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EVALUATION OF BREAST FEEDING PRACTICES IN URBAN AREA OF KHAMMAM, TELANGANA STATE

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ABSTRACT

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. Feeding practices of children among urban poor is far from satisfactory which leads to various conditions of ill health and malnutrition. The study emphasizes the need for more intensive efforts in creating awareness regarding initiation of breast feeding within one hour of birth, exclusive breast feeding till six months and adding supplementary feeding at six months of age. In this study 24.5 % newborns were initiated of breast feeding within 1 hour, 22.5% mothers were given exclusive breast feeding up to six months, 89.5 % of infants received colostrums, 48.5% of the post-natal mothers had correct practice regarding position of the baby, (42.5%) mothers added supplementary feeding at 6 months of age and 62.5% of newborns received prelacteal feed. Breast feeding promotes health, prevents diseases and reduces the health care and feeding cost.

Keywords: Breast Feeding, Practices, Urban, Khammam

INTRODUCTION

Good nutrition forms the basis for good health of a child. Nutrition is required for a child to grow, develop, and stay active and to reach adulthood as well. Breast feeding is the first fundamental right of the child. Breast milk is the ideal food for the infant. Breast feeding has been accepted as the most vital intervention for reducing infant mortality and ensuring optimal growth and development of children. Exclusive breastfeeding during the first 6 months of life has been identified as one of the key interventions for reducing childhood deaths. As a global public health recommendation and the WHO also urges member states to support exclusive breastfeeding for first six months. Early initiation and exclusive breastfeeding for the first six months of life -lay down the best possible foundation for start of life. Breastfeeding not only nourishes the child but also help in development of a strong bond between mother and child. Special fatty acids in the breast milk help in increasing intelligence quotients (IQs) and better visual acuity. Early initiation of breast feeding lowers the mother's risk of post-partum hemorrhage and anemia. Colostrum contains high concentration of protein & other nutrients needed. It is also rich in anti-infective factors which protect the baby against respiratory infections and diarrhoeal diseases (Suryakantha, 2010). The promotion of early & exclusive breast feeding is a well recognized strategy for child survival. Prelacteal feeds are strictly prohibited because not only they introduce infection but also replace colostrum and interfere with sucking (TanuMidha et al., 2010). Although breastfeeding is still universal in India there are some indications that this trend is declining especially in urban educated population (Food and Nutrition Board, GOI, 2006).

The present study was conducted to know Breast feeding practices including time of initiation, giving colostrums, prelacteal feeds and Exclusive Breast feeding among infants (up to 6 months of age) in Khammam district of Telangana state. It evaluate prevalent practices and the current status of knowledge regarding breast feeding amongst mothers of children aging between 0-2 year and to identify factors influencing breast feeding.

MATERIALS AND METHODS

The present study was a cross-sectional study conducted at Mamatha general hospital, Khammam, Telangana state during January 2015 to June 2015. The study was carried out using pre defined and pre

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tested questionnaire after taking informed consent. The terms and definitions for Infant and Young Child Feeding Practices were according to National Guidelines on Infant and Young Child Feeding, 2nd edition (2006). A total of 200 mothers having children aging up to 2 years were selected and data obtained was analyzed by calculating percentages.

RESULTS AND DISCUSSION

The study included 200 mothers who were coming to the hospital for child immunization. The dominant group of mother was in the age group of 21-25 years comprising of about 49.5% of study population. The percentage of teenage pregnancy (below 20 years) was quite high of about 22.5%. Among 200 mothers 69.5% of mothers underwent normal delivery and 30.5% had caesarean delivery. About 62.5% were first time mothers followed by 34.5% second para and 3.0% thirdpara. Amongst all 30.5% mothers were found illiterate, 11.5% were primary educated and 35.5% educated till secondary school. Only 22.5% mothers were educated up to graduation level. Most of the women (67%) belonging to poor families.

Breast Feeding Practices

- a) *Initiation of breast feeding within 1 hour*: Globally, over one million newborn infants could be saved each year by initiating breastfeeding within the first hour of life. In developing countries alone, early initiation of breastfeeding could save as many as 1.45 million lives each year by reducing deaths mainly due to diarrhoeal disorders and lower respiratory tract infections in children (Lauer *et al.*, 2006). Only 24.5 % newborns were breast fed within 1 hr of birth. 67.5% of newborns were put on breast milk in later hrs of the same day and 8% were fed after one day. This was the lower rate. WHO recommends early initiation of breastfeeding (i.e. within one hour of giving birth). Government of India also recommends that initiation of breastfeeding should begin immediately after birth, preferably within one hour (6). The findings were similar to observations of Kumar *et al.*, (2006), Chatterjee *et al.*, (2008), Oommen *et al.*, (2009), and Roys *et al.*, (2009).
- b) *Pre-lacteal feeding*: Ideally nothing should be given to infant up to 6months of age but due the wrong beliefs and culture, people think that prelacteal feed is good for newborn. It is one of the causes for infections in newborn. Here 62.5% of newborns received prelacteal feed. Water sugar solution was the predominant pre lacteal feed used. But in this study majority children received water as their child needs water during day time. This is very important message needed to be conveyed to people that water is not required to be given to infants up to 6 months of age because breast milk itself would sufficient to meet thirst of the infants. Similar findings reported by Neelima *et al.*, (2010).
- c) Feeding of colostrums: Colostrum is nature's protection of the infant against childhood infections especially during first year of life. Every child should receive colostrum but here only 89.5 % of infants received colostrum. Similar finding was observed in Lauer *et al.*, (2006) study where 74% of newborns received colostrum, while a study conducted by Chaterjee *et al.*, (2008) found that 96.4% of the infants received colostrums. Similar findings reported by Neelima *et al.*, (2010) and Vidhya *et al.*, (2015).
- d) *Exclusive breastfeeding rate*: Exclusive breast feeding referred to receiving only breast milk from his /her mother or expressed breast milk. 22.5% mothers were given exclusive breast feeding up to six months, 47.5% up to 4 months, 2% up to 9 months respectively. These findings were similar to other studies of Poonam *et al.*, (2010) and Vidhya *et al.*, (2015).
- e) Mothers knowledge regarding duration of breast feeding: Out of total studied mothers 24.5 % said that correct age up to which they should breast feed their child is 2 year which is correct age and 28.5 % mothers said up to age of 1 year. The WHO and Indian academy of pediatrics emphasize the value of breast feeding for mother and child and recommended exclusive breast feeding up to six months of life and supplemented breast feeding for at least two years .In most of countries child feeding costs high (Bartick *et al.*, 2010).
- f) Mother's knowledge regarding benefits of breast feeding: All mothers said that breast milk is better than commercially available infant formula milk because it is cheap and covered. Only 48 % mothers said that it protects against common respiratory diseases and diarrheas and 4% mothers stated about its contraceptive property.

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- g) Practices regarding frequency of breastfeeding: According to National guidelines on infant and young child feeding even if child is feeding on demand, constitutes about 8-10 times a day is sufficient enough to full fill the needs of a child. Majority of women in this study (67.5%) breast fed their child on demand5-6 times and 32.6% approximately 7-8 times in a day. Episodes during night on an average were two to three times.
- h) Perceptions among mothers for non-breast feeding their children: Out of 200 mothers, 13.5 % were found non-breastfeeding. Majority of mothers (43.5%) felt that milk is not sufficient enough to satisfy their child. Pregnancy was another main reason and few mothers said that the milk does not suit to baby.
- i) *Position of baby*: in this study 48.5% of the post-natal mothers had correct practice regarding position of the baby. 37.5% of them were partially correct and 14% were incorrect. These results were in accordance with Bhatt *et al.*, (2012).
- j) Supplementary feeding: Among 200 mothers 22% given supplementary feeds before 6 months ,48% mothers added supplementary feeding at 6 months of age, whereas 30% mothers did not give supplementary feeding even after 6 months of age. These findings are comparable with the study conducted by Poonam et al., (2010).

Factors Affecting Exclusive Breastfeeding

- a). Educational status: Percentage of mothers who exclusively breast fed their child up to six month was found higher among illiterate mothers (42.5%) than mothers with higher education (36 %). The results were in confirmatory with Vidhya *et al.*, (2015).
- b). Tiwn births: Only 3 mothers were found who has delivered twins. Out of which one mother exclusively breastfed only up to 4 month and other two breast-fed only up to 1 month. Reason being is that mothers feel that milk would not be sufficient enough to satisfy their infants.
- c). Working status of mother: Total 24 mothers were found working out of which 2 mothers (0.5%) did exclusive breastfeeding up to 6 month, 52% did up to 4 month and 47.5% did not practiced exclusive breastfeeding. These results correlated with Vidhya *et al.*, (2015) results.
- d). *Birth spacing*: Most of mothers were not followed proper birth spacing. About 92 mothers were conceived within one year .Out of which 55% breast-fed up to 3 months, 35% breast-fed up to 6 month and 10% did not exclusively breast-fed. It is noted that breastfeeding is a primary determinant of birth interval in societies where contraceptive practice for birth spacing and limitation is low.
- e) The hospital practices: breast feeding techniques were shown to 41% of mothers and 24.5% of mothers was told about the benefit and management of breast feeding. Mother and baby were kept in same room in most (68.6%) of hospitals where as baby was put immediately to breast in 82.5% which helped in successful breast feeding. The results were in comparison with Bhatt et al., (2012).

Conclusion

The study emphasizes the need for more intensive efforts in creating awareness regarding initiation of breast feeding within one hour of birth, exclusive breast feeding till six months and adding supplementary feeding at six months of age. Mothers should also be made aware of the harmful effects of Prelacteal feeds. Year by year awareness is increasing among people regarding breastfeeding. However, practiced at a desired level which we would like to promote through the institutions conducting deliveries, and educating mothers during pregnancy and lactation. The key to successful breastfeeding is Information, Education and Communication strategies aimed at behavior change. Very few women in India have access to hospitals and counseling services on infant and young child feeding, it needs to be improved.

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REFERENCES

Bhatt S, Pooja P, Neha K, Amit D and Rahul P (2012). Knowledge, attitude and practice of postnatal mothers for early initiation of breastfeeding in the obstetric wards of a tertiary care hospital of Vadodara city. *National Journal of Community Medicine* **3**(2) 305-309.

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Bartick M and Reinhold A (2010). The burden of sub optimal breast feeding in U.S: A Pediatric cost analysis. *Pediatrics* **125**(5) 1048-56.

Chatterjee S and Saha S (2008). A study on knowledge and practice of mothers regarding infant feeding and nutritional status of under-five children attending immunization clinic of a medical college. *The Internet Journal of Nutrition and Wellness* **5**(1) 341-34.

Kumar Dinesh, Agarwal Neeraj and Swami HM (2006). Socio-demographic correlates of breastfeeding in urban slums of Chandigarh. *Indian Journal of Medical Sciences* **60**(11) 461-6.

Lauer JA, Betrán AP, Barros AJ and de Onís M (2006). Deaths and years of life lost due to suboptimal breast-feeding among children in the developing world: a global ecological risk assessment. *Public Health Nutrition* **9**(06) 673-85.

National Guidelines on Infant and Young Child Feeding (2006). Ministry of Women and Child development (Food and Nutrition Board). Government of India.

Neelima T and Kumar Arun (2010). Breast feeding practices among the Ganda women of Raipur slums. *Indian Journal of Maternal & Child Health* 12(3) 4.

Oommen Mvatsa, Paul VK and Aggarwal R (2009). Breast feeding practices of urban &rural mothers. *Indian Pediatrics* **46** 891-4.

Poonam Naik and Abhay Nirgude (2010). Breast feeding practices in urban slums of South India. *The Antiseptic* **107**(8) 390-391.

Roys Dasgupta A and Pal B (2009). Feeding practices of children in urban slums of Kolkata. *Indian Journal of Community Medicine* **34**(4) 362-3.

Suryakantha AH (2010). Reproductive and Child Health. *Community Medicine with Recent Advances* (New Delhi: Jitendar Pub) second edition 558.

Tanu Midha, Nath B, Kumari R, Goyal P and Pandey U (2010). Breast feeding practices inrural Kanpur- A Cross-sectional study. *Indian Journal of Maternal and Child Health* **12**(1) 1.

Vidhya B and Naik D (2015). Breast feeding practices among mothers in urban area of Adilabad, Andhra Pradesh. *Indian Journal of Maternal and Child Health* **17**(1) 4-8.

WHO (No Date). Report of the expert consultation on the optimal duration of exclusive Breastfeeding. Geneva, Switzerland, 28–30 march 2001.