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A Comparative Study of Breast- Feeding Practices Among Kashmiri Pandits and Dogras

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INTRODUCTION

Breast feeding is an extremely ancient process and is universally recommended way of providing infant nourishment. Mother's milk has been the mainstay of the infant's diet in every culture or community from the very beginning of life on earth.

Breast milk is important for healthy growth and development of all babies. It contains all the essential nutrients a healthy child needs. Several studies have demonstrated that the breast milk composition is unique and best suited for the growing infant. Feeding at breast is emotionally satisfying and a healthy practice for both the mother and the child, besides, it also helps to delay a new pregnancy.

In the developed countries, after a downward trend till 70's breast feeding has shown an upturn (Henderson, 1984). Conversely in many developing countries situation is deteriorating (WHO, 1989), there has been a tendency towards an early shift to bottle feeding (Kumar et al., 1989). Hence it is necessary to keep this practice under continuous surveillance, so that timely action could be taken at the earliest indication of decline. Though no milk can be a real substitute for mother's milk but sometimes it is needed to give artificial milk/ top feeding to the children due to various reasons. Present study was carried out with the aim of assessing the existing breast feeding practices in two communities of Jammu (Jammu and Kashmir).

Objective of the Study: To know and compare the existing breast feeding practices among Kashmiri Pandits and Dogras.

METHODOLOGY

The sample of the study consisted of mothers of 100 infants in the age group of 0-18 months from Kashmiri Pandits and Dogra families selecting 50 from each community. Snowball sampling technique was used to select the sample from different areas of Jammu city and Kathua town. Interview schedule and observation methods were used to collect the information. Interview schedule consisted of 3 sections: (a) section dealt with the background information of the family of the infant (b) consisted of questions regarding the pregnancy and birth details (c) consisted of questions regarding breast feeding practices and beliefs. After the data collection, tabulation was done and percentages were calculated so as to emphasize the majority of responses of both the communities.

RESULTS AND DISCUSSION

Table 1 reveals that the mean age of Kashmiri infants was 9-12 months and in Dogra infants, it was 6-9 months; mean educational status of the parents was graduation and occupational status was government employee; monthly income was Rs. 5,000-10,000/- and the type of family was nuclear families in both the communities.

Table 1: Background information

Variables	*Kashmiri Pandits (Mean)*	*Dogras (Mean)*
Age group of infants	9-12 months	6-9 months
Education of their parents	Graduate	Graduate
Occupational status	Govt. employee	Govt. employee
Monthly income of the family	5,000-10,000/-	5,000-10,000/-
Type of family	Nuclear	Nuclear

Maximum of deliveries (both normal and caesarian) took place in the hospital and that too in the government hospital followed by private hospitals. Only 1/5th (20%) of the deliveries were carried out at home. Families from lower income group (less than Rs. 3000/-p.m) also preferred hospitals than home for the delivery.

It was found that majority of the Dogras had more than 2 children as compared to Kashmiri Pandits who preferred to have one or two children. Parents of infants with more siblings preferred to have children of different sex i.e. if there were 2 boys; they went for 3rd child (girl) or vice-versa. Table 2 reveals that 48% of the

Kasmiri Pandits infants were first born and 42% were 2nd born.

Table 2: Birth order and number of siblings of the infants

S. No.	Birth order	No. of Sib-lings	Kashmiri Pandit		Dogras		Total
			No.	%	No.	%	
1	First child	0	24	48	12	24	48
2	Second child	1	21	42	24	48	45
3	Third child	2	4	8	9	18	13
4	Fourth child	3	1	2	5	10	6

It is clear from the table 3 that the pre-lacteal feed in Kashmiri Pandits was plain boiled water and in Dogras, it was honey and the time gap of first breast-feed was few hours after birth in both the communities. As regards to the feeding of colostrums, although majority of the mothers in both communities started feeding breast milk on the first day itself. But they fed colostrum only to some extent to the infants as mothers of both the communities i.e. 86% of Kashmiri Pandits and 91% of Dogras extracted and discarded initial breast milk. Hence colostrum was fed to infants but not the whole of it. The reasons stated for this by mothers were that, it is impure and very thick milk and harmful for the child.

Table 3: Pre-lacteal feeds fed to the in fants

S. No.	Prelacteal feed	Kashmiri Pandits (n=50)		Dogras (n=50)		Total
		No.	%	No.	%	
1	Plain Boiled water	31	62	3	6	34
2	Sugar Water	13	26	6	12	19
3	Honey	-	-	35	70	35
4	Jaggery Water	-	-	4	8	4
5	Breast Feed	6	12	2	4	8

The Kashmiri Pandits fed the pre-lacteal feed mostly with cotton to the infant and very rarely with spoon, but in dogras, honey as pre-lacteal feed was fed with narrow strip of earring (i.e. golden ear circles as gold is considered pure and holy) and with the help of it Om was written on the tongue of the infant and was called as '*guthi*'. Rest other pre-lacteal feeds were fed with spoon. It was also found that 2 Dogra families gave a finger touch of cow's urine on the tongue of infants for '*shudhi*'. Maximum (89%) of the infants got their first feed on the first day itself and 11% of the infants got it on second or third day in both the communities.

It was observed that the delay in initiation of breast feed in both the communities was either associated with the extraction of initial milk, caesarean delivery pre- lacteal feed and mother's illness. About 90% of the mothers extracted the initial milk before starting breast feed and rest 10% did not extract on the advice of the doctor**.** Although the maximum deliveries took place in the hospitals, most of the mothers still extracted the initial milk.

Table 4 represents the nature of feeding between both the communities and it was found that maximum number of respondents fed their children as per the demand of their infants and only a few percent of them fed their children as per their set schedule. Also, it is clear from the table that maximum number of respondents fed their children 5-10 times a day in both the communities.

Table 4: Nature of feeding

Communities	Nature of feeding	Percentage distribution of infants by number of breast feeds per day		
		4 or less	5-10	11+
Kashmiri Pandits	On demand (96%)	6.6	86.9	6.5
	On schedule (4%)	4.0	67	2.9
Dogras	On demand (87%)	26	74	-
	On schedule (13%)		69	6

Large percentage of mothers in the elite communities also followed demand schedule for breast feeding but they have fixed schedule for only bottle feed which is recommended by health professionals. The infants breast fed 'on schedule' in the present study belonged to educated and employed mothers. Same results were obtained in the study by Panda (1983) in the village near Delhi. Also results were compared with the study of 5 rural communities of Nigeria (Okolo et al., 1999) it was found that prevalent feeding among them was on demand.

Table 5 reveals that majority (88%) of the mothers were following the mixed feeding pattern i.e. bottle milk + breast milk and minimum (3%) of mothers were exclusively

Table 5: Present feeding pattern of the infant

S. No.	Present feeding pattern	Kashmiri Pandits N=50		Dogras N=50		Total
		No.	%	No.	%	
1.	Bottle milk + breast milk	43	86	45	90	88
2	Only bottle milk	-	-	3	6	3
3.	Exclusively breast feed	7	14	2	4	9

breast feeding.

Table 6 shows that the maximum percent of women in both the communities received advice on breast feeding from the doctors and a few

Table 6: Advice to mothers on breast feeding

S. No.	*Persons who gave advice to mothers*	*Kashmiri Pandits (N=50)*		*Dogras (N=50)*		*Total*
		No	*%*	*No.*	*%*	
1	Doctors	30	60	20	40	50
2	Self	10	20	17	34	27
3	Mother-in-law	10	20	13	26	23
4	Friend	-	-	-	-	-

percent of them took advice regarding the same from their mother-in-law and rest of them were aware of its importance.

It can be concluded that mothers from joint families were more influenced by mother-in-laws and half of mothers whose deliveries were carried out in the hospitals were advised by doctors. This shows that doctors are creating awareness among mothers regarding infant feeding practices. Still there is a need of intensive breast feeding education to mothers for removing various myths regarding breast-feeding.

Reviewing the literature available regarding breast feeding practices (Kar and De, 1991; Kaur and Kaur, 1996; Panda et al., 1983) it was found that almost all the mothers breast feed their babies on demand; majority of the mothers were aware of advantages of breast feeding but were ignorant about the nutritive value of colostrum; children were breast fed 4 times a day till 8 months and most of the mothers gave pre-lacteal feeds such as warm water, top milk and gutti. Majority of them discard colostrum as it was considered impure and harmful for the child.

So it was found that although people have become aware of the importance of breast-feeding but there still is a great need for intensive nutrition education programme in this context so as to bring awareness about importance of colostrum for infants.

KEYWORDS Breast-feeding. Pre-lacteal Feeds. Top Feeding. Colostrum

ABSTRACT The present study was undertaken to investigate the breast feeding practices prevalent among Kashmiri Pandits and Dogra communities. The sample of the study consisted of 100 infants in the age group of 0-18 months, 50 infants from each community. Snowball sampling technique was used to select the sample. Interview schedule and observation method was used to collect the data. Results revealed that the incidence of breast-feeding was 100% in both the communities. Nursing was started on an average on the first day itself, after feeding the infants with pre-lacteal feeds. Plain boiled water in Kashmiri Pandits and honey in Dogras were prevalent as prelacteal feeds. Although breast-feeding was started on the first day, 90% mothers of both the communities discarded the initial milk (colostrum) as harmful and impure, so only a part of it was fed to the infants. Breast milk was supplemented with top milk (commonly, diluted cow's), by first or second day after birth, so mixed feeding pattern was common in both the communities. Mothers preferred "on demand" pattern for breast-feed and "on schedule" for top milk. So it is concluded that infant-feeding practices among the said communities are similar to some extent with variations in the pattern of feeding.

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