantity of food stuff for their children.

### **Nutritional status**

It refers to assessment of selected nutritional parameters such as length, weight, head circumference and chest circumference of the children.

### **Children**

It refers to the individual whose age is 4-8months which includes both male and female.

### **Mothers**

It refers to the primi mothers aged between 18-45yrs and having children of 4-8months.

## **Delimitations**

The study is limited to primi mothers of age group between 18-45yrs.

The study is limited to primi mothers with children of age group between 4-8months.

## **Results and Discussion**

The data were analyzed on the basis of the study objectives, using both descriptive and inferential statistics. Findings are organized in the following headings

### **Section-I: Demographic profile of mothers and their child**

#### **Description of demographic profile of mother**

The proportion of mothers according to their age of majority 68 percent of moms were between the ages of 18 and 24, 30 percent were between the ages of 25 and 31, and 2 percent were between the ages of 32 and 38. The Hindu faith is practised by the vast majority of people.

According to the study's findings, the majority (38%) finished Higher Secondary Education, 22% completed Secondary Education, 18% completed Intermediate, 10% completed Primary Education, 8% were Graduates, and 4% were Illiterates. In terms of occupation, the vast majority (98%) were housewives, with only 2% working in agriculture. In terms of work type, the majority (98%) were sedentary employees, with only 2% being heavy workers.

The majority of participants' household income was Rs.5001-10000/-, 26% had less than Rs.5000/-, 18% had 10001-15000/-, 6% had 15001-20000/-, and just 2% had more than Rs.20001/-. In terms of family type, the majority (74%) belongs to a joint family, 22% to a nuclear family, and only 4% to an extended family.

According to the eating pattern of mothers, the majority 88 percent were Mixed and 12 percent were Vegetarian. The majority (56%) obtained knowledge from family members/relatives/friends, 40% obtained information from health personnel, and only 4% obtained information from newspapers/health magazines.

## **Description of demographic profile of children**

According to the study's findings, the majority of children were 8 months old, 34% were 4 months old, 10% were 6 months old, 6% were 5 months old, and 4% were 7 months old. In terms of gender, the bulk of children (62%) were males, while just 38% were females. In terms of birth weight, the majority of infants had 2.5-3.5kgs, 22% of children had >3.5kgs, and just 4% of children had 2.5kgs. The majority, 70%, had a vaginal delivery and 30% had a caesarean section. In terms of delivery location, the majority (96%) were hospital deliveries, while 4% were home deliveries. Doctors performed 96 percent of deliveries, while family members performed only 4 percent. In terms of birth injuries, the vast majority of children were free of them. The vast majority of youngsters had no birth abnormalities.

### **Section II: feeding practices of mother and nutritional status of child**

Mother feeding habits revealed that 42 percent of primi mothers' feeding practices were unsatisfactory or somewhat satisfactory, whereas just 16 percent of primi mothers' feeding practices were good.

The majority of children have a good nutritional state. Only 26% of children were maintaining a normal weight, while 74% of youngsters were underweight.

The feeding practice scores of primi mothers, the maximum mean percentage obtained by the subjects in the aspects of Monitoring the child for nutritional status (80.0 percent), Exclusive breast feeding and its techniques (65.80 percent), Preparation and Serving of Supplementary diet (55.8 percent), Weaning (42.6 percent), and the least feeding practice was found in the aspect of Problems of Supplementary diet (42.6 percent) (40.5 percent). The total feeding habits were 56.68 percent with a standard deviation of 6.84.

The nutritional status of children, as measured by the mean percentage of subjects in the aspect of Length (62.02 percent) Chest Measurement (43.60 percent) Head circumference (42.24 percent) was determined to be the least in terms of weight (6.55 percent). The mean BMI was 16.91, with a standard deviation of 2.60.

**Table.1** Mean, Mean percentage and standard deviation for the feeding practice scores of mothers

N=100

Sl. No.	Feeding Practices	No. of Items	Max Score	Mean	Mean %	Median	SD
1	Exclusive breast feeding and its techniques	21	21	13.82	65.80	14	1.66
2	Weaning	15	15	6.39	42.6	4	5.29
3	Preparation and Serving of supplementary diet	5	5	2.79	55.8	3	2.88
4	Problems of supplementary diet	4	4	1.62	40.5	1.5	0.74
5	Monitoring the child for nutritional status	5	5	4.00	80.0	4	0.00
<b>Overall Feeding Practices</b>		50	50	28.34	56.68	28	6.84

**Table.2** Mean, Mean percentage and standard deviation for the nutritional status

N=100

Sl. No.	Variables	Mean	Median	SD
1	Weight (kg)	6.55	6.85	1.518
2	Length (cm)	62.02	63.5	6.656
3	Head Circumference (cm)	42.24	42	2.571
4	Chest Circumference (cm)	43.60	44	3.172
<b>BMI</b>		16.912	17.5	2.609

**Table.3** Correlation between the feeding practices and nutritional status

N= 100

Sl. No.	Variables	Mean	SD	Pearson's 'r' value	Inference
1	Feeding Practices	28.34	6.845	0.588	Moderate Positive Correlation
2	Nutritional status (BMI)	16.912	2.609		

**Fig.1** Feeding practices of mother

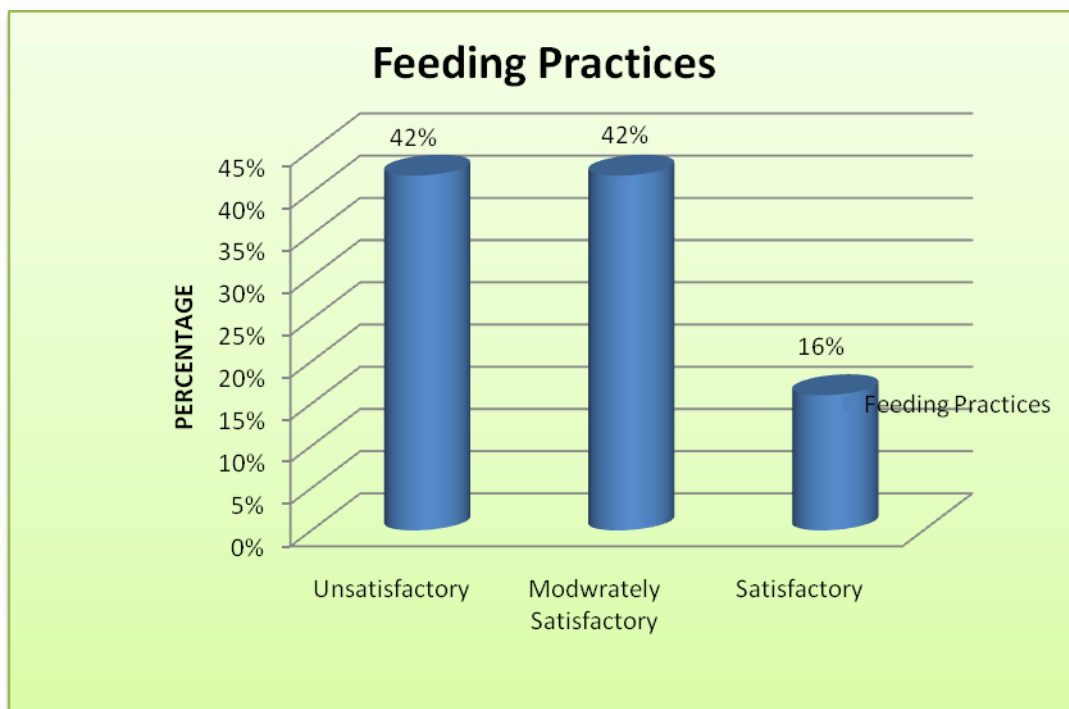
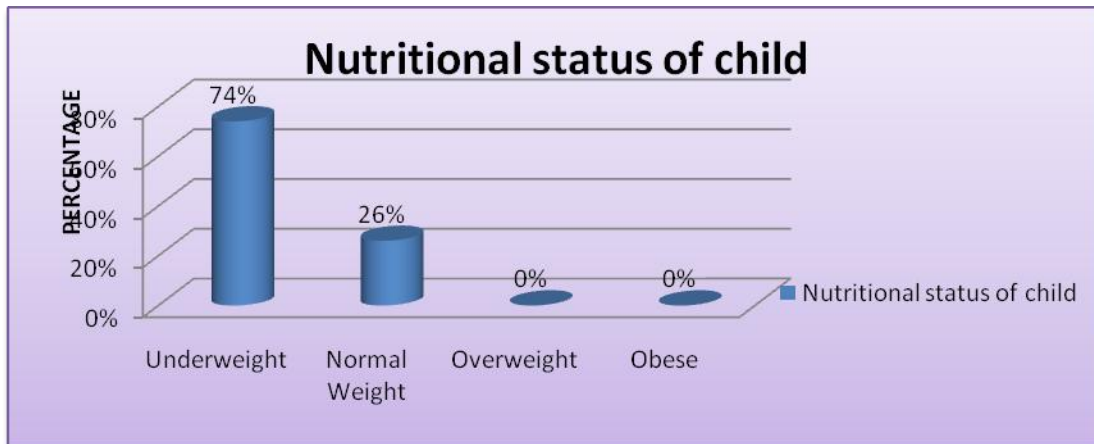


Fig.2 Nutritional status of child



### Section III: correlation between the feeding practices and nutritional status

The correlation between the feeding practices and nutritional status it is evident that there is moderate positive correlation between the feeding practice of mothers and nutritional status of children. It shows that when there is correlation between feeding practices of mother with nutritional status of child and vice versa. Education programme with effective teaching strategies will help mothers to improve their feeding practices in recognition of early signs of nutritional deficiencies and nutritional assessment of children, improve their feeding practices etc.

Various Teaching strategies can be used to improve in their knowledge on feeding the infant, identifying the nutritional deficiencies in order to promote health of the children.

Nursing education emphasizes on preparing dedicated nurse to impart health education both in community settings and clinical areas by using various methods of educational technology to improve the feeding practices

Nursing administration should have proper vision and mission while making and implementing the policy with regard to health care of the children. Since children are the dependable and vulnerable population, mothers should be taken into consideration for the improvement of children's nutritional status.

### Limitation

The study is limited to mothers of selected rural community at Kolar.

Convenient sampling limits the generalization of the study.

Long-term follow-up could not be carried out due to time constraints.

### Recommendations

A similar study can be replicated on larger sample to generalize the findings.

An experimental study can be undertaken with a control group for effective comparison of the results.

The study can be conducted by including additional demographic variables.

A similar study can be recommended by using different method of teaching.

### Ethical approval

The study was approved by the Institutional Ethics Committee

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**How to cite this article:**

Harish Kumar A. R. and Bhavya S. V. 2021. Correlate the Feeding Practice of Mother with Nutritional Status of their Children at Selected Rural Community Kolar, India. *Int.J.Curr.Res.Aca.Rev.* 9(11), 16-22.  
doi: <https://doi.org/10.20546/ijcrar.2021.911.003>