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KAP study of mothers on complementary feeding practices residing at Gandhinagar city

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Abstract

Present study was conducted with aim of “KAP study of mother’s on complementary feeding practices residing at Gandhinagar city” Present study was conducted with descriptive and survey method. For data collection, a pre-structured an ideal questionnaire was used. Total 100 6-23 months child’s were randomly selected from four areas of Gandhinagar city of Gandhinagar district of Gujarat state. Suitable statistical analysis was applied. The result of the present study concluded that overall, KAP study of mother’s on complementary feeding practices of mother’s at age of 6-23 months of child was not good. Anthropometric measurement was not normal and majority of selected 6-23 months of child age had lower measurement than the standards. Only 50% or half of selected population had overall good appearance.

Keywords: Pre-structured, population, appearance

Introduction

Complementary feeding, when foods are introduced to complement a milk-based diet, generally occurs between 6 and 23 months of age. It is a critical period for both physical and cognitive development. During this period, the growth rate of the brain is one of the fastest during the life span and, consequently, the timing, dose, and duration of exposure to specific nutrients can result in both positive and negative effects. Complementary feeding is more than ensuring an adequate intake of nutrients; it also is about avoiding excess intakes of calories, salt, sugars, and unhealthy fats. Therefore, in addition to what a child is fed, attention to how a child is fed is also important. In this review, 12 topics relevant for updating global guidance on complementary feeding were identified: age of introduction of complementary foods; continued breastfeeding; responsive feeding; safe preparation and storage of complementary foods; food textures, flavors, and acceptance; energy and meal and snack frequency; fats, protein, and carbohydrates; dietary diversity; milks other than breast milk; fluid needs; unhealthy foods and beverages; and use of vitamin and mineral supplements or supplementary foods. Foods used in complementary feeding are Combination of cereals and pulses (Khichdi, Dal-rice, etc.), locally available staple foods such as idli, dosa, dhokla, ragi, chapatti, roti, paratha with oil/ghee, and some amount of sugar. Mashed banana, other pulpy fruits (e.g., mango, papaya), sweet potato, and potato, Milk- based cereal preparations Sprouts, pulses, legumes, groundnuts, almonds, cashewnuts, raisins (Note: Any nut should be well grinded and mixed with food as

solid pieces may cause choking in young children). During the period of complementary feeding, children are at high risk of Undernutrition Complementary foods are often of inadequate nutritional quality, or they are given too early or too late, in too small amounts, or not frequently enough. Premature cessation or low frequency of breastfeeding also contributes to insufficient nutrient and energy intake in infants beyond 6 months of age. Around the age of 6 months, an infant’s need for energy and nutrients starts to exceed what is provided by breast milk, and complementary foods are necessary to meet those needs. An infant of this age is also developmentally ready for other foods. If complementary foods are not introduced around the age of 6 months, or if they are given inappropriately, an infant’s growth may falter. Guiding principles for appropriate complementary feeding are:

- Continue frequent, on-demand breast feeding until 2 years of age or beyond;
- Practice responsive feeding (for example, feed infants directly and assist older children. Feed slowly and patiently, encourage them to eat but do not force them, talk to the child and maintain eye contact);
- Practice good hygiene and proper food handling;
- start at 6 months with small amounts of food and increase gradually as the child gets older;
- Gradually increase food consistency and variety;

Importance of complementary feeding

- Good nutrition in the first two years of life is crucial. Therefore, to grow and stay healthy, young children

need a variety of nutritious foods such as meat, fish, pulses, grains, eggs, fruits and vegetables, as well as breast milk.

- Foods such as mashed vegetables and copped meat, eggs or fish should be added to the child’s diet as often as possible.
- Starting at six months of age, feed babies freshly prepared energy and nutrient rich complementary foods, while continuing to breastfeed the baby up to two years of age and longer.
- A child’s stomach is smaller than an adult’s, so a child cannot eat as much at one meal. However, children’s energy and body-building needs are great. It is important that children eat frequently to provide for all their needs.
- Complementary feeding ensures healthy growth and development of children through the variety of nutritious food introduced in addition to breast milk.
- Good nutrition, care and hygiene, especially in the first two years of life, are necessary to prevent children from becoming too short for their age (stunted).

Objectives

1. To Study KAP of mothers feeding on complementary practices residing at area of Gandhinagar City.

Methodology

The present study was conducted in the city area of Gandhinagar district, Gujarat state. Four areas selected purposely for conducting the study. The main purpose of selecting the Gandhinagar district is that it has been identified as a less awareness of nutrition. During the period of investigation, lists of 6-23 months old child attaining Anganwadi were prepared from each selected area with the help of a data sheet obtained from Anganwadi of Gandhinagar taluka. Then, a sample of 100 child was drawn by following a proportionate random sampling technique. To collect the information in person, the per-structured interview schedule was used. The data were collected through personal interviews of the respondent’s parents. The respondents were interviewed either at their residence or at their Anganwadi center. Then, the data were classified, tabulated, processed and analyzed to obtain the result. For the present study, Percentage method was applied for the testing significance.

Results and Discussions

Table 1: Time of first received breast milk

Time of first received breast milk	Percentage (%)
Within one hour	81
After one hour	19
Total	100

Table 1 depicts the data regarding time slot of first received breast milk. In the present study, 81% selected 6-23 months child’s mother were breast fed their child within one hour. 19% selected 6-23 months child’s mother were breast fed their child after one hour. Thus, it can be concluded that majority i.e. 81% selected 6-23 months child’s mother were breast fed their child within one hour which is good for

health of child.

Table 2: First feed of baby after delivery

First feed of baby after delivery	Percentage (%)
Galthuthi	13
Mother’s milk	83
Powder’s milk	4
Total	100

Table 2 depicts the data related to first feed of baby after delivery. In the present study, 13% selected 6-23 months child had Galthuthi as a first feed after delivery. 83% selected 6-23 months child had Mother’s milk as a first feed after delivery. Only 4% selected 6-23 months child had Powder’s milk as a first feed after delivery. Thus, it can be concluded that majority i.e. 83% selected 6-23 ms child had Mother’s milk as a first feed after delivery.

Table 3: They had Mamta card and they taken all Vaccination regularly

Had Mamta card/ Child taken all Vaccination	Percentage (%)
Yes	100
No	00
Total	100

Table 3 depicts the data related to had Mamta card and all child were taken all Vaccination regularly. In the present study, 100% selected 6-23 months child mother’s had Mamta card and all child were taken all Vaccination regularly. Thus, it can be concluded that means majority of selected 6-23 months child mother’s had Mamta card and all child were taken all Vaccination regularly.

Table 4: Which food were given as a complementary food

Which food were given as a complementary food	Percentage (%)
Mother’s milk	8
Animal milk	38
Both	41
Other	13
Total	100

Table 4 depicts the data related to complementary food. In the present study, 8% selected 6-23 months child had a Mother’s milk as a complementary food. 38% selected 6-23 months child had a Animal milk as a complementary food. 41% selected 6-23 months child had a both as a complementary food. 13% selected 6-23 months child had a other food as a complementary food. Thus, it can be concluded that majority i.e. 41% selected 6-23 months child had a both milk as a complementary food, But most off complementary food from animal milk i.e. 38% selected 6-23 months child.

Table 6: Frequency of feeding

Frequency of feeding	Percentage (%)
7-8 times a day	72
As per child demand	28
Total	100

Table 5 depicts the data regarding frequency of feeding. In the present study, 72% selected 6-23 months child were fed

7-8 times a day. 28% selected 6-23 months child were fed as per child demand. Thus, it can be concluded that majority i.e. 72% selected 6-23 months child were fed 7-8 times a day.

Table 6: Food group

Food Groups	Percentage (%)
Fruits, Cereals and Pulses	7
Fruits, Cereals, Pulses, Milk and milk products and Jaggery	84
Fruits, Milk and milk products and Sugar	9
Total	100

Table 6 depicts data regarding food groups of 6-23 months child. In the present study, 7% selected 6-23 months child were consumed Fruits, Cereals and Pulses. 84% selected 6-23 months child were consumed Fruits, Cereals, Pulses, Milk and milk products and Jaggery. 9% selected 6-23 months child were consumed Fruits, Milk and milk products and Sugar. Thus, it can be concluded that majority i.e. 84% selected 6-23 months child consumed Fruits, Cereals, Pulses, Milk and milk products and Jaggery.

Table 7: Quantity of food at one time

Quantity of food at one time	Percentage (%)
½ bowl	19
1 bowl	39
> 1 bowl	19
As per child demand	23
Total	100

Table 7 depicts the data regarding to quantity of food at one time. In the present study, 19% selected 6-23 months child were taken ½ bowl at one time. 39% selected 6-23 months child were taken 1 bowl at one time. 19% selected 6-23 months child were taken >1 bowl at one time. 23% selected 6-23 months child were taken as per their demand at one time. Thus, it can be concluded that majority i.e. 39% selected 6-23 months child were taken 1 bowl at one time.

Table 8: Sickness of child and treatment of place

Sickness of child	Treatment of place	Percentage (%)
Yes	PHC center	13
No	-	87
Total	-	100

Table 8 depicts the data regarding sickness of child and place of treatment. 13% selected 6-23 months child were sicked and their treatment given at PHC center. 87% selected 6-23 months child were no sicked. Thus, it can be concluded that majority i.e. 87% selected 6-23 months child were no sicked.

Conclusion

Inappropriate complementary feeding practices like early or late initiation of complementary feeding, feeding the child less quantity or poor-quality diet is the root cause of child malnutrition. From above results, the present study concluded that overall, KAP study of mother's on complementary feeding practices of mother's at age of 6-23

months of child was not good. Anthropometric measurement was not normal and majority of selected 6-23 months of child age had lower measurement than the standards. Only 50% or half of selected population had overall good appearance.

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