

An Assessment of Knowledge and Practices of Rural Women Regarding Infant Care, Jaipur District, Rajasthan.

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Abstract:

Infants are the most crucial resources of the country. A healthy generation of infants will lead to healthy generation of adults. His whole some growth and his happiness depend upon the ministrations of others, particularly upon his mother. The mother plays a pivotal role in the life of her infant. But it is generally observed that rural mother have lack of knowledge and they are more traditionally bound and are steeped in superstitions, ignorance and false beliefs especially with regard to infant care. Hence present study was an attempt to assess the knowledge and practices followed by rural area women regarding infant care. Study was conducted in village Ramjipura khurd in jaipur district. A total number of 50 women from selected rural area and who had at least one child in the age of 0-24 month were selected for the study. The data were collected through structured interview schedule. Results reveal that majority (54%) of mother were in low knowledge category regarding infant care. Further it was also found that majority (62%) rural area women were poorly followed the infant care practices. And as compare to all selected aspects, in clothing and immunization aspect they had very poor knowledge and practices.

Introduction

Today's infant is a responsible citizen of future. Infants are the most crucial resources of the country. A healthy generation of infants will lead to healthy generation of adults. Infancy is a highly vulnerable period in which many psychological and physiological adjustments to life outside uterus must be made. The 0-2 years of human life is a period of wordless oblivion which is yet to root significance for individual development. Infant growth and development depends upon the degree of care in the early year that mother takes for their child. Child rearing practices are therefore "influenced largely by practices that have been passed from one generation to another generation while some of these practices are innocuous and some beneficial, many are definitely harmful for the optimal growth and well being of the infants and young children Bafna et al. (1974).

The mother plays a crucial role in the life of her infant. But it is generally observed that rural area mother spent very little time for looking after their children, as they remain busy in wages and household work and followed traditional practices regarding infant care. Singh et al. (1997) and Manju and Madhu (2008) findings also stated that rural woman are very poor in knowledge and practices regarding infant care. Hence there is scope for improvement in knowledge and practice of rural area women regarding infant care by educational intervention programme, for any educational interventional/training programme, it is needed to assess the existing knowledge of target group. Thus the present study was conduct to assess the knowledge and find out practices of rural area women regarding infant.

Methodology

The present study was conducted in one randomly selected village "Ramjipura khurd" in jaipur district. A sample of available fifty rural area women who had at least one child in the age of 0-2 years was selected. Descriptive survey research design was used for the study. For data collection structured

interview schedule was developed to assess the knowledge and practices of rural area women regarding infant care. Two point scale test (dichotomous test) was used to measure the knowledge and practices regarding infant care. The knowledge and practice score of the each respondent were calculated by assigning marks for the correctly answered question. Each respondent scored 1 point for the correct response and 0 for the wrong responses. A maximum score of 50 was possible for knowledge test and maximum score of 25 was possible for practices test. Data were analyzed by using some suitable statistical measure.

Results And Discussion

This chapter deals with findings of the present investigation.

Table:-1

Distribution of respondent by their overall level knowledge regarding infant care

KNOWLEDGE LEVEL	F	%
Low (0-16)	27	54.00
Medium (17-33)	15	30.00
High (34 -50)	8	16.00
TOTAL	50	100.00

Table 1 shows the overall percentage of sample with low, medium, high levels of knowledge regarding infant care. Table depicts that (54%) of the samples were in low levels of knowledge category followed by (30%) of the sample were at medium level of knowledge and only (16%) of respondents had high knowledge regarding infant care. Similar results were found by Able (1985), and Siali et al. (1992), they also reported that women were poor in knowledge regarding various aspects of infant care.

Table:-2

Level of knowledge regarding various aspect of infant care

Sr. NO.	Aspects	No. of Respondents					
		Low (0-3)		Medium (4-6)		High (7-10)	
		F	P	F	P	F	P
1	Breastfeeding	24	48.00	18	36.00	8	16.00
2	Complimentary feeding	27	54.00	13	26.00	10	20.00
3	Bathing	26	52.00	16	32.00	8	16.00
4	Clothing	30	60.00	14	28.00	6	12.00
5	Immunization	31	62.00	12	24.00	7	14.00

Table 2 present the information about distribution of respondents by their different aspects wise level of knowledge regarding infant care.

Breastfeeding

The table 2 shows that in breast feeding aspect maximum numbers of respondents (48%) were in low level knowledge category. While (36%) of the respondents were found to possessed medium level knowledge and only (16%) of the respondents were found to be high knowledge.

Complimentary feeding

Above table further reveals knowledge regarding complementary feeding aspect of infant care, its shows that majority (54%) of the respondents were found in low knowledge about complementary feeding aspect of infant care, they did not had knowledge about proper complementary feeding practices of the infant etc. Whereas (26%) of the respondents were found in medium level of knowledge category and only (20%) of the respondents possessed high level of knowledge regarding complementary feeding of infants.

Bathing

Table 2 also indicate that maximum percentage of respondents (52%) were possessed low knowledge regarding bathing of infant. Followed by (32%) of the respondents were found to possessed medium level knowledge and only (16%) of the respondents were found to be high knowledge of bathing of infant.

Clothing

In clothing aspect it shows that majority (60%) of the respondents were found in low level of knowledge. Whereas (28%) of the respondents were found in medium level of knowledge category while only (12%) of the respondents possessed high knowledge regarding clothing of infant.

Immunization

Table 2 also depicts that maximum numbers of respondents (62%) were having low knowledge in immunization aspect of infant care. Followed by (24%) of the respondents were found to possessed medium level knowledge and (14%) of them were found to be high in knowledge regarding various dimensions of immunization.

Table: - 3

Level of practices regarding various aspects of infant care

Sr. NO.	Aspects	No. of Respondents					
		Low (0-1)		Medium (2-3)		High (4-5)	
		F	P	F	P	F	P
1	Breastfeeding	26	52.00	15	30.00	9	18.00
2	Complimentary feeding	28	56.00	14	28.00	8	16.00
3	Bathing	27	54.00	16	32.00	7	14.00
4	Clothing	31	62.00	14	28.00	5	10.00
5	Immunization	32	64.00	14	28.00	4	8.00

Table 3 shows the percentage of sample with low, medium, high levels of practices regarding different aspect of infant care.

Breastfeeding

The table 3, shows the percentage of sample with low, medium, high levels of practices regarding breast feeding of infant. Table revealed that (52%) of the samples were having low levels of breast feeding practices. While (30%) of respondents were in medium level category and only (18%) were in high level of feeding practices category.

Complimentary feeding

Table 3, further indicate that (56%) of the samples were having low levels of complementary feeding practices. Followed by (28%) of respondents had medium level of practices regarding complementary feeding of infant and (16%) of sample were in high level of complementary feeding practices.

Bathing

Table 3, also shows that (54%) of the samples were having low levels of bathing practices. (32%) of respondents had medium level of practices regarding bathing of infant and (14%) of sample were in high level of bathing practices.

Clothing

Table shows the percentage of sample with low, medium, high levels of practices regarding infant clothing. It indicate that (62%) of the samples were having low levels of clothing practices. While (28%) of respondents had medium level practices regarding clothing of infant and only (10%) of sample were in high level of clothing practices.

Immunization

Table 3, further indicate that (64%) of the samples were having low levels of immunization practices. Followed by (28%) of the respondents were found to posses medium level practices and (8%) of them were found to be high in practices regarding various dimensions of immunization.

Table: - 4

Distribution of respondent by their overall level of practices regarding infant care

LEVEL OF PRACTICES	F	%
Low (0-8)	31	62.00
Medium (9-16)	12	24.00
High (17-25)	7	14.00
TOTAL	50	100.00

Table 4 depicts the percentage of sample with low, medium, high levels of practices regarding infant care. Table shows that (62%) of the samples were having low levels of infant care practices, (24%) percent had medium level practices and (14%) were in high level of infant care practices. Similar results were found by Singh et al. (1997), Taneja et al. (1998) and Manju and Madhu (2008) they also reported that majority of rural women had low level of practices regarding infant care, Also there is more prevalence of various harmful practices of newborn like application of kajal, delay of breastfeeding. These study suggested that there is need to give knowledge to rural infant mothers regarding proper infant care practices.

Conclusion

The result of the study revealed that majority of rural area women had low level of knowledge and practices regarding infant care, and as compare to all selected aspects in clothing and immunization aspect they had very poor knowledge and practices. It may be due to lack of awareness and education about proper infant care practices and lack of any educational interventional programme regarding infant care. It can be concluded that there is need to improve knowledge and practices of rural area women regarding infant care. Providing timely education in the form of intervention to the mothers could fill these gaps in knowledge and practices regarding infant care practices.

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References

1. Able (1985). Child rearing old and new child care practices. Vol. XVI, PP.5-6.
2. Bafna, P, Parekh, P. and Kaul, K.K. (1974). "A study of attitude of practicing doctors to infant feeding". *Indian pediatr*, Vol. 11, P. 563.
3. Manju and Madhu (2008). Knowledge, attitudes and practices of Iraqi mothers and family child-caring women regarding breastfeeding. Department of Community Medicine, College of Medicine, Al-Nahrain University, Baghdad, Iraq. *East Mediterr Health J*.1003-14.
4. Siali, A., Siali, A. and Saran, M.S. (1992). "Immunization awareness in mothers". *Indian pediatr*, **29** (1\$6): 93.
5. Singh, M.B., Haldiya. K.R. and Lakshminarayana J. (1997). "Infant feeding and weaning practices" in semi-arid rural areas of Rajasthan. *Journal of Indian medicine Association*, **95**(11):576-590.
6. Taneja P.V, Gupta N.V. and Chawla N.P. (1998). Feeding practices in infant of Bhil tribe in Jhabia district of Madhya Pradesh. *Ind Ped*. **35** (6): 568.