



Socio Demographic Factors of prolonged Breast Feeding beyond two years of age

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Abstract

Background: Knowing the importance of breast feeding for children, it is important to research and understand the various factors that influence this practice in our changing and urbanising society.

Design: Prospective cross-sectional study

Aim: To study the socio-demographic factors responsible for prolonged breastfeeding of children beyond 2years of age.

Method: A prospective cross-sectional study was conducted in the outpatient department of Paediatrics, ASCOMS and Hospital, for a period of 12 months (July 2021 to June 2022)

All the mothers accompanying their sick children above the age of 3years were enrolled in the study. A predesigned questionnaire was used to assess the duration of breastfeeding along with the sociodemographic

profile. This included month of breastfeeding, gender of the child, type and place of delivery, age of mother when married, age of mother during interview, mother's education (in years), total no of children, place of residence, annual household income, mother-in-law lives with the family. All the children were treated for their illnesses and proper health education was imparted.

Results: The study included 645 mothers who were given the questionnaire to answer about their breastfeeding practices. 161 (25%) of mothers breastfed their children beyond 2 years of age. 77.6% of mothers who breastfed beyond the age of 2 years were below 20 years of age when they got married.

64% were uneducated.55.9% of the mothers were above the age of 25 at the time of interview. The socioeconomic factors responsible for this included annual household income of less than ₹1,00,000 with 70.8% of the mothers

belonging to this group. 70.2% resided in rural areas.

With 61.5% living with their mothers in law. 60.9% of the children that receive extended breast feedings were of the male gender. 69.6% were born via normal vaginal delivery irrespective of their gender. Prolonged breast feeding is seen more in children born at home (39.8%) or in government setups (36%). Small families (57.8%) with 1 to 2 children were found to be breast feed for a longer duration of time.

Conclusion: Male gender baby, normal vaginal delivery, home birth, young age and poor education status of mothers, rural residence, low socioeconomic background, Mother-in-laws are also found to be some of the important factors leading to prolonged breastfeeding in children beyond 2 years of age.

Keywords: Prolonged breast feeding, extended breast-feeding, Socio-economic factors. Children above 2 years of age.

Introduction

Breast milk is the best and the only source of nutrition required for the new born children up to 6 months of age as recommended by WHO. Breastfeeding has numerous benefits both for infants and their mothers. It provides both short- and long-term effects in protecting infants from various diseases. (1) The cost of breastfeeding is nothing as compared to formula feeding and thus this promotes mothers to exclusively breastfeed their children. (2) Exclusive breastfeeding is essential for normal growth of infants up to 6 months of age, and should be prolonged until the age of 2 years, provided that supplementary nutrition is provided after 6 months of age. (3)

In developed nations the trend of breast feeding is rarely seen going beyond 2 years of age but in developing nations many mothers are observed breastfeeding their children way beyond 2 years of age. Data from national

surveys show that about 65% of children in low-income countries, 55% in lower-middle-income, and about 18% in upper-middle-income continue breastfeeding up to 20 to 23 months (4).

Breast feeding for a long duration is termed as extended or prolonged breastfeeding. Prolonged breastfeeding can be beneficial in providing extra nutrition to the child as its composition keeps changing as the child gets older. Milk contains higher energy and fat content after a year of breastfeeding. (5) It also helps in birth spacing and increasing bond between the mother and child. According to the Academy of Breastfeeding Medicine (ABM), a longer duration of breastfeeding is associated with maternal disease reduction and protection. It reduces the risk of breast cancer, ovarian cancer, diabetes, hypertension, obesity, and heart attack.

Breast feeding is a universal practice in India. Today, 55% of children under six months are exclusively breastfed in the country. While this is more than the world average, progress must continue so that all children are able to thrive. The average duration of breast feeding in the 90's was 24 months.

In India, mothers commonly breastfed their children until 2 to 3 years of age. Cow's milk is also given in combination with breast milk though use of formula has been on the rise as well. (6) There are many factors which are responsible for the duration of breast feed received by a child. These include- their gender (7), their birth order (7), the target family size (7), place of delivery (8), education status and age of mothers (8), socioeconomic condition of the family (8), place of residence (9) and so on.

Knowing the importance of breast feeding for children, it is important to research and understand the various factors that influence this practice in our changing and urbanising society.

Aim

To study the socio-demographic factors responsible for prolonged breastfeeding of children beyond 2years of age.

Material and methods

A prospective cross-sectional study was conducted in the outpatient department of Paediatrics, ASCOMS and Hospital, for a period of 12 months (July 2021 to June 2022)

All the mothers accompanying their sick children above the age of 3years were enrolled in the study. The study was conducted after getting approval from the Institute of Independent Ethical Committee wide reference number ASCOMS/IEC/RP&T/2021/440 dated 26 JUNE 20221. An informed consent was obtained from the parents of all children who enrolled for the study.

A total of 645 mothers participated. A predesigned questionnaire was used to assess the duration of breastfeeding along with the sociodemographic profile. This included months of breastfeeding, gender of the child, type and place of delivery, age of mother when married, age of mother during interview, mother’s education (in years), total number of children, place of residence, annual household income, if mother-in-law lives with the family.

All the children were treated for their illnesses and proper health education was imparted.

Inclusion criteria- mothers of children above the age of 3years

Exclusion criteria- mothers of children below 3years of age, children not accompanied with mothers.

Results

The study included 645 mothers who were given the questionnaire to answer about their breast-feeding practices. Out of these, only 25% (161) of mothers breastfed their children beyond 2years of age.

Table 1: Months of breastfeeding done by all mothers

Breast feeding duration (In months)	No. Of mothers
0-12 months	223
12-24 months	261
More than 24 months	161
Total	645

On further investigating the forms of mothers who breast fed for more than 24 months, It was found that the major maternal socio demographic factors responsible for it were less age of mother. 77.6% of mothers who breastfed beyond the age of 2 years were below 20 years of age when they got married. 64% were uneducated. This phenomenon was recognised more in mothers who are older now. 55.9% of the mothers were above the age of 25 at the time of interview. The socioeconomic factors responsible for this included annual household income of less than ₹1,00,000 with 70.8% of the mothers belonging to this group. 70.2% resided in rural areas. With 61.5% living with their mothers in law.

60.9% of the children that receive extended breast feedings were of the male gender. 69.6% were born via normal vaginal delivery irrespective of their gender. Prolonged breastfeeding is seen more in children born at home (39.8%) or in government setups (36%).

Small families (57.8%) with 1 to 2 children were found to be breast fed for a longer duration of time.

Table 2: socio-demographic factors of mothers who breastfed beyond 2 years.

Factors	N (%)
Gender of baby	
Female	63 (39.1%)
Male	98 (60.9%)

Mode of delivery	
Normal vaginal delivery	112 (69.6%)
Cesarean section	49 (30.4%)
Place of delivery	
Home	64 (39.8%)
Government hospital	58 (36%)
Private hospital/nursing home	39 (24.2%)
Age of mother at time of marriage	
Less than 18 years	54 (33.5%)
18 - 20 years	71 (44.1%)
21-25 years	27 (16.8%)
More than 25 years	9 (5.6%)
Age of mother at time of interview	
15-20 years	20 (12.4%)
21-25 years	51 (31.7%)
26-30 years	68 (42.2%)
More than 30 years	22 (13.7%)
Mothers education in years	
None	64 (39.8%)
1-5 years	32 (19.9%)
6-11 years	40 (24.8%)
12 or more	25 (15.5%)
Total no. Of children	
1-2	93 (57.8%)
3 or more	68 (42.2%)
Place of residence	

Urban	48 (29.8%)
Rural	113 (70.2%)
Annual household income	
Less than ₹50,000	53 (32.9%)
₹50,000 - ₹1,00,000	61 (37.9%)
More than ₹1,00,000	47 (29.2%)
Mother-in-law lives in household	
Same household	99 (61.5%)
Different household	62 (38.5%)

Discussion

Throughout various researches it is a common understanding that there are short- and long-term benefits of breastfeeding to both mother and infants. Which encompass prevention and protection against acute health problems and long-term health protection. It also helps in maintaining their psycho logical relationship and even helps in savings health care costs. (11)

Extended breastfeeding has its own set of advantages and disadvantages. Countries with comparatively high extended breast feeding show poor child mortality rates and population growth—typically, those in Africa and Asia. (12) Through our study we were able to identify a few sociodemographic factors responsible for prolonged breastfeeding. Various factors like wealth of the family, education status of the mothers was found to be consistent with the previous study by Grummer-Strawn L.M. (1996) (13). Decrease in months of breastfeeding with comparison with increasing mothers age were found to be directly related as compared to the conflicting views in different studies by Bautista 1997, Nath & Goswami 1997 and Giashuddin& Kabir 2004; Hajian-Tilaki 2005. Male children are breastfeeding for longer durations of time thus confirming the gender bias

stated by Nath & Goswami 1997; Khanna et al. 2003; Borooah 2004. Children born in home via normal vaginal delivery were also breastfeed for longer duration of time. A religious bias was also discovered as Hindus were observed to breastfeed for more months due to religious beliefs as compared to the other religions.

A rural-urban discrepancy was also observed as the lack of awareness and education may be a cause of prolonged breastfeeding. The influence of mother's-in-laws in the household over breastfeeding was also tested which demonstrated as an factor for extended breastfeeding. We could clearly see the wide range of difference in factors affecting prolonged breastfeeding.

This discussion suggests that breastfeeding promotion programmes in India need to work harder in reaching the rural, young and less educated mothers. Also, healthcare workers like doctors, nurses, midwives and dias should be given proper knowledge about the topic so they can further impart the same.

Conclusion

Male gender baby, normal vaginal delivery, home birth, young age and poor education status of mothers, rural residence, low socioeconomic background and mothers-in-law are found to be some important factors leading to prolonged breastfeeding beyond 2 years of age in children.

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