

# Prevailing knowledge, practices, attitudes about breast feeding among mothers in Bhagalpur

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■ **ABSTRACT** : The Govt. and non-Govt. organizations throughout the world has realized the importance of Breast feeding under the scheme of 'Health Care for All' and particularly through protection and promotion of Breast feeding. To the practice of Breast feeding is an universal process in recent years. There has been a global decline in the number of Breast feeding mothers. The present investigations was an attempt to evaluate the prevalence of Breast feeding practices in relation to their awareness, knowledge, income, source of knowledge and reason behind Breast feeding. The present study was to spot the variations of child rearing and awareness regarding the feeding practices in the Bhagalpur town - Raionale : (1) to evaluate their awareness and knowledge. (2) to assess the knowledge according to age, income and source of knowledge. Methodology: This study was conducted in different wards of Bhagalpur town. It was Hindu dominated but Muslims respondent were also present, in which slum population was also considered. Total number of 500 subjects were selected, but 96 schedule were rejected due to incomplete answers. Therefore only 404 cases were studied by the researcher. Data were analysed statistically according to the need. Tools for the study – Interview schedule was used for the study. Result : 52.94 per cent subjects in between age group of 21 to 25 yrs. belonged to middle income group. 2.04 per cent respondent belonged to the age group of 30 to 40 yrs. were higher income group. 81.18 per cent respondent's source of knowledge regarding Breast feeding was from neighbours and relatives. Only 4.47 per cent got the knowledge through medical advisor. 40.50 per cent respondents belonging to higher income group showed the reasons behind Breast feeding were healthy way. 32.7 per cent respondents belonging to lower income group highlighted about the natural and enough secretion of milk was the main reason. Some reason was followed by 29.16 per cent women belonging to middle income group.

■ **KEY WORDS**: Income, Breast feeding, Knowledge, Practices

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Every child is a pure and holy flower and it is possible to lend and water this plant child with due care and attention that it may blossom and

seek the sun. Breast milk is best and perfect food for new born or new child. It has the right amount of body building protein that the infant needs so that he can grow.

Breast milk is rich in energy giving carbohydrate and fat, minerals, vitamins and water. That the body needs. Breast milk is safe and has no micro-organisms or 'germs' as in dirty feeding bottles. Breast milk can't be contaminated or go bad, too hot or too cold but perfectly warm at all time. Breast feeding is the natural way to feed a baby. When a baby is born and first starts to suck the milk is secreted naturally and baby is fed quite satisfactorily. There is no need to teach mothers how to breast feed. Most of the women have frequently seen how Breast feeding is done. But in special conditions like young mothers, pre-mature babies or weak babies or much smaller babies are unable to go through proper practice of feeding. They should be guided to adopt the feeding practices by elders. All healthy babies start sucking almost at once, but if a baby is unable to suck for some hours, care should be taken. Healthy mothers feed their babies well. Breast feeding for infants is enough for the first six months of his life, there is no need to give any other pre-lacteal feed, water or other drinks. The European commission (Protection promotion and support of Breast Feeding in Europe) the US centre for disease control and prevention ("Breast feeding"; Promotion and support, CDC August 2, 2011) (CDC UNICEF, AAP American association of Paediatric) save the children and the UK National Health Service (NHS), Australian Department of Health Canada, Canadian Paediatrics Society, dietations of Canada and breast feeding committee for Canada recommended exclusive Breast feeding for 6 month following birth and continued nursing for an additional 18 months or more. 'Save the Children' states - six months of exclusive Breast feeding increases a child's chance of survival at least 6-folds ("Breast feeding"; Promotion and support, CDC August 2, 2011). But in special conditions like diarrhea or so or in hot weather, baby needs something to drink should be fed breast milk first then if needed can be given some boiled cold water from cup with a small bit of cotton, never with feeding bottle. Sometimes mothers complain for not having enough milk should never be advice to start feeding bottle instead she should continue Breast feeding even if a baby cries a lot. The crying of baby is the indication of his/her activeness or may be some pain or uneasiness but this does not mean they are ill or half fed. These special caring babies should be breast fed and never take them off the road to health (*i.e.* bottle feeding) and make them really ill. Sucking enhances milk

secretion and more the baby suckles, production of milk is more, well sucked breast make more milk naturally. If suckling is not proper the secretion of milk are hampered and less and less production of milk continues and lastly stops. Most of the mothers know that if a baby cries it means he/she need to be fed, the more they cries the more milk secretion starts and when babies are put to breast they suckle well and received enough milk and are satisfied. Babies work hard to get enough milk. These babies are healthy baby and immuned baby. The best indication of getting breast milk can be judged known by weighing the child. If the baby is growing, heavier in weight than before are happy, active baby. Breast feeding benefits both mother and baby (American Academic of Pediatrics Section on Breast feeding, 2012; "A Summary of the agency for Health Care Research and Qualities Evidence report on Breast Feeding in developed countries, 2009). Support for Breast feeding is universal among major health and children's organization WHO. States, breast milk is the ideal food for the healthy growth and development of infants. Breast feeding is also an integral part of the reproductive process with important implications for the health of mothers ("UK Worst at Breast Feeding" BBC, 2016 and WHO, 2013), WHO's guidelines recommends continued frequent on demand breast feeding until 2 years of age or beyond (World Health Organization, 2003). Sometimes when babies are pre-mature and small who do not suck well needs breast milk to be expressed and fed by a clean bowl and spoon so that they get mother's milk in these conditions too. Both the breast is expressed to get enough milk in the Katori and if possible spoon dropper or cotton is used to make baby suck milk of mother so that immunity and satisfaction is given. Breast milk (expressed) should be fed fresh to the infants. This practice of expressing milk and feeding baby should be continued because this helps mothers to make more and more milk and when baby is strong and grown a bit can again continue to feed on breast. If no milk is expressed the milk secretion discontinues and stops. This is bad for baby and mother too. Babies should be fed on breast milk up to six months because it is complete food for them. After six months however, some supplementary foods should be started but still Breast feeding can be continued. Along with breast milk extra foods can be continued. Every community has its own peculiar practices and ideas about child rearing and infant feeding. Mothers should be

motivated and taught to breast feed their babies in all condition even if mother are ill. Breast feeding is so important that mothers who do not feed their babies are asked by their relatives or those mothers who breast feed their babies so that immunity can be assured to babies. Mothers who are malnourished or unable to feed their babies should be taught to continue feed their babies and encouraged to take enough care about herself and take proper food, calories and protein diet to make good milk production. It is estimated that more than a million deaths of babies could be prevented globally per year through wide spread Breast feeding. Breast feeding decreases the risk of respiration tract infection and diarrhea (American Academic of Pediatrics Section on Breast feeding, 2012). This is true both in developing and developed countries (WHO, 2014). Other benefits include lower risks of asthma, food allergy, celiac disease, type I diabetes, and leukemia (American Academic of Pediatrics Section on Breast feeding, 2012). Breast feeding may also improve cognitive development and decrease the risk of obesity in adulthood (WHO, 2014). Infants, unlike the young ones of other species, wholly depended for his food and care on others. Babies need more food for energy and repair of wear and tear of tissues, extra nourishment is required to provide for the continuous increase in size of the body. These activities increases this results in vast increase in energy, weight, for actively growing tissues to regulate the various functions of the body, protective foods are needed to make baby a perfect healthy baby. If babies are undernourished, sometimes leading to actual stunting and loss of weight gain. For this most useful parameters to assess the growth of infant are weight for height. Mother's milk is unquestionably the best possible food for the baby. The milk contains in correct proportions of all the nutrients for the complete growth and development of a baby. Every mother produces the right amount of milk for her new born baby which is fit for them nutritionally and immunologically. These nutrients are easily digestible and are of biological value. Breast feeding is tradition in India since long. In rural communities and urban slums it has been observed that people who are living in unhygienic environment for them breast milk is safer and cleaner feed their babies. Feeding at breast is a happy experience for mothers of all communities and for babies too which gives the emotional satisfaction. Baby has the tendency to suck

when he is hungry and to fulfill his urge babies must be put on breast to satisfy this urge. When baby starts sucking breast milk it is advisable to continue as regular so that flow of milk is enhanced and regulated. Before nursing a baby mother should clean herself before each feed. The baby should be put on each breast simultaneously so that baby is completely satisfied and contented. It is advisable to make baby suckle more frequently so that flow of milk and secretion of milk is continuous and more regular. Ministry of Social Welfare, Govt. of India in its resolution no-18—11/81-NT dated 19 December 1983 affirmed the right of every child to be adequately nourished as a means of attaining and maintaining health and adopted the Indian National Code for Protection and Promotion of Breast feeding Gopujkar *et al.* (1984) have studied and discussed the practical steps for the promotion of wholesome infant feeding practices in Mumbai, Kolkata and Chennai. A few workers have also presented some excellent recent observations on lactation performance of women in Punjab. Several years ago Scientists of National Institute of nutrition Hyderabad studied the effects of nutritional supplementation on output of breast milk. In a comprehensive Inter-country study on contemporary patterns of Breast feeding organized by the World Health Organisation (WHO) could not also elicit the desired information mainly because the studies largely remains confined only to the region in an around Hyderabad in Andhra Pradesh in Bihar the subject of Infant Feeding has generated very little interests and hardly a couple of references are available. Study of this kind therefore, needs to be undertaken from every region covering different communities, having different traditions and customs so that a firsthand information could be available about the trend of infant feeding practices and related aspect in vogue in the religions. Vivid picture of the region of Bihar on the exciting feeding practices prevailing among the different socio income groups of mothers of Bhagalpur town. The study is to spot out the regional variations in child rearing and extent of variations in so far as the knowledge of different feeding practices is concerned.

These are also controversies and ethical consideration surrounding the means used by public campaigns which attempt to increase Breast feeding rates relating to pressure on women, and potential feeling of guilt and shame of women who fail to breast feed and

social condemnation of women who use formula (<http://www.bbc.com>). In addition to this there is also the moral question as to what degree the state or medical community can interfere with the self determination of a women for example in the United Arab Emirates the law requires a woman to breast feed has baby for at least 2 yrs and allows her husband to sue her if she does not do so (<http://www.the-guardian.com/world> 2014).

## RESEARCH METHODS

Nutritional status of the infants depends on the socio-economic status of the mother and family. Feeding practices depends on the tradition and beliefs of the particular community to which the family belongs. It is imperative therefore, that proper knowledge of child nutrition to mothers is important and there is great need to spread the knowledge of nutrition to mothers. W.H.O. has played a great role in spreading knowledge of child nutrition to all mothers of world's community. In this study the following characteristics of the mothers of

urban area of Bhagalpur town on the basis of age of the mother, knowledge source of the mothers and reasons for giving breast milk in different income group. This study was conducted in the different wards of Bhagalpur town a traditionally old city has considerably changed due to migration of rural people to urban area for the sake of livelihood and education. It is Hindus dominated area but Muslims are the second highest in number. There are slums and slum spots in the middle of the city without any plan of the city. 'Angika' and Hindi is understood by one and all. The present study unit of the respondents was the mothers having child in the age group of zero to one year may be working or housewives were selected randomly to make the study free from any bias. Approximately twenty mothers were pre-tested and after that the re-scheduling of the questionnaire were done. Mothers bearing child of 0 to 1 year were selected and interviewed to fill the booklet (schedule). Some common tools like measuring tape, portable vertical baby weighing machine, some pictures and dummies were

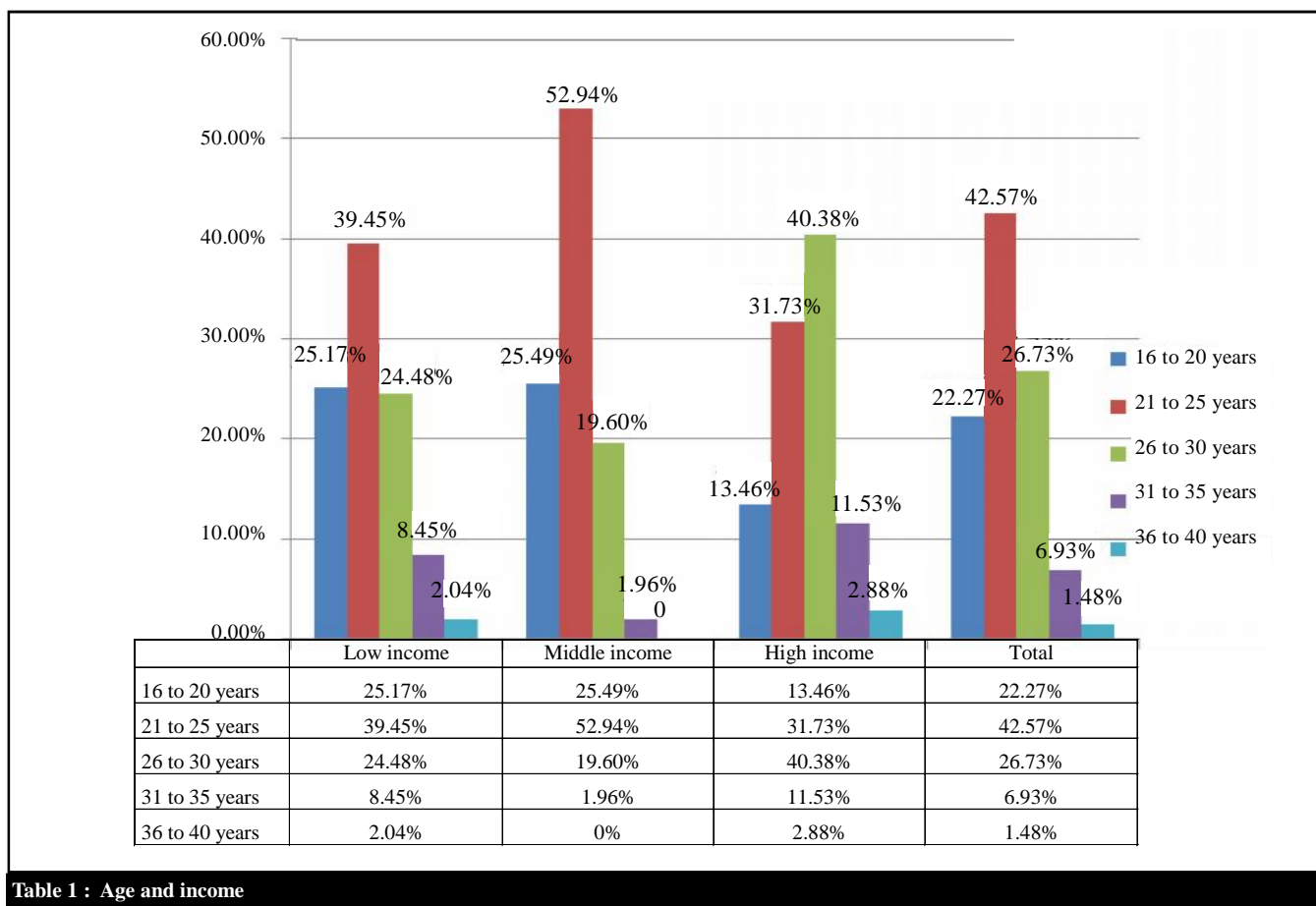


Table 1 : Age and income

taken for assessment. Total number of booklets was filled by the researcher and the respondents accordingly but some of the incomplete or with evasive answers were rejected. Thus 96 schedules were rejected and only 404 cases were selected for study. Mothers were interviewed regarding their age group, income group and some of knowledge regarding their feeding practices and the reason behind feeding practices. Final data were collected tabulated and analysed for the final results. To some extent, survey and observation methods were also applied.

**RESEARCH FINDINGS AND DISCUSSION**

The respondent were interviewed and the findings reveals that out of 500 respondents only 69 per cent of mothers were between the age of 21 to 30 years in all the category of economic groups taken together. This shows that this age group *i.e.* 21 to 30 years represents the maximum fertility group and mothers who produced children were in the age group of (1) 16 to 40 years, (2) 16 to 35 years and (3) 16 to 40 years in higher economic group. Despite the marriage law prohibiting the age of

marriage *i.e.* before 18 years. Result shows that some of the respondents were below the age of 18 in all three categories who produced children. The number of such mothers was fewer in the higher status women.

In the present study, it appears that out of (n=404) 100 per cent respondents 328 mothers knew the advantages of Breast feeding from their neighbours and relations (81.18%) and 58 (14.35%) from the news media like radio, televisions, magazines and news papers.

Only few 18 (4.47%) got knowledge through medical advice. The study reveals that our negative assumption regarding that news media like radio, T.V., magazines and extension services of the Health Department (medical advice) have plays their affective role in spreading the message of the advantages of Breast feeding to a large number of mothers.

In the study the reasons for giving breast milk in different income groups is further classified according to the statistically tested by application of X<sup>2</sup> test, it was observed that economic factor was the main reason to accept Breast feeding practices in lower economic group of mothers numbering 55 out of total 57 *i.e.* 96.49 per

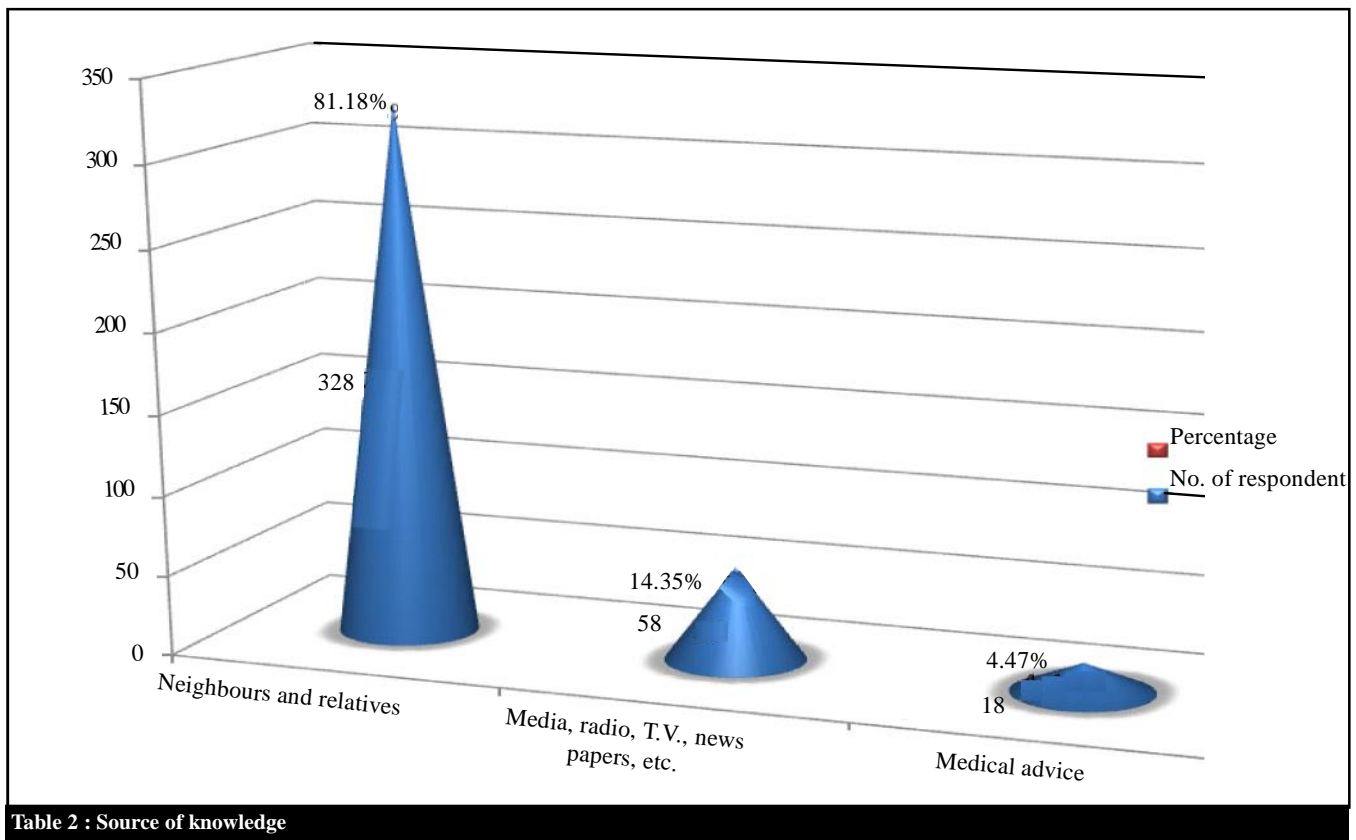


Table 2 : Source of knowledge

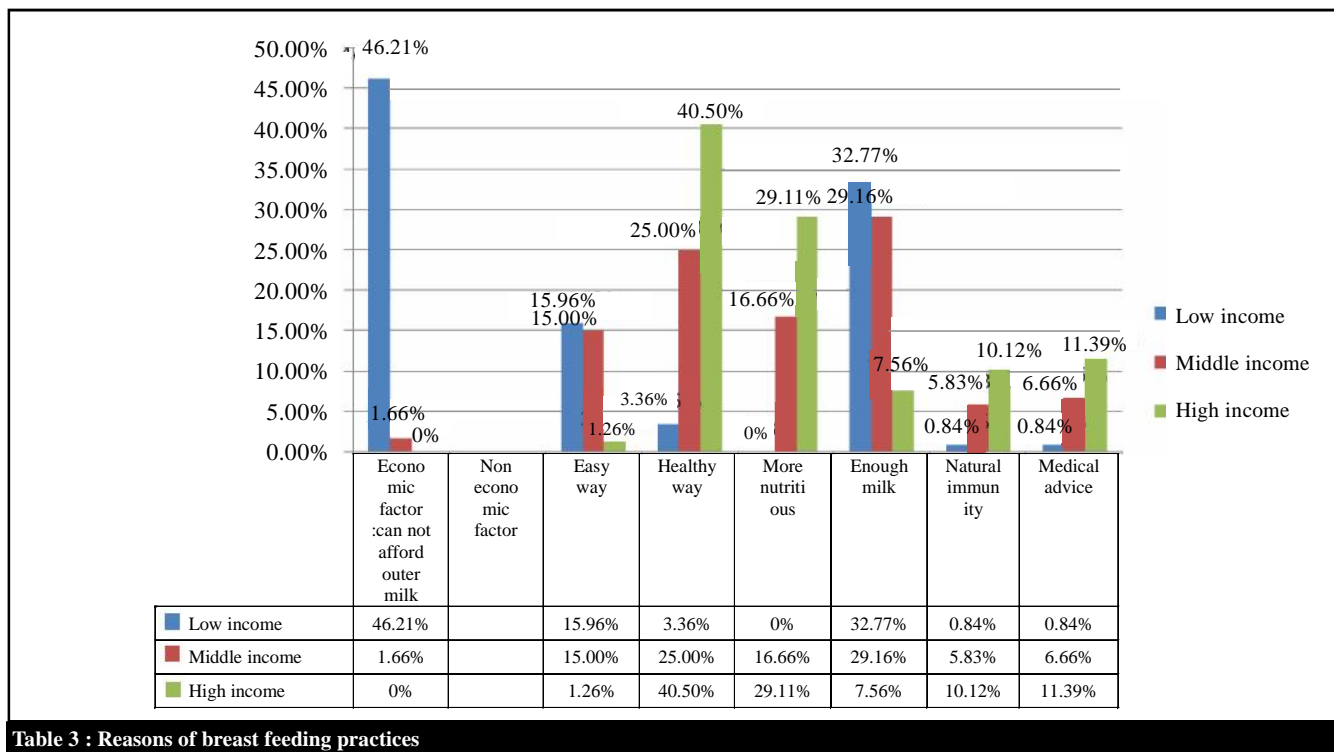


Table 3 : Reasons of breast feeding practices

cent as against 2 mothers from middle status group. The number of mothers from high status group citing economic factor being the reason for Breast feeding their infant was nil. However the reverse was true for the three categories in relation to non-economic factors leading to acceptance of Breast feeding. 64 (53.78%) out of 119 mothers from low status group, 118 (98.33%) out of 120 mothers from middle income group and 100 per cent *i.e.* 79 out of 79 mothers cited non-economic factors alluring them to opt for Breast feeding their infants.

Besides, this practice is more nutritious and healthy is known significantly more number of mothers from middle status group (20 and 30) and high income group (23 and 32) in comparison to a meager four mothers from low economic status. Adoption of the practice as a result of medical advice was also significantly more by mothers of middle and high economic groups (8 and 9) as against only one mother from low income group. Thus it signifies in this study that mothers from low status breast feed their infants more out of compulsion than conviction. Although 64 respondents from this group practiced it, citing non-economic factors as against 55 mothers mentioning economic considerations, but when judged against number and percentage of respondents from middle and higher economic groups, the position

comes as described in above study.

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