PARENTING: A HEALTH DETERMINANT

Abstract: Parents are the most important and influential persons in the life of a child. Children depend on their parents to protect and take care of them while parents monitor and endorse their safety and well-being. Parenting plays a pivotal role in the upbringing of a child. It is an art which involves boosting and assisting the physical, emotional, social, intellectual development of the child right from birth.

Ayurveda, considered as the basic life science lays special emphasis on parenting. The lines “Taccha nityam prayunjeeta Swasthyam yen anuvartate” from the treatise Caraka Samhita points out the fact that nutrition forms the basic foundation of health. This principle indicates the importance of balanced diet and also emphasizes that one has to inculcate healthy eating habits right from childhood. The importance of child nutrition and its detrimental effects are well explained in Kashyapa Samhita.

Healthy development of the child does not wholly rest with the parents but the task of ensuring the same lies with the social community as well. Urbanization which is rapidly spreading throughout developing countries is ensuing changing proportion of urban to rural population. Substantially, it is the urban poor who are at the interface between underdevelopment and industrialization.

Society benefits socially and economically from a healthy and thriving child. Accomplishment of the same is achieved by serving support to parents through programs and services of Organizations or Government at community level, state and central levels.

Index Terms - Ayurveda, development, malnutrition, parenting style.

I. INTRODUCTION

Ayurveda, explains parenting as a phenomenon that continues until the individual attains adulthood and can survive independently; not alone physically but also emotionally, mentally and socially [1]. Parents play an explicit role in building and moulding a child’s problem-solving and cognitive skills. Parental behaviour, interaction with the child, home environment and many other factors tend to influence the cognitive development so also, the health of the child. Parenting is a very significant social reality as it determines the prospects of the child; the parental traits being carried forth.

“Parenting is a reciprocal process where the parent influences the child’s development and in return, the child influences the parent” [2]. Parenting Responsiveness and Parenting Demandingness are the two important elements of parenting style reflecting different patterns of parental values, practices and behaviours. Parents were thus categorized by Baumarind as:

(i) Authoritarian- Highly demanding and directive, not responsive.
(ii) Authoritative- Both demanding and responsive.
(iii) Permissive (indulgent) - More responsive than demanding.
(iv) Uninvolved- Low in both demandingness and responsiveness.

Parenting involves foresight. There is no stipulation in parenting as different children require different levels of compromises, attention, love etc. In accordance to the anticipation of a child’s social, economic and psychological well-being, the parent has been described by researchers as investing resources in two forms: (1) Material or Monetary resource (2) Psychological resource [3]. These are identified to help children in successfully regulating biological and social functioning.

Parenting is influenced by factors like ethnicity, socio-economic status of family and community. These factors directly influence the behaviour and emotional well-being of children which is a growing level of concern. Early malnutrition, yet another concern, among rural children when compared to urban may be attributed to better parental care given to urban children. Parenting style in context of nutrition can be understood in terms of feeding style. There happens to be no direct correlation, though. Nutrition acts as a mediator of parenting and childrens’ outcome.

Increased urbanization has also paved way to development of slums, pollution and poor access to safe drinking water, sanitation etc. resulting in poor health and under nutrition [4]. Insanitation and lack of adequate facilities for sewage disposal has led to...
The relation between the child and the parent begins since its conception in the womb. In Ayurvedic classics, from the time of conception, health of both parent (especially mother) and child are taken care of. Life style modulations with weightage to nutritional values are introduced as monthly Garbhinihcharya. Food and activities that cause harm to the foetus are contraindicated during pregnancy. Jatakarma, Sadhyojata sisu paricharya, Raksho Vidhana, Stanya pareeksha (examination of breast milk) and wet nurse, all these and many more indicate as to how this science has guided mankind evolve parenting. Categorisation of children under Ksheerada, Ksheerannada and Annada furnishes proper nutritional requirement of the child. Malnutrition as the cause of infant mortality is indicated while Kashyapa Maharshi in Phakka Roga Chikitsa Adhyaya describes Garbhaaja Phakka Roga. The pregnant mother unable to feed her child results to malnutrition in the child and is explained as life threatening. Caraka Acharya in his treatise describes about the play area (Kumaragarga) and also the toys (Kreedanaka) which aid in healthy development of a child in every aspect. One can conclude thus that since times memorable there has been insight into the concepts of parenting. In the context of Mooka and Badhira of Phakka Roga Adhyaya, from the treatise Kashyapa Samhita, Acharya explains that a child who has a prior exposure to the verbal sounds of parent or near ones has no hinderance in speech in later stages of life \cite{5}. A child, if not for any anatomical deformities, is dumb only if it is deaf since birth. This implies that a child speaks only if he listens. This also points to the importance of determinants of health since ancient times.

2.1. There are umpteen numbers of factors that determine the health of a child. One of the most important being Parenting; which in itself is influenced by the very same determinants of health.

2.1.1. GENETICS: What is the answer behind the suckling reflex of new born? The new born is not taught nor does it have a prior knowledge of the same. It is in the same manner the question as to how parenting is influenced genetically, is answered. Each parent has a different genetic predisposition which defines an individual style of parenting.

Parenting style is an important factor in development of food preferences. Preference to sweet and salty flavors over bitter and sour tastes is seen to be genetically pre-disposed. In the first year of life, the child shows a tendency to avoid novel foods which can be bypassed by introducing a flavour via breast milk thereby increasing the acceptance of flavored food at weaning.

During early years, this genetic predisposition is modified by experience. At this stage, children who had been good eaters may start rejecting food. Parents assume that the child is poor eater but need to understand that this is normal. Rejection in younger children seems to be based on the senses. Aversion also is the outcome of repeated illness or an emotion or cultural influences.

Earlier, Parents had a strategy, a policy of manipulating availability of certain foods as a reward or punishment. They otherwise, simply exposed the child to mere observation of mother taking the novel food or through persuasion by older children. But now-a-days, especially in the urban, the parental stress has lead to Force-feeding which almost always ends in aversion to that food. Parents’ now-a-days need to find time to expose their children to wide variety of tastes so as to familiarize them with diverse flavours which encourage or increase readiness to experience novel tastes.

2.1.2. PARENT HEALTH: The health of mother is given prime importance in Ayurveda as evident from the verse of Kashyap Samhita-“Sukham dukham hi balanām dhautri moolam asamshayam”. Mother’s psychological functioning and child - rearing behaviour predict the mental health of the child. Economically disadvantaged parents are vulnerable to mental health assaults from the demands of day to day existence and also from dangers, hassles and inconveniences of poverty. Positive factors like parental warmth predict favourable outcomes for children. Single motherhood which is common among the poor is a contributing factor for psychological stress.

2.1.3. SOCIAL COMMUNITY and ENVIRONMENT: Social support has influenced parenting in coping with the skills. A healthy environment results in healthy parenting resulting in a healthy individual. A number of adverse childhood experiences is seen to disrupt healthy childhood, sometimes lifelong health. The development of children and young and their subsequent life chances in adulthood are product of a complex set of interacting factors at individual, family or community level \cite{6}. Harmonious marital life promotes a favourable environment for health of a child. Maternal shortages and poor environmental conditions severely affected parenting. Emotional or psychological availability of the parent is a healthy and wholesome pattern of care.

A negative statement about the child is seen to be associated with lesser consumption. Recently, there have been noticeable cultural changes in nature and pattern of meals; where they are eaten or with whom. Each change brings with it an effect on the diet. Peer-group play and interaction in cross-age groups reveal a positive experience for child development. Growth rates and developmental quotients in pre-schoolers from lower socio-economic sections were found to be lower than high socio-economic counterparts.

2.1.4. EDUCATION and LITERACY: Parents who are highly educated are usually associated with knowledge about the developmental milestones in the child, thus are able in inducing effective parenting strategies. Children with regular routines at home, whose parents are engaged with them for school showed higher academic achievement compared to children of ignorant or illiterate parents.

2.1.5. EMPLOYMENT and ECONOMIC STABILITY: Research consistently reports that economically deprived children are at a high risk of developing mental health problems. Poverty or food inadequacy results in inadequate diet and ultimately malnutrition, leading to
an array of infections. Studies reveal that early malnutrition experiences produced permanent exaggerated response to stress, which further increased with social isolation. Issue of poverty, especially in low-income group who particularly are vulnerable to policy and economic shifts, adversely affects parenting. Relocation and consequent acclimatization to the new environment can become stress-filled.

2.2 Nutrition and social factors have a role in intellectual development of the child. There have been numerous studies showing evidence on the influence of above factors in relation to attention, memory etc. Social background proved to be a better indicator of IQ than nutrition in chronically malnourished children (Richardson, 1976)[7].

The reported effects of malnutrition, iron deficiency Anemia, over-eating and obesity are rendered thus:

Under-nourished Children performed poorly on short term cognitive performance than well-nourished counterparts. Mental functioning as measured by long term intellectual and developmental quotient was vulnerable to severe under nourished child especially in first year of life. IQ showed 1-2 SD reduction in malnourished (Pollit and Thompson, 1977)[7].

Studies also provided evidence that Iron deficiency anaemia alters the cognitive processes resulting in impaired attention arousal, memory and learning. Performance of anaemic children was less in use of memory strategies and ability to respond to salient stimuli.

Obesity is the most prevalent form of child malnutrition. These children showed low self-esteem with a setback on achievement. An attraction to sweetness is not associated with obesity instead a high intake of fat is positively associated. The relationship between media use and childhood obesity is yet to disentangle but studies do reveal that children who spend more time on media are more likely to be over weight than who do not.

Fasting i.e. breakfast skipping, which is habitual in rural from lack of raw material on other hand is common among adolescents and teenagers of the urban. Accuracy in problem solving and also ability to discriminate between relevant and irrelevant features of visual stimuli were common in such individuals.

2.3. There has been a plethora of studies comparing rural and urban determinants of health. In the past few decades, a greater emphasis is laid on rural health as 80% of Indian population inhabits the villages. But the true scenario is that the urban health in the slum poses a serious concern and challenge. They lie at the border-line of urban and rural and do not enjoy the privileges allotted to the rural counterparts. Studies conducted in mortality statistics observed mild disparity between urban rich and urban poor. The existing urban statistics do not give a true representation of Urban Slums. Neonatal health and neonatal mortality, absence of envisaged PHC’s with a planned network stand as a threat to the urban slum community. Health care is ensured with hygienic environment along with availability of safe drinking water. The government at national, state or community levels should aim to ensure highest possible level of good health through numerous health programmes. Some of them being - Universal Immunization Programme, Pulse polio Programme, IDSP(Integrated Disease Surveillance Programme), RBSK (Rashtriy Bal Swasthya Karyakram) etc. National Health Mission launched by the Government in 2013 aims at both rural and urban (especially of urban slums) health. Nutrition Programme for Adolescent girls, Child Line Services, Mid-Day Meal Scheme etc. are various other initiatives.

III. CONCLUSION

Parent – child relationship has revolutionised in the past years. Recently, parents have greater expectation in relation to attending school, revealing their whereabouts, nutrition and health, being polite and well-mannered, etc. With the advent of digitalization, contemporary egalitarian parenting patterns have replaced the conventional type. The sensitivity of parenting, today has not only resulted in a decline in the geographical limit of the child but also has caused a surge in the indoor hours spent by the child. Also, an increasing concern of modern parenting that lingers over is the decline in the period of time spent with one another which especially affects the health status of the child.

A healthy citizen results in a healthy Nation. A healthy citizen is an outcome of healthy parenting. Hence it is the responsibility of every parent to ensure positive parenting styles in upbringing the future of the nation.

REFERENCES