PREVALENCE OF BREAST FEEDING IN THE WORKING WOMEN OF DISTRICT MARDAN

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ABSTRACT

Objectives: The primary objective of my study was to determine the prevalence of breastfeeding in working women. Secondly the effect of working status on breastfeeding was observed and thirdly the use bottle-feeding in the working women was determined.

Methodology: The study being conducted was a cross sectional study. The study area was carried out in the Out Patient Departments and wards of Mardan Medical Complex. It took two months to conduct the study. A written consent was taken from the participants after which questionnaires were filled by the researchers according to participant data. Data from the questionnaires was entered & analysed via SPSS version 16 and was presented in tabular, bar and pie chart form. On the basis of this data detailed discussion was done & conclusions were drawn.

Results: The rate of Prevalence of breastfeeding was 100% and 75% of our sample did exclusive breast feeding for 6 months. The main factor that has been recognized for this earlier cessation was working status of females. Very few females started bottle feeding in first week. But in subsequent weeks the incidence of bottle feeding increased. 23% of sample preferred bottle milk over breast milk. Again the reason behind this was job, while some of them preferred bottle feeding due to their comfort level with bottle feeding.

Conclusion: Although the prevalence of breastfeeding in working women was high exclusive breast feeding for 6 months could not be achieved so a favourable attitude should be created for working women to breast feed in place of work or they should be given lactation breaks so that they can exclusively breast feed their babies.

Key Words: breastfeeding practices, bottle feeding, breastfeeding prevalence.

BACKGROUND AND INTRODUCTION

Breastfeeding plays a vital role and have a significant implications for maternal and child health. Healthy breastfeeding practices reduce child mortality and morbidity, and improve resistance against infections in children, besides being essential for their optimal growth and development.¹ Breastfeeding increases the emotional attachment of the mother to the infant, and reduces the risk of breast and endometrial cancer, increases the duration of Lactational amenorrhea, and consequent birth spacing, and multiple other health benefits¹. The World Health Organization recommends that the babies should be exclusively breastfed for the first six months, and should be followed by breastfeeding along with complementary foods for up to two years of age².

Studies conducted Breastfeeding reveals that nearly all children in Pakistan are breastfed³, but the feeding practices are suboptimal, causes adverse effects on child health, worsening the already poor state of child health and nutrition, and overburdening the meagre health coverage.

As a Muslim country, our women prefer to breastfeed their babies for 2 years.⁴ In South Asia, Pakistan is holding second position in infant and child mortality rate which is a dangerous fact.⁴ Gradual decrease in the breastfeeding rates are reported in Pakistan especially among urban educated and
employed women. Along with other problems which cause a decrease in prevalence of breastfeeding, the employment of women resulted in early cessation of breastfeeding, decrease duration of breastfeeding and increase practice of bottle feeding.4

Exclusive breastfeeding, which is the most important nutrition of infant life, is badly affecting due to working status of mothers. Rates of exclusive breastfeeding are also decreasing worldwide. Pakistan makes zero progress in exclusive breastfeeding in seven years despite the fact of increase in literacy rate among women and most of women in health profession5. This percentage has risen only from 37.1 percent in 2006-07 to 37.7 percent in 2012-13. However, bottle-feeding rates have risen from an already undesirable 32.1 percent in 2006-07 to a shamefully high 41 percent in 2012-13.6 Pakistan is lagging behind every South Asian country, both in terms of timely initiation of breastfeeding, as well as exclusive breastfeeding. The children who are devoid of being exclusively breastfed are at 14 times high risk of mortality as compared to exclusively breastfed ones. They are also at 11 times high risk of dying of diarrhea.

Exclusive breastfeeding rates are lowest among educated women belonging to the upper socio-economic class, and that bottle-feeding rates are high among working women, women belonging to the upper income class, those residing in urban areas, and those seeking care from health professionals.7 According to conservative estimates, the promotion of exclusive breastfeeding can reduce neonatal mortality by over 10 per cent.8

Exclusive breastfeeding is defined by World Health Organization (WHO) as practice of feeding only breast milk (including expressed breast milk) and allows the baby to receive vitamins, minerals or medicines and water, breast milk substitutes, other liquids and solid foods are excluded.9

Only 38% of infants (under six months) in Pakistan were exclusively breastfed. This is indicative of the fact that there is hardly any improvement since PDHS 2006-07, when the exclusive breastfeeding for six months was 37%. The PDHS 2012-13 findings also show increase in bottle feeding rates in Pakistan.10 Health experts believed that, if new-borns were breastfeed within the first hour of life, infant mortality can be reduced 22 percent. Early feeding secure the new-borns from a range of diseases, establish bond among mothers and children, reduce the chances of breast cancer among mother and is a natural source of birth spacing.11

Globally, less than 40% of infants are exclusively breastfed for the first six months of life and the majority receive some other food or fluid in the early months. The increase use of infant formula and substitutes too early in a baby’s life contributes to the high degree of under development and malnutrition in our children. And babies given cow’s milk and formula early in their lives have over 60% more risk of being malmourished12.

Breast feeding is usually stopped earlier by mothers who were illiterate and poor and had female children. A study from Gilgit Northern Area of Pakistan revealed that breast feeding for the first 6 months is still not routinely practiced by most of mothers. In majority the lower socioeconomic group and illiterate mothers are more likely to breast feed, gender bias was also observed as a significantly high percentage of male babies were observed to be breast fed as compared to females.13

Objectives:
1. To determine the prevalence of breastfeeding in working women.
2. To identify the effect of working status on breastfeeding.
3. To determine the use of bottle-feeding women.

METHODOLOGY

The study being conducted was a cross sectional study. Nonprobability Convenient sampling technique was adopted for this study. The study area was carried out in the Out Patient Departments and wards of Mardan Medical Complex. It took two months to conduct the study. All the sample were collected during June 2015 to August 2015. A written consent was taken from the participants after whom questionnaires were filled by the researchers according to participant data. Data from the questionnaires was entered & analyzed via SPSS version 16 & then presented in tabular, bar and pie chart form. On the basis of this data detailed discussion was done & conclusions were drawn.

Inclusion criteria:

All the working women who were presently breast feeding their babies were included in the study.
Exclusion criteria:
All the women who were presently breast feeding their babies were not working women were excluded from the study.

RESULTS
The results of our study revealed that out of 100 clients a large proportion of the women (73%) were graduate, 15% were matriculate, 7% had primary education and 5% were uneducated.

As we had conducted study among working class, so our sole sample (100%) belonged to working class and among them 38% were nurses, doctors contributed 20%, teachers were 20%, maids were 10% and 12% were from other profession among which 6 female were OT technician, 3 were engineer, 2 were lawyer and remaining 2 were working as government servant. 60% percent women had 1-3 children, 31% women had 4-6, and 9% women had 7 or more than 7 children.

The prevalence of breastfeeding in my study was 100% and all the clients were breastfeeding their babies.
60% of the clients started the breastfeeding in 1st hour while 40% breastfed their babies later. Out of these 40%, 70% started on 1st day, 22% started during 1st 3 days and 8% started in 1st week. The reasons behind delayed breastfeeding were noted as following: 47% maternal ill health, 32% insufficiency of breast milk, 18% infant health ill while 3% were not comfortable and familiar with the breastfeeding.

In our sample about 98% women have knowledge of exclusive breast feeding for 6 month while 2% were unaware. 71% population did exclusive breast feeding for 5-6 month. 3% for more than six month, 11% practiced it for 2-3 month and remaining 15% followed it for 3-4 months.

Breast feeding at 1 year in 83%, continued breastfeeding at 2 year in 56% and bottle feeding in 51.3%. According to this survey percentage of breast feeding is quite high i.e. 71%. It may be due to high level of literacy rate in our sample.

55% of population breastfed their young ones 7 times in a day, 27% used to practice it 3-5 times and 22% used to do it for 6 times or more in a day. Most of the females (78%) considered job as a factor affecting duration of breastfeeding, while 22% did not agree to idea above.

Most women 50% stated that their working status was responsible for earlier cessation of breastfeeding. 27% stopped due to insufficiency of breast milk and 10% ceased because of pregnancy and 13% had other reasons. In our study majority of women (75%) did not started bottle feeding in first week and 25% of the women started bottle feeding in first week.

Majority of people (50%) started bottle feeding during 5-8 months, 25% started in 1-4 months, 20% in 9-12 months and 5% never bottle fed their babies. 76% of women in our research preferred bottle feeding because of uncomfortable with breastfeeding, 13% did so because of job and 11% considered it easier than breast feeding. Most of them (69%) used formula milk followed by dairy milk (25%) and packed milk (6%). More than 70% population were unsatisfied with bottle feeding.

**DISCUSSION**

The results presented in our study have revealed that out of 100 clients A large proportion of sample (73%) were graduate, 15% were matriculate, 7% had primary education and 5% were uneducated. The overall literacy rate of Pakistan is 46% according to UNESCO report 2013\textsuperscript{14}. The reason of high literacy rate in our sample is basically due to selection of the working class individual’s working class individuals.

The prevalence of breastfeeding in my study was 100% and all the clients were breastfeeding their babies. According to National Demographic Health Survey 2012-13,\textsuperscript{15} the prevalence rate of breastfeeding is 98%, which is slightly lower than our values. A study in Pakistan shows that 95.4% women Breastfeed their child\textsuperscript{17}.

In our sample about 98% women have knowledge of exclusive breast feeding for 6 month while 2% were unaware. 71% population did for 5-6 month, 3% for more than six month. 11% practiced it for 2-3 month and remaining 15% followed it for 3-4 months.

The Demographic and Health Survey (DHS) 2012-13\textsuperscript{15} revealed that in Pakistan the rate of early initiation of breastfeeding was 54.7%, which is consistent with the results of my study where 60% of the clients started the breastfeeding in 1st hour.

In another study carried out in Pakistan that overall optimal time (1st hour) of onset of breastfeeding rate was 69%\textsuperscript{16} which is consistent with my study where 60% of our clients started breastfeeding in 1st hour while 40% breastfed later. Out of these 40%, 70% started on 1st day, 22% started during 1st 3 days and 8% started in 1st week\textsuperscript{16}. The result of our study is almost in consistency with the study carried above. Only 36% of mothers began breastfeeding the day they gave birth. 30.7% start it on 2nd day, 34% started on 3rd day.\textsuperscript{17} There were significant differences in breastfeeding among provinces, rural and urban residence educated or uneducated. 62% of mothers start supplemented feeding to their children before the age of 5 months. The early initiation of supplementary food were common in rich and educated families. Late initiated in poor and less educated families.\textsuperscript{18}

50% of the women hold their working status as responsible for earlier cessation of breastfeeding. 27% stopped due to insufficiency of breast milk and 10% ceased because of pregnancy and 13% had other reasons while another study conducted by Ibrahim et al\textsuperscript{19} showed that; the most common reason for not exclusive breast feeding was inadequate milk production as stated by 71% of mothers, followed by maternal employment as the reason for the early cessation of breast feeding.

A study conducted at Zia Uddin Medical University, Karachi indicates that significant associations existed between the early termination of breast feeding and family income, family structure (nuclear vs. extended), mode of delivery, delayed in initiation of breast feeding early weaning and antenatal counseling\textsuperscript{20} early which is not consistent with my study results were working status of the women is responsible for...
earlier cessation of breastfeeding. According to J. Prev “The higher the mother’s education, the shortest is breastfeeding duration” which is consistent with my study results.

It is recommended by WHO that only breast milk should be given to infant till 6 month. But working class has some difficulty to continue breastfeeding. No doubt breastfeeding is superior to bottle feed but in some cases bottle feed can substitute breastfeeding. In our study majority of women (75%) did not start bottle feeding in first week. According to study published in Journal of Pakistan Medical Association, 46% infants were bottle fed during the first week of life while in our study only 25% bottle fed during first week. So our results contradict with above study’s result.

CONCLUSION

The working status of females was the most important reason for the cessation of exclusive breastfeeding so a favourable attitude should be created for working women to breast feed in place of work or they should be given lactation breaks so that they can exclusively breast feed their babies. A room should be made available at all the working places where the infants should be kept and breastfed by the Mothers. They should be assured that they can produce enough breast milk to exclusively breast feed their babies. Adequate prenatal counselling can help the women to prepare themselves for exclusive breastfeeding.

REFERENCES

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