

Breastfeeding Practices Among Mothers and Nutritional Assessment of Preschool Children in Ejigbo Local Government, Osun State, Nigeria

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Abstract

This study was carried out to assess the prevalence of malnutrition among the preschool children aged 2-5 years (24-60 months) and practices of exclusive breastfeeding among mothers in Ejigbo local government area osun state. 300 pre-school children were assessed for their nutritional status. The semi-structured questionnaire, mid upper arm circumference measurement. Data were analyzed using SPSS version 23. The main purpose of this study is to assess the nutritional status of preschool children and exclusive breastfeeding practices among mothers. The research shown that using MUAC (45) 14.9% were malnourished, 85% were normal. Its was concluded that 20% of the male were been affected with acute malnutrition while 22% of the female was affected with acute malnutrition, 26.4% of the mothers didn't practices exclusive breastfeeding while 22% of the mothers gave agbo concoction to their wards during breastfeeding, 4.6% introduced complementary food at 3 months, 12% at 4 months, 8.6% at 5 month, and 74.6% introduced complementary food food at 6 months, therefore the study concluded that due to low family income, lack of exclusive breastfeeding and poor complementary feeding practices among mothers malnutrition was slightly high among the preschool children which need nutritional intervention..

Keywords

Malnutrition, Exclusive Breastfeeding, Mid Upper Arm Circumference, Complementary Feeding

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1. Introduction

Overweight and obesity are globally problem, with more than 1.6 billion adults overweight - at least 300 million of them were clinically obese - and is a major contributor to the global burden of chronic disease, disability and premature death. [1]

The burden of obesity is shifting towards the poor socio-economic level on a worldwide basis due to the rapid increase in obesity found in lower income in developing countries. Some of the causes of the rise in fatalities are thought to be a change in lifestyle – as the population surges

towards urbanization, and away from rural areas resulting in unhealthy eating habits and reduced physical activity, [2].

Childhood obesity is also one of the most serious public health challenges of the 21st century. The problem is globally and steadily affecting many low- income countries, particularly in urban settings. Studies indicate that health risks associated with obesity are found in higher concentrations among children from low income countries [3]

In achieving optimal growth, development and health, the World Health Organization (WHO) has recommend that infants should be exclusively breastfed for the first six

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months of life, which means that infants should receive only breast milk which supply all the nutrient needed by the infant both in macro and micro quantity, [4, 5]. The Government also strives in addressing the under-nutrition through the Lifecycle Approach which includes ensuring that newborns are breastfed within one hour of birth and that exclusive breastfeeding (EBF) continue for the first six months, followed by adequate and complete complementary feeding [5]. Breastfeeding has a significant role in improving nutrition, education, and maternal and child health [6]. studies showed that EBF has a potential to reduce under- five mortality by 11.6%, the prevalence of EBF is still relatively low globally, as in sub Saharan Africa with a magnitude of 35% and 22– 33%, respectively [7]. According to WHO, 90% EBF practice strongly reduces the incidence of infant mortality due to pneumonia [8]. The prevalence of EBF varied from country to country [9].

[10]. On the contrary the prevalence of EBF was higher in developing countries [11, 12]. Studies revealed that various factors could influence EBF practices such as maternal education and family income, family history, infection and diseases [13].

The most worrying trend is the fact that childhood obesity tracks into adulthood, its associated with adverse health outcomes, and difficult to treat, about one-third of overweight preschool children and one-half of overweight school-age children remain overweight in their adult years. [14] The preschool years have been identified as a crucial time to study the determinants of childhood obesity because it is the period within which eating and physical activity habits become established states [15]. Therefore this study aim to assess the prevalence of malnutrition among the preschool children aged 2-5 years (24-60 months) in Ejigbo local government, osun state and in relation to feeding practices.

2. Methodology

The LGA [Ejigbo L. G] in Osun state Nigeria was used for this study, where 9 private schools were randomly selected from the total population and 33 respondent were randomly selected from KG1 to primary 1 (with only one school in which 36 students were selected) with an approval from the school head and this respondent comprises of the ward/ children that their parent bought them to school everyday to have assess to complete question from their mother. The data obtain were analyses using SPSS version 23 to determine their anthropometric and practices of exclusive breastfeeding among mothers which include weight for age, weight for height, MUAC, and compared with WHO reference standard 2007.

3. Result

Table 1. Characteristics of the pre school children.

SEX	N	%
MALE	116	38.6%
FEMALE	184	61.3%

The 1 above shown that 38.6% of the respondent assessed were male while 61.3% were female.

Table 2. Parent education level, marital status and households.

	N	%
Formal education	1	0.3%
Primary	2	0.6%
Secondary	5	1.6%
Tertiary	292	97.3%
MARITAL STATUS		
Married	298	99.3%
Widowed	—	—
Divorced/separated	2	0.6
HOUSEHOLD		
Rented household	198	66.6%
Owned household	102	34%

The table 2 above shown that 92.3% of the mother have no formal education, 97.3% had tertiary certificate which was contrary to 26.8% earlier reported [16] to have tertiary education, 99.3% were living together (male), only 0.6% were divorced, 66% of them live in a rented house while 34% of them owned house.

Table 3. Prevalence of malnutrition among the children.

	Acute malnutrition	Moderately acute	severe acute malnutrition%
	<-2> -score	<-2 = score>=>-3=score	<-3=score
Boy affected	20%	11%	91%
Girl affected	22%	9%	13%

The table 3 above shown that 20% of the male are affected with acute malnutrition, 22% of the female had acute malnutrition the finding correspond with what [16] reported in their studied, 11%, 9%, 9%, 13% were moderately acute malnourished and severe acute malnutrition for male and female respectively.

Table 4. MID upper arm circumference.

MUAC for children	Range	N	%
Nourished	13.5 above	275	91.6%
Malnourished	12.5-13.5cm	13	4.3%
Moderately acute malnutrition	11-12.5cm	10	3.3%
Severely acute malnutrition	<11	2	0.6%

The 4 above show that 0.6% of the children were severely acute malnourished, 3.3% were moderately acute malnourished, 4.3% were malnourished while 91.8% were nourished the study also correlate with [16] realier reported in their studied.

Table 5. Exclusive breastfeeding practices among mothers.

Do you practice exclusive breastfeeding	N	%
YES	221	73.6%
NO	79	26.3%
Do you give Agbo (conclusion) while breastfeeding	N	%
YES	66	22%
NO	234	78%

Table 5 above show that only 26.4% of the mothers did not practice exclusive breastfeeding and above show that 22% of the mothers said they gave agbo /concoction to the baby

Table 6. When do you introduce complimentary food.

Month	N	%
3month	14	4.6%
4month	36	12%
5month	26	8.6%
6month and above	224	74.6%

The table 6 above show that 4.6% of the mother said they introduce complimentary food at 3 month, 12% introduce at 4 month, 8.6% introduce at 5 month while 74.6% said they introduce complimentary food at 6 month above to their ward.

4. Conclusion

The preschool children included in the study were both boys and girls of age 2-5 years with their mothers who were both the respondents. The finding revealed that malnutrition was slightly high which need nutritional intervention. Which could be due to low family income, lack of exclusive breastfeeding and poor complementary feeding practices among mothers. Therefore the study recommended as follow:

1. Mothers should be encourage to practice exclusive breast feeding.
2. More attention should be given to their hygiene practice
3. Nutrition education /counseling should be given to mother /caregiver.
4. This study needs to be improve on every at least every 5 years.
5. Preschool children in private schools should also be incorporated into the school feeding programme by the ministry of education to ensure that they are provided with adequate meals while in school.

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