Myths about Child Health among Rural Population of Pondicherry

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What are the myths about child health among the rural population of Pondicherry? What is the impact of education on myths?
Myths about Child Health among Rural Population of Pondicherry

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ABSTRACT

Research questions: What are the myths about child health among the rural population of Pondicherry? What is the impact of education on myths?

Setting: Village under Rural Health Centre of Community Medicine Department

Study design: Cross sectional study

Participants: 339 villagers above 18 years of age

Methodology: Participants were interviewed regarding misconceptions about child health. Statistical analyses were done using proportions (%) and Chi-square test.

Results: Most of the people did not have myths regarding diarrhea. According to 29.4% illiterates and 24.6% literates, breast-feeding should not be stopped. There is a strange belief in the area that evening colic in infants is relieved by introducing a tamarind twig in the anus of infants as stated by 51.5% illiterates and 36.5% literates. 19.1% illiterates and 17.2% literates also believe that Infant diseases can be cured by feeding milk mixed with donkey’s blood.

Conclusions: Most of the people lack awareness; they still believe and practice myths. Illiteracy is an important factor responsible for myths.

Keywords: Misconception, myth, infant, colostrum, diarrhoea, chicken pox
INTRODUCTION

All people, whether rural or urban, have their own beliefs and practices concerning health and disease. Not all customs and beliefs are bad. Some are based on centuries of trial and error and have positive values while others may be useless or positively harmful (1). Majority of the rural people believe that wrath of Gods and Goddesses, evil eye, spirit or ghost intrusion are supposed to be the causes of some diseases. Application of kajal to ward off evil eye is still a practice, going on. In spite of the fast developing modern science, people have misconceptions about health and disease. As Information about these factors i.e. customs, habits, beliefs and superstitions is still lacking, we planned a study to understand some child health misconceptions among the people in rural Pondicherry.

MATERIAL AND METHODS

A community based cross-sectional study was planned to study the misconceptions regarding child health among residents of rural Pondicherry. The study was conducted in the catchment area of Rural Health Centre, Manapet, of department of Community Medicine. There were 4 villages under the field area of RHTC Manapet. One village was selected randomly and door to door survey was conducted. Population of the selected village was 1435. All families (except door locked/no consent) in the village were covered. Only adult population was selected for the study. One person (either head of the family or any other person present at the time of study) from each family was interviewed. A pre-tested semi-structured questionnaire was used for the interview. Before interview, subjects were informed about the purpose of the study and consent was taken.

After proper orientation, research team conducted the survey in the village (1st January - 15th February 08). The data collected was analyzed using Microsoft excel and SPSS. Simple proportions (%) and chi-square test were used to compare the differences in literates and illiterates. As literacy is an important determinant for perception and practice, we compared various misconceptions between illiterates and literates.

OBSERVATIONS

Population aged 18 years and above was included for the study. Total 339 individuals participated in the study (range - 18 to 85 yrs, mean 43.04 yrs, SD 16.91). Most common age group was 25-32 yr (24.5%). Two thirds (64.3%) of the participants were females. Regarding literacy, 203 were literates & 136 were illiterates. Nearly half of the respondents were in Socio Economic Class V according to Modified Prasad’s classification (2), only 1.8% were in class I.
Table I: Misconceptions about colostrum and honey to the newborn among illiterates and literates

<table>
<thead>
<tr>
<th>Statement</th>
<th>Illiterates (n=136)</th>
<th>Literates (n=203)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Agree</td>
<td>Disagree</td>
</tr>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
</tr>
<tr>
<td>Colostrum should not be given to the newborn</td>
<td>57</td>
<td>41.9</td>
</tr>
<tr>
<td></td>
<td>63</td>
<td>31</td>
</tr>
<tr>
<td>Honey/sugar solution should be given to the newborn</td>
<td>78</td>
<td>57.3</td>
</tr>
<tr>
<td></td>
<td>76</td>
<td>37.4</td>
</tr>
</tbody>
</table>

* Highly significant ($\chi^2 = 8.42$, $p = 0.0037$)

41.9% of the illiterates were of the opinion that colostrum should not be given to the newborn, while 31% of the literates were of this view. 57.3% of the illiterates were in favor of giving honey/sugar solution should be given to the newborn. This view was shared by 37.4% of the literates. (Table I)

Table II: Misconceptions about Chicken pox among Illiterates and Literates

<table>
<thead>
<tr>
<th>Statement</th>
<th>Illiterates (n=136)</th>
<th>Literates (n=203)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Agree</td>
<td>Disagree</td>
</tr>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
</tr>
<tr>
<td>Treatment for chicken pox should not be taken</td>
<td>99</td>
<td>72.8</td>
</tr>
<tr>
<td></td>
<td>131</td>
<td>64.5</td>
</tr>
<tr>
<td>Chicken pox can only be cured by correcting the past mistakes#</td>
<td>70</td>
<td>51.5</td>
</tr>
<tr>
<td></td>
<td>51</td>
<td>25.1</td>
</tr>
<tr>
<td>Chicken pox can be treated by appeasing goddess##</td>
<td>90</td>
<td>66.2</td>
</tr>
<tr>
<td></td>
<td>96</td>
<td>47.3</td>
</tr>
</tbody>
</table>

# Highly significant ($\chi^2 = 27.58$, $p < 0.0001$)

## Highly significant ($\chi^2 = 12.5$, $p = 0.0004$)
One common myth about chicken pox is that it should not be treated. In our study also according to 72.8% illiterates and 64.5% literates treatment should not be taken. “By appeasing goddess chicken pox can be treated” was a common myth in 66.2% illiterates, 47.3% literates. (Table II).

Table III: Misconceptions about Diarrhoea among Illiterates and Literates

<table>
<thead>
<tr>
<th>Statement</th>
<th>Illiterates (n=136)</th>
<th>Literates (n=203)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Agree</td>
<td>Disagree</td>
</tr>
<tr>
<td></td>
<td>No.</td>
<td>%</td>
</tr>
<tr>
<td>Breast-feeding should be stopped in an infant with diarrhoea</td>
<td>40</td>
<td>29.4</td>
</tr>
<tr>
<td>Solid and semisolid food items should not be given to the child during diarrhoea</td>
<td>46</td>
<td>33.8</td>
</tr>
<tr>
<td>Fluids should not be given to the child during diarrhoea^</td>
<td>47</td>
<td>34.6</td>
</tr>
</tbody>
</table>

^ Highly significant ($\chi^2 = 7.42, p = 0.0065$)

Diarrhea is a leading cause of less than five-year mortality and morbidity. Regarding diarrhea most of the people did not have myths. Breast-feeding should not be stopped according to 29.4% illiterates and 24.6% literates. (Table III)

There is a strange belief in the area that evening colic in infants is relieved by introducing a tamarind twig in the anus of infants (illiterates 51.5% and literates 36.5%). 19.1% illiterates and 17.2% literates believed that Infant diseases can be cured by feeding milk mixed with donkey’s blood.
DISCUSSION

India is a country where more than two-third population lives in villages and lacks awareness about health. As literacy is an important determinant for health and disease we compared the various myths between illiterates and literates in our study.

According to WHO, infant should be exclusively breast fed for the first six months of life and if possible breastfeeding should be continued till 18-24 months. Colostrum is the first 2-3 days secretion from breast after delivery. This thick and yellow secretion is very nutritious for the newborn and necessary for his/her wellbeing. In most of the villages the newborn is not fed colostrum as a part of old custom, instead newborn is given honey or sugar solution which may be useless if not harmful because it replaces the colostrum. A study done by Yadav RJ, Singh P (3) in Bihar showed that 65.7% mothers did not give colostrum to their infants; this figure is dissimilar to our finding (35.4%). The reason for this difference may be the disparity between literacy rates of Bihar (46%) and Pondicherry (76%). (4)

Chicken-pox is regarded as "curse of goddess" or "wrath of god"(5). In Hindi speaking areas it is known as “Choti Mata”, which relates the disease with curse of Mata (Goddess).

In our study two third of literates as well as illiterates said that treatment of chicken pox should not be taken.

Withholding of milk in diarrhea especially in infants is a common practice in our country (6,7). Breastfeeding reduces severity and complications of acute diarrhea as withdrawal during diarrhea apart from its deleterious effects are also associated with higher risk of dehydration (8). In our study approximately one-third of respondents were in favor of withholding solid and semisolid foods during diarrhea, which could delay or retard nutritional rehabilitation after diarrhea, as there is no physiological basis for resting the bowel during or following acute diarrhea (9). In a study done by Gupta Ritu (10), it was observed that 51% educated mothers restricted feeds/diet/fruits in many ailments especially in diarrhea. In our study it was seen in one third of literate respondents.

In our study it was found that there is a significant difference between literates and illiterates with regard to majority of the beliefs related to child health.

CONCLUSION

From our study we concluded that most of the people in Rural Pondicherry are lacking the knowledge about child health; they are practicing most of the myths as these are age old practices. Although with increase in literacy the proportion of people has reduced to a certain extent. Health education strategies can be planned based on the study, to remove the false beliefs. It is recommended that mass media should take active part in creating awareness and changing the behaviour.

REFERENCES


