

Study of Attitude of Rural Mothers towards Breastfeeding



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Abstract

Data related to different breastfeeding issues were collected from 70 respondents (rural mother) of Santakabir nagar district of Uttar Pradesh. The age of the respondents was between 18-45 years. The data were collected through a self made questionnaire. The collected data were analyzed by using Linkert scaling technique, mean, S.D. and one way ANOVA. The results of the study show that majority of rural mother have positive attitude towards different issues of breast feeding.

Keywords: Breastfeeding, Rural Mother, Attitude.

Introduction

Mother's milk is the best natural food that almighty has provided for infants. The process by which milk is produced and secreted by the mammary gland or breasts of mother is called lactation. This mother is called lactating mother. The process of lactation is controlled and regulated by hormones namely prolactin and oxytocin secreted by pituitary glands.

It is recommended that all infants should be fed exclusively on mother's milk until they are six months of age and continue to be breastfed till 2 years or beyond. Exclusive breastfeeding means the infant receives only breast milk from her mother and no other liquids, not even water or complementary food with the exception of undiluted vitamin/mineral drops or syrups, and medicines.

Before a baby is born it is protected within a mother's womb from all infections and after birth breastfeeding takes over the protection process. Mother's milk is made especially for her own baby. It is the right nutrition for the growth of baby. It is easy to digest and it contains protective substances which help prevent infection especially loose stools. Mother can give it even when she is ill, pregnant or menstruating.

"Breastfeeding is an unequalled way of providing ideal food for the healthy growth and development of infants; it is also an integral part of the reproductive process with important implications for the health of mother. As a global public health recommendation, infants should be exclusively breastfed for the first six months of life to achieve optimal growth, development and health. Thereafter, to meet their evolving nutritional requirements infants should receive nutritionally adequate and safe complementary foods while breastfeeding continues for up to two years of age or beyond"- WHO, 2002.

UNICEF and WHO have initiated a scheme called "The Baby friendly Hospital Initiative" to impart health education which includes breast feeding, to rural women who deliver at home and who are unaware of modern health care system.

According to the W.H.O., 60% of all deaths under the age of 5 are related to malnutrition. Inappropriate feeding practices are related to 2/3rd of all under five deaths. According to the most recent estimates published in the Lencet 2003, 13-16% of all child deaths can be avoided if exclusive breastfeeding was 90% during first six months and continued breastfeeding was practiced. Another 6% death can be avoided if adequate and appropriate complementary feeding after 6 months for 2 years and beyond was provided. Table 1, depicts the status of infant feeding practices in the state of Uttar Pradesh.

Table 1: Infant Feeding Practices in Uttar Pradesh

% Initiation of Breastfeeding within 1 hour	7.3
% of Exclusive Breastfeeding 0-6 months	51.3
% of complementary Feeding (6-9 months)	45.5

Source: National Family Health Survey (NFHS-3 January 2008)

The infant should be put to breast within half an hour after normal delivery and within four hours after caesarian sections. Milk is secreted

after 4-5 hours of delivery. In the beginning it is only a few drops (10- 40 ml). These few drops are the first vaccination of the infant. Therefore it should be carefully given to infant. Infant has just begun to learn sucking. Sucking helps produce more milk. There should be no milk accumulated into breast after feeding since it causes harm to mother.

Colostrum

Colostrum is very important for infant. Mother must give her first watery and yellowish fluid (colostrum) to the newborn immediately after birth. During the first two or three days of delivery watery and yellowish fluid that comes from mammary gland differs from the regular milk and is called colostrum or pre-mature milk. The amount of fat and lactose in colostrum is less than mature milk or true milk. The level of niacin, pantothenic acid, biotin and riboflavin are also low in colostrums than mature milk. Vitamin C is secreted at about the same level as in mature milk. The amount of sodium chloride, Zinc and rich anti-body protein immunoglobulin and Lactoferrin in colostrums is more than mature milk.

Colostrum is the first immunization to the infant after birth against several diseases and infections. It contains an interferon like substance which possesses strong antiviral activity. Colostrums contain B12 binding protein which renders B12 unavailable for the growth of E. coli and other bacteria. It also contains antibodies against viral diseases such as small pox, polio, measles and influenza. Enzyme like lysozyme, peroxidase and xanthine oxidase that promote cell maturation are found to be more in colostrum.

Mature Milk

Within 10-12 days colostrum content of milk is reduced to zero and mature milk is secreted. The quantity of milk is gradually increased. Normal lactating mother secretes maximum 600 milliliters of milk in one day. Mature milk is thinner and watery but contains all the nutrients essential for optimum physical and mental development of the baby.

Breast milk is infant's first food. Artificial feeding is never a choice for infant feeding. In innumerable circumstances and emergency, infant is given artificial feeding. There is no age for introducing artificial feeding. Cow's milk is the only alternative for mother's milk. Milk powders or the infant formula feeds are the last choice for infant. These are several circumstances in which infant are given artificial feeding. These are -

1. The mother is suffering from serious illness, fever or infection,
2. Infant unable to suck milk from breast,
3. Another pregnancy intervenes during lactation,
4. Unavailability of mother for feeding,
5. Breast milk has completely stopped or insufficient for child,
6. Genetic problem in mother or infant,
7. The child is too weak to nurse or cannot suck because of harelip or cleft palate,
8. The mother is on anticoagulants, steroids and radioactive drugs.

If the baby has to be given artificial milk it should be given with a cup or a spoon and not with a bottle. Any mistake in the process of preparing bottle-feed can lead to infections.

Advantage of Breast Feeding

Breast milk is advantageous for all—mother, baby and the society.

1. To the baby: Breastfeeding provides numerous benefits to the baby, which are as follows-

1. Breast milk contains adequate calories and provides the right kind of proteins, fats, lactose, vitamins, iron, minerals, water and enzymes in the amounts necessary for baby.
2. Breast milk contains iron, water soluble Vitamin D, Vitamin A, C and E more than cow's milk.
3. Breast milk is clean, free from bacteria and has anti-infective properties.
4. It also contains substances which prevent harmful bacteria from growing in intestines and causing loose stools.
5. It is ready to serve when the baby wants it, needs no preparation and it has the right temperature.
6. It is economical and free from contamination.
7. Breastfeeding enhances the emotion bond between the child and the mother and provides warmth, love and affection and is more than food.
8. Breastfeeding protects the child against several infections including respiratory infections.
9. Breastfed babies are less prone to have diabetes, heart diseases, eczema, asthma and other allergic disorders later in life.
10. Breastfed babies have shown to have a higher IQ (intelligence Quotient) and develop better mathematical abilities than infants who are not breastfed.
11. Breastfeeding enhances brain development. There is better visual development and visual acuity leading to learning readiness.

2. To the mother: Breastfeeding has many advantages to the mother, which are as follows-

1. It reduces post-delivery bleeding and chances of anemia.
 2. Obesity is less common among breastfeeding mother as it helps the mother regain her normal figure.
 3. It has a contraceptive effect.
 4. It has protective effect against breast and ovarian cancers.
 5. If you exclusively breastfeed your baby, you will have better adjustment with your baby.
- 3. To the society:** Breastfeeding lowers health-care cost by reducing illness and deaths of children under-five years of age and thus reduces the strain on the family budget.

It helps in reducing absenteeism of mothers from work as exclusively breastfed children are less prone to diseases. Thus it will prove less costly to the employer.

Need of the Study

Children are young saplings in the garden of life. To love them is to turn our minds to the bountiful creator. To care them and look after them with physical mental and emotional makes us happy.

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Especially for mother a meaning of it is more touchable has been started during pregnancy to a first day of baby in this world become mother feed her baby with. Ideally an infant thrives best on exclusive breastfeeding for the first six months and continued breastfeeding for two years or beyond along with adequate and appropriate complementary feeding starting after six months. This is critical for their health, development and survival.

Though there has been a significant improvement in the survival and development over the decades, however, lot more needs to be done. Under nutrition during first two years impairs cognitive development, intelligence, strength, energy and productivity. Optimal feeding practices during first year of life are critical to prevent malnutrition and to ensure optimal health and development of infants and young children.

As far as child care is concerned, both rural literate and illiterate mothers are observed to breastfeed their babies. But due to the lack of proper knowledge and awareness most of them adopt harmful practices like discarding of colostrum, giving practical feeds, delayed initiative of breastfeeding and delayed introduction of complementary feeds. In addition, an extreme of religious believes gender bias and unhygienic practices trend to aggravate the problems. On other hand due to social change and modernization artificial feeding is also increasing in rural areas. It is hoped that the outcomes of the studies will assist in developing positive attitudes towards breast feeding in rural mothers.

Objective-

1. To assess the attitude of rural mothers towards various issues of breastfeeding.
2. To assess the attitude of rural mothers towards breastfeeding on the basis of caste.
3. To assess the attitude of rural mothers towards breastfeeding on the basis of education.

Hypothesis

To achieve the objectives of the study, the following hypothesis were formulated and tested:

Attitude of rural mothers towards various issues of breastfeeding-

Table-3

Statement						n- 70
	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree	Mean
Mother's milk is like nectar, it is a myth.	2	2	0	51	15	4.07
After delivery watery and yellowish fluid secreted from mother breast called colostrums, is poisonous and impure.	14	4	0	33	19	3.56
Frequent breast feeding practice has negative effect on mother's health and physique.	30	15	0	16	9	2.77
Girl child always remains weak in comparison of boy despite sufficient breastfeeding.	8	5	0	44	13	3.7

1. The table-3 shows that majority of respondents were disagree from the statement of 'Mother's milk is like nectar, it is a myth'. The results shows that majority of rural mothers have negative attitude (mean-4.07) about the above statement.
2. It can be observed from the table-3 that the majority of respondents were disagreed from the statement of 'After delivery watery and yellowish

1. There is no significant difference in the attitude of rural mothers towards various issues of breastfeeding on the basis of caste.
2. There is no significant difference in the attitude of rural mothers towards various issues of breastfeeding on the basis of education.

Tools

Survey method was followed for the study and the five point attitude scale observing the norms of Linkert's method for assessing the attitude of the rural mother towards breastfeeding was developed by investigator for collecting the data. The tool consisted of 4 statements. All the statements were negative.

Sample

Sample is collected from Khalilabad block of Santakabir nagar district of Uttar Pradesh. Data were collected from 70 respondents (rural women) having below 6 years baby. Ages of the respondents were between 18-45 years.

Results and Discussion

To test the hypothesis collected data were analyzed with statistical tool such as Linkert scaling technique, mean, standard deviation and test of ANOVA. Data were analyzed by using statistical software SPSS.

Breast Feeding Attitude in Women Scaling Plan

Linkert scaling technique used for scaling has been shown in table-2.

Table-2

Statement	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
Favoring	5	4	3	2	1
Unfavouring	1	2	3	4	5

Above table shows that the statement favoring the statement assign 5 point to strongly agree, 4 point to agree, 3 point to undecided, 2 point to disagree and 1 point to strongly disagree. In the same way the statement unfavouring the statement assign 1 point to strongly agree, 2 point to agree, 3 point to undecided, 4 point to disagree and 5 point to strongly disagree.

fluid secreted from mother breast called colostrum is poisonous and impure'. The results shows that majority of rural mothers have negative attitude (mean-3.56) towards the above statement.

3. The data in table-3 reflect that majority of respondents were agree from the statement 'Frequent breast feeding practice has negative

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effect on mother's health and physique'. The results show that majority of rural mothers have positive attitude (mean-2.77) about the above statement.

- From above table it is clear that majority of respondents were disagree from the statement of 'Girl child always remains weak in comparison of boy despite sufficient breastfeeding'. The results shows that majority of rural mothers have negative attitude (mean-3.7), about the above statement.

The above table-3 shows that majority of rural mothers have positive attitude towards various issues of breast feeding. Despite these results majorities of mothers also believe that frequent breastfeeding has negative effect on health and physique.

Attitudes of Rural Mothers towards Breast Feeding on the Basis of Caste

Statement 1- Mother's milk is like nectar, it is a myth.

Table-4

Caste	Respondent	Mean	S.D.	F
GEN	14	4.07	0.27	*16.22
OBC	50	4.24	0.56	
SC	6	2.67	1.50	

*significant

One way ANOVA was applied to find out the attitude of rural mothers towards the statement of 'Mother's milk is like nectar, it is a myth' is not affected from caste type of respondents. ANOVA result shows that the calculated F-value 16.22 is greater than the table value 3.07 at 5 per cent level of significant. Since the calculated value is greater than the table value, it is inferred that null hypothesis is rejected. Thus we can say that attitude of rural mothers towards the above statement is affected by the caste of respondents.

Statement 2- After delivery watery and yellowish fluid secreted from mother breast called colostrum is poisonous and impure.

Table-5

Caste	Respondent	Mean	S.D.	F
GEN	14	3.57	1.28	1.79
OBC	50	3.68	1.46	
SC	6	2.5	1.64	

One way ANOVA was applied to find out the attitude of rural mothers towards the statement 'After delivery watery and yellowish fluid secreted from mother breast called colostrum is poisonous and impure' is not affected from caste type of respondents. ANOVA result shows that the calculated F-value 1.79 is less than the table value 3.07 at 5 per cent level of significant. Since the calculated value is less than the table value, it is inferred that null hypothesis is accepted. Thus we can say that the attitude of rural mothers towards the above statement is not affected from caste type of respondents.

Statement 3- frequent breast feeding practice has negative effect on mother's health and physique.

Table-6

Caste	Respondent	Mean	S.D.	F
GEN	14	2.6	1.45	0.95
OBC	50	2.9	1.59	
SC	6	2	1.55	

One way ANOVA was applied to find out the attitude of rural mothers towards the statement 'frequent breast feeding practice has negative effect on mother's health and physique' is not affected from caste type of respondents. ANOVA result shows that the calculated F-value 0.95 is less than the table value 3.07 at 5 per cent level of significant. Since the calculated value is less than the table value, it is inferred that null hypothesis is accepted. Thus we can say that attitude of rural mothers towards the above statement is not affected from caste type of respondents.

Statement 4- Girl child is always remains weak in comparison of boy despite sufficient breastfeeding.

Table-7

Caste	Respondent	Mean	S.D.	F
GEN	14	3.43	1.34	0.61
OBC	50	3.8	1.16	
SC	6	3.5	1.22	

One way ANOVA was applied to find out the attitude of rural mothers towards this statement 'Girl child is always remains weak in comparison of boy despite sufficient breastfeeding' is not affected from caste type of respondents. ANOVA result shows that the calculated F-value 0.61 is less than the table value 3.07 at 5 per cent level of significant. Since the calculated value is greater than the table value, it is inferred that null hypothesis is rejected. Thus we can say that attitude of rural mothers towards the above statement is affected from caste type of respondents.

Attitudes of rural mothers towards breastfeeding on the basis of education

Statement 1- Mother's milk is like nectar, it is a myth.

Table-8

Education	Respondent	Mean	S.D.	F
Primary / Junior High School	26	4.08	0.74	0.02
High School / Intermediate	22	4.04	0.58	
UG / PG	22	4.09	0.97	

One way ANOVA was applied to find out the attitude of rural mothers towards the statement 'Mother milk is like nectar, it is a myth' is not affected from education of respondents. ANOVA result shows that the calculated F-value 0.02 is less than the table value 3.07 at 5 per cent level of significant. Since the calculated value is less than the table value, it is inferred that null hypothesis is accepted. Thus we can say that attitude of rural mothers towards the above statement is not affected from education type of respondents.

Statement 2- After delivery watery and yellowish fluid secreted from mother breast called colostrum is poisonous and impure.

Table-9

Education	Respondent	Mean	S.D.	F
Primary./ Junior High School	26	3.08	1.57	*4.11
High School / Intermediate	22	3.45	1.41	
UG / PG	22	4.23	1.15	

*significant

One way ANOVA was applied to find out the attitude of rural mothers towards in the statement of 'After delivery watery and yellowish fluid secreted from mother breast called colostrum is poisonous and impure', is not affected from education of respondents. ANOVA result shows that the calculated F-value 4.11 is greater than the table value 3.07 at 5 per cent level of significant. Since the calculated value is greater than the table value, it is inferred that null hypothesis is rejected. Thus we can say that attitude of rural mothers towards the above statement is affected from education type of respondents.

Statement 3- Frequent breast feeding practice has negative effect on mother's health and physique.

Table-10

Education	Respondent	Mean	S.D.	F
Primary / Junior High School	26	2.5	1.53	*5.08
High School /Intermediate	22	2.27	1.49	
UG / PG	22	3.6	1.40	

*significant

One way ANOVA was applied to find out the attitude of rural mothers towards the statement of 'Frequent breast feeding practice has negative effect on mother's health and physique' is not affected from education of respondents. ANOVA result shows that the calculated F-value 5.08 is greater than the table value 3.07 at 5 per cent level of significant. Since the calculated value is greater than the table value, it is inferred that null hypothesis is rejected. Thus we can say that the attitude of rural mothers towards the above statement is affected from education type of respondents.

Statement 4- Girl child is always remains weak in comparison of boy despite sufficient breastfeeding.

Table-11

Education	Respondent	Mean	S.D.	F
Primary/ Junior High School	26	3.27	1.34	2.97
High School / Intermediate	22	4.05	0.79	
UG / PG	22	3.86	1.25	

One way ANOVA was applied to find out the attitude of rural mothers towards the statement of 'Girl child is always remains weak in comparison of boy despite sufficient breastfeeding' is not affected from education of respondents. ANOVA result shows that the calculated F-value 2.97 is less than the table value 3.07 at 5 per cent level of significant. Since the

calculated value is less than the table value, it is inferred that null hypothesis is accepted. Thus we can say that attitude of rural mothers towards the above statement is not affected from education of respondents.

Conclusion

The findings of the study are concluded as follows:

1. The majority of respondents were disagree from the statement of 'Mother's milk is like nectar, it is a myth', which shows positive attitude of respondents. The attitude of rural mothers was affected by caste about the above statement. But no significant deference was found in mother's attitude on the basis of education, about the statement.
2. The majority of respondents were disagreed from the statement of 'After delivery watery and yellowish fluid secreted from mother's breasts called colostrum is poisonous and impure', which shows positive attitude of respondents. The attitude of mothers was affected by education about above statement. But no significant deference was found in mother's attitude on the basis of caste about the statement.
3. The majority of respondents were agreed from the statement of 'Frequent breast feeding practice has negative effect on mother's health and physique', which shows negative attitude of respondents. The attitude of mothers was affected by education about the above statement. But no significant deference was found in mother's attitude on the basis of caste about the statement.
4. The majority of respondents were disagreed from the statement of 'Girl child is always remains weak in comparison of boy despite sufficient breastfeeding', which shows positive attitude of respondents. No significant deference was found in mother's attitude on the basis of caste and education about the above statement.

In conclusion, the present study shows that majority of rural mothers have positive attitude towards various issues of breast feeding. However, it was revealed that education and cast of rural mothers affects their attitude forwards various issues of breastfeeding.

Suggestion

1. Education, information and communication facilities should be increased hundred percent at community level to achieve awareness among rural mothers towards breastfeeding.
2. Proper education and advice/counseling regarding various issues of breastfeeding must be given to every mother in the antenatal clinic. For example the mothers should be made aware of the fact that lactating mothers must be given proper nutrition and care in the family.

Family level mobilization campaign must be launched by community health workers

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