

Breast Feeding Practices Among Santals and Non- Santals of Orissa

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ABSTRACT The practice of breast feeding is almost universal. In the present investigation an attempt has been made to study the breast feeding practices among Santals and non-Santals of Mayurbhanj district of Orissa. 90 Santal mothers and 100 non-Santal (general castes) mothers were interviewed personally on breast feeding practices. Almost 37.78% of Santal babies and 48% of non-Santal babies were first put to breast within 6 hours after birth. And they were first put to breast (67.78% of Santal and 55% of non-Santal babies) as the first feeding. They were also seen putting plain water, sweetened water and other liquids using spoon, katori and spoon etc. as the methods of feeding. Feeding was mostly by demand whenever the baby cried. Majority of Santal mothers (53.13%) did not give colostrum whereas 66% of non-Santal mothers fed with colostrum. The number of feeding required per day is more at the initial stage of the child, decreased throughout the first year. Non-Santal mothers exhibit better feeding practices than the Santal. This may be due to social customs and beliefs. There should be proper encouragement to the Santals to breast feed the baby. Mothers should not consider an alternative and authority should see that breast feeding practice is not eroded any way by socio-cultural development.

INTRODUCTION

The practice of breast feeding is almost universal in India. The nature has provided breast milk for proper development of infants. It is universally accepted that, for the first few months of life, breast milk is the best nutrition for the human infants. The health and nutritional status of millions of infants influence their subsequent growth and development throughout childhood is determined by the patterns of feeding during the infancy. Human milk is the most appropriate of all available milks for the human infants because it is uniquely adapted to his or her needs. Breast milk is the natural food for full term infants during the first months of life. And it is continued up to the age of 4 to 6 months. After six months supplementation is necessary for a child. Doctor always advises the mother to provide for breast milk shortly after birth of the child. Most infants start breast feeding shortly after birth and others within 4 to 6 hours.

Many pioneering works on breast feeding have been undertaken by various medical and social scientists (Jelliffe and Jelliffe, 1978; Mishra, 1993; Chndrasekharan, 1990; Satpathy, 1984; Khan, 1985; Devi, 1980; Datta, 1984; Katiyar, 1981;

Klra, 1982; Ganjoo, 1988; Behman, 1996; Carol, 1998 among others). Different kinds of studies have been undertaken on breast feeding in various populations of the world. Still there are many communities left untouched. The present work is an attempt to add some more knowledge about the breast feeding practices among Santals and non-Santals of Mayurbhanj district of Orissa. Santal is an endogamous tribe of Orissa. They are also seen in adjacent states of Bihar and West Bengal. The non-Santals are mixed communities from general castes of Mayurbhanj district.

MATERIALS AND METHODS

Data for the present study were collected from different villages namely, Kesarigadia, Kuidhia, Purunia, Dalki, Banagasal and Rairangpur areas of Mayurbhanj district of Orissa state. These villages are dominated by Santal tribal people. A total number of 190 lactating mothers were interviewed personally by administering an interview schedule. Out of which 100 were from non-Santals (general castes) and 90 were from Santal tribe. Children of these mothers were breast fed. They were from birth to 24 months of age. Random sampling method was used at the time of data collection. Due to non-availability of subjects, lack of cooperation from the mothers and associated problems, sample size in all the age group of children is not uniform (Table 1).

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Table 1: Age-sex distribution of Santal and Non-Santal children.

Age of the Infant/ Children in completed months	Santal			Non – Santal			Total
	Male	Female	Total	Male	Female	Total	
1 month	3	3	6	4	2	6	12
1 month 1 day to 2 month	4	4	8	3	6	9	17
2 month 1 day to 3 month	4	2	6	4	8	12	18
3 month 1 day to 4 month	3	3	6	4	4	8	14
4 month 1 day to 5 month	2	4	6	4	4	8	14
5 month 1 day to 6 month	2	2	4	5	3	8	12
6 month 1 day to 8 month	3	7	10	4	6	10	20
8 month 1 day to 12 month	11	7	18	10	14	24	42
12 month 1 day to 24 month	14	12	26	7	8	15	41
Total	46	44	90	45	55	100	190

OBSERVATIONS

During the first day after birth of a child, a first feeding 'Janam Ghunti' is given to neonates with the belief that it helps to prevent stomach disorder, dehydration and acts as a tonic. This is given before establishment of lactation of the mother. This practice is widespread in different Indian communities. Such other feedings are sweetened water with sugar, glucose, jaggery, honey, cow's milk etc. But the percentage of introduction of breast feeding as first feeding is more.

Table 2 shows the different types of first feeding given to the neonates. Breast feeding is found to be more (67.78%) among Santals and 55.0% among non-Santals) as the first feeding. 13.33% of Santal mothers and 18.0% of non-Santal mothers have given other liquids (Lactogen, Amul and other commercial milk) as the first feeding. A paste of red vermilion and Jaiphala (*Myrsitca fragrans* – Nutmeg) is given by Santal mothers as the first feeding. It is considered as the immunization against tetanus and also works as a good digestive. 12.22% of Santal mothers give plain water and 17% of non-Santals give

Table 2: Distribution of first-feeding practices.

Type of first feeding	Santal		Non-Santal	
	Freq- uency	%	Freq- uency	%
Plain water	11	12.22	2	2.00
Water with sugar/misri / glucose powder / honey	3	3.33	17	17.00
Diluted milk- cow/buffalo/goat	3	3.33	8	8.00
Breast milk of mother	61	67.78	55	55.00
Others	12	13.33	18	18.00
Total	90	99.99	100	100.00

sweetened water to the neonates. Very less percentage of non-Santal mothers (2.0%) give plain water. It is observed that Santal and non-Santal mothers of Mayurbhanj prefer breast feeding as the first feeding because they believe in natural food.

The common first-feeding methods are shown in Table 3. 5.56% of Santal mothers feed their babies first with samuka (a baby feeder) and 26.67% by using katori and spoon. But in case of non-Santal mothers the frequency of first feeding method is with samuka (5.0%) and 40.0% of mothers use katori and spoon. 67.78% of santal mothers and 55.0% of non-Santal mothers directly allow the neonates to suck their breasts. The frequency of breast feeding children is high in both the groups but percentage of Santal is higher (67.78%) than the non-Santal (55.0%).

Table 3: Distribution of common first-feeding methods.

Methods of first feeding to new-born	Santal		Non-Santal	
	Frequ- ency	%	Frequ- ency	%
Spoon	-	-	-	-
Samuka	5	5.56	5	5.00
Cotton swab	-	-	-	-
Katori and Spoon	25	26.67	40	40.00
Breast feeding	61	67.78	55	55.00
Total	90	100.00	100	100.00

Colostrums (thick, yellow milk) secreted during first few days after birth of a child is very rich with vitamin 'A' and an easily digestible protein having high concentration of antibodies. It protects the newborn against various bacterial and viral diseases, till the nature's provision of self manufacturing antibodies inside the baby's body mature to become functioning. However, there seems to be a deep rooted prejudice against

giving colostrums and many mothers do not put the baby to the breast for one or two days or even longer. 51.11% of Santal mothers and 66.0% of non-Santal mothers have fed the yellow breast milk (colostrums) to the newborn (Table 4). 53.33% of Santal mothers and 27.0% of non-Santal mothers have given the breast milk after discarding colostrums.

The time of introduction of first breast feeding varies from mothers to mother. The time ranges

Table 4: Use of colostrums – First yellow milk.

First breast milk given	Santal		Non-Santal	
	Freque- ncy	%	Freque- ncy	%
Yellow breast milk (with colostrum)	46	51.11	66	66.00
Discarded yellow milk (without colostrum)	48	53.33	27	27.00
Never	6	6.66	7	7.00
Total	90	100.00	100	100.00

from within six hours to third day after birth of the child. However, majority of Santal (37.18%) and non-Santal (48.0%) mothers have fed the first breast milk within six hours after birth of the child (Table 5). 20.0% of Santal and 24.0% of non-Santal mothers have fed the first breast milk within twelve hours. 35.55% of Santal and 21.0% of non-Santal mothers have started first breast feeding one day after the birth of the Child.

Reasons of delaying the feeding of the first breast milk were enquired from the mothers and they are mentioned in the Table 6. 40.48% of Santal and 27.96% of Santal mothers delayed to provide first breast milk due to their personal health problems (delay in lactation). But 34.52% of Santal and 27.78% of non-Santal mothers did not get any advice from their elders so they delayed in

Table 5: Time of introduction of first breast feeding to the new born.

Time gap between birth and first breast feeding	Santal		Non-Santal	
	Freque- ncy	%	Freque- ncy	%
First day within 6 hours	34	37.78	48	48.00
First day within 12 hours	18	20.00	24	24.00
Second day	18	20.00	13	13.00
Third day	10	11.11	7	7.00
After 3 rd day	4	4.44	1	1.00
Never	6	6.67	7	7.00
Total	90	100.00	100	100.00

feeding the child. 22.62% of Santal and 43.01% of non-Santal mothers did not delay much in breast feeding the child. The non-Santals are more conscious about breast feeding. A few numbers of mothers believe that early feeding is harmful for the baby. After fully relaxed from pain the

Table 6: Distribution of common first-feeding methods.

Reasons for delaying breast feeding	Santal		Non-Santal	
	Freque- ncy	%	Freque- ncy	%
Harmful and unnecessary	2	2.38	2	2.15
Advice of elders	29	34.52	25	26.88
Personal health problems	34	40.48	26	27.96
Not delay	19	22.62	40	43.01
Total	90	100.00	93	100.00

mother is able to feed her child. So feeding is delayed.

Breast feeding is given to the infant/child as per the convenience of the mother. In her day to day domestic work, sometimes mother feeds the child on specific scheduled time and sometimes on demand of the child. Mothers feed the child when he/she cries out indicating hunger. It is seen from Table 7 that 77.78% of Santal mothers have fed their child on demand, 3.33% of mothers on specific scheduled time which is very less and 6.67% of mothers did not follow any of these two categories rather feed their child in an unscheduled time. In case of non-Santals 52.0% and 29.0% of children were fed on demand and on scheduled time respectively. Only 12% of children were fed on unscheduled manner. The demanded feeding is found to be more among Santals (77.78%) than the non-Santals (52.0%) as the child always stays with mother at work. And whenever the child cries mother feeds him/her thinking that child is hungry.

The number of feeding required per day is

Table 7: Distribution of type of breast feeding practices followed by mothers.

Type of feeding Practices	Santal		Non-Santal	
	Freque- ncy	%	Freque- ncy	%
On Demand	70	77.78	52	52.00
On Schedule	3	3.33	29	29.00
Neither of the above	6	6.67	12	12.00
Never	11	12.22	7	7.00
Total	90	100.00	100	100.00

important to the child to meet his/her hunger. At the initial stage of the child it is more than the later. The number of feeding required per day decreases throughout the first year. By the first year of age most infants are satisfied with three meals /day. The intervals between feeding differ considerably among infants but in general, it ranges from 3-5 hours during the first year of the life. Table.8 shows the number of feeding given during day time. Average frequency of feeding varies from 6 to 10 times in different age groups among Santal children and that of non-Santal children, it is 6.36 to 10 times. The frequency of feeding is more within one month of child and less when the child reaches one year. The highest average frequency is found to be more (10) in

age groups 4, 5 and 6-8 among Santal children and that of the Santal children and that of the non-Santal is 5 months. The lower frequency is found in the age group of 12 to 24 months .

Table 9 shows the frequency of number of feeding given during night time according to the age of the child. The frequency varies from 2.8 to 4.4 times per night in age group of 8-12 months and less than one month respectively among Santal children. Whereas, it is 4.08 to 6 times among non-Santals. The frequency of feeding is found to be more among non-Santal children than those of the Santals in all age groups during both day and night.

The breast feeding practices among the Santals and non-Santals show that non-Santal

Table 8: Distribution of frequency of breast-feeding during daytime according to the age of child.

Age of Child(in month)	Frequency (No. of times)	Santal Mother			Non-Santal Mother		
		No. of child	Mean	S.D.	No. of child	Mean	S.D.
1	0 - 4	-	9.20	1.79	-	9.33	1.63
	4 - 8	1			1		
	8 - 12	4			5		
2	0 - 4	-	8.86	1.95	-	9.00	1.85
	4 - 8	2			2		
	8 - 12	5			5		
3	0 - 4	-	9.33	1.63	-	9.00	1.30
	4 - 8	1			3		
	8 - 12	5			9		
4	0 - 4	-	10.00	-	-	8.50	2.07
	4 - 8	-			3		
	8 - 12	6			5		
5	0 - 4	-	10.00	-	-	10.00	-
	4 - 8	-			-		
	8 - 12	5			6		
6	0 - 4	-	8.00	2.31	-	8.85	1.95
	4 - 8	2			2		
	8 - 12	2			5		
6-8	0 - 4	-	10.00	-	-	9.11	1.76
	4 - 8	-			2		
	8 - 12	9			7		
8-12	0 - 4	4	6.00	3.02	-	6.36	1.17
	4 - 8	7			20		
	8 - 12	4			2		
12-24	0 - 4	11	4.00	2.04	2	6.92	2.90
	4 - 8	11			6		
	8 - 12	-			5		

mothers are much advanced and superior in feeding the babies to those of the Santal mothers. This may be due to that the Santals have lack of sufficient knowledge about the feeding and also due to certain social customs and beliefs. Sympathetic health worker can help to overcome the prejudice by explaining the mothers and their families about the protective value of colostrum and encouraging them to feed the baby. The

mothers should not consider an alternative to breast feeding. Exclusive breast feeding can save many lives by preventing malnutrition and reducing risks of infections during early infancy. No child should be denied the benefit of exclusive breast feeding due to lack of information to the mother. We have to take care that this practice is not eroded in any way by socio-cultural development.

Table 9: Distribution of frequency of breast-feeding during night time according to the age of child.

Age of Child (in month)	Frequency (No. of times)	Santal Mother.			Non-Santal Mother		
		No. of child	Mean	S.D.	No. of child	Mean	S.D.
1	0 – 4	2	4.40	2.19	-	6.00	-
	4 – 8	3			6		
2	0 – 4	4	3.71	2.13	1	5.5	1.41
	4 – 8	3			7		
3	0 – 4	3	4.00	2.19	-	6.00	-
	4 – 8	3			12		
4	0 – 4	1	5.33	1.63	3	4.5	2.07
	4 – 8	5			5		
5	0 – 4	6	2.00	-	-	6.00	-
	4 – 8	-			6		
6	0 – 4	1	5.00	2.00	-	6.00	-
	4 – 8	3			7		
6-8	0 – 4	10	2.00	-	1	5.55	1.33
	4 – 8	-			8		
8-12	0 – 4	12	2.80	1.65	11	4.08	2.04
	4 – 8	3			12		
12-24	0 – 4	18	2.72	1.57	7	3.66	2.05
	4 – 8	4			5		

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