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RESEARCH ARTICLE

ATTITUDE TOWARDS BREASTFEEDING AMONG RURAL WOMEN

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ABSTRACT

Attitudes and confidence among women can predict the duration of exclusive breastfeeding. The longer duration of breastfeeding, the more advantages there are for both mother and child. The aim of this study was to explore how the attitudes and the confidence were among breastfeeding mothers, impart scientific information and techniques of breastfeeding practices to the women and evaluate the impact of the programme. The total sample size of the study was 500 women were drawn from five blocks of Coimbatore district. From each block two Village Panchayats are chosen randomly to conduct the research. The data was collected from selected 500 women by face-to-face contact after agreeing to participate in the study. A main finding of the study is after the training programme on Attitude towards Breastfeeding, women had changed their negative attitude towards breastfeeding techniques. Women had much more positive attitudes towards breastfeeding

INTRODUCTION

Breastfeeding is the best way of providing ideal food for healthy growth and development of infants, and its advantages range from physiological to psychological for both mother and infants. It is well-known that breastfeeding influences a child's health positively and improves nutritional status. A meta-analysis from three developing countries showed that infants who were not breastfed had a 6-fold greater risk of dying from infectious diseases within the first 2 months of life than those who were breastfed. Six months of exclusive breastfeeding and continued breastfeeding in first year of life could also prevent 1.3 million child deaths worldwide according to systematic reviews from the Bellagio Child Survival Study Group. In addition, incorrect infant feeding practices pose significant risk for malnutrition among children under the age of five. The prevalence of breastfeeding differs from one country to another and from one society to another, this of course is due to cultural and religious believes. Delayed breastfeeding initiation, colostrum deprivation, supplementary feeding of breast milk substitutes, early introduction of complementary feeding, and incorrect weaning from breast milk are commonly found practices in communities around the world.

Objectives of the study, To

- Explore how the attitudes and the confidence were among breastfeeding mothers
- Impart scientific information and techniques of breastfeeding practices to the women and
- Evaluate the impact of the programme

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METHODOLOGY

The cross-sectional study is conducted in the following areas of the Coimbatore district which is selected using Multi stage strata sampling techniques. The blocks are Karamadai, Annur, Thondamuthur, Madukarai, Sarkkarsamakkulam (Kovilpalayam) and Narachimmanaichenpalayam. From each block two Village Panchayats are chosen randomly to conduct the research. Rapport was developed through frequent visits and discussions with Panchayat Presidents, Panchayat Level Federation Leaders, Self Help Groups, Non Governmental Organisations, School Head Masters, Integrated Child Development Scheme Officers, Child Development Programme Officers, Anganwadi Teachers, village people, to select the target people. The total sample size of the study was 500 women were drawn from five blocks of Coimbatore district. Multi stage strata sampling techniques were used to select the area and sample for the study. Fifty women were chosen from each village Panchayat, Municipality and Corporation (10-Village Panchayats). The criteria used for the selection of the sample are mothers who have breastfeed their children at least for two years. Interview Schedule was used to collect data from the women. The prepared interview schedule was evaluated by the experts for standardization. The independent and dependent variables were identified, based on the data collected from the respondents. The study was approved by the Institutional Human Ethics Committee, Avinashilingam Institute for Home Science and Higher Education for Women. The Approval Number is AUW/IHEC13-14/XMT-04. The data was collected from selected 500 women by face-to-face contact after agreeing to participate in the study. The collected data were consolidated, analysed and presented in Results and Discussion.

Table 1. Socio – Economic Characteristics of the Women

Characteristics		Blocks										Average percentage N=500
		Annur		Kovilpalayam		Karamadai		Madukarai		Thondamuthur		
		Village Panchayats										
		1	2	3	4	5	6	7	8	9	10	
	18-23	40	46	64	58	40	44	52	42	42	44	47
	24-29	50	36	26	18	36	30	38	42	50	52	38
Age(in years)	30-35	10	18	10	18	24	26	10	16	8	4	14
	Above 35	-	-	-	6	-	6	-	-	-	-	1
	Hindu	94	86	90	100	90	86	92	92	94	90	91
Religion	Muslim	4	10	-	-	4	6	-	2	2	-	3
	Christian	2	4	10			10	8	6	4	10	6
	Scheduled Caste (SC)	52	48	52	28	52	28	54	50	52	40	46
Community	Most Backward Caste(MBC)	38	32	44	22	44	22	32	34	32	44	34
	Backward Caste(BC)	10	20	4	50	4	50	14	16	16	16	20
Family type	Nuclear family	36	30	46	82	40	30	36	36	30	38	40
	Joint family	64	70	54	18	60	70	64	64	70	62	60
Size of the family	Small (4 members)	32	36	46	82	46	82	42	34	32	30	46
	Large (More than 4 members)	68	64	54	18	54	18	58	66	68	70	54
Education (Head)	Illiterate	2	6	10	4	10	4	6	4	2		4
	Primary school (1-5)	20	18	46	6	44	52	20	10	20	20	26
	High school (6-10)	22	26	20	58	20	14	20	10	23	18	23
	Higher secondary (+12)	22	20	8	10	16	10	20	22	22	14	16
	Diploma	26	20	12	20	10	20	24	38	26	30	23
	College	8	10	4	2	-	-	10	16	8	18	8
	Illiterate	2	4	12		12		4		2		4
	Primary school (1-5)	50	48	48	12	28	12	40	34	50	56	38
	High school (6 to 10)	36	30	36	20	36	46	38	40	36	30	35
	Higher secondary level (+12)	6	4	-	50	24	34	4	-	6	-	12
	Diploma	6	14	-	8	-	8	14	26	6	14	10
	College	-	-	-	10	-	-	-	-	-		1
	Agriculture	6	-	10	22	20	22	12	6	6		10
Occupation (Head)	Coolie	50	68	54	26	60	68	48	38	62	68	54
	Business		-		8				4	32	32	8
	Private sector	44	32	36	44	20	10	40	52	-	-	28
Occupation (Women)	Housewives	100	100	100	100	100	100	100	100	100	100	100
Income – Head (per month in Rs)	2500-5000	58	74	30	12	30	20	62	50	72	74	48
	5001-7500	20	14	14	70	46	58	20	30	12	14	30
	Above 7500	22	12	56	18	24	22	18	20	16	12	22

Source: Field survey 2013

1-Machakowdampalayam, 2- Kariyampalayam, 3- Vellamadai, 4 – Keeranatham, 5- Odanthurai, 6- Chikkarampalayam, 7- Malumichampatti, 8- Madukarai, 9-Theethipalayam, 10 – .Maathampatti

RESULTS AND DISCUSSION

Socio – Economic Characteristics of the Women in Rural Areas: Table I reveals the socio- economic characteristics of the respondents. It can be seen that a higher per cent of respondents belong to the age group of 18-23 years (47 per cent), followed by the 24-29 years (38 per cent) with the least per cent (1 per cent) seen in the age group of 35 and above. Majority of the households belonged to the Hindu religion (91 per cent) while the Muslim community households were the lowest in the village Panchayats. More than half of the respondents in all village Panchayats belonged to the scheduled caste; 44 per cent of the women were under the category of Most Backward Community (MBC); one fourth of the respondents (20 per cent) belonged to the Backward Classes (BC).

Attitude towards Breastfeeding

Table 2. Attitude towards Breastfeeding

Attitude	Rural (N:500) Paired Differences			t value
	Mean	SD	SEM	
Prelactal practice delay the initiation of breastfeeding	1.61	1.811	0.081	19.877**
Prelactal feeds hampers the proper establishment and future success of breastfeeding	1.218	1.902	0.085	14.319**
Start breastfeeding within half an hour of birth	1.22	1.861	0.08	14.652**
Breastfeeding is a good contraceptive method if menstrual cycle is not started	1.09	1.951	0.087	12.488**
During breastfeeding the mother should sit comfortably	1.774	1.797	0.08	22.074**
During breastfeeding the mother should maintain eye to eye contact with the baby and also talk to her	1.43	1.823	0.081	17.539**
Wash each breast with warm water before breastfeeding	1.584	1.779	0.079	19.908**
Practice exclusive breastfeeding from birth to 6 months	1.608	1.823	0.081	19.719**
Milk flows from breasts when the mother thinks of her baby, or hears crying	1.618	1.776	0.079	20.371**
Machine should be used for expression of milk	1.918	1.751	0.078	24.480**
Expressed breast milk can be mixed with previous expressed milk	1.44	1.856	0.083	17.347**
Expressed can be warmed on fire	1.496	1.797	0.08	18.606**

Attitude	Rural (N:500) Paired Differences			t value
	Mean	SD	SEM	
Mother can produce enough milk to satisfy the baby's need	1.584	1.755	0.078	20.178**
Mother should take medicine for breastfeeding problems according to doctor advice	1.588	1.796	0.08	19.762**
Breast milk is produced as a result of the interaction between hormones and reflexes	1.802	1.775	0.079	22.692**
Prolactin reflex increases mother's milk supply	1.154	1.921	0.085	13.426**
More prolactin secreted at night time and it will help to suppress ovulation	1.874	1.764	0.078	23.753**
Oxytocin reflex increases milk flow	2.802	1.797	0.08	34.866**
Oxytocin reflex helps in uterus contraction	3.638	1.241	0.055	65.509**
Breast feeding helps in mother and child bonding	4.176	0.728	0.032	128.255**
Those using formula feeding will miss the greatest joy of motherhood	3.822	0.883	0.039	96.775**
High calorie diet must be taken by all mothers at the time of lactation	3.588	1.185	0.053	67.684**
Breastfeeding should be given at an interval of 20 minutes	2.648	1.809	0.08	32.721**
Tension, pain and lack of confidence hinder the milk flow	2.592	1.821	0.081	31.827**

**Significant at 1 percent level

About 60 per cent of the respondents lived in joint family system. More than 50 per cent of the respondents came from families which had four or more members. With regard to the educational qualification of the respondents, it is seen that a high per cent of them had completed primary school (40 per cent) while 36 per cent of them had undergone high school education. One fourth of the respondents (20 per cent) were diploma holders and only 4 per cent were illiterates. Thirty per cent of the house-holds heads had completed the primary school level education, followed by 26 per cent who had finished their high school (X standard). Twenty per cent of the respondents had done their diploma education. Only nine per cent of the house-holds heads had completed their degree. Regarding the occupation of the respondents, it was seen that fifty per cent of head of the households were daily wage earners followed by the people in the private sector (30 per cent) while one forth of them (10 per cent) were working as agricultural labourers. All respondents were housewives (100 per cent). Fifty per cent of the head of the households were earning between Rs. 2500- 5000/- while thirty per cent were earning in the range between Rs 5001-7000/-; only twenty per cent had an income above Rs 7500. To measure the attitudes among mothers towards infant feeding the Iowa Infant Feeding Attitude Scale (IIFAS) was developed by De la Mora, Russell, Dungy, Losch & Dusdieker (1999). The IIFAS contains 17 questions concerning attitudes about breastfeeding and formula feeding, where the women rate how much they agree or how much they disagree with the statement. In a study by Shaker, Scott & Reid (2004) the IIFAS was used to analyze the attitudes of expectant parents towards breastfeeding and formula feeding.

The IIFAS was shown to be a validated and reliable instrument. The result of the study also showed that the parents who were positive towards breastfeeding had a better attitude and a better knowledge about the advantages of breastfeeding. The t value of the following aspects were statistically significant at one per cent level Prelactal practice delay the initiation of breastfeeding, Prelactal feeds hampers the proper establishment and future success of breastfeeding, Start breastfeeding within half an hour of birth, Breastfeeding is a good contraceptive method if menstrual cycle is not started, during breastfeeding the mother should sit comfortably and maintain eye to eye contact with the baby and also talk with the child, Wash each breast with warm water before breastfeeding, Practice exclusive breastfeeding from birth to 6 months, Milk flows from breasts when the mother thinks of her baby or hears crying, Baby crying as a major sign of hunger, Machine should be used for expression of milk, Expressed breast milk can be mixed with previous expressed milk, functions of Prolactin and Oxytocin, benefits of breastfeeding, diet for lactating mother and psychological advice for successful breastfeeding. Brown & Lee, 2011 explored the attitudes and experiences in mothers who successfully breastfed exclusively for six months. A positive attitude towards breastfeeding was associated with a longer duration of breastfeeding. High level of support, confidence and a natural determination to breastfeed had a connection to a positive attitude. The mothers were able to list several advantages with exclusive breastfeeding and that it was the natural and healthiest choice for both themselves and their infants. They also felt that they enjoyed it and that it created a closer bond between mother and infant.

Table 3. Attitude towards Breastfeeding in Rural Areas

Name of the Areas	Paired Differences			t value
	Mean	Std. Deviation	Std. Error Mean	
Machakakowdampalayam	30.360	17.915	2.533	11.983**
Kariyampalayam	39.300	49.819	7.045	5.578**
Odanthurai	56.400	31.524	4.458	12.651**
Chikarampalayam	65.720	29.684	4.197	15.655**
Malumichampatti	60.000	31.431	4.445	13.498**
Madukarai	6.022	32.458	4.590	13.119**
Vellamadai	6.142	31.547	4.461	13.767**
Keeranatham	64.820	31.340	4.432	14.625**
Theethipalayam	61.120	31.614	4.470	13.671**
Maathampatti	5.926	33.571	4.747	12.482**

**Significant at 1per cent level

Impact of the Selected Demographic Variables on Attitude towards Breastfeeding Techniques among Women in Rural Areas

Table 4. Impact of the Selected Demographic Variables on Attitude towards Breastfeeding Techniques among Women

Name of the Areas	Mean value							R Square	F value
	Age (in Yrs)	Religion	Community	Family type	Education (Women)	Occupation (Head)	Income – Head (per month in Rs)		
Machakakowdampalayam	1.318	.106	2.182	-3.714	-1.482	1.329	1.329	.670	4.891
	.195	.916	.035	.001	.146	.191	.191		.000
Kariyampalayam	3.091	3.296	-.555	1.738	-4.659	-.646	1.330	.819	14.651
	.003	.002	.582	.089	.000	.521	.191		.000
Odanthurai	.408	1.356	-4.006	-.513	1.605	1.218	-.999	.470	4.544
	.685	.183	.000	.611	.116	.230	.324		.001
Chikarampalayam	.521	1.874	-.877	-1.624	-1.421	.081	.034	.278	2.310
	.605	.068	.385	.112	.163	.936	.973		.044
Malumichampatti	2.126	.593	1.041	-3.450	-.008	-.525	1.474	.458	1.933
	.039	.557	.304	.001	.993	.602	.148		.000
Madukarai	2.126	.593	1.041	-3.450	-.008	-.525	1.474	.458	5.076
	.039	.557	.304	.001	.993	.602	.148		.000
Vellamadai	2.651	-.490	.848	-2.376	.461	-.509	1.045	.396	3.937
	.011	.627	.401	.022	.647	.613	.302		.002
Keeranatham	.699	-.406	.564	-6.324	.578	-.927	1.338	.606	9.238
	.488	.687	.576	.000	.566	.359	.188		.000
Theethipalayam	1.537	-3.409.	-1.542	-5.829	-.609	1.382	-1.974	.683	12.912
	.132	.001	.131	.000	.546	.174	.055		.000
Maathampatti	1.225	.725	1.542	-4.020	-1.096	1.041	.627	.414	4.235
	.227	.472	.131	.000	.279	.304	.534		.001

**Significant at 1per cent level * Significant at 5 per cent level

After the training programme on Attitude towards Breastfeeding, women had changed their negative attitude towards breastfeeding techniques. Women had much more positive attitudes toward breastfeeding. Wojcicki *et al.* (2010) investigated maternal attitudes towards breastfeeding in San Francisco, California, by interviewing mothers who recently delivered a healthy newborn. The main findings of the study showed that those participants who were using instant formula were more likely to have a negative attitude towards breastfeeding. Elements that promoted the negative attitude were embarrassment of breastfeeding in public, physical concerns, uncomfortable feelings and negative influence from family/friends. Stuebe & Bonuck (2011) also found comfort with breastfeeding in social environments and knowledge about the benefits of breastfeeding as factors related to the intension of exclusively breastfeeding. The authors suggested that strong reinforced messages about the health benefits of breastfeeding and strategies for encouraging breastfeeding in social environments should increase the duration and the exclusivity.

Attitude towards Breastfeeding in Rural Areas: To find out the mean difference for the attitude towards breastfeeding before and after the training programme of the village Panchayats viz., Machakakowdampalayam, Kariyampalayam, Odanthurai,Chikaramapalyam,Malumichiampatti, Madukkarai, Vellamadai, Keeranatham, Theethipalayam and Mathampatti, the Paired sample t test was used**.** The t value of all the Panchayats was significant at one per cent level. It shows that there was a significant improvement in the attitude on breastfeeding after the training programme. Maternal attitudes are better predictors of infant feeding method during the postpartum period. After the training programme women had a significantly higher total attitude score to breastfeeding preference than before the training programme. A research study on Knowledge, Attitude, and Practices of Breastfeeding and Weaning Among Mothers of Children up to 2 Years Old in a Rural Area in El-Minia Governorate, Egypt conducted by Eman et. al 2014. A community-based cross-sectional study was conducted on 307 rural mothers who have a youngest child aged 2 years or less. Mothers were selected using systematic random sampling. All the studied mothers knew that breastfeeding is the best nutritional source for the baby. The majority of the mothers had good knowledge about the advantages of breastfeeding for child. As regards weaning, majority (92.5%) of the mothers defined weaning as breastfeeding cessation. Most of the mothers (94.8%) agreed that breastfeeding protect child from infection, 96.1% agreed that it is the healthiest for infant, 76.5% agreed that breast milk lead to loss of figure, and 83.4% agreed that breastfeeding should be avoided during mother's illness. About 84% initiated breastfeeding immediately after delivery, and 42.7% of the studied mothers offered pre-lacteal feeds to baby before

lactation. About thirty quarters (74.2%) of mothers fed colostrum. Exclusive breast-feeding was found to be associated with mother's education ($P < 0.0001$) but not with mother's age at birth, mother's occupation, or place of birth.

A study on Breastfeeding attitudes and confidence among mothers in a rural area of Thailand conducted by Johansson et.al. The outcome of the study demonstrated that the majority of the women had a neutral attitude towards breastfeeding, 13% had a positive attitude towards formula feeding and 7% had a positive attitude towards breastfeeding. No significance was found between mothers living with nuclear and extended family regarding the attitude. The majority rated high confidence in breastfeeding. Mothers who were living in nuclear families rated lower than mothers living in extended families in "refrain from bottle-feeding for the first 4 weeks" regarding confidence in breastfeeding. The estimated equation was statistically significant at one per cent level. It could be identified from the significant F value of various Panchayats. It indicated that all the selected variables together were statistically significant to explain the variations in attitude towards the breastfeeding. The highest value of R^2 was 0.82 for Kariyampalayam Panchayat. It means that attitude was explained by the selected Demographic factors along with breastfeeding to the extent of 82 per cent, this was followed by the Theethipalaym Panchayat with the value R^2 of 0.68, which implies the attitude, was explained by the selected Demographic factors along with breastfeeding to the extent of 68 per cent. The value of R^2 was 0.67 for Machakowndampalayam Panchayat. It means that attitude was explained by the selected Demographic factors along with breastfeeding to the extent of 67 per cent. A study was conducted in India for checking the knowledge, attitude and practices of infant feeding in south India on a group of 300 mothers whose baby's ages from 3 days to 17 months .Only 32% of the mothers felt that milk should be the first feed ,6% considered prelacteal fluids are necessary, 71% felt 4-5 months is the optimal period of breast feeding exclusively and 78% said that cow's milk can be continued beyond one year as a regular food and proportion of mothers said breast feeding can be discontinued in case of maternal illness. The investigators concluded that still there is lack in the knowledge of mothers regarding exclusive breast feeding (Chandrashekar.S and Chakaldar, 1995).

Conclusion

This study showed a lack of understanding of the importance of and poor adherence to exclusive breastfeeding for the first six months postpartum among rural mothers. As exclusive breastfeeding promotion has been proved to be one of most effective ways to improve infant survival, more attention should be given to it, especially targeting the large proportion of women who missed formal education on infant feeding in school. A proper community-based program including the tools for monitoring its implementation and effectiveness needs to be developed to transform policy recommendations into action in rural areas.

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