

Research Article

The Effect of Maternal Mental Health on Child Nutritional Status in El-Minia City

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Abstract

Background: Under nutrition is one of the most serious and most neglected problems of children in developing countries. Basic causes of under nutrition are multiple. It was suggested that poor physical or mental health in mothers may have adverse consequences on their children's nutritional status. **Subjects and methods:** A cross sectional study was conducted on children in the age group (6-24 months) attending the four health offices of El-Minia city during the period between fifth of November 2012 to sixth of April 2013. Data were collected by a questionnaire which included socio demographic, feeding practices, child related data and screening for maternal common mental disorders (CMD) by WHO questionnaire. Child weight and length were measured. **Results:** 300 children were studied, 2% of children were moderately underweight, 12.9% moderately stunted, 4.5% were severely stunted. Under nutrition was not significantly higher in children whose mothers probably have CMD (10.5%). Under nutrition was significantly higher among males (27.7%), among children who refused food during illness (83.3%), children whose mothers did nothing when child refused food (52.3%) and children who started complementary feeding at age ≤ 6 months (78.2%). Child weight and length were significantly associated positively with child's age of cessation of breast feeding. **Conclusion and recommendations:** maternal CMD may adversely affect child nutritional status by undermining maternal feeding practices. It is important to intervene early by nutrition education message to mothers about healthy feeding practices.

Key words: Common mental disorders, children, nutrition, El-Minia

Introduction

Undernutrition is a major problem in Egypt and affects about one-third of children under-five as Egypt Demographic and Health Survey 2008 (EDHS) found that 29% of children under the age of five were stunted, 6% were underweight and 4% were wasted. Results from the EDHS 2008 indicate that chronic malnutrition rates increased in Egypt over the last decade as the prevalence of stunting increased from 23% in 2000 to 29% in the 2008 (EDHS, 2008)

Evidence from South Asia had shown an association between maternal depression and impaired child growth. In Goa, malnourished children had a risk 2.5 times higher than non-malnourished children of having a depressed mother and Rahman et

al., estimated that reduction in the prevalence of maternal depression could lead to a reduction in child growth retardation of up to 30%. But, yet maternal mental health is largely neglected in child health programs in developing countries (Trudy et al., 2000).

Subjects and methods

Study design:

This study was a cross sectional study that was conducted in the four health offices of El-Minia city during the period between fifth of November 2012 to sixth of April 2013.

Study population:

1. **Inclusion criteria:** All children in the age group between six and twenty four

months who were with their mothers who visited four health offices of El-Minia city during the period between fifth of November 2012 to sixth of April 2013.

2. Exclusion criteria: Infants beyond age range, infants and children who were not with their mothers, children not from El-Minia city.

World health organization (WHO) twenty items questionnaire:

WHO twenty items questionnaire scored as if the answer of the question is no; the score is zero and if the answer of the question is yes; the score is one. Item scores are summed to obtain a total score. A score above cut-off point indicates the existence of a probable mental disorder and if score is below cut off point indicates non probable mental disorder (Girmay et al., 2010). A cut-off point of ≥ 5 had been used in this study.

Anthropometric measurements to assess child nutritional status include: Weight

and length were measured using standardized methods.

Ethical considerations:

In each health office of the four health offices in El-Minia city, before starting in collection of subjects of the study, a consent was obtained from mothers to participate in the study after giving an idea about study and its objectives.

Statistical analysis:

Data entry and analysis were all done by using software SPSS (Statistical Package for the Social Sciences) version 16. Quantitative data were presented by mean and standard deviation, while qualitative data were presented by frequency distribution. Correlation, student t test, Chi Square test and regression were done. The probability of less than 0.05 was used as a cut off point for all significant tests. Graphics were done using Excel 2007.

Results

Table (1): Characteristics of the studied children attending El-Minia city health offices from November 2012 to April 2013

Variables		Frequency (No)	Percent (%)
Child Sex	Male	103	34.3
	Female	197	65.7
Total		300	100
Residence	Urban	293	97.7
	Rural	07	2.3
Total		300	100
Birth weight (BW)	Low BW < 2500 gm	34	11.3
	Normal BW 2500-4000 gm	202	67.3
	High BW > 4000 gm	14	4.7
Total		300	100
Variables		Range	Mean ± SD
Child age in months		6 - 24	12 ± 4.6
Child birth order		1 - 8	2.2 ± 1.1
Children weight (Kg)		6 - 10	9.3 ± 1.6
Children length (Cm)		56 - 88	71.7 ± 7.1

Complete data were available for 30 children included in the study which entered into statistical analysis and table (1) showed that studied children age ranged between 6 and 24 months with mean of 12 ± 4.6 , they were between first and eight birth order with mean of 2.2 ± 1.1 , 66.3% were females, 33.7% were males, those with

history of low birth weight were 9.7%, 83.7% were living in urban areas, 16.3% were living in rural areas and their weight ranged between 6 and 10 kilograms with mean of 9.3 ± 1.6 and their length ranged between 66 and 88 centimeters with mean of 77.7 ± 6.1 centimeters.

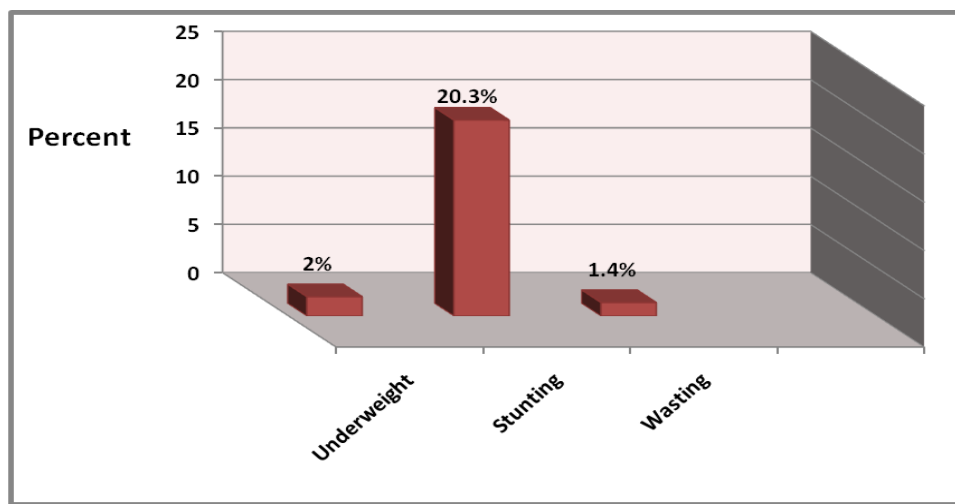


Figure (1): Under nutrition among studied children:

Figure (1) showed that 20.3% of studied children were stunted, 2% were underweight and 1.4% was wasted.

Table (2): Frequency distribution of common mental disorders among participated mothers attending El- Minia city health offices from November 2012 to April 2013:

Maternal common mental disorders (CMD)	Frequency (No)	Percent (%)
Probable had CMD	200	71.4
Probable did not have CMD	100	28.6
Total	300	100

Table (2) showed that 200 (71.4%) of mothers of studied children probable had common mental disorders; while 100 (28.6%) of mothers probable did not have common mental disorders.

Table (3): Frequency of undernutrition of studied children attending El- Minia city health offices from November 2012 to April 2013 in relation to different studied variables:

Variables		Nutritional status				X ²	P value
		Undernourished children(n=78)		Normal children (n= 272)			
		No	%	No	%		
Child sex	Male	40	51.3	108	39.7	7.9	0.001**
	Female	38	48.7	164	60.3		
Starting complementary feeding	≤ 6 months	61	78.2	241	88.9	0.9	0.33*
	> 6 months	17	21.8	31	11.1		
Feeding during child illness	Same food	6	7.7	10	3.7	10.9	0.001**
	Change food	7	9	69	25.0		
	Child refused food	65	83.3	192	70.3		
Maternal mental health	with CMD	51	65.4	199	73.2	1.7	0.19
	without CMD	27	34.6	73	26.8		

Table (3) showed that there was significant higher undernutrition frequency among male studied children (51.3%), those who had started to receive complementary feeding at age of ≤ 6 months (78.2%) and in

those who refused food during their illness (83.3%) But there was non significant higher undernutrition frequency among studied children whose mothers probable had CMD (65.4%).

Table (4): Low BMI for age frequency of studied children attending El- Minia city health offices from November 2012 to April 2013 in relation to maternal mental health status:

Maternal mental health	Child BMI				X ²	P
	Low BMI for age (n= 8)		Normal BMI for age (n= 242)			
	No	%	No	%		
Mothers probable with CMD*	3	37.5	247	102.5	4.6	0.03*
Mothers Probable without CMD**	5	62.5	95	39.5		

This table showed that the frequency of low BMI for age were higher in studied children whose mothers probable had not CMD (37.5%) than those whose mothers probable had CMD (62.5%) and this difference was statistically significant (0.03).

Discussion

It was found that under nutrition frequency among studied children was 22.3% and this frequency was higher than what was reported by Mosalem and Aboul-Fotoh (2008) who studied the prevalence of

malnutrition among rural preschool children; anthropometric assessment study, El-Minia, Egypt that under nutrition prevalence was 21%. This difference may be due to high sample size of children in this study in comparison to Mosalem and Aboul-Fotoh (2008) study and different children age group included in this study which ranged between 6 and 24 months and this age group more susceptible to under nutrition. Although, children under nutrition frequency in this study was lower than what was stated by Egypt demographic and health survey (EDHS, 2008) at which 29% of the children under-five years of age suffered from under nutrition but this indicated deterioration of children nutritional status in El-Mina city as there was proportional difference in under nutrition frequency in relation to children number included in this study and EDHS.

This study found that under nutrition frequency was higher among studied children whose mothers probably had CMD (60.4%) than those whose mothers found to be not probably had CMD (34.6%) but this difference was statistically non significant ($P = 0.1$). it was also found that there was significant higher frequency of studied children with low body mass index for age in those whose mothers probable did not have common mental disorders ($p = 0.03$).

These findings were in consistent with what was found by Trudy et al., (2009) who studied maternal mental health and child nutritional status in four developing countries only in Peru and Ethiopia using the same WHO 20 items questionnaire that there was no association between maternal common mental disorders and poor child nutritional status, Veit et al., (2010) who studied maternal postnatal depression and child growth in an European cohort study, but in contrast to what was found by Trudy et al., (2009) who studied maternal mental health and child nutritional status in four developing countries but only in India and Vietnam using the same WHO 20 items questionnaire that there was an association between poor maternal mental health and poor child nutritional status as it was found that mothers with CMD have significantly

higher odds of having a stunted and underweight child than those without CMD

Conclusion

There was a high frequency of child under nutrition and a high frequency of mothers who probably have common mental disorders in El-Minia city. Maternal common mental disorders found to be not directly affect child nutritional status but it was found that maternal CMD can affect child nutritional status indirectly by undermining maternal feeding practices..

Recommendation

Breastfeeding should continue with complementary feeding up to 2 years of age, and it should be on demand, as often as the child wants as recommended by WHO, 2009.

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