



## To Study The Knowledge of Rural Women Regarding Breast Feeding Practices in Amreli District

*The present study was conducted in purposively selected Taluka of Amreli district of Gujarat State namely Amreli. The purpose of the present study was to know the knowledge of rural women regarding breast feeding practices in Amreli district. The total sample of 50 rural respondents were selected for the present study. Finding of the study reveal that women had good knowledge regarding different aspects of breast feeding practices.*

**Key Words :** Breast Feeding Practices, Lactating Mothers.

**DR. NEHA TIWARI\* & DR. HEMANGI MEHTA\*\***

### Introduction :

Breastfeeding allows you and your baby to emotionally bond in a special way that cannot be matched, since breastfeeding meets both the nutritional and nurturing needs. Nursing is a learned skill for both mother and baby that requires time and patience. Breast milk provides many health benefits and is the ideal first food for your baby. Breastfeeding is special for so many reasons, including the joyful bonding with your baby, the perfect nutrition only you can provide, the cost savings, the health benefits for both mother and baby. The benefits of breastfeeding for mothers and infants have been widely recognized and researched. Studies have shown that breastfeeding is superior to infant formula feeding because of its protective properties against illness, in addition to its nutritional advantages. Considering the extensive benefits of breastfeeding, the World Health Organization and the American Dietetic Association recommend exclusive breastfeeding of infants for the first six months and continued breastfeeding with complementary foods up to 12 months of age (ADA Reports, 2001). According to WHO, (2012), 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 mothers. 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.

The World Health Organization estimates that around 220,000 children could be saved every year with exclusive breastfeeding. It recommends that colostrums, the yellowish sticky breast milk that is produced at the end of pregnancy as the ideal food for newborns; to be given within the first hour of birth, a process referred to as early initiation. Infants breast fed within the first hour of birth are three times more likely to survive than those who have their first breast milk after a day. Exclusive breastfeeding should be given from birth up to 6 months and continued breastfeeding is recommended with appropriate complementary food until the child celebrates his/her second year birth day without water, food or drink. The only exceptions are rehydration salts and syrups that contain medicine. It becomes essential that we counsel, encourage and support mothers to initiate exclusive breastfeeding. Governments, family members and community health workers all have a role to play in the survival of newborns through the uptake of exclusive breast feeding. Therefore the present study was conducted to know the knowledge of rural women regarding breast feeding practices in Amreli district.

### Methodology :

The study was conducted in purposively selected Taluka of Amreli district of Gujarat State namely Amreli. Five villages i.e. Sedubhar, Khijdiya, Nana Ankadiya, Babapur, Gavadka having maximum infant mother were selected. A separate list of respondents was prepared for all the five villages and 10 women were randomly selected from each village constituting the total sample of 50 rural respondents for the present study. For collection of data interview technique was used. Data were collected with the help of

\*Assistant Professor, Polytechnic in Home Science, JAU, Amreli (Gujarat)

\*\*Subject Matter Specialist, Krushi Vigyan Kendra, JAU, Morbi (Gujarat)

structured interview schedule. Frequencies, percentage and mean percent score were used for analyzing the data statistically.

**Result and Discussion :**

In the present paper results emerged out from the analysis of the data of the present investigation. The data have been organized and analyzed by taking into account the objectives of the study. All the pertinent information has been categorized and reported under the following major sections :

(i) Background information of the respondents.

(ii) Knowledge of rural women regarding breast feeding.

**(i) Background Information of The Respondents :**

This section deals with the general information of the respondents like age, education, marital status, occupation, caste, family size and type, ownership of the fixed assets, household assets, live stock ownership and their socio-economic status.

**Age :** Data in Table 1 reveal that majority of the respondents (86%) belonged to the age group of 18-30 years, whereas very few of the respondents (14%) were in the age group 31-45 years.

**Marital status :** Table 1 reveals that all the respondents were married.

**Table 1 : Distribution of respondents by their personal variables (N=50)**

S. No.	Variables	f	%
1.	Age		
	a) 18 - 30 years	43	86
	b) 31-45 years	7	14
2.	Marital Status		
	a) Married	50	100

**Caste :** It is evident from Table 2 that 58.0 per cent of the respondents belonged to upper caste, while 32.0 and 10.0 per cent respondents belonged to the other backward caste and schedule respectively.

**Family Structure :** Data in Table 2 clearly indicate that more than half of the respondents (58.0%) were from joint families and 42.0 per cent respondents were from nuclear families. Regarding size of the family, the table further reveals that almost half of the respondents (44.0%) had medium size family and 38.0 percent of the respondents had large and 18.0 percent had small size family.

**Education :** Education is one of the most important determinants of a person's social status. Regarding educational level of the respondents, Table 2 indicates that more than majority of the respondents (80.0%) were educated up to primary level, while, 10.0 per cent of the respondents were educated up to middle and high school level. Most of the respondents mentioned that their education was discontinued due to early marriage.

**Occupation :** Table 2 regarding occupation of the respondents reveal that majority of the respondents (80%)

**Table 2 : Distribution of respondents by their social variables (N= 50)**

S. No.	Variables	f	%
1.	<b>Caste</b>		
	a) SC/ST	5	10.0
	b) Other backward caste	16	32.0
	c) Upper middle caste	0	0.0
	d) Upper caste	29	58.0
2.	<b>Family structure</b>		
	Family type		
	a) Nuclear	21	42.0
	b) Joint	29	58.0
	Family size		
	a) Small (upto 4 members)	9	18.0
	b) Medium (5-8 members)	22	44.0
c) Large (above 8)	19	38.0	
3.	<b>Education</b>		
	a) Illiterate	00	0.0
	b) Read and Write	0.0	0.0
	c) Primary school	40	80.0
	d) Middle	5	10.0
	e) High school	5	10.0
4.	<b>Occupation</b>		
	i. Main occupation		
	a) Farming	10	20.0
	b) Farm labour	40	80.0

had farm labors, whereas one fifth of the respondents (20%) had farming as their main occupation.

**(ii) Knowledge of Rural Women Regarding Breast Feeding :**

Knowledge is the most important component of behavior and it plays major role in the covert and overt behavior of human being. Once knowledge is acquired, it produces change in one's opinion/ thinking which would lead to further changes in attitude of the individual. Knowledge as a function or stages in the innovation-decision process was recognized by Roger and Shoemaker (1971). This exemplifies the importance of knowledge in innovation- decision process.

Data in the Table 3 revealed that all the respondents (100%) new about colostrum as it contains anti bodies to protect the new born against disease and they all planned to breast feed their babies. Regarding time of initiation of breastfeeding majority of the respondent (76%) had good knowledge about initiate breastfeeding with in 1 hour of birth whereas one third of the respondents initiate breastfeeding within 1-4 hour of birth knowledge. Regarding duration to breastfeed babies table reveal that majority of the respondents (92%) breastfeed their babies on their demand as when they feel hungry. Further table indicate that 86% of the respondent used exclusive breastfeeding without any mixed feeding, however 16% of the respondents used mixed feeding and they all prefer cow milk for mix feeding.

Table 3 further indicate that doctor (52%) was the most frequent counselor followed by family members (44%). Grandmother (40%) most commonly support the mother in feeding. Further table indicate that majority of

**Tables 3 : Distribution of the respondents regarding their knowledge about breast feeding (N=50)**

S.No.	Attributes	f	%
1	Knowledge about colostrum	50	100
2	Plan to breast feed after delivery	50	100
3.	Time of initiating breast feeding		
i.	Within 1 hr. of birth	38	76
ii.	Bet ween 1-4 hr. of birth	28	16
iii.	Bet ween 1-3 days of birth	2	4
iv.	Within 1 <sup>st</sup> week of birth	2	4
4	Duration to breast feed infant		
i.	2 hr.	4	8.0
ii.	4 hr.	2	4
iii.	On baby demand	46	92
5	Exclusive breast feeding for 6 month		
i.	Exclusive breast feeding	42	86
ii.	Mixed feeding	8	16
6	Milk use for mixed feeding		
i.	Cow milk	8	10
ii.	Goat milk	0	0.0
iii.	Packaged milk	0	0.0
iv.	Buffalo milk	0	0.0
7	Counselor	0	0.0
i.	Family	2	44
ii.	Relatives		
iii.	Doctor	6	52
iv.	Midwife	2	4
8	Aid/ support in feeding		
i.	Father	10	20
ii.	Grand mother	20	40
iii.	No help	20	40
iv.	Others	0	0
9	Recommendation of breast feeding		
i.	2 months	4	8
ii.	4 months	6	12
iii.	6 month	40	88
10.	Maternal nutrition		
i.	Taken extra calories during pregnancy and lactation	35	70
ii.	Taken supplements during pregnancy and lactation	15	30

the respondents (88%) had knowledge that breastfeeding is recommended for 6 months to promote all around development of infant. Table 4.3 shows that 70 percent mother had taken extra calories and 30 percent had taken supplements during pregnancy and lactation.

The study are in conformity with Sriram, et. al. who revealed that 70.67 percent of mothers had the knowledge about initiation of breast feeding within 1 hour of birth 90.67% of mothers had a good knowledge about colostrum. 96% mothers had the knowledge of exclusive breast feeding. Doctor (58.67%) was the most frequent counsellor regarding feeding.

Table 4 indicate knowledge of respondent regarding supplementary feeding reveal that all the respondents (100%) initiated supplementary feeding by six months of age, further table reveal that they use rice water (30%), pulse water (30%), khichdi (35%), baby food (40%), Raab (10%), Curd (20%) and upma,(10%) as a supplementary food for their babies.

**Table 4 : Distribution of the respondents regarding their knowledge about supplementary feeding**

S.No.	Attributes	f	%
1	Initiation of supplementary feeding		
i.	6 months	50	100
ii.	1 year	0	0
iii.	2 year	0	0
2	Type of supplement food you prefer for baby		
i.	Rice water	15	30
ii.	Pulse water	15	30
iii.	Khichdi	20	40
iv.	Baby food	20	40
v.	Raab	5	10
vi.	Curd	10	20
vii.	Upma	5	10

\*Multiple responses

### Overall Knowledge of The Respondents :

An effort was made to categories the respondents on the basis of their overall knowledge about the breast feeding. Findings in Table 5 reveals that majority of the respondents (75.0%) had good knowledge about different aspects of breast feeding. However 25 per cent respondents were in average knowledge category with overall mean per cent score of 65.02.

**Table 5 : Categorization of respondents on the basis of their overall knowledge (N=50)**

S.No.	Knowledge Categories	f/%
1.	Poor	0
2.	Average	75
3.	Good	25
	<b>Overall MPS</b>	<b>70.02</b>

### Conclusion :

This can be concluded from the study that rural women had good knowledge regarding breast feeding practice. They were aware about the supplementary feeding. Although Awareness generation programme should be needed to be plan by government officials to generate knowledge among rural respondents regarding breast feeding. A training manual and teaching aids like leaflet, folder, film etc. should be developed to generate awareness among rural women.

### Acknowledgement :

I have duly acknowledged all the sources used by me in the preparation of this research paper.

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