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Factors Affecting Breast Feeding Pattern among Mothers in a Selected Area Dehradun, Uttrakhand

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Abstract

Introduction: Human milk is uniquely tailored to meet the nutrition needs of human infants. It has the appropriate balance of nutrients provided in easily digestible and bio available forms Every infant & child has the right to good Nutrition according to the 'Convention on the rights of the child. According to the WHO & UNICEF recommend Early initiation with in 1 hour of birth, Exclusive for 6 month & complementary at 6 month with breast feeding up to 2 year of age or Beyond. Approx 44% of infants 0-6 months exclusively breast feed over the period of 2015-2020.

Aim of the study: A study to identify the factors affecting breast feeding pattern among mothers in a selected area Dehradun, uttarakhand.

Methodology: Retrospective exploratory design was used to explore the problem. Total 66 (sixty six) mothers who were fulfilling the inclusion criteria selected by purposive sampling technique and data were collected by interview method.

Result: The study findings show that Lactational, Nutritional, Milk Pumping, Medical & Life Style were the main factors which might be affecting breast feeding pattern among mothers. There was only association between Milk Pumping Factors with socio demographic variable birth weight at 0.05 level of significance.

Conclusion: The study result shows that Mothers who were having infant (0-1 yr) not able to feed two hourly & There must be a need for skill fully manage and try to minimize the risk.

Keyword: Breastfeeding, Factors, Mothers.

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INTRODUCTION

Human milk is uniquely tailored to meet the nutrition needs of human infants. It has the appropriate balance of nutrients provided in easily digestible and bioavailable forms Everyinfant &child has the right to good Nutrition according to the 'Convention on the rights of the child.[1] According to the WHO & UNICEF recommend Early initiation with in 1 hour of birth, Exclusive for 6 month & complementary at 6 month with breast feeding up to 2 year of age or Beyond.[2] Approx 44%

of infants 0-6 months exclusively breast feed over the period of 2015-2020.[3]

The two most important hormones associated with lactation are oxytocin and prolactin Oxytocin, named after the Greek word for "speedy birth," acts in the body as a smooth muscle contractor, facilitating contractions during labour and the release of milk during lactation, Where as Prolactin is the primary hormone responsible for milk production levels increase slowly during pregnancy, triggering changes in the breast tissue that stimulate milk production.[3]

The mother's body releases oxytocin into the blood stream to aid in milk ejection. During the feeding session, when tactile stimulation is received from the nipple, oxytocin and prolactin are released in pulsating patterns, controlled by nerve fibers linked to the hypothalamus.[3] Globally in 2020,149 million children under 5 were estimated to be stunted(too short for age), 45 million ere estimated to be wasted (too thin for height) & 38.9 million were overweight or obese.[4] First 2 year of a child life were important, as optimal nutrition during this period lowers morbidity & mortality, reduces the risk. So optimal breast feeding could save the lives of over 820,000 children under the age of 5 years each year.[5]

Aim of the study

The Aim of the study were as follows:

- To identify the factors affecting breastfeeding pattern among mothers in a selected area of Dehradun, uttarakhand.
- To find association between selected demographic variables and breastfeeding pattern among mothers.

MATERIAL AND METHODS

Retrospective exploratorydesign was used to explore the problem. Total Sixty Six mothers who were fulfilling the inclusion criteria selected by purposive sampling technique and data were collected by interview method. The study was conducted in Keshav Basti village of doiwala block, Dehradun Uttarakhand.

RESULT

Data were analysed under following heading: Maternal Data, Infant Data Pattern of breast feeding.

Variables	Frequency (f)	Percentage %
Acceptance of breast milk during first few days of the birth breastfeed		
a. Yes	65	98.5
b. No	1	1.5
Duration of exclusive breastfeeding		
a. Up to 6 months	57	86.4
b. Less than 6 months	9	13.6
Breastfeeding from both breast in each session		
a. Yes	65	98.5
b. No	1	1.5
Duration of breastfeeding per session		
a. 1-10 mins	40	60.0
b. 11-20 mins	26	39.4
Mode of breastfeeding in first six month of life		
a. On Demand	62	93.93
b. Time Schedule	4	6.06
Time interval		
a. On demand	62	93.93
b. More than 6 hours	4	6.06
Methods of Feeding		
a. Bottle Feed	8	12.1
b. Formula Feed	8	12.1
c. Breast Feed	50	75.8

Table 1(c) revealed that out of 66 Mothers (98.5%) babies were Normally accepted breast milk in starting few days of the birth. Majority (86.4%) babies were exclusively breastfeed upto 6 month (98.5%) were breastfeed with both breast and (60.6%) Participants used for breastfeeding 1-10 min in per session. (93.93%) mothers provided demand feed in first six month. Majority (93.93%) were demand feed on specific time interval. (6.06%) babies were feeded more than 6 hours (75.8%) babies were breast feeded with breast milk only.

(Lactational, Nutritional & Milk Pumping)

To assess factors affecting breast feeding pattern Likert scale was used to collect data, it consists of 26 statements. For the purpose of research, investigator has divided 26 statements in 8 sections.

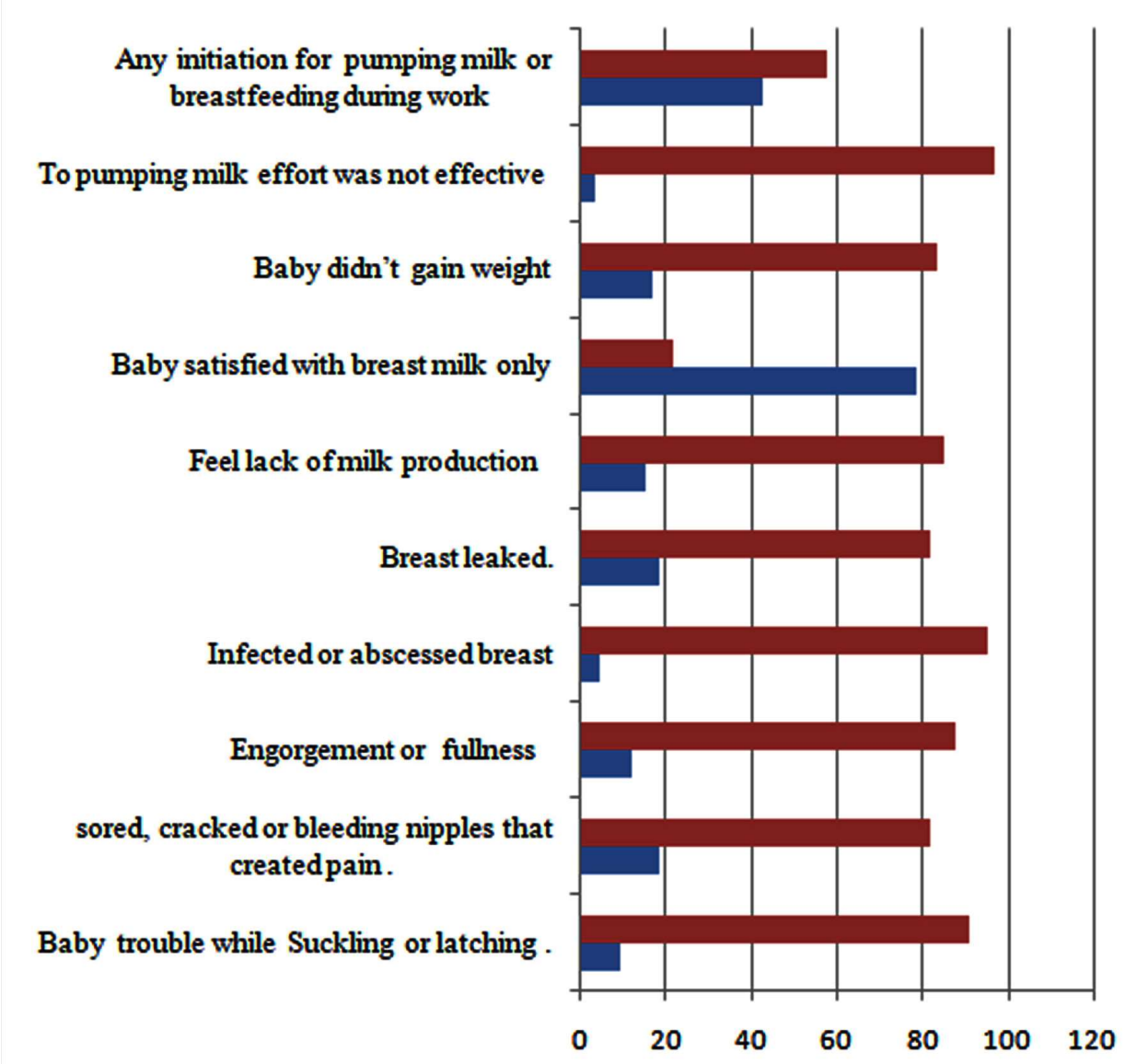

Fig. 1: Factors affecting breast feeding pattern among mothers

Fig. 1 Factors affecting Breast feeding among mothers (Lactational, Nutritional, Milk pumping) Blue denote = Yes, Red Denote =No

Fig. 1 shows that (18.2%) were having cracked & Sore nipples (9.1%) babies were facing trouble while suckling or Latching (4.5%) had infected or Abscess breast (78.8%) babies weresatisfied with breast milk (24.2%) mothers had trouble to milk flow to start (16.7%) said that there baby didn't gain weight & Majority (57.5%) mother's didn't take any initiation for pumping milk or breast feeding during work.

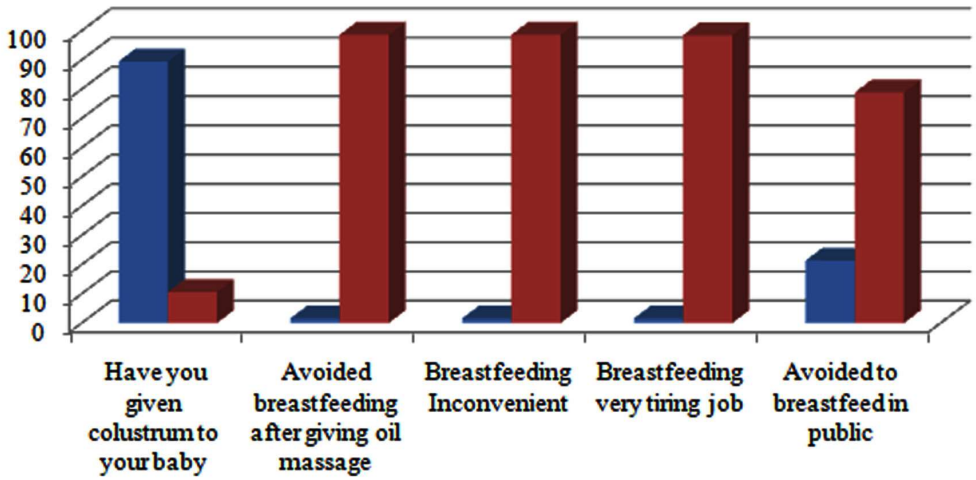

Fig. 2: Factors Affecting Breast feeding Pattern (Psychological Factors) Blue denote = Yes, Red Denote =No

Fig. 2 Reveals That approximately (71.3%) mothers avoided breast feeding immediately after their bath (10.6%) were not given colustrum to their baby (98.5%) mother's didn't feel breast feeding was inconvenient (1.5%) felt breast feeding was tiring job and (78.8%)didn't avoided breast feeding their baby in public.

When we see the association between Socio demographic Variables with Maternal factor It Shows that only birth weight were significantly associated (p=0.038 i.e P<0.05) with milk pumping factor remaining other variables (like age, mother education, working hour, type of delivery, sex of baby) were not significantly associated with milk pumping factor. There fore it was found that only the birth weight was significantly associated with milk pumping factor.

DISCUSSION

A. Factors affecting pattern of breast feeding

Study revealed that majority number (98.5%) babies were accepted breast milk during first few days of birth. Nearly (98.5%) babies were breast feeded from both breasts in each session and (60.6%) were breast feeded 1-10 min in per session and most of the babies (93.93%) babies were breast feeded on demand and only(6.06%) feeded at time interval in first six month of life. Majority (75.8%) babies were feeded by breast only. In Contrary to the findings of the previous study by Vyas S, Sharma P, Kandpal SD, Semwal J, Srivastava A, Nautiyal Vin (2012)[6] stated that 159(51.46%) were given pre-lacteal feed and 177(49.44%) were breast feed from both breast were as 58(43.61%) feeded upto 10 mins. 219(52.52%) were breast feeded on demand. Only 19(37.26%) were breast feeded at regular interval and Majority 177 (49.44%) babies were feeded by breast only.

Lactational factor

In present study few (18.2%) were having cracked & sore nipples and leaked breast in very few babies (9.1%) were facing trouble while suckling or latching, few of them (4.5%) had breast infected or abscess. Similar findings were reported by Saxena P, PalS, Salhan S, Sarda N stated that (90%) mothers have breast engorgement (11%) have cracked nipples, only (1%) breast were abscess.[7]

Nutritional factor

The findings of the study revealed that only (24.2%) mothers had trouble for milk flow to start and (16.7%) mothers said that there baby didn't gain weight and only (10.6%) reported that any health professional said that there baby was not gaining weight. This result was supported by Saxena P, Pal S, Salhan S, Sarda N stated that (6.1%) have Inadequate milk output.[7]

Milk pumping factor

In present study findings Few (3.0%) mothers have tried pumping milk but efforts was not effective as much as required and Majority (57.5%) mothers didn't take any initiation for pumping milk or breast feeding during work. Similar result was supported by Saxena P, Pal S, Salhan S, Sarda N stated that (22%) were working mothers and not taking proper

efforts for pumping milk or breastfeeding during work.[7]

Medical factor

In present study nearby (4.5%) mothers were stoped feeding as they wanted to conceive or wanted to become pregnant. Study findings are supported by Catherine R L, BrownDL, Alexander L, Bryanton J, Semenic S8 stated that 10.4(7.9-13.4%) mothers & babies were have medical conditions.

Social factor

In present study approximately (71.3%) mothers avoided breast feeding immediately after bath and (10.6%) were not given colustrum to their baby. Only (1.5%) avoided breast feeding after giving oil massage to their baby. Similar study result supported by Vyas S, Sharma P, Kandpal S D, Semwal J, Srivastava A, Nautiyal Vl stated that 212 (51.96%) were feed their baby with colustrum.[6]

B. Association between selected demographic variables and breastfeeding pattern among mothers

In present Study found that there is significantly association between birth weight (Fisher Exact P=0.038) with milk pumping factor as measured at level P< 0.05 level of significance. Similar findings supported by Ahmadi M & Moosavi SM stated that (53.78%) Mothers where pumped breast milk because they return to work.[9]

CONCLUSION

The study result shows that Mothers who having infants (0-1 yr) were not able to feed two hourly & There must be a need for skillfully manage and try to minimize the risk. So future studies can be conducted.

REFERENCES

1. Varghese Achamma, Ukande Usha, Vijayan Shreeja, Chandel Rakhi. Knowledge and practice of postnatal mothers regarding breast feeding .Nursing Research Society of india.2013 June, 6(1): [20-23].
2. ICY DYT Fong, M Heys, ILyLee, A Sham Tarrant .Profesional breast feeding support for first time mothers .obstetric general.2014 May 26:[1673-1681]Available at: online liberary. wiley.com/doi/10.1111/1471-0528.12884/ abstract.
3. Holbrook Hann Jennifer, Schetter Dunkelchris, Haselton Martie.Breast feeding and Maternal mental and Physical health.2012; 39(45): [414-417].Available at. www.ssnet.ucla.edu/ comm/haselton/unify-uploads/files/Hshn-Holbrook%20et%20al%20in%20 press % 20 women % 20health % 20 Psychology. pdf.
4. Akour AL Ahmad, Okour Abidhakeem, Aldebes Roba. Factors associated with exclusive breast feeding practices among mothers in Syria. British. Journal of medicine & Medical research. 2014. feb 4(14): [2713-2724] Available at: Al-Akour 4142013BJMMR8395-1(1).pdf
5. W T Lee, S S Lui, Vchan, E Wong, J Lau. A population based survey on infant feeding practice (0-2) year in Hong kong.breastfeeding rate and pattern among 3,161infants below 6 month old. Asia 2006, 15(3): [377-87] Available at:www.ncbi.nlm.nih.gov/pubmed/16837431.
6. Vyas Shaili, Sharma Parul,Kandpal S D,Semwal J, Srivastava A, Nautiyal V, 2012April-June; 3(2):[283286]Availableat:www.njcmindia.org/ home/download/257.
7. Saxena Pikee, Pal Sumita, Salhan Sudha, Sarda Nivedita Contemporary breast feeding practices.2006.July-Dec.37(3&4):[170-176] Availableat:medind.nic.in/ibl/t06/i3/iblt 06i3p170.pdf
8. Catherine R L, Brown, Dodds Linda, Alexandra Legge, Bryanton Janet, Semenic Sonia. Factors influencing the reasons why mothers stop breast feeding .2014.May-June, 105(3): [179-184]Availableat:Journal.cpha.ca/index.php/ cjph/article/view/4244
9. Ahmadi M, Moosavi S.Evaluation of occupational factors continuation of breast feeding and formula initiation in employed mothers.Global. Journal of health science 2013.5(6):[166-171] Available at:www.ncbi.nlm. nih.gov/pubmed/24171884