Infant Feeding Practices in Rural Bangladesh

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A longitudinal study was done on the infant feeding practices in a rural area. One hundred and ten infants were followed up from birth to 1 year of age by alternate day home visits, to enquire about the type of food, and frequency of consuming it. It was found that 100% mothers breast-fed their infants from birth to 1 year, almost every day. But, bottles containing various kinds of milk and starchy food were added to 60% of infants diets by 3 months, and 80% by 5 months of age. This additional food was given mostly in diluted form, which was more so in case of tinned milk. Family food such as rice and vegetables were given in 30% and 40% child days respectively from 6 months to 1 year. Rural people withhold protein food and fruits during infancy. It is concluded, that infant feeding practices in our population is improper and mothers should, therefore, be trained and motivated on weaning practices for timely and adequate supplementation to ameliorate the presently observed dietary deficiency and early malnutrition in rural Bangladesh. (Indian J Pediatr 1992; 59 : 573-577)

Key words: Infant food; Weaning; Breast feeding

According to the latest nutrition survey, 90% of the children in Bangladesh suffer from malnutrition of which 15% are severely malnourished.1 Virtually 100% of rural mothers in Bangladesh breast feed their infants upto 1 year of age.2,3 Breast milk is the best and safest food for young babies and it maintains optimum growth upto the age 4-6 months;4-7 and thereafter faltering of growth occurs in most of our children5,7,8 Hence, it is important that the babies are given extra foods along with breast milk at the right age and in sufficient amounts to enable them to grow and stay healthy. Knowledge about the actual feeding practices of rural infants is necessary, to define the baseline from which alterations in these current practices have to be made. Many studies have been done in Bangladesh in this context5,9-12 However, no study was done on how frequently and in what concentration the food items, other than breast milk, were given to the infants. The present study aims to assess qualitatively, the infant feeding practices in a rural community in Bangladesh.

MATERIAL AND METHODS

The study was conducted in 12 villages of Dhamrai Upazilla comprising a population of 8000, 40 kilometers north of Dhaka.
Ninety five percent of the villagers were agricultural workers, of which 38% were landless. The literacy rate was low at 27%, median per capita income at the time of the study was 2000 taka (US $66) per year. Eighty five percent of the population were Muslim and 15% Hindu.

The consecutive 110 normally delivered infants born in the study villages were included in the study. The number of days of observation used in the analysis included only days for which information on feeding was available, and excluded days when a child or a reliable informant was absent. Previously trained field workers visited each study family on alternate days, to enquire about the items of food given to the infants and their methods of preparation on that day and on the preceding day. Information was recorded on a pre-formed sheet. Dietary data was collected upto one year of age of the infants.

RESULTS

All the mothers breast-fed their infants at birth and continued till the end of the study period. The kind of food given to the infants at different months of the age by percentage are shown in Figure 1. It shows that 16% of the rural infants were given bottle feeding within one month of age, 80% by the 5th month, and all by 12 months of age. Only 20% of the infants were exclusively breast-fed upto 5 months of age. Solid foods though started only in 5% of infants within 6 months, were given to all the infants by 1 year.

Table 1 shows the prevalence of different food items given to the infants at different ages. Breast feeding was the main and only food, which was given in 99.7% of child days. Though weaning should be started within 6 months of age, rice was given only in 30% of child days from 7 months upto 1 year.

Fig. 1. Pattern of food given at different ages (months)