

Infant Feeding and Breastfeeding Practices Among Tribal Groups of India

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ABSTRACT

Infant feeding and Breast feeding is universal and it influences the life of maternal and child health. It also Influences the demographic determinants. Tribal groups reside in far-flung areas in Hills, Forest, and Desert and in remote villages in India, wherein modern health facilities and scientific awareness is less in general. Therefore to study the Infant and Breast feeding practices among tribal groups is significant to strengthen the rural health system and health education with reference to infant feeding practices.

The main objective of this review-cum research work is to systematize the scattered and important data on Infant and breast feeding practices among tribal groups of India. To know their myths, belief and misconception, good and bad practices to bring it documented for researchers, social scientists, community medical practitioners.

Primary data on tribes of Central India was collected using pre-structured interview schedule. Personal interviews of lactating women followed by focus group discussion was made to verify the quality of the data. Maximum secondary data is scrutinized and systematized from research papers and reports to fulfill the objective.

Generally the new-born are breast-fed for the first time only 24 to 48 hours after birth. In Tribal areas breast feeding is initiated within 6-12 hours. Study shows, 47.9% Tribal mothers breast-fed their children 5-6 times per day followed by 25.5%, 7-8 times during day while 43.1%, 1-2 times and 42.7%, 3-4 times during night. Among the Tribal people various pre-lacteal foods given to infants it can be seen from various studies. The average age of child at starting liquid come out to be 7.0 months. Among the Tribal children the average age of child at starting semisolids/ solids came out to be 8.1 months. The data shows that rural/ tribal women generally are unaware of the antibody and contraceptive properties of breast milk. Working status of mother does not influence the frequency and duration of breast-feeding among Tribes because they always take their children to the work place.

Key Words: *Infant feeding, Breast feeding, Tribal, Tribes, Rural, India.*

INTRODUCTION

The declaration on the protection promotion and support of Breast-feeding drawn up the WHO (2005) recognized the importance of breast-feeding on Maternal and Child Health. It appeals to government to develop an environment that is conducive to the achievement of desirable breast-feeding practices. The declaration is particularly significant for developing countries where high level of neonatal and infant mortality exists. A primary cause of Infant mortality is diarrhea that is often the result of unsound feeding practices such as late initiation of breast-feeding, discrediting colostrums, administration of Prelacteal feeds and early introduction of supplements including the food. Huffman, and Combest (1990), Chezem et.al (2006) Kenneth et al (1989) Madhu et al (2009) estimates that 1.3 million deaths could be prevented each year if babies were breast-fed exclusively for the first four to six months. Followed by appropriate complementary feeding in addition to breastfeeding for at least first year of life (Anand 1994).

A variety of customs and practices are found in traditional and Tribal societies for promotion and secretion of mother-milk (Lakshmi and Makrand 2001). In context of social and medical scene in Rural and Tribal areas breastfeeding is still the most important single factor in child survival. The available information on social, cultural and environmental determinants of breast feeding among Tribals is neither enough nor satisfactory. The policy makers and planners of health and related fields are often handicapped with inadequate information or sometime no information on health aspects to Tribals in India, particularly in the area of maternal and child health. Since the Ministry of Health and Family Welfare have been thinking of strengthening health services in Tribal areas, National Institute of Health and Family Welfare, Report 1986.

Considering the importance of the subject however, it is surprising that the study of breast-feeding in India has remained neglected and no major attempts have been made to document the breast-feeding practices in different settings, the influences the culture, ecology and modernization on breast practices or linkages between fertility and lactation (Khan 1990). Some significant efforts were made by World Health Organisation WHO (1990), and Indian Council of Medical Research ICMR (1977), with some supplements by National Family Health Surveys I, II and III Phases. This article makes an attempt to review some studies of Tribal people regarding breast-feeding and Infant Feeding Practices.

Prevalence of Breast-Feeding:

In India, although breast-feeding is still almost universal, particularly in Rural and Tribal areas. Pandey (2001) Khan (1990) Sharma and Chakravarty (2005) and study conducted by Indian Council of Medical Research (1977), National Institute of Health and Family Welfare (1986), data reveals that prevalence of breast-feeding is still universal both in Rural and Tribal area and urban areas of India.

Initiation of Breast-Feeding:

It is highly desirable that the Infant should begin to be breast-fed as soon as possible after birth, preferably within six hours of birth. The unique nutrition and antibody properties of colostrums and the disadvantages to those infants not fed with colostrums are now well recognized and documented (ICMR 1977).

Generally the new-born are breast-fed for the first time only 24 to 48 hours after birth. In Tribal areas breast feeding is initiated within 6-12 hours in Madhya Pradesh (Pandey 2001), 24 to 70 hours among Hill Korwas

Chhattisgarh (Sharma, and Chakravarty 2005). Studies reported on early initiation in rural Himachal Pradesh, (Bhahal 1979), and in Gujarat (Khan 1990).

Duration of Breast Feeding:

Generally, it is considered desirable for infants to be exclusively breast-fed for at least the first-months after birth. Among lower socio-economics groups, prolonging the duration of “exclusive” breast-feeding up to six months may be advantageous in view of the problems of poor environmental sanitation and lack of safe water. National Institute of Health and Family Welfare conducted a study in 1986 data reveal in 30.8 percent cases mothers breast fed the babies for 19-24 months. However, 40.3 percent continued breast-feeding even after two years. This is a fairly high percentage of Tribal mothers which jointly depicts the proportion of sample population which breast fed the babies even after 2 years and even up to the time when the mother becomes pregnant once again. This establishes the fact that the Tribals are maintainers of the sound practices of breast feeding for long duration. Such trend was obvious in Santhals and Kandhas of Orissa and Bhils of Rajasthan with 58.0%, 72.1% and 53.0% mothers, breast-feeding beyond 24 months respectively. Sharma and Chakravarty (2005) reported the same duration and practices among Tribals of Rajgarh, Jashpur, Surguja and Bilaspur districts of Chhattisgarh and by Bhardwaj et al.(1991) in Uttar Pradesh.

Table 1. Average period of Breast Feeding Among Tribals

S. No	Name of the State	Tribal Group	Average period in (months)
1	Andhra Pradesh	Koyas and Lambadis	25.6 months
2.	Madhya Pradesh	Gonds	25.5. months
3.	Manipur	Nagas and Kukis	22.2. months
4.	Meghalaya	Garos and Khasis	18.2. months
5.	Orissa	Kandhs, Santhals	26.6. months
6	Rajasthan	Bhils	27.9 months

Source- NDC. NIHFV, New Delhi

Frequency of Breast-Feeding:

Frequency of breast-feeding plays a significant role in increasing the period of lactational amenorrhea. It has been observed that the number of suckling episodes is a determinant of plasma protection. WHO (2005).

Studies show, 47.9% Tribal mothers breast-fed their children 5-6 times per day followed by 25.5%, 7-8 times during day while 43.1%, 1-2 times and 42.7%, 3-4 times during night. The frequency of breast-feeding during night was relatively less than the frequency during day time.

Total frequency was computed about 53.7%, 5-8 times, while 29.5% fed 9-12 times. Sharma (2005) notified that Hill Korwas (A Particular Vulnerable Tribal Group of Chhattisgarh) mothers always keep their babies with her and the breast-fed whenever the child demands. There is no baby food other than mother's milk. There nursing would be prolonged the balance between population and resources probability was also under conscious biological control because extended lactation and nutritional deficiency can lower fertility by causing hormonal changes in a women's reproductive cycle. In India 575 communities are notified as scheduled Tribes by the President of India in Indian Constitution and out of these 75 Tribal groups have been identified as Particularly

Vulnerable Tribal groups on the basis of low literacy rate, pre-agriculture technology and important one is declining or stagnant population. Infant feeding and breast-feeding practices may be one of the reason for stagnant population. Research and in-depth studies need to carry out so far the development of these Tribal groups can be addressed. A summary of pre-lacteal time is given below, in Table 2.

Among the Tribal people various pre-lacteal foods given to infant it can be seen from review of studies, the pre-lacteal on food includes beverages such as boiled water, tea, honey, sugar, jaggery diluted animal milk, ghee, castor oil and some herbal preparations are also used as pre- lactation food for infant.

Table 2. Pre-lacteal Time (Hours) in different tribal Group in Percentage and State wise distribution

S.No	Tribal Area/States	<3 Hours	4-6 Hours	7-12 Hours	13-24 Hours	25-48 Hours	49-72 Hours
1	Andhra Pradesh	----	74.1	13.8	6.2	4	----
2	Madhya Pradesh	----	----	----	8.9	1.3	85.7
3	Manipur	----	23.0	52.6	8.3	8.3	----
4	Meghalaya	20.1	33.7	4.8	33.7	----	----
5	Orissa	25.1	17.1	31.8	12.2	11.8	----
6	Rajasthan	---	----	----	----	58.6	38.5
7	Chhattisgarh	38.2	21.5	12.5	10.5	15.1	----

Source, NDC, NIHFWS, New Delhi

Reasons for feeding the colostrums or not Feeding:

Among the Tribal people 72 percent did not have any particular reason except that it was customary and an age-old practice, while about 20 percent opined that the colostrums is good for baby health. Among the women who did not favour feeding colostrums 53 percent felt that colostrums is not good for baby's stomach and it is hard and dirty milk and about 26 percent followed the practice of discarding the colostrums because it was customary. About 10 percent also felt that colostrums may be related to the eye. Elders' advice not to feed the colostrums was a reason in about 4 percent women.

Age of Child at Starting Liquids:

The average age of child at starting liquid come out to be 7.0 months. 17.3 percents subject started to have started liquids at the age of twelve months, while 17.2, 17.0 and 14 percent stated to have started the liquids to their previous child at the age of 5 months, 6 months and 4 months respectively. Notably all women starting given liquids to their children within the age of one year. Sharma (2007) reported the 6 months of age of child at starting liquids among Tribes of Central India.

Age of Child (in months) at starting semisolids / solids:

The average age of children at which they are introduced to solid supplemental food. It may be observed that mean age varies considerably across the country (NFHS- I, II, III, IIPS)

Table 3. National Goal, Recommendations and Achievement Regarding Breast-Feeding Practices in India.

S. No	Goals	Recommendation	Achievement
1.	Initiation of Breastfeeding	One hours of Birth	25%
2.	Prelacteal Feeding	Should not given	43%
3.	Exclusive Breastfeeding	Six Months	46%
4	Bottle Feeding	Should not Feed	86%
5	Timely Complementary (age 6-8 months)	_____	53%
6	Feed Breast Milk or Milk products and feed a minimum number of time from a minimum number of Food, groups (age 6-23 months)	_____	21%

Source- NFHS-3 India, IIPS, 2005-2006

Among the Tribal children the average age of child at starting semisolids/ solids came out to be 8.1 months. Of all the states 17.9, 16.4, 14.5, 11.5, 11.2 and 10.3 percent have starting semisolids and solids at the age of 6 months, 12 months, 8 months, 7 months, 5 months, 10 months and 9 months respectively.

Feeding Practices when Child is having Health Problems:

More than 80 percent mothers preferred to feed their babies with breast milk while had health problems rest of children followed with chapattis, rice, fruits etc. Some of women have inclination to feed or with breast milk and cow milk both, or type of milk in combination with other items i.e. fruits rice etc.

Food Items to be eaten during pregnancy and Lactation:

Tribal women were not able to answer this question. They felt that a pregnant women may take anything and there should be no restrictions on food but in Central India Sharma (2005) reported that Tribal people are avoiding certain leafy vegetables and non-vegetable foods during pregnancy and lactation due to customary taboos and misconceptions. Tribal who are residing near by main roads and township they are aware to take special food during pregnancy and and lactation.

Conclusions:

Review of studies, reveals that the practice of breast-feeding is almost universal in Indian and among Tribal/Rural people. However many of the societies, breast-feeding and weaning practices being followed are not conducive to the proper growth of the child. The study shows that initiation of breast-feeding is generally delayed and that colostrums is discarded. The mode of pre- lection feeding is generally found among Tribes. Similarly, exclusive breast-feeding often contrives for 6-9 months after delivery often resulting in malnutrition of the children owing to inadequate feeding. Generally breastfeeding is prolonged and on average is extended up to 24 months. Children are normally fed on demand and night feeding is common. The data shows that rural/ tribal women generally are unaware of the antibody and contraceptive properties of breast milk. Working status

of mother does not influence the frequency and duration of breast-feeding among Tribals because they always take their children to the work place.

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