

SOCIAL HYGIENIC CHARACTERISTIC OF FAMILIES WHERE CHILDREN ARE RAISED UP TO ONE-YEAR OLD

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Abstract. *The health of children, especially children under one year of age, depends largely on factors such as the external environment, family lifestyle, the health of mothers during pregnancy, and the course of pregnancy. When describing the life activities of the population and some of its strata, public health experts use the concepts of lifestyle and quality of life. Work, home conditions, food, recreation, education, medical culture, education and health care are important elements of lifestyle. Therefore, in studying the health of children under one year old, it is important thoroughly study the lifestyle factors that affect it, to target the complex of factors, to support their positive aspects, to prevent or reduce their negative ones.*

Keywords: *pregnancy, hygiene, life span, public health, strata.*

Research materials and methods.

In order to conduct this research, we selected 1240 children (660 boys and 580 girls) born in 2021 from the districts of Tashkent using the cluster and strata methods, and studied their health and diseases from birth to the age of 1 year using the dynamic cohort method.

In the dynamics of children's diseases, each child was studied from birth to the age of one year. Studying the disease in this way makes it possible to obtain reliable information on the origin of new events (incidence), the influence and strength of the studied factors (Incidents and events were determined between full biological ages, not calendar years).

Children's illnesses were studied using the following primary record-report documents: history of the child's development (f. 112), exchange map (f. 113), card of inpatients (f. 003). The information obtained from them was copied and recorded in a specially developed "Map for studying the health and illness of a child under one year of age".

Children's diseases were analyzed according to the International Classification of Diseases (ICD-10, Tashkent, 2004).

A special questionnaire was prepared for the study of the living conditions of families, the impact of lifestyle on children's health, and for medical surveys.

The main parameters of the family's lifestyle and living conditions were evaluated according to the methods developed by B.M. Mamatkulov (1982, 1997).

Results

In our observations, more than half of the mothers involved in the research (55.9%) were housewives, 22.2% were servants, 16.6% were workers, and 5.5% were students. No factor has a positive effect on children's health like maternal care. Because they devote more time to directly raising children at home.

It was found that 59.1% of working mothers have work experience up to 5 years, 21.4% 5-8 years, 19.7% 9 and more. The majority of mothers (67%) had a special secondary education, 27.3% had a higher education, and 5.8% had a secondary education.

70.1% of the surveyed families rated their living conditions as good, 25.1% as satisfactory, and 4.9% as unfavorable. 94.3% of observed mothers were married, 5.7% were divorced. More than half (51.5%) of mothers were married at the age of 20-24, 42.3% at the age of 25 and older, and only 6.3% at the age of 15-19. The average age of girls at marriage was 20.9 years. In our republic, no matter how much propaganda work is carried out, there are still families built between related clans, in our study, 5.8% of families were built between relatives, and the most unfortunate 2.3% of families were built based on close relatives. 91 % of mothers rated the mental condition in their homes as good, while 9.0% of mothers rated the mental condition as unsatisfactory. The list of families with unsatisfactory mental status includes families with negative relations between husband and wife (frequent quarrels between spouses, one of the family members is addicted to alcohol, single-parent families). In addition, as one of the main reasons for negative relations in the family, material shortages (25.3%), living together with mother-in-law (22.2%), repeated nervous breakdowns between the couple (11%) and dependence on parents' income (9.7%) and others.

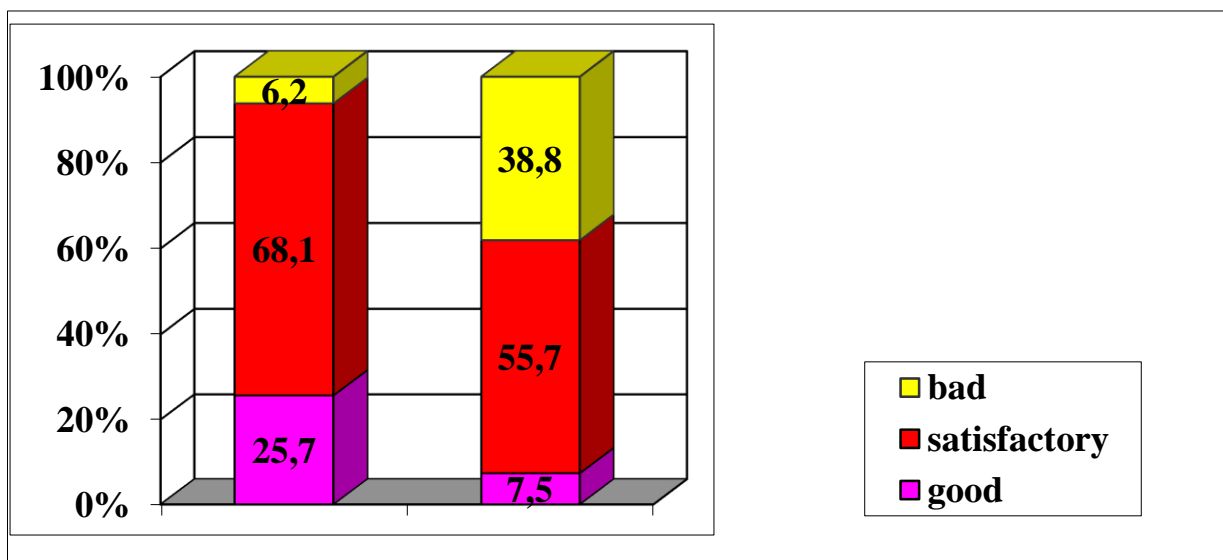


Figure 1. Dependence of maternal health on the mental state of the family (results of self-assessment of mothers).

It is known that a healthy, rational diet affects not only the health of mothers, but also the mother's diet during pregnancy affects the health of the fetus, i.e. the health of the unborn child. Therefore, we studied the eating habits of the family members, especially the mother-to-be, the manner and types of food consumed, and the composition.

78.2% of the mothers in the family said that they followed the diet, and 21.8% said that they did not. 15.6 % noted that mothers ate more vegetables and fruits during pregnancy, 9.4% began to consume more milk and dairy products, 75.0% said that the nature and mode of eating of mothers did not change during pregnancy, 49.6% often noted that he started eating. 10.4% of pregnant women eat the same, 68.2% eat different foods, 8.5% diet, 8.5% boiled, 7.2% women eat pastry during pregnancy, 13.4% eat meat, 21.7% vegetables. And 19.8% of them noted that they consumed a lot of fruits and meat and 27.8% of them did not eat enough fruits and vegetables during pregnancy. The obtained results showed that one in five mothers do not follow the nature, mode, and rules of healthy eating during pregnancy.

It is known that the physical activity of the mother during pregnancy has a positive effect on the development of the fetus and the birth of a healthy child. In our study, only 8.1% of mothers reported doing morning exercise during pregnancy, while 81.0% reported no exercise at all. The above-mentioned factors are important not only for pregnant women, but also for the development of the fetus and the birth of a healthy child (Table 1).

Table 1

Dependence of certain lifestyle factors on the interaction of family members, %

Classification of lifestyle factors	Relationships are good families	Relationships are bad families
Physical education, physical exercises		
Morning body training	12,1	3,7
Regular	3,1	-
Every now and then	21,0	7,0
Not engaged at all	63,8	89,3
Eating pattern and character		
Follows a meal plan	85,7	13,3-
Consumes more milk and dairy products	21,5	4,0
Eat more fruits than vegetables	33,3	8,0

As can be seen from the above table materials, interactions in the family have a huge impact not only on the mental state of pregnant people, but also on the agenda, the nature of nutrition. In families where a healthy environment is dominant, the incidence of pregnant compliance with physical education, morning physical education exercises, eating patterns, healthy eating rules has been shown to be consistently high compared to families with unhealthy environments in families ($R < 0.001$), with a relatively high medical activity of mothers. From a group of key factors that indicate the medical activity of the family, the attention of mothers to their own health (57.3%) and the health of their children (25.0%) cannot be considered satisfactory. Cases of non-compliance with the hygienic requirements that the doctor recommends for mothers to maintain the health of the baby-42.3%, to the question of whether you will take the baby to family polyclinics for preventive examination, 71.6% answered that the mother is yes, while 23.1% answered that only when calling a doctor will go. The patronage nurse answered 65.5% yes to the question of whether the family is being informed of your health as well as the health of the baby. 27, 7% of them come once a month, 70,5% only when I call, 6% responded that they had never come home. At the same time, 15.9% of mothers who were given the service of a family polyclinic in particular whether they were satisfied with the service of family doctors and patronage nurses, 77.4% were satisfied, 6.8 were not satisfied at all, 20.0% of mothers were happy with the service of a patronage nurse, 72.5% were satisfied, 7.5% were not satisfied.

Thus, an in-depth study of the lifestyle of the families under study made it possible to depict a socio-hygienic "portrait" of mothers engaged in the upbringing of children up to one year old. These were assessed the age of the mother at the time of marriage, the relationship of kinship of the couple, the family, social status of the mother, education, diet and character, the mental state of the family, the living conditions of the family, the medical activity of the mother and the level of satisfaction with medical service.

The health of children, especially children up to one year of age, depends on how well they are born from pregnancy and childbirth, the course of pregnancy, the organization of childbirth, the state of the baby being born and many other factors. Including 3/2 of the children involved in the study, 63.8% were born from gestation 2-3, 52.8% from gestation 2-3, 29.3% from gestation 1 and 39.9% from gestation 1, and 7.1% from gestation 4 and more, and 7.4% from gestation 4 and more. Since more than half (57.5%) of the period between childbirth is 2-3yil, 11.2% of babies who are still characteristic of the Central Asian region are seeing a face within 1 year. This factor is considered one of the negative factors that affect the health of mothers and children. Because considering that when the period between childbirth does not exceed 1 year, the mother should breastfeed and care for the baby in her hands, provide in sufficient quantities the necessary microelements, vitamins, protein fat and carbohydrates for the growth of the fetus in the womb, as well as provide her organism with the above products (1 mouth saturates 3 stomachs) it can be understood that it is difficult. In our study, 67.7% of mothers had pregnancy anemia, 6.2% of mothers had pregnancy with the risk of miscarriage, and in 26.8% of cases toxicosis was reported in the 1st and 2nd half of pregnancy. So we still need to note that in order to ensure that the period between childbirth will not be less than 3 years, neither only medical institutions, the general public, family, neighborhoods have great tasks for the formation of healthy lifestyle skills. Unlike the effects of the above factors, it was noted that 11.3% of premature baby, and 30.7% of babies were born with one or another complication.

7.1% began to receive complementary foods from the birth of the baby, 8.9% from 1-2 months to 17.0% from 3-4 months. Only 50.2% of babies began to receive complementary foods when they were 6 months old. 12.5% of mothers did not follow the baby's diet. 46.5% of mothers spent 1 hour in the fresh air with the baby, 43.1% for 2 hours, while only 9.8% of mothers spent 3 hours walking the baby in the fresh air.

12.5% of mothers did not follow the baby feeding regimen, 13.4% did not follow the sleep regimen, and 9.9% did not follow the baby's rest regimen. Mothers 49.3% of babies followed the rules of bathing, rubbing, massage, gymnastics, exercises. 99.0% of mothers spent 2 hours and more per day on child care.

When asked "who will you be the first to address if you feel your child is injured", 51% of mothers answered that they would appeal to a doctor, 31.7% to a patronage nurse, 12.7% treated at home myself, 6.2% to related seeds. 37.7% of mothers were judged to be able to provide primary care and have good medical knowledge, 54.5% satisfactory, while 8.1% of mothers were found to be able to provide primary care and have unsatisfactory medical knowledge levels.

Thus, through the study of the social hygienic characteristic of families in which children are raised up to one-year old, important aspects of the lifestyle, medical activity of families, pregnancies, mothers and children under one year old were identified.

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Conclusion

1. The age of the mother at the time of marriage, the relationship of kinship of the couple, the family, social status of the mother, education, diet and character, the mental state of the family, the living conditions of the family, the medical activity of the mother and the level of satisfaction with medical service were assessed;

2. While 41.5% of mothers noted premature separation of the child from the breast, as one of the main causes of this condition, 36.2% indicated a low amount of breast milk, while 5.3% of mothers indicated that the child himself did not breastfeed. 12.5% of mothers did not follow the baby feeding regime, 13.4% did not follow the sleep regime, 9.9% did not follow the rest regime;

3. Our study found that 67.7% of mothers have anemia during pregnancy, 6.2% of mothers have a risk of miscarriage, 26.8% of cases have toxicosis in the 1st and 2nd half of pregnancy. 71.5% showed that the mother's agenda was not different during pregnancy, from the usual one in five mothers did not follow the character of nutrition during pregnancy, the regime of walks in the fresh air, the rules of healthy eating;

4. Breast feeding of the baby, the correct Organization of the provision of complementary foods from 6 months, the implementation of wellness treatments, walks in the fresh air, active rest and compliance with the sleep regime, direct education of the child by the mother are considered to be extremely important factors in raising the child healthy and raising the medical culture of mothers,

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