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Original Research Article

A Descriptive Cross-Sectional Study of Breast Feeding Practice

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Abstract

Background: Breastfeeding practices play an important role in reducing child mortality and morbidity. This study describe the breastfeeding practices. This study was describe the breastfeeding practices and factors affected initiation and duration of breastfeeding.

Materials and methods: The cross sectional study on mothers with infants less than 1 year who came to immunization center for vaccination were included in the study. Total 600 mothers include in this study.

Results: Our study was showed most of the mothers initiates breastfeeding (98%) and the others(2%)were not able to initiates and Only. 38% of the mothers did the exclusive breastfeeding until 6 months and started weaning after 6 months. A total 57% of mothers in our study prematurely started weaning.

Conclusions: The study emphasizes the need for breastfeeding intervention programs, especially for the mothers during antenatal and postnatal check-ups. The information regarding the advantage and duration of breastfeeding need to be provided for the community as a whole.

Keywords: Breastfeeding, Immunization, Infants.

Introduction

Breastfeeding, initiated within the first hour of birth, provided exclusively for six months, and continued up to two years or beyond with the provision of safe and appropriate complementary foods, is one of the most powerful practices for promoting child survival and wellbeing. Improving breastfeeding rates around the world could save the lives of more than 820,000 children under age 5 every year, the majority (87 per cent) under 6 months of age.

Breastfeeding is one of most important determinants of child survival, birth spacing, and prevention of childhood infections. The importance of breastfeeding has been emphasized in various studies. [1,2] The importance of immunological and nutritional value of breast milk has been demonstrated. [3,4]

The beneficial effects of breastfeeding depend on breastfeeding initiation, and its duration. [5] Breastfeeding practices vary among different regions and communities in India, breastfeeding in rural areas appear to be shaped by the belief of a community, which are further influenced by social, cultural, and economic factors.

Materials and Methods

The cross sectional study was conducted on mothers with infants less than 1 year

who came to immunization center for vaccination were included in the study. Total 600 mothers include in this study. Verbal consent was obtained. Those who are not willing to participated were excluded.

The pre-tested questionnaire included various factors that had a potential effect on the initiation and duration of breastfeeding practice. The questionnaire included socio-economice and demographical data, details on the initiation and duration of breastfeeding. A pre-test run was done to validate questionnaire .for socio-economic status , a standard of living index [6] was used that can be used for both urban and rural backgrounds.

Statistical analysis used: data analysis was done according to descriptive statistics. Result are given in percentages.

Results

Percentage distribution of study population by socio-demographic characteristic.

Total mothers = 600 mothers

Socio demographic profile	Number	Percentage
Mothers age		
<21 years	150	25
21-25 years	318	53
26-30 years	78	13
>30 years	54	09
Formal education		
None	228	38
Primary to secondary	282	47
College	90	15
Mothers employment		
Working	528	88
Not working	72	12
Socio economics status		
low	228	38
Medium	264	44
High	48	8
Parity		
One	228	38
Two	276	46
Three	72	12
More than three	36	6

In our study, the majority of the mothers were between the ages of 21 and 25 years old(53%). About 40% of mothers were illiterate and 48% belonged to low socio-economic class. The majority of mothers were housewives(88%)and mothers who were employed were(12%).

Initiation of breast feeding Most of the mothers initiates breast feeding (98%)and the others(2%)were not able to initiates due to separation from mother or due to advice from the mother-in-law.

A total of 31% mothers initiates breastfeeding within 30 minutes with normal delivery and 48%mothers delay of 2 to 3hours in our study . A total of 19%of the mothers in our study did not breast feed even after 24 hour after the delivery. They were given pre lacteal feed and discarded colostrums. Sugar water ,honey

and ghee are commonly used pre lacteal feed.

Table 1: Duration of breastfeeding

Duration	Number	Percentage
<6 months	342	57%
>6 months and started weaning	228	38%
>6 months and not yet started weaning	30	5%

Only 38% of the mothers did the exclusive breastfeeding until 6 months and started weaning after 6 months. A total of 57% of mothers in our study prematurely started weaning.

Only 5% mothers continued to breastfeed the baby even at 9 months. A total of 76% of the mothers followed on demand feeding practice and rooming in. cow milk (29%) was most common food used for infants who were breastfed less than 6 months followed by mix milk and water. only 16% mothers used commercial infants formula.

Among the mothers who started weaning exclusive breastfeeding after 6 months (57%), cow milk was most common weaning food (36%).

Discussion

Women have a very positive attitude towards initiation of breastfeeding. in this study almost all the women had initiated breastfeeding and continued to breastfeed beyond 6 months. Benakappa DG et al [7] and Chandrashekhar TS et al [8] also show similar pattern.

Breast milk should be initiated within half hour of delivery [9]. The delay in initiation will lead to a delay in the development of oxytocin reflexes, which are very important for the contraction of the uterus and the breast milk reflex. In our study, initiated breastfeeding within 30minutes of childbirth, which is a good practice.

Pre lacteal feeds should not be given but still the majority of mothers gives either sugar water or honey. discarding the colostrums is still practiced widely. the colostrums is rich in vitamins, minerals, and immunoglobulins that protects the child from infectins [10]. Discarding the colostrums and feeding the child with honey or sugar water makes the child vulnerable to infection. Sharma M et al have also found similar practices in the community and it is largely influenced by the relatives and the primary care providers during childbirth [11].

Exclusive breastfeeding should be continued for 6 months [12]. It protects the child from malnutrition, infection and helps the overall development of child [3,4]. The prematurely start weaning the child, which may lead to development of infection and may have a long term effect on the physical growth of the child [13]. The main reason given for the mother to strart early weaning was insufficient milk, which may be due to the early age marriage (those who were yonger than 19 years old) and early child birth. Studies indicate that adolescents breastfeed less often than adults and they hold positive and negative attitude toward breastfeeding that influence decision making and breastfeeding [14].

Most of the mothers received information regarding breastfeeding from health workers and doctors. The development of counselling skills among doctors helps in conveying the right message to mothers about breastfeeding and weaning practices [15].

The influence of the mother-in-law and self-assumption about lack of milk for the baby are sited as major reasons for early and late weaning. [16]

Conclusions

The study emphasizes the need for breastfeeding intervention programs especially for the mothers during antenatal and postnatal check-ups. The information regarding the advantage and duration of breastfeeding need to be provided for the community as a whole. Practices such as discarding the colostrum and early or late weaning should be discouraged and community based health education programs is needed.

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