

Practices Related to Exclusive Breastfeeding Among Women in Tribal Block of Banaskantha District, Gujarat

By

Tarun Sharma

*Dissertation submitted in partial fulfillment of the requirements of the degree
MBA Hospital and Health Management*

Academic year, 2017-2019



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TO WHOMSOEVER MAY CONCERN

This is to certify that Dr. Tarun Sharma, student of MBA Hospital and Health Management from The IIHMR University, Jaipur has undergone internship training at National Health Mission, Gujarat from 4th February 2019 to 8th May 2019.

The Candidate has successfully carried out the study assigned to him during internship training and his approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish him all success in all his future endeavors.



(Col) Dr. Ashok Kaushik

Dean, Academics and Student Affairs

The IIHMR University, Jaipur

17 May 2019



Dr. Veena N Sarkar

Assistant Professor

The IIHMR University, Jaipur



Office of Chief District Health Officer Banaskantha, Gujarat

The Certificate is awarded to

Dr. Tarun Sharma

In recognition of having successfully completed his
internship in the department of

Health and Family Welfare

And has successfully completed his project on
**Study on Practices Related to Exclusive Breast feeding Among
Women in Tribal Blocks of Banaskantha, Gujarat**

Date- 04-02-2019 to 08-05-2019

Organisation- National Health Mission, Gujarat

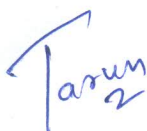
He comes across as committed, sincere and diligent person
who has a strong drive and zeal for learning
We wish him all the best for future endeavors

**Chief District Health Officer
Banaskantha, Palanpur**

**Chief Dist. Health officer
Dist. Panchayat Banaskantha
PALANPUR.**

CERTIFICATE BY SCHOLAR

This is to certify that all ethical issues have been considered while collecting data for my dissertation titled **Study on Practices Among Women in Tribal Block of Banaskantha** and submitted by **Dr Tarun Sharma Enrolment No 0682** under the supervision of **Dr Veena N Sarkar** for award of MBA in Hospital and Health of the University carried out during the period from 04/02/2019 to 08/05/2019 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, titles in this or any other institute or other similar institution of higher learning.

A handwritten signature in blue ink that reads "Tarun" with a stylized flourish underneath.

Signature of student

Acknowledgement

At this juncture of the completion of my dissertation, first I would like to thank the almighty for showering his blessings on me. I would like to sincerely thank The IIHMR University for giving me this platform of learning and making me a part of this memorable journey.

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In the end I would like to appreciate the support of all my friends especially Soumya and Ankesh for helping me out in this

Thank you all

**PRACTICES RELATED TO EXCLUSIVE BREASTFEEDING
AMONG WOMEN IN TRIBAL BLOCK OF BANASKANTHA
DISTRICT, GUJARAT**

**Submitted by
Dr Tarun Sharma**

Introduction

“A new born baby has only three demands; they are warmth in the arms of his mother, food from her breasts and security in the knowledge of her presence. Breastfeeding satisfies all three.”

__Grantly Dick-Read

Nutrition is one of the basic necessities for each species to live, survive, sustain and to grow and develop and lead a productive life. The word ‘nutrition’ has been derived from the word ‘nutricus’ which means to ‘suckle at breast’.

Even before a baby is born, the nature takes the proper and regular supply of all the required nutrients. The nature has an inbuilt mechanism to support and provide nutrition and fulfil the requirements of the foetus in the form of a continuous supply of food from her mother in the womb. During pregnancy placenta is the main source of nutrition to the growing foetus.

After delivery one of the first gifts or boon received by a baby is from the mother which is a promise by her to the baby to provide everything in the form of breast-milk.

So, considering a life course perspective it can be seen that nutrition to the baby is an important and effective link which will cater to many issues like malnutrition, mortality, morbidity which may have some debilitating effects on not only on the individual but also on society as a whole.

Breast milk alone is enough to satisfy the all the biological process would like of infants for the primary six month of life. when six month mature, to satisfy all of a child’s biological process needs breast milk got to be complemented by different foods, though continuous to be a very important supply of nutrients similarly as impacting malady morbidity and mortality.

So basically in areas where there is inadequate provision of nutrition and impaired health status, it is very common to observe that the time between birth till 36 months is a crucial period in early childhood for proper mental and physical development of a child. Also it has also been proved that the continuous responsiveness of breastfeeding enables to create perfect

bond between a mother and a child which is very important for overall development of the children.

Rationale

Gujarat is one of the most developed state of India and has low level in IMR, U5MR and NMR in India. Recently the report submitted according to sample registration system two thousand and sixteen, thirty four infants per thousand live births die in our country. Neonatal sepsis, Diarrhoea and pneumonia, accounts for major killing of more than lakh of young children in India. Proper practices related to breast-feeding and also adequate amount of breastfeeding are the main reason for the more number of infant death. In the state Level Household Survey-3(DLHS), 77% children deaths corresponds to the inadequatebreastfedding practices and due to unexclusive breastfedding during the birth and six months of life.

n Gujarat, as per the information from National Family Health Survey 2015-16 (NFHS-4) solely five hundredth of mother provides milk to her kid each inside one hour of birth however identical observe has terribly low rate within the social group Blocks of Banaskantha i.e. twenty 9 share. Failure in early begin of breastfeeding ranges from a delay of three hours up to three days rife within the social group Blocks of Banaskantha

In NFHS-4 survey, it's mentioned that fifty six share youngsters|ofyoungsters|of kids} were solely breastfed for the primary six months and nearly eleven share of the whole children whose age is between six and twenty 3 months area unit presently taking adequate diet at that point.

There is substantial improvement from NFHS-3 but also there is large number of children still deprived of Colostrum and the antibodies which it contain.

One in five children (19%) who were ever breastfed were given something other than breastmilk during the first three days.

So overall 86% of the child continue to do breast feeding till 1 year and 63% till two year. It is advised that complimentary food should be added to the diet of the child at the age of 6-8 months but also 49 % of child include breast feeding with complimentary food.

WHO recommend for IYCF (Infant and Young Child Feeding) practices for the age group of 6-23 months which measures the adequacy of dietary diversity and meal frequency.

Literature Review

45% of the child deaths occurred worldwide with the estimation of 3.1 % deaths due to undernutrition, not optimum breastfeeding and not proper cognitive development.

Nutritional status of children improves best in the age of six months to two years of age and also decline happens in the same age period according to report submit by FAO. Nutritional status declined can be attributed to reasons like inadequate knowledge, not proper utilization of resources, unavailability of nutrient rich foods and lack of water and food storage. Thus this also results in contamination of foods that are stored in the storage area.

The best person to promote breastfeeding among mothers is the staff nurse who can motivate them and also nearly about in 58% of the case were found where staff nurses actually influenced the decision of the mothers, this was published in a report submitted by Republic of the Union of Myanmar on KAP Study among young children in age between 6-23 months. The study was published in the year 2014.

29 % of the mothers have started breastfeeding their children on the within 24 hours and about 21% refused to breastfed the children because their elder ones has told to do so, this was observed in a study KAP conducted in Gujarat related to breastfeeding the children for better young feeding practices.

Basically even though when mothers know about the importance of breastfeeding but somehow they fail to practice the same, there are some factors related to this which includes delay of breastfeeding, refusing the colostrum, giving foods like cerelac during 6 months and thus avoiding exclusive breastfeeding; thus this can be concluded that there are some gaps in attitude which leads to unfollow the practices which are most important for the proper growth and devt. of the children. This KAP study was conducted among mothers in Patna District.

In another study done by Shahnawaz K from Bihar regarding knowledge, attitude and practices of nourishing mothers about breast feeding, attending urban health center which is a cross sectional study: A c that there was suboptimal knowledge and

practices of early breastfeeding among mothers although a positive changing trend were seen in aspects of colostrum feeding.

Two major practices.i.e First, Early start of breastfeeding and secondly exclusive breast feeding has always been at the core of the various studies which have been carried out in various developing as well as developed countries of the world.

Many of the recent studies have predominantly focused on the significance of breast feeding and also the importance of mother's colostrum. Some other studies have focused on the social, cultural and economic factors which can shape and create the environment of practice of breast feeding.

From the Study we come to know that, The status of exclusive Breastfeeding in many of the Asian countries had increased due to the observed improvement in the education background of mothers .Due to deficiency of Vit A and Zinc there is Under nutrition, with fetal growth restrictions, medium breastfeeding, stunting and wasting which cause forty-five of child deaths happening worldwide which result in infants deaths of around 3.1 million in number globally.

In many studies a difference is observed across traditional races and cultures regarding practices of breastfeeding and it somehow depend on the geography of an area... Breast milk cannot be obtained from artificial means and studies demonstrate that improved breastfeeding are essential for proper growth and development of child. Optimal Infant Young Child Feeding practices; especially early start and exclusively breastfeeding the children for the first six months of their lives helps to ensure the better way of starting the young life. We all know that practicing the Breastfeeding is mother nature's way of giving nutrition to the child and also it helps in creating a strong bond between mother and children. Breastfeeding helps in establishing the emotional security and affection along with lifelong cognitive and mental development of the child. It is estimated that a baby who is breastfed have an IQ of almost 8 and a half points higher than any other normal non-breastfed baby.

Methodology:

These portion of report explains about the information on the universe of the study, study area and data collection method. Later it provides details about a description of the sample localities and data analysis plan adopted for the study.

Study setting:

The study have taken place in Tribal Blocks of Banaskantha District of Gujarat. Gujarat is located in the north-western part of India and the state shares the boundaries with Rajasthan and Maharashtra and international borders with Pakistan. It is located at the North East part of Gujarat, Banaskantha District with the coverage of around 12703 square kilometer which make it as the second largest district of the Gujarat. It is named after “The West Banas River” which flows between the Mount Abu and Aravalli Ranges. There are two tribal blocks also named Amirgadh and Danta of Banaskantha.

The official headquarters of the Banskantha district is situated at Palanpur.

Banaskantha as a district is divided into nearly fourteen Talukas as follows:

Amirgadh

Bhabhar

Dantiwada

Danta

Deesa

Deodar

Dhanera

Palanpur

Kankrej

Tharad

Vadgam

Lakhni

Suigam

[Vav](#)

There are two tribal blocks in district of banaskantha name as Amirgadh and Danta .

Study setting

The study area was at the Tribal Blocks of Banaskantha District in the State of Gujarat.

Study Design:

It was a cross sectional study with the help of structured questionnaire. These studies are done by taking a cross section of the sample at one time from the universe or targeted population.

In this assessment the social and demographic profile of the respondents were taken. Further the information regarding the number of children, birth space between the children and the place and method of delivery were also taken. Information about the actual practices regarding infant and young child feeding were asked in the interview. Convenience sampling method was used for the assessment. .

Data was collected from the mothers of children aged 6-60 months in the time period of 4th of March 2019-8th May 2019.

Interview questionnaire was prepared based on conceptual framework of Infant and Young Child. The questionnaire consisted of close ended question

Interview method:

Primary data was collected from the mothers of children whose age is between 6 months to fifty nine months with the help of face to face interviews . Interviewer have visited the village in the tribal block of banaskantha and interacted with the respondents so that they can participate in the study. The participants who were eligible there had to face the interview process and the interview was conducted in Gujarati and Hindi languages. After that data was collected regarding practice of early initiation of breastfeeding, exclusive breast feeding , complementary feeding.

Information was mainly gathered from the Dangosia Tribe which is the Tribal Community residing in the Tribal Blocks of Banaskantha district. During data collection the written consent was filled by each of the respondents.

The MUAC of the children was measured and taken with help of MUAC Tap.

Sampling Population

The sampling consisted of the ladies notwithstanding the age WHO have delivered within the past six months and age of their, last-born kid wasn't but six months and less than sixty month once the interview was taken.

Sample of two hundred mothers of kids aged between 'six months to sixty months' was elect for the study.

EXCLUSION CRITERIA:

1.social group ladies living in Banaskantha district and mothers with a toddler whose age isn't between 06-60 months

INCLUSION CRITERIA :

2.social group ladies living in Banaskantha district and mothers with a toddler whose age varies from 06-60 months

Methods of data collection:

Ethical considerations:

The study objective being on a sensitive subject, all stakeholders were well-read of the moral issues that can be Janus-faced by the info collectors. Before administering of the schedule, scientist explained to the respondents concerning the target of the assessment and also the importance of participation within the study. consent was taken before filling up the form.

Research question:

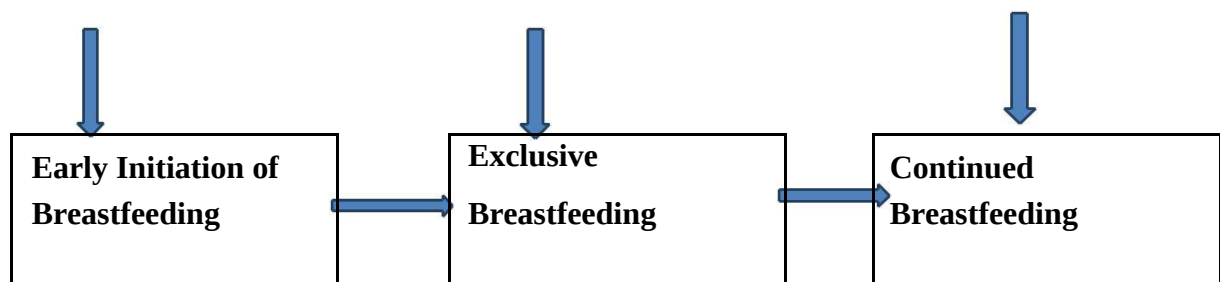
1. What is the status of practices related to exclusive breast feeding in women in Tribal Blocks of Banaskantha district in Gujarat?

Research objective:

1. To assess the practices related to Colostrum Feeding in tribal blocks of banaskantha.
2. To find out the status of exclusive breastfeeding in tribal blocks of banaskantha
3. To identify the effect of economic factors on breastfeeding

Conceptual framework:

There must be early initiation of breast milk since child birth takes place. It's the duty of the ANM or the nurse to feed the child with the colostrum of mother which is very necessary for the proper growth of the child and live disease free in upcoming years of his life.



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Data analysis-

The data was analyzed with the help of SPSS and Microsoft Excel.

1. Status of the Child fed with Colostrum

Child fed with colostrum:

a. Yes

b. No

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	yes	49	24.5	24.5	24.5
	no	151	75.5	75.5	100.0
	Total	200	100.0	100.0	

24.5% of the mother told they did fed their child with colostrum and 75.5% told they did not fed their child with colostrums.

2. Economic condition of family

Occupation of child's father:

a. Agricultural labour

b. Other labour

c. Owner Cultivator

d. Land lord

e. Service

f. Business

g. Other

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agricultural labour	28	14.0	14.0	14.0
	other labour	129	64.5	64.5	78.5
	owner cultivator	24	12.0	12.0	90.5
	Service	10	5.0	5.0	95.5
	Business	9	4.5	4.5	100.0
	Total	200	100.0	100.0	

Most of the Respondent were involved in some type of labour with 64.5 % being the highest among the occupation and 14% were agricultural labour. Only 9.5% of them were doing job or some type of service.

Occupation of child's mother:

a. Agricultural labour

b. Other labour

c. Owner Cultivator

d. Service

e. Business

f. Housewife

g. Other

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	agriculturaurallabour	9	4.5	4.5	4.5
	other labour	4	2.0	2.0	6.5
	Housewife	187	93.5	93.5	100.0
	Total	200	100.0	100.0	

Most of the women were Housewife nearly about 93.5%. and remaining were some type of labour.

3.Income of the Household

Household annual income:					
a. Less than 60,000					
b. 70,000- 1,00,00					
c. 1,00,000 - 2,00,000					
d. 2,00,000 - 3,00,000					
e. More than 3 lakh					
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	less than 60000	187	93.5	93.5	93.5
	100000-200000	13	6.5	6.5	100.0
	Total	200	100.0	100.0	

Most of the household have less than 60000 annual income that is nearly about 93.5% and 6.5% were having income from 100000-200000. Most of them are having very low income.

4. Relation between Economic Condition and giving colostrums to child

Childe fed with colostrum:

a. Yes

b. No

* Household annual income:

a. Less than 60,000

b. 70,000- 1,00,00

c. 1,00,000 - 2,00,000

d. 2,00,000 - 3,00,000

e. More than 3 lakh

Count

		Household annual income:		Total
		a. Less than 60,000	b. 70,000- 1,00,00	
		c. 1,00,000 - 2,00,000	d. 2,00,000 - 3,00,000	
		e. More than 3 lakh		
		less than 60000	100000-200000	
Childe fed with colostrum:	Yes	41	8	49
a. Yes	no	146	5	151
b. No				
Total		187	13	200

Colostrum given to the child is directly linked with household income as we can clearly see from the table that only 25% of the child are only feeded with colostrums having low income and 75% have not feddedcolostrum which shows relation between Household income and colostrums feeding.

5.Reasons for discarding the colostrums

Childe fed with colostrum:

a. Yes

b. No

*** If no, reasons for discarding colostrum:**

a. Child could not suck

b. Difficult to digest

c. Not good for health

d.Tradition of giving Goat-milk Crosstabulation

Count

	If no, reasons for discarding colostrum: a. Child could not suck b. Difficult to digest c. Not good for health d.Tradition of giving Goat-milk		
		d	Total
Childe fed with a colostrum: b	49	0	49
a. Yes	0	151	151
b. No			
Total	49	151	200

75.5% OF THE MOTHERS told they are following the tradition of giving Goat Milk that's why they have not given Colostrum to their child.

6. Weight at Birth

Weight at birth

a. Less than 2.5 kg

b. Equal and greater than 2.5kg

c. Not recorded

If child had low birth weight then:

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	A	83	41.5	41.5	41.5
	B	117	58.5	58.5	100.0
	Total	200	100.0	100.0	

41.5% of the child were having weight less than 2.5 kg when they were born and 58.5% of child were having weight equal and greater than 2.5 kg..

6. Status of Exclusive Breast feeding in Tribal Blocks

Feeding practices:

a. solely breast fed

b. Breast fed+ water

c. Breast fed+ complementary feeding

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	a	84	42.0	42.0	42.0
	c	116	58.0	58.0	100.0
	Total	200	100.0	100.0	

42% of the mothers told they do solely breastfeeding their child and 58% told they do breast feeding with complimentary feeding

Conclusion:

The status of exclusive breastfeeding is found to be very less among the tribal population and also they have a very strong reason of not following this practice; there is a belief of following the tradition of providing goat milk to the children thus resulting in discarding the colostrum. Cultural practices thus plays an important role in the practices related to breastfeeding as can concluded from this research work. This study further helps in future research related to young feeding child practices There are various factors which helps in the development of the children and exclusive breastfeeding is one of them. It lays the foundation of growth for the young children which ultimately helps in improving the health status among mothers and children as well.

Recommendations:

As consistent with the various survey reviews, the ‘toddler and young infant feeding’ practices had been beneath the countrywide and state average. As consistent with the assessment, even though there are some development, we need to recognition greater on behavioral part. The behavioral trade communications should be designed to suggest and deal with the issues within the have a look at population.

Promoting of early initiation of breastfeeding inside one-hour birth regardless of region of start exceptional breastfeeding up to the age of six months of the kid.

Complementary feeding must be started at the onset of seventh month for each toddler, so we need to focus on Complementary Feeding Day (Annaprasan Diwas).

Continuous breast feeding up to the age of years with various dietary diets.

Attention on giving iron and nutrition supplementation to the child at well timed. Orientation packages or refresher trainings ought to be performed to enhance the information of AWW to promote accurate practices.

Supervisory visits ought to be planned as consistent with VHSND monitoring test listing.

Incorporation of position play workshop to cause them to better understand the significance of breastfeeding for toddlers as well as moms. the key factor of intervention consists of Village fitness sanitation and nutrients day, increase monitoring, CMAM, Supportive supervision, network participation onthe session website.

ICDS system weekly and monthly review meeting approximately fitness Subcenter assembly and region meeting. through these meetings a FLW can easily get the baseline knowledge approximately working responsibilities

QUESTINNAIRE

Part-1 (Child related information)

Name of the reference child

DOB

Age(in years)

Weight at birth

- a. Less than 2.5 kg
- b. Equal and greater than 2.5kg
- c. Not recorded

If child had low birth weight then:

Childe fed with colostrum:

- a. Yes
- b. No

If no, reasons for discarding colostrum:

- a. Child could not suck
- b. Difficult to digest
- c. Not good for health
- d.Tradition of giving Goat-milk

Time of initiation of breast feeding after delivery

- a. Within 1 hr after birth
- b. After 1 hr and within 24 hr
- c. between 1 to 3 days
- d. After more than 3 days

Feeding practices:

- a. solely breast fed
- b. Breast fed+ water
- c. Breast fed+ complementary feeding

Age of inititionsuplimentary feeding:

- a. Before 6 months
- b. At 6 months
- c. After 6 months

Present weight(in kg):

Present height(in cms):

MUAC of the child(in cms):

Did your child receive immunization?

- a. Yes
- b. No

No. of children:

- a. 1
- b. 2
- c. 3
- d. 4
- e. 5
- f. More than 5,

Birth order (nth child):

- a. First
- b. Second
- c. Third
- d. Fourth
- e. Fifth and above

Interval between last two brth(in yers):

Part-2 (Parents related information)

Name of the respondent (parents):

Age:

Economic factor-

Occupation of child's father:

- a. Agricultural labour
- b. Other labour
- c. Owner Cultivator
- d. Land lord
- e. Service
- f. Business
- g. Other

Occupation of child's mother:

- a. Agricultural labour
- b. Other labour
- c. Owner Cultivator
- d. Service
- e. Business
- f. Housewife
- g. Other

Household annual income:

- a. Less than 60,000
- b. 70,000- 1,00,00
- c. 1,00,000 - 2,00,000
- d. 2,00,000 - 3,00,000
- e. More than 3 lakh

Type of house:

- a. Kuchaa
- b. Pucca
- c. Semi-pucca

Literancystatu of responder

- a. Illiterate
- b. Read & write
- c. 1- 5 class
- d. 6 -7 class
- e. 8 - 10 class
- f. Intermediate
- g. Graduate & above
- h. NA

Caste:

- a. General
- b. OBC
- c. SC
- d. ST

Undergone ANC check-up: (if no, go to Q27)

- a. Yes
- b. No.

If yes, total number of ANC's:

- a. One
- b. TWO
- c. Three
- d. Four

If no, then why?

- a. Not aware of the need
- b. Loss of wages
- c. No faith
- d. No ANC held in the village
- e. Timing are not convenient
- f. Place is not accessible
- g. Other

Received IFA tablets:

- a. Yes
- b. No

Place of delivery:

- a. home
- b. Institutional delivery