



The 48th Annual Scientific Meeting of the Nutrition Society of Australia, 3-6 December 2024

Attitudes, beliefs, knowledge and perceptions towards infant feeding practices of Indian immigrant mothers in Australia—qualitative exploration

C. Tulpule¹, E.A. Szymlek-Gay², M. Zheng² and K.A. Bolton²

¹School of Exercise and Nutrition Sciences, Deakin University, Melbourne, Victoria, Australia

²Institute of Physical Activity and Nutrition, School of Exercise and Nutrition Sciences, Deakin University, Geelong, Victoria, Australia

Optimal infant feeding practices in the first 2000 days of life offer protection against chronic diseases in later life⁽¹⁾. A study focusing on Indian-born mothers in Australia found that while they generally followed health-promoting infant feeding practices such as prolonged breastfeeding and delayed introduction of solids, they also displayed sub-optimal practices such as early introduction of water, fruit juice, cows' milk, and formula⁽²⁾, suggesting nonadherence to the Australian Infant Feeding guidelines⁽³⁾, potentially increasing the risk of overweight/obesity or chronic disease in later life. Therefore, this study explored cultural beliefs, knowledge, attitudes and perceptions of Indian-born mothers living in Australia that may influence these practices. Thirteen Indian-born mothers (n = 13) with a child aged between 1.5-5 years born in Australia were purposively sampled from participants of an Australia-wide online survey involving Indianborn mothers. Purposive sampling was based on a mix of variables such as length of stay in Australia, language spoken at home, and education. These mothers took part in semi-structured interviews over Zoom. Zoom transcripts were analysed using a reflexive thematic approach to generate themes with NVivo. All mothers were married, and 85% were aged between 35 and 39 years. All mothers had lived in Australia for at least five years, with 54% for at least ten years. Most mothers (54%) had postgraduate qualifications and an annual household income of more than \$156,000 (39%). Most mothers were Hindu (92%), and the main language spoken at home was Marathi (38%). Most fathers belonged to Indian ethnicity (85%). Themes relating to infant feeding and infant growth were identified.1) Cultural beliefs about breastfeeding positively influenced breastfeeding initiation and duration; 2) Maternal beliefs and attitudes negatively influenced formula feeding practices; 3) Acculturation positively influenced exposure to cows' milk, honey, and pre-lacteal feeds; 4) Maternal knowledge about feeding guidelines and cultural beliefs positively influenced solid introduction and types of solids introduced; 5) 'Tiny baby' perception of mothers often influenced by health care professionals, negatively influenced infant feeding practices; 6) Reliance on mothers and mothers-in-law for feeding advice due to cultural disconnect between infant feeding guidelines and; 7) Lack of support after hospital discharge negatively influenced breastfeeding journey. In conclusion, Indian immigrant mothers in this study expressed their need to have culturally tailored support and consistent advice from healthcare professionals during the solid introduction and better support structures after hospital discharge to enable their optimal breastfeeding journey.

References

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- 3. National Health and Medical Research Council (2024) Infant Feeding Guidelines https://www.nhmrc.gov.au/health-advice/public-health/nutrition/infant-feeding-guidelines