RESEARCH ARTICLE

A STUDY ON KNOWLEDGE AND PRACTICES OF BREAST FEEDING AMONG RURAL MOTHERS IN THAZHAKUDY VILLAGE, THOVALAI BLOCK, KANYAKUMARI DISTRICT.

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Abstract

Under - nutrition is associated with at least 35% of child deaths. Also adequate nutrition during infancy and early childhood is essential to assure the growth and development of children to their full potential. Poor nutrition increases the risk of illness and is responsible, directly or indirectly. For childhood morbidity and mortality. The problems of malnutrition are various. The short term problems include a stunted growth, infection proneness etc and the long term problems include reduced intellectual performance in the adulthood. For almost all disorders, the prevention is natural in the form of mother's milk. For healthy growth and development, mother's milk is essential. Breastfeeding is the optimal form of infant nutrition. Breast milk fully meets the requirements of the infant in the first few months of life. All mothers knew that they had to breastfeed their babies, but they did not have adequate knowledge about the appropriate way to breastfeeding. Now a days creating awareness among mothers on correct breastfeeding practices is a must. Infant feeding practices have a significant effect on the health of both mother and child. Breast feeding practices in rural communities are shaped by their beliefs, which are influenced by social, cultural and economic factors. Mothers having at least one child of age from six months to two years in Thazhakudy Village was taken for the study and analyzed.

Introduction:-

A child faces many Challenges in the form of disease which varies from nutritional disorders like deficiency disorders and overt malnutrition to inflections diseases like diarrhea and respiratory inspections.

Under - nutrition is associated with at least 35% of child deaths. Also adequate nutrition during infancy and early childhood is essential to assure the growth and development of children to their full potential. Poor nutrition increases the risk of illness and is responsible, directly or indirectly. For childhood morbidity and mortality. The problems of malnutrition are various. The short term problems include a stunted growth, infection proneness etc and the long term problems include reduced intellectual performance in the adulthood. For almost all disorders, the prevention is natural in the form of mother's milk. For healthy growth and development, mother's milk is essential.
Breast feeding is the optimal form of infant nutrition. Breast milk fully meets the requirements of the infant in the first few months of life. United Nations children's fund (UNICEF) recommends initiation of breast feeding immediately after child birth. The Government of India, in line with World Health Organization (WHO) and UNICEF global recommendation advocate that infants should be given exclusively breast milk for the first six months of life. Subsequently adequate and appropriate complementary foods should be added to the infants diet along with continued breast feeding in order to provide sufficient nutrients for optimal growth.

All mothers knew that they had to breast feed their babies, but they did not have adequate knowledge about the appropriate way to breast feeding. Nowadays creating awareness among mothers on correct breast feeding practices is a must. Infant feeding practices have a significant effect on the health of both mother and child. Mothers are affected through the influence of breast feeding on the period of post - partum infertility, and hence on fertility levels and the length of birth intervals. These effects vary according to both the duration and intensity of breastfeeding. Proper infant feeding starting from the time of birth is important for the physical and mental development of the child.

Breast feeding practices in rural communities are shaped by their beliefs, which are influenced by social, cultural and economic factors. Beliefs like the first milk is not good or there is no secretion of milk in first three days result in practices like discarding colostrums and promoting prelateral feeds. Such practices increase the risk of infections and deprive the valuable benefit of colostrums feeding to the vulnerable neonates. This issue becomes an area of concern since large number of babies born in India are low birth weight.

According to District Level Household and Facility survey (DLHS -111) 2007-08, in India particularly in rural areas breastfeed within 1 hour is 39.8 percent, in Tamilnadu 80 percent and in Kanyakumari District. 70.9 percent, children aged above 6 months exclusively breastfeeding in India is 26.2 percent, in TamilNadu 22.4 percent and in Kanyakumari District 26.3 percent children aged (6-24 months) who received solid or semi-solid food and still being breastfeeding in rural areas of India is 56.5 percent, in TamilNadu 62.1 percent and in Kanyakumari District 94.6 percent.

Objectives:-
The main objective of this study is to analyse the breast feeding habit of the rural women in Thazhakudy village in Thovalai block in Kanyakumari district. The other objectives of the present study are as follows:
1. To assess the knowledge regarding breast feeding of the respondents.
2. To find out the infant feeding practices of the respondents.

Methodology:-
The study was conducted in Thazhakudy village in Thovalai Block Kanyakumari district. The data was collected during May 2017 among 60 mothers by house visit. Repeated visits were made to ensure coverage. Mother having at least one child of age from six months to tow years in Thazhakudy village were taken for the study and analysed.

Source of Data:-
The present study depends upon both primary and secondary data. In order to obtain the required primary data from the respondents interview schedule was utilized. Secondary data were collected from related books, journals and government reports. The collected data were analysed with the help of percentage.

Data Analysis:-
Knowledge of Breastfeeding:-
All mothers knew that they had to breast feed their babies, but they did not have adequate knowledge about the appropriate way of breast feeding.

Colostrums:-
The milk secreted after the child birth for the first few days is called "colostrums". It is yellowish in colour and sticky. It is highly nutritious and contains anti-infective substances. It is very rich in vitamin A. Colostrum has more protein, sometimes upto 10%. It has less fat and the Carbohydrate lactose than the mature milk. Feeding colostrums to the baby helps in building stores of nutrients and anti-infective substances (antibodies) in the baby's body. The anti infectious substances protect the baby from infectious diseases such as diarrhea, to which the child
might be exposed during the first few weeks after birth. The following Table 1 shows the distribution of respondents according to the knowledge of colostrum.

Table 1: Distribution of respondents according to knowledge of colostrum

| S.No. | Colostrum | No. of Respondents | Percentage |
|-------|-----------|--------------------|------------|
| 1     | Yes       | 34                 | 57         |
| 2.    | No        | 26                 | 43         |
| Total |           | 60                 | 100        |

Source: Primary Data

The above Table 1 indicates that 57 percent of the respondents know about colostrum and 43 percent have no knowledge about colostrums. It shows their lag in awareness about colostrum.

![Chart 1](image)

Demand feeding:
Mothers feed the baby by following a proper schedule of time, may be 3 or 4 or 5 times per day. Certain mothers do not follow a schedule. They feed the baby soon after the cry. It happens because of the demand by the baby. Table 2 shows the distribution of respondents according to knowledge of demand feeding.

Table 2: Distribution of respondents according to knowledge of Demand Feeding

| S.No. | Demand Feeding | No. of Respondents | Percentage |
|-------|----------------|--------------------|------------|
| 1     | Yes            | 44                 | 73         |
| 2.    | No             | 16                 | 27         |
| Total |                | 60                 | 100        |

Source: Primary Data

Table 2 shows that 73 percentage of the simple respondents know about demand feeding and 27 percent of them do not have knowledge about demand feeding.
Exclusive Breastfeeding:-
Exclusive breastfeeding means that babies are given only breast milk and nothing else other than milk. During the first six months exclusive breastfeeding should be practiced. Breast milk provides best and complete nourishment to the baby during the first six months. This provides babies with the best start in life. It makes them smarter with higher intelligence and helps in optimal development. This is therefore, extremely important to prevent infections like diarrhoea and acute respiratory infections in early infant and thus reduce infant mortality. Table 3 shows the distribution of respondents according to knowledge of exclusive breastfeeding.

Table 3: Distribution of respondents according to knowledge of exclusive breastfeeding

| S.No. | Exclusive Breastfeeding | No. of Respondents | Percentage |
|-------|-------------------------|--------------------|------------|
| 1     | Yes                     | 39                 | 65         |
| 2     | No                      | 21                 | 35         |
| Total |                         | 60                 | 100        |

Source: Primary Data

Table 3 reveals that 65 percent of the sample respondents have knowledge about exclusive breast feeding and 35 percent of them have no knowledge about exclusive breastfeeding.
Dilution of Milk:-
Before the First feed if the mother intakes a drink it may dilute the milk. Table 4 shows the distribution of respondents according to knowledge of dilute the milk.

Table 4:- Distribution of respondents according to knowledge of diluting the milk

| S.No. | Exclusive Breastfeeding | No. of Respondents | Percentage |
|-------|-------------------------|---------------------|------------|
| 1     | Yes                     | 16                  | 27         |
| 2.    | No                      | 44                  | 73         |
| Total |                         | 60                  | 100        |

Source : Primary Data

Table 4 reveals that 27 percent of the sample respondents have knowledge about diluting the milk and 73 percent of them have no knowledge about dilute the milk.

Chart 4:- Distribution of respondents according to knowledge of diluting the milk

Burping:-
After feeding the baby the mother will make the baby to emit wind noisily from the stomach through the mouth. It is known by burping. The following Table 5 shows the distribution of respondents according to knowledge of burping.

Table 5:- Distribution of respondents according to knowledge of burping

| S.No. | Exclusive Breastfeeding | No. of Respondents | Percentage |
|-------|-------------------------|---------------------|------------|
| 1     | Yes                     | 51                  | 85         |
| 2.    | No                      | 9                   | 15         |
| Total |                         | 60                  | 100        |

Source: Primary Data

Table 5 indicates that 85 percent of the sample respondents know about burping and 15 percent of them have no knowledge about burping. If the baby fails to burp it may cause vomiting. So mothers are often aware of burping.
Practices:-
Infant feeding practices have significant effects on child survival, material health and infertility. Following Table shows the feeding practices of the respondents.

Colostrums given:-
Colostrum is basically the first immunization a child receives from the mother. Some mothers consider this first milk as something dirty and indigestible. Table 6 shows the distribution of respondents according to practice of colostrums given.

Table 6:- Distribution of respondents according to practices of colostrums given

| S.No. | Exclusive Breastfeeding | No. of Respondents | Percentage |
|-------|-------------------------|--------------------|------------|
| 1     | Yes                     | 48                 | 80         |
| 2.    | No                      | 12                 | 20         |
| Total |                         | 60                 | 100        |

Source: Primary Data

Table 6 indicates that 80 percent of the sample respondents have practiced giving colostrums and 20 percent have not practiced.
Breastfeeding within 1 hour of birth:-
The baby should receive the first breastfeed as soon as possible and preferably within one hour of birth. The newborn baby is very active during the first half an hour and if the baby is kept with the mother and effort is made to breastfeed, the infant learns sucking very fast. This early sucking by infants starts the process of milk formation in the mother and helps in early secretion of breast milk. Table 7 shows the distribution of respondents according to practices of breastfeeding within one hour.

Table 7:- Distribution of respondents according to practices of breastfeeding within one hour

| S.No. | Exclusive Breastfeeding | No. of Respondents | Percentage |
|-------|-------------------------|--------------------|------------|
| 1     | Yes                     | 22                 | 37         |
| 2     | No                      | 38                 | 63         |
| Total |                         | 60                 | 100        |

Source: Primary Data

Table 7 shows that 37 percent of the sample respondents have practiced the breastfeeding of the baby within one hour of the birth and 63 percent of them have not practiced it. It reveals that the respondents are unaware about it and the sedation of mother makes it impossible.
Exclusively breast feel for 6 months:-
Still six months breast feed is enough for babies. A healthy mother can sufficiently feel the baby upto six months. Table 8 shows the distribution of respondents according to practices of exclusively breast feed for 6 months.

**Table 8**: Distribution of respondents according to practices of exclusively breast feed for 6 months

| S.No. | Exclusive Breastfeeding for 6 months | No. of Respondents | Percentage |
|-------|--------------------------------------|--------------------|------------|
| 1     | Yes                                  | 51                 | 85         |
| 2     | No                                   | 9                  | 15         |
| Total |                                      | 60                 | 100        |

Source: Primary Data

Table 8 shows that 85 percent of the sample respondents have practiced exclusively breastfeed for 6 months and 15 percent have not practiced.

**Chart 8**: Distribution of respondents according to practices of exclusively breast feed for 6 months

Complementary Feed:-
Breast milk is an excellent food and meets all nutritional requirements of the baby for the first six months. However after six months of age breast milk alone is not enough for an infant to grow well. Other foods are also needed. So, complementary feeding should be started at six months of age, while continuing breast feeding, to meet the growing needs of the growing baby. Infants, grow at a very rapid rate. The rate of growth at this stage is incomparable to that in later period of life. Table 9 shows the distribution of respondents according to practices of complementary feed.

**Table 9**: Distribution of respondents according to practices of Complementary feed

| S.No. | Exclusive Breastfeeding for 6 months | No. of Respondents | Percentage |
|-------|--------------------------------------|--------------------|------------|
| 1     | Yes                                  | 55                 | 92         |
| 2     | No                                   | 5                  | 8          |
| Total |                                      | 60                 | 100        |

Source: Primary Data

Table 9 indicated that 92 percent of the sample respondents have the practice of giving additional feed apart from breast feed and 8 percent have not practiced.
Breastfed in correct position:--
To avoid ear problem and other nostril problems correct position of mother while breast feeding should be practiced.
The following table to shows the distribution of respondents according to practices of breastfed correct position.

| S.No. | Exclusive Breastfeeding for 6 months | No. of Respondents | Percentage |
|-------|--------------------------------------|--------------------|------------|
| 1     | Yes                                  | 8                  | 13         |
| 2.    | No                                   | 52                 | 87         |
| Total |                                      | 60                 | 100        |

Source: Primary Data

Table 10 reveals that 13 percent have practiced breastfed in a correct position and 87 percent have not practiced it.
It reveals that the respondents find it inconvenient to remain in correct position.

Findings:--
1. Fifty Seven percent of the respondents know about colostrums.
2. Seventy Three percent of the sample respondents are aware of demand feeding.
3. Sixty five percent of the sample respondents have knowledge about exclusive breast feeding.
4. Seventy three percent of them have no knowledge about diluting the milk.
5. Eighty five percent of the sample respondents know about burping.
6. Eighty percent of the sample respondents have practiced giving colostrums.
7. Sixty three percent of them have not practiced breastfeed within one hour.
8. Eighty five percent of the sample respondents have practiced of exclusively breastfeed for 6 months.
9. Ninety two percent of the sample respondents have the practice of giving additional feed apart from breast feed.
10. Eighty seven percent have not practiced breast feed in correct position.

**Conclusion:**

Though there is breastfeeding among rural women, they have less knowledge about dilute the milk, burping and colostrum. They had the practice of incorrect position of breastfeeding and absence of breastfeeding within 1 hour of birth. This indicates the need to promote awareness, following the correct method of infant feeding and care of the newborn. Creating awareness will further strengthen and support the common practice of breastfeeding in rural communities and avoid an early introduction to complementary foods for socio-cultural reasons.

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