Acute Respiratory Infections in a Rural Area of the Southwestern Region of Bangladesh: Perceptions, Practices and the Role of First-Time Mothers

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Abstract: A qualitative study was conducted in a rural area of the southwestern region of Bangladesh to identify perceptions, practices, and the role of first-time mothers surrounding acute respiratory infections (ARI) in infants and children aged under four years. The study reveals that all mothers had knowledge of ARI and were able to identify a number of signs and symptoms. They also recognized pneumonia and thought it to be caused by exposure to cold or weather change, supernatural causes, evil influences, mothers' negligence, and failure to observe 'purdah'. They were able to identify chest retractions, difficult breathing, and inability to feed as signs of severe disease needing treatment outside the home. In these cases, spiritual healers were sought, and allopathic treatment was delayed or avoided. Home care practices involved massaging the child with oil and avoiding 'cooling' foods, including water. With the presence of fever and breathing difficulty, mothers tended to increase the number and diversity of medicines, although more concern was expressed about fever than about breathing difficulty. Effective medical care was more likely to be delayed for infants than for older children (they often waited 2-5 days after signs of illness appeared); infants were also more likely to be taken to a spiritual healer as the first-choice provider. The reasons for these perceptions and practices and their implications on the ARI of infants and young children are discussed. Community intervention is identified as viable, effective, and practical to address the body of local socio-cultural knowledge about family practices and the role of the mother regarding the mitigation of ARI in infants and young children.

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