

EVALUATION OF BREAST FEEDING PRACTICES

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ABSTRACT

Background: The best first food for babies is breast milk. This study was conducted to assess the percentage of population having knowledge regarding benefits of breast feeding, exclusive breast feeding and ratio of mothers practicing it.

Material & Methods: This observational study was carried out from January 2008 to June 2008, in the vicinity of Isra University Hyderabad. A sample of 285 women who attended the Gynaecology antenatal clinics, living in the vicinity of Isra University, also lady doctors working there were enrolled by convenient sampling. A pre-designed questionnaire was filled by interviewing these women. The data collected was statistically analyzed and percentages recorded.

Results: Breast feeding was practiced in 278(97.54%) of the study population and only 7(2.45%) women did not practice it. 130(44.56%) of women were knowing about benefits of breast feeding and 155(54.38%) were not aware about the benefits. Among those knowing about the benefits, only 3.2% were fully aware, 67% were feeding for health of babies and 29.8% for prevention from diseases. Information regarding exclusive breast feeding was collected, 198 (68.70%) were practicing it and 87 (31.29%) were not exclusively feeding their babies. Time duration of breast feeding noticed that 28 (9.82%) of mothers feed their child for <6 months but most of women 104 (36.49%) for 2 years and some of them even feed for >2 years.

Conclusion: Breast feeding is well practiced in this community but the ratio of exclusive breast feeding is low. Mothers have poor knowledge of benefits of breast feeding.

Key words: Breast feeding, Exclusive breast feeding, Breast feeding practice.

INTRODUCTION

The best first food for babies is breast milk and is the fundamental right of child.¹ Nutrients in the breast milk are the nature's recipe for excellent growth and development. Breast milk is safe, hygienic, inexpensive, readily available to the infant at right temperature and with ideal nutritional value. It reduces childhood infective diseases especially diarrhea and atopic illnesses, (eczema, asthma). Mothers who do not breast feed, their babies will have lower IQ, abnormal development and increased infant mortality rate. Breast feeding prevents mother from PPH, it also helps to promote natural family planning and protection against pregnancy and may cause amenorrhea which prevents breast cancer, ovarian cancer and type 2 diabetes in mothers.^{2,4}

Breast feeding in our community has traditional values and certain myths like colostrum is not good for baby or insufficient milk in first three days.⁵ A study of Pakistan which was carried out among the medical students to assess their knowledge of breast feeding in which 14% of students said about the colostrum that it should be discarded and 12% said it is harmful for the baby, so

these are the traditional strong believes even running in educated families through their grandparents.⁶ According to demographic and health survey 2006-07 in Pakistan, almost two thirds of babies 62% are given some other things before breast milk (pre-lacteal feed).⁷

Exclusive breast feeding have been emphasized all over the world up to six 6 months to obtain optimum benefits of baby.⁴

Despite the well known maternal and child benefits, the breast feeding trend has declined. World wide global data shows that less than 40% of babies below 6 months of age are exclusively breast fed. In our society this trend could be due to western influence, urbanization and increased economic power combined with the increased availability of commercial milk substitutes.^{5,7}

This study was conducted to assess the percentage of population having knowledge regarding benefits of breast feeding, exclusive breast feeding and ratio of mothers practicing it.

MATERIAL AND METHODS

This observational study was conducted from January to June 2008 at Isra University Hyderabad, to assess the percentage of population having knowledge regarding benefits of breast feeding, exclusive breast feeding and ratio of mothers practicing it. A sample of 285 women, who attended the gynecological, antenatal clinics, lived near by to Isra University and lady doctors working there were enrolled by convenient sampling into the study. A pre-design questionnaire was filled by interviewing these women. Mothers who had infants with specific problems (cleft lip, palate and primary lactose intolerance) were excluded. Verbal consent was taken from all the study women; they were explained about the importance of study. The data collected was calculated, statistically analyzed and percentages were recorded.

RESULTS

A total of 285 women were recruited in to the study, the ages rang was between 15-40 years and mean age was 27.5, most of them 63.15% belonged to 31-40 years of age group, rest 36.84% were in 15-30 years of age group. The level of education among the women was categorized as primary, secondary school, graduate and above. Regarding the occupation, majority of these women 157 (55.08%) were house wives 29 (10.17%), doctors and remaining were in other jobs. This demographic data is shown in Table-1.

A large number 278 (97.54%) of study population practiced breast feeding, only 7 (2.45%) of women did not practice it. About ben-

Table-1: Demographic characteristics of study women.

Variables	Groups	Number	Percentage
Age	15-30	105	36.84
	31-40	180	63.15
Education	Uneducated	73	25.61
	Primary	75	35.37
	Secondary	62	29.24
	Graduate	33	15.56
	Above Graduation	42	19.81
Occupation	House wife	157	55.08
	Teachers	10	03.50
	Doctors	29	10.17
	Other jobs	89	31.22

efits of breast feeding 44.56% of women were knowing the benefits and 155 (54.38%) were not aware, although these women were practicing breast feeding but they think it is the nature who meant them to do so, tradition to feed their babies some consider it is clean, pure good for health of baby. Among those knowing the benefits of breast feeding, only 3.2% were fully aware, 67% were feeding for health of babies and 29.8% for prevention from diseases. Information regarding exclusive breast feeding was collected, 100 (35.08%) of women knew it, 185 (64.91%) were not aware about exclusive breast feeding. Regarding practice 198 (68.70%) were exclusively feeding their babies and 87 (31.29%) were not. (Table-2 & 3).

Table-2: Knowledge about benefits and exclusive Breast Feeding.

Breast Feeding	Knowledge	Number	Percentage
Benefits	Yes	127	44.056
	No	155	54.38
Exclusive	Yes	100	35.08
	No	185	64.91

Table-3: Percentage of mothers practicing Breast Feeding and Exclusive Breast Feeding.

Breast Feeding	Number	Percentage
Practicing	278	97.54
Not practicing	07	2.45
Exclusive	227	68.70
Partial	51	31.29

Time duration of breast feeding by mothers illustrated in Table-4, 28 (9.82%) of mothers feed their babies for <6 months but most of women 104 (36.49%) for 2 years and some of them even feed for more than 2 years.

Table-4: Time duration of Breast Feeding by mothers.

Duration	Number	Percentage
<6 months	28	9.82
12 months	71	24.91
18 months	77	27.01
2 years	104	36.49
>2 years	05	1.75

DISCUSSION

It is generally believed that breast feeding directly promotes overall health of the child and results in decreased childhood morbidity and mortality.⁷ In this study breast feeding was practiced by 97.54% of women similar results 97.0% were reported by Bena Kappa et al,⁸ in study of Srilanka⁴ they observed 100% initiation of breast feeding but exclusive breast feeding up to 4 months was seen in 61.6% of study women. In our study, ratio of exclusive breast feeding was 68.70% which is slightly higher than above results. Small number 2.4% of women did not breast feed their babies, the reasons were maternal serious illness, figure consciousness, insufficient milk and occupation problem, almost same reasons were reported in the study of India and mini survey study of Pakistan.^{7,9,10} We divided age in two groups among them most of the women 63.15% were in 31-40 years age group. When educational level was assessed, the ratio of primary educated women was 35.37% and uneducated was 25.94% and also breast feeding practices were seen more in this group of study population. Similarly Singh et al¹¹ reported that most mothers 22.8% and 28.6% were primary and secondary school educated, small number 4.6% were illiterate, in contrast we found large number of uneducated women in our study, the reason may be that our study women mostly were from near by rural areas of the hospital.^{11,12}

As far as the duration of breast feeding is concerned, majority 36.49% of women breast feed their babies for 2 years and even 1.75% continued it more than 2 years, with little variation to our results in one survey of Pakistan, reported that 17.6% of mothers breast feed up to 5 months, 35.6% up to 1 year and 29.2% beyond 1 year also in one study they observed, that duration of breast feeding varied according to mothers educational level and socioeconomic status of family and longer duration was seen in women of rural areas.^{7,9}

CONCLUSION

Breast feeding is well practiced in our community but the ratio of exclusive breast feeding is low. Mothers has poor knowledge of benefits of breast feeding.

Several national guidelines, programs and surveys are conducted but these need implementation at local community level.

REFERENCES

1. Kulkarni RN, Ajenaya S, Gujar R. Breast Feeding Practices in an urban community of Kalamboli, Navi Mumbai. *Indian Journal of community Medicine* 2004; 29.

2. Campbell S, Mongar A. In: *Ten Teachers Obstetrics*. 18rg Edn. London UK, British Publishers. 2006. pp: 286-99.
3. Bushra F, Ahmad N, Hussain T, Manan F. Effect of infant feeding practices on birth interval and morbidity among children in North West Province of Pakistan. *Journal of Islamic Academy of Sciences* 1995; 8: 69-72.
4. Agampodi SB, Agampodi TC, Pyas KD. Breast feeding Practices in a public health field practice area in Sri Lanka: a survival analysis. *International Breastfeeding Journal*. 2007, 2: 13 doi: 10. 1186/1746-4358-213.
5. Galhotra A, Abrol A, Agarwal N, Goel NK, Swami HM. Impact of community Based awareness campaign among lactating women in Chandigarh. *The Internet Journal of health, LLC* 1996-2008.
6. Qudsia A, Tabinda A, Hemna S. Knowledge regarding Breastfeeding Practices among Medical Students of Ziauddin University Karachi. *Journal of Pakistan Medical Association* 2007; 57: 480-83.
7. Morisky DE, Kar SB, Chaudary AS, Chen KR, Shaheen M. Breast feeding Practices in Pakistan. *Pakistan Journal of Nutrition* 2002; 1: 137-42.
8. Benakappa DG, Raju MS, Benakappa AD. Breast Feeding Practices in rural Karnataka (India) with Special Reference to lactation failure. *Journal of the Japan Pediatrics International* 2007; 31; 391-8.
9. Kalra A, Kalra K, Dayal RS. Breast feeding practices in different residential, economic and educational groups. *Journal Indian Practitioner* 1982; 19: 419-26.
10. Khan MH. Decline in Breast: what are the factors responsible? *Gomal J Medical Sci* 2003; 1: 1-4.
11. Singh PMP, Bhalwar R. Breast feeding practices among families of Armed Forces Personnel in a large cantonment. *MJAFI* 2007; 63: 134-6.
12. Victoria J, Jimenez MS, Hainsworth MD. Improving breast feeding practices on a broad scale at community level: success stories from Africa and Latin America. *Journal of Human lactation* 2005; 21: 345-54.

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