



Original Research Article

A Study of Pattern of Breast Feeding Practices among the Women Residing In Aurangabad District of Maharashtra

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ABSTRACT

Aims and Objectives:-

1. To study the pattern of breast feeding practices among the women residing in Aurangabad district of Maharashtra.
2. To find of the socio demographic and cultural factors affecting the breast feeding practices.

Material and Methods:- A cross sectional study was carried out in immunization OPD during June 2011 to December 2011 over a period of 6 months. On an average 10-20 mothers visited to each immunization session. Total 268 lactating mother having child aged less than two year of age, who attend the immunization clinic for child vaccination on Monday and Thursday were interviewed. Purposive sampling method was used to select the study population.

Results:- Only 83(31.0%) of study participants had initiated breast feeding within 4 hours of delivery, most common reason for delay in initiation of breast feeding was mother undergone Caesarean Section 89 (48.1%). Total 185(69.0%) mothers gave prelacteal feeds. 124 (46.3%) mothers practiced and had knowledge of exclusive breast feeding upto 6 months. Socioeconomic status has significant association with duration of breast feeding ($p < 0.01$). Shorter duration was observed among the mothers with higher socioeconomic status and vice versa.

Conclusion:- In our study we found less number of mothers had initiated breast feeding within 4 hours of delivery and percentage of mothers who gave prelacteal feeds to their child was found more. So there is need for creating awareness about importance of early initiation and exclusive breast feeding upto 6 months.

Key words:- exclusive breast feeding, prelacteal feeds, initiation, awareness

INTRODUCTION

Breastfeeding is an unequalled way of providing ideal food for the healthy

growth and development of infants; it is also an integral part of the reproductive process with important implications for the health of

mothers. Review of evidence has shown that, on a population basis, exclusive breastfeeding for 6 months is the optimal way of feeding infants. Thereafter infants should receive complementary foods with continued breastfeeding up to 2 years of age or beyond. ^[1]

Breastfeeding is nature's way of nurturing the child, creating a strong bond between the mother and the child by developing baby's trust and sense of security. Breastfeeding is important for young child survival, health & nutrition, Exclusive breastfeeding and longer duration of breast feeding is known to protect the child from obesity risks, it also helps in enhancing brain development and learning readiness. Breast feeding also serves as one of the child spacing methods, which is especially important in developing country like ours where the awareness, acceptability & availability of modern family planning methods are very low. ^[2]

In the last two decades, child mortality has decreased considerably, but close to 7 million children under five years of age still die each year, mainly from preventable causes. Of those, newborn deaths now represent nearly half of all child deaths under five years. Immediate breastfeeding – putting the baby to the mother's breast within an hour after birth – would significantly reduce neonatal mortality.

Early and exclusive breastfeeding helps children survive, but it also supports healthy brain development, improves cognitive performance and is associated with better educational achievement at age 5. Breastfeeding is the foundation of good nutrition and protects children against disease. In this way, breastfeeding allows all children to thrive and develop to their full potential. Yet, less than half of the world's newborns benefit from early breastfeeding

and even fewer are exclusively breastfed for the first six months. ^[3]

Only 35% of infants world-wide are exclusively breastfed during the first four months of life and complementary feeding begins either too early or too late with foods which are often nutritionally inadequate and unsafe. ^[2]

As per NFHS - 3 data only 69 percent of children under two months of age are exclusively breastfed, which further drops to 51 percent at 2-3 months of age and 28 percent at 4-5 months of age. ^[4] Although Breast feeding is universal in India, but exclusive breast feeding & appropriate weaning practice rates are not satisfactory, Various Socio cultural factors influence these practices, which vary from region to region. ^[4] Beliefs like the first milk is not good or there is no secretion of milk in first three days result in practices like discarding colostrum and promoting prelacteal feeds, such practices increase the risk of infections and deprive the valuable benefit of colostrum feeding to the vulnerable neonates. This issue becomes an area of concern since large number of babies born in India is low birth weight. ^[5]

MATERIALS AND METHODS

The present cross sectional study was carried out in immunization OPD, (Clinic) under the Community Medicine Department Government Medical, Aurangabad during June 2011 to December 2011 over a period of 6 months. On an average 10-20 mothers visited to each immunization session. Total 268 lactating mother having child aged less than two year of age, who attend the immunization clinic for child vaccination on Monday and Thursday were interviewed. Purposive sampling method was used to select the study population. The information about participants demography and practices towards breast feeding were collected from

the mothers on pre designed and pretested proforma. A verbal & written consent was taken from the participants before collecting the information.

Statistical analysis: The data was compiled, analyzed and tabulated. Percentages, chi square tests applied. Statistical analysis was done by SPSS 16.0.1; wherever applicable.

RESULTS

Table 1 shows majority 86(32.1%) of women were in the age group of 25 to 28 years. 42(15.7%) were equal to and below 20 years. The average age of the women was 24.8 years. The youngest and oldest participants were 18 and 40 years old respectively. 163(60.8%) women residing in urban area while 105(39.2%) residing in rural area. Most of the study participants 96(35.8%) were educated up to middle school while 52(19.4%) were illiterate. 66(24.6%) women were involved in some kind of work while 202(75.4%) were Housewives. Majority 93(34.7%) belonged to socioeconomic class III while 100(37.3%) belonged to upper socioeconomic strata.

Table 2 shows 83(31.0%) of study participants had initiated breast feeding within 4 hours of delivery, while 14(5.2%) took more than 48 hours to start breast feeding. Almost 199(74.3%) of study participants had initiated breast feeding within 24 hours of delivery. Most common reason for delay in initiation of breast feeding, which was mother undergone Caesarean Section 89 (48.1%), baby was in NICU 38(20.5%) was the next important reasons.

Table 3 shows 185(69.0%) of the 268 mothers gave prelacteal feeds. Commonest prelacteal feed given was sugar water 94(50.8%) followed by cow / buffalo milk 56(30.3%), honey 19(10.3%), castor oil 16(8.6%).

Table 1. Distribution of participants according to Socio-demographic variables

Variable	Frequency	Percentage
Age group (in Years) n=268		
≤ 20	42	15.7
21-24	77	28.7
25-28	86	32.1
≥ 29	63	23.5
Place of Residence n=268		
Urban	163	60.8
Rural	105	39.2
Educational status n=268		
Illiterate	52	19.4
Primary School	26	9.7
Middle School	96	35.8
High School	58	21.6
Intermediate	28	10.5
Graduate	8	3.0
Occupational status n=268		
Housewives	202	75.4
Non agricultural worker	27	10.1
Agricultural worker	28	10.4
Owner & Cultivator	11	4.1
Socio-economic class^a n=268		
Class I	22	8.2
Class II	78	29.1
Class III	93	34.7
Class IV	54	20.2
Class V	21	7.8

Table 2. Distribution of participants according to time of initiation of Breast feeding and reason for late initiation of breast feeding

Time in hours	No. of respondent women (n=268)	Percentage
<4	83	31.0
4-24	116	43.3
24-48	55	20.5
>48	14	5.2
Reason	No. of respondent women (n=185)	Percentage
Milk not produced immediately	22	11.9
Delivery complication**	36	19.5
Caesarian section	89	48.1
Baby was in NICU	38	20.5

(** Eclamsia, mother exhausted, hepatitis PPH etc)

Table 3. Distribution of participants according to prelacteal feeds given

Prelacteal Feeds	No. of respondent women (n=185)	Percentage
Sugar water	94	50.8
Honey	19	10.3
Castor oil	16	8.6
Cow / Buffalo milk	56	30.3

Table 4 shows 124(46.3%) practiced and had knowledge of exclusive breast feeding upto 6 months while 41(15.3%) had no knowledge regarding exclusive breast feeding.

Table 4. Distribution of participants according to knowledge and practice regarding extent of exclusive breast feeding

Extent of exclusive breast feeding	No. of respondent women (n=268)	Percentage
Upto 4 months	103	38.4
Upto 6 months	124	46.3
Don't know	41	15.3
Total	268	100

Table 5 shows educational status of mothers was inversely associated with duration of breast feeding that is longer duration of breastfeeding (above 12 months) were observed in mothers who were illiterate or educated upto primary or middle

Table 5. Period of continuation of breast feeding according to literacy status of mothers having children 12-24 months of age (n=127)

Literacy Status	< 6 mths. No. (%)	6-12 mths. No. (%)	> 12 mths. No. (%)	Total
Illiterate	5 (17.2)	9 (31.1)	15 (51.7)	29
Primary / Middle	8 (12.7)	12 (19.1)	43 (68.2)	63
High School	3 (13.0)	8 (34.8)	12 (52.2)	23
Intermediate & above	3 (25.0)	5 (41.7)	4 (33.3)	12
Total	19 (15.0)	34 (26.8)	74 (58.2)	127

$$\chi^2 = 7.046 \quad p > 0.05$$

Table 6. Period of continuation of breast feeding according to socioeconomic status of mothers having children 12-24 months of age (n=127)

S. E. Status	< 6 mths. No. (%)	6-12 mths. No. (%)	> 12 mths. No. (%)	Total
I & II	46 (90.2)	4 (7.8)	1 (2.0)	51
III	3 (7.0)	4 (9.3)	36 (83.7)	43
IV	2 (9.5)	1 (4.8)	18 (85.7)	21
V	0 (0.0)	2 (16.7)	10 (83.3)	12
Total	51	11	65	127

$$\chi^2 = 94.984 \quad p < 0.01$$

school compared to mothers who were educated high school, intermediate and above. However this inverse association between breast feeding duration and mother's education was not statistically significant.

Table 6 shows socioeconomic status has significant association with duration of breast feeding ($p < 0.01$). Shorter duration was observed among the mothers with higher socioeconomic status and prolonged duration among the lower socioeconomic class.

DISCUSSION

Breast milk is the best gift a mother can give to infant. It is believed that breast-feeding is universally and traditionally practiced in India. In present study 83(31%) of study participants had initiated breast feeding within 4 hours of delivery, while 14(5.2%) took more than 48 hours to start breast feeding. Almost 199(74.3%) of study participants had initiated breast feeding within 24 hours of delivery. Srivastava Anurag et al [6] in their cross sectional study found that only 47(4.7%) mothers had initiated breast feeding within 4 hours of delivery and 479(47.9%) mothers had initiated breast feeding within 24 hours of delivery. These percentages were less compared to our study. Study conducted by

M C Yadavannavar and Shailaja S Patil [7] showed 23.3% of mothers had initiated breast feeding within 4 hours of delivery, while 8.3% took more than 48 hours to start breast feeding. Almost 56.6% of mothers had initiated breast feeding within 24 hours of delivery and these findings were approximately similar to our study.

In our study most common reason for delay in initiation of breast feeding, was mother undergone Caesarean Section 89 (48.1%), baby was in NICU 38(20.5%) was the next important reasons and these findings were similar with study conducted by Sanjay V Wagh et al [8] in which most common reason for delay in initiation of breast feeding, was mother undergone Caesarean Section 24 (50%). In present

study 185(69.0%) mothers gave prelacteal feeds to their child. Commonest prelacteal feed given was sugar water 94(50.8%) followed by cow / buffalo milk 56(30.3%), honey 19(10.3%), castor oil 16(8.6%) and these findings were similar with study conducted by M C Yadavannavar and Shailaja S Patil [7] in which commonest prelacteal feed given was sugar water 103(46.81%). Thakur Neelima and Kumar Arun [9] in their cross sectional study observed that only 56(36.25%) children were given pre-lacteals which was less compared to present study. A study conducted by PK Mandal et al [10] showed 71.7% infants given pre-lacteal feeds and most common was Honey (25%). These findings are contrast compared to our study. Present study findings shows that 124(46.3%) mothers practiced of exclusive breast feeding upto 6 months, which was more compared to study conducted by Thakur Neelima and Kumar Arun [9] in which only 32.25% mothers practiced exclusive breastfeeding till 6 months of age. A study by Takalkar Anant A et al [11] showed 72.6% mothers exclusively breast fed their child for less than or up to six months duration and these percentage was higher compared to our study and it could be due to sociodemographic and cultural variations. In present study we found educational status of mothers was inversely associated with duration of breast feeding that is longer duration of breastfeeding (above 12 months) observed in mothers who were illiterate or educated upto primary or middle school compared to mothers who were educated high school, intermediate and above. However this inverse association between breast feeding duration and mother's education was not statistically significant. Similar findings observed by M C Yadavannavar and Shailaja S Patil [7] and study conducted by Takalkar Anant A et al [11] observed shorter duration of breast

feeding amongst mothers with higher education. In our study socioeconomic status has significant association with duration of breast feeding ($p < 0.01$). Shorter duration was observed among the mothers with higher socioeconomic status and prolonged duration among the lower socioeconomic class, similar findings observed by M C Yadavannavar and Shailaja S Patil [7] in their study.

CONCLUSION

Present study revealed negative aspect that less number of mothers had initiated breast feeding within 4 hours of delivery and most common reason for delay in initiation of breast feeding, was mother undergone Caesarean Section. Percentage of mothers who gave prelacteal feeds to their child was found more in our study which was also unsatisfactory. Almost half of the study participants had practiced exclusive breast feeding upto 6 months. So there is need for creating awareness about importance of early initiation and exclusive breast feeding upto 6 months. We also observed shorter duration of breast feeding among the mothers with higher socioeconomic status, so there is need to promote advantages of exclusive breast feeding and it should be continued with supplementary feeding upto 2 years of age or beyond.

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