



A CROSS SECTIONAL STUDY ON THE WEANING PRACTICES AMONG WORKING WOMEN

Abida Kousar

PIMS Hospital Islamabad

Abstract:

Objectives: The purpose of this study was to evaluate weaning practices among working women.

Material and Methods: The design of this study was a cross sectional study. this study was conducted at PIMS Hospital Islamabad and the duration of this study was from 01-01-2014 to 01-01-2015. 119 working women who step out of their homes for a job, for approximate 40 hours a week (standard working hours worldwide) were included in our study. Data was collected using a questionnaire with variables like age, education, working hours of mother, type of job, weaning practices, family systems and the condition regarding weaning practices at work place. Approximately 10 minutes were required to complete the questionnaire. Data was analyzed on SPSS version 17.0. All categorical variables were presented as percentage and frequency; and all numerical variables were presented as mean and standard deviation. T test was employed to explore the frequency and determinants of weaning care at PIMS Hospital Islamabad.

Results: The results show that the majority of mothers researched were well educated (66% had done BSc), doctors (50%), with high earning (54% earning above Rs. 60,000 per month) and worked 8-12 hours a day (59%). Majority (92%) of them started breast feeding Right after birth. Another majority (52%) started weaning at 6 months although a large number (44%) did start to wean their child at 4 months. Most of them used suitable food substitutes (77% used homemade food) and continued breast milk (61%) during weaning. An important finding however is that a considerable number (40%) of women stopped breastfeeding before the age of 6 months and another majority (69%) did not wean their child themselves. A number of women (63%) said they had issues with timely feeding of their baby during working hours and another (68%) stated weaning at work affected their jobs. Majority (77%) of women supported the claim that changes should be made at their workplace to support weaning practice.

Conclusion: The study found out that majority of women working in health sector although aware of normal weaning guidelines set by WHO, started the practice earlier than 6 months. The study elicits the need for hygienic and safe work-place day-care centers and an encouraging work place which would allow working mothers to feed and wean their children with ease.

Keywords: Weaning, Practices, Working, Women

Corresponding author:

Abida Kousar,

PIMS Hospital Islamabad

QR code



Please cite this article in press Abida Kousar, A Cross Sectional Study On The Weaning Practices Among Working Women., Indo Am. J. P. Sci, 2015;2(6).

INTRODUCTION:

Weaning is basically gradual supplementation of breast milk with other suitable foods rich in nutrients. It has a great impact on health of a child. Breast feeding is recommended up to 4 to 6 months of age of a child according to the guidelines of WHO. ^[1] Same recommendations are given by American Academy of Pediatrics. After 6 months' mothers add food rich in nutrients for proper growth of child. The term "to wean" means "to accustom" and it describes the process by, which the baby is gradually introduced to foods other than milk and is recommended between the 4th-6th months of life ^[2] Proper weaning also plays an important role in meeting the challenges of developmental milestones at appropriate time. Thus, it is essential that weaning is appropriately timed, nutritionally adequate, hygienically prepared and culturally acceptable. Various researches have been conducted to assess breast feeding and weaning practices in the society. In an international study carried out in Nigeria, it was seen that educated and working women breast fed for shorter period of time and tend to wean earlier; because of their hectic routines and unsupportive working environments. ^[3] Another study in Lahore (2006) showed that recommended weaning age was followed in 84% infants while delayed weaning was seen in 16% infants. ^[4] During the whole process of breast feeding and weaning, the mother plays the most important role in the infant's life. A local study in Islamabad revealed that mother's education has a great role in fulfilling proper nutritional requirement of infants during weaning. ^[5] Weaning is not only about timing of food but also counts the quality of food. The United Kingdom's NHS recommends withholding foods including those that contain wheat gluten, nuts, peanuts, seeds, liver, eggs, fish, shell fish, cow's milk and soft cheese until a baby is 6 months old as they may cause food allergies or make the baby ill. ^[6] Proper feeding practices will also help in achieving development goals which call for eradicating extreme poverty, hunger and reducing child mortality. ^[7]

MATERIAL AND METHODS:

A cross-sectional descriptive study was conducted at PIMS Hospital Islamabad and the duration of this study was from 01-01-2014 to 01-01-2015. A sample of 119 working women was recruited from PIMS Hospital Islamabad. The procedure of study was explained to the participants and informed consent was taken. The nature and purpose of study was also

explained to the participants. The participants were assured regarding the confidentiality of information. Data was collected using a questionnaire with variables like age, education of mother, working hours of mother, type of job, weaning practices, family systems and the condition regarding weaning practices at work place. Approximately 10 minutes were required to complete the questionnaire. Data was analyzed on SPSS version 17.0. All categorical variables were presented as percentage and frequency; and all numerical variables were presented as mean and standard deviation. T test was employed to explore the frequency and determinants of weaning care at PIMS Hospital Islamabad. Informed consent was taken from every mother prior to study, confidentiality of information was ensured.

RESULTS:

Among the 119 working mothers included 60(50%) doctors, 36(30%) nurses/paramedical staff and 23(19%) other staff. 31(26%) worked less than 8 hours a day, 70(59%) worked 8 to 12 hours, 6(5%) worked 12 to 16 hours and 12(10%) worked more than 16 hours in a day. Assessment of educational status of mothers showed that 13(11%) were Primary passed, 16(13%) were high school graduates, 11(9%) had done their intermediates, 25(21%) had done bachelors, and 54(45%) had done their post-graduation. Regarding monthly household income 13(11%) earned <Rs. 30,000, 18(15%) earned Rs. 30,000 – 40,000, 30(25%) earned Rs.40,000 – 60,000 and 61(54%) earned >Rs.60,000 (Table.1). Inquiry into the reason for having a job showed that 9(8%) of women were sole earners in their family, 48(40%) did it to support their husband financially and 62(52%) were doing it for their personal interest. 48(40%) of them lived in a joint family system while the other 71(60%) lived as a nuclear family. Comparison of parity of the women showed 20(17%) had had one child, 54(45%) had 2 children, 24(20%) had 3 children, 18(15%) had 4 children and 3(3%) had more than 4 children. The mean number of children was 2.37, the median and mode were both 2 children while the range was 7. Out of the 119 women surveyed, 74(64%) had the availability of a day care center at work while 43(36%) did not have this facility. 102(86%) left their babies at home during work and 17(14%) left them at work place day care centers. 87(73%) of these 119 women felt the work place day care center was not safe and healthy for their child

Table No: 1 Socio-Demographic Characteristics of Respondents

Variables n= 119	Frequency	Percent
Working Hours		
8 – 12 hours		
12 – 16 hours		
Educational status of mothers		
Primary		
Intermediate		
Bachelors		
Post-graduation		
Parity		
3		
4 - 8		
Combined monthly household income		
<Rs.10,000	10	8.4
Rs.10,000-20,000	18	15.1
Rs.20,000-50,000	30	25.2
>Rs.50,000	61	51.3
Availability of day care		
Yes		64.0
No		36.0

Table No: 2 Weaning Practices of Respondents

Variables	Frequency	Percent
Quality of day-care center		
Daycare is safe and healthy	32	26.9
Daycare is not safe and healthy	87	73.1
Breastfeeding ease at work		
Could breastfeed easily at work	11	9.2
Could not breastfeed easily at work	108	90.8
Age of baby at cessation of breastfeeding		
4 -6 months	48	40.4
8 months	9	7.6
9 - 12 months	62	52.0
Feeding of baby during working hours		
Baby is fed at proper times during working hours	75	63.0
Baby is not fed at proper times during working hours	44	37.0
Reason for weaning at said age		
No time for BF due to job	28	23.5
It was the right time	85	71.4
Influenced by other source	6	5.0
Person responsible for weaning		
Mother	37	31.1
Care-taker	26	21.8
Someone else	56	47.1
Child's state of health		
Happy and healthy	57	47.9
Irritated and lonely	52	43.7
Gets sick often	10	8.4

The data shows that 89(75%) of the 119 women were given a maternity leave while 30(25%) were not. It was observed that 108(91%) of them stated they could not easily breastfeed at work and 11(9%) said they could. From the 119 women surveyed, 62(52%) said they were forced by their job to stop breastfeeding and 57(48%) negated this statement. Out of these women 109(92%) stated breastfeeding was started right after birth and the other 10(8%) started feeding the baby later on. The data shows that 31(26%) mothers stopped breastfeeding the baby at 4 months of age, 17(14%) at 6 months, 9(8%) at 8 months, 20(17%) at 12 months and 42(35%) breastfed the baby for more than a year. 91(76%) of these women used formula milk along with breast milk and 28(24%) fed the baby solely on breast milk. 75(63%) claimed the baby was not fed at proper times during working hours while 44(37%) said the baby was fed timely. Regarding the age of baby at the time of onset of weaning 52(44%) were 4 months of age, 62(52%) were 6 months, 3(3%) were 8 months and 2(2%) were older than 8 months. When asked why the mothers chose to wean at their respective times 28(24%) said they had no time to breast feed due to their jobs, 85(71%) said it was the preferred time to start weaning and 6(5%) said they were influenced by someone to do so. The results show that 73(61%) of mothers continued breast milk during weaning while 46(39%) did not. In 37(31%) of the cases the mother carried out the practice of weaning herself, in 26(22%) cases a caretaker was assigned the task and in 56(47%) of cases someone else was involved in weaning the baby. 92(77%) of the 119 mothers used homemade food during weaning whereas 27(23%) used packaged products. 100(84%) women said their workplace was not supportive for weaning and only 19(16%) reported otherwise. 81(68%) stated weaning at work affected their job while only 38(32%) said their job wasn't affected. Out of 119, 71(60%) women said their job affected their relationship with their baby. When inquired about the health of their babies, 57(48%) women stated their baby was happy and healthy, 52(44%) stated their baby was mostly irritated and felt lonely and 10(8%) said their child gets sick very often due to weaning at workplace. Of the 119 women surveyed, 92(77%) believed changes should be made at work place to support weaning.

DISCUSSION:

Personal breastfeeding and weaning experiences of healthcare professionals play a major role in influencing their attitudes and expertise regarding counseling and managing breastfeeding and weaning issues in patients. The study was done with the objective of assessing the weaning practices in

working women in various health related sections like doctors (50%), nurses (30) and paramedical staff (19%). To minimize the recall bias, it was ascertained that all the participants had to be below 40 years of age with at least one child under the age of 5 years. It was observed from our research that 92% of women started breastfeeding right after birth and other 8% started later on. 26% stopped breastfeeding their baby at 4 months of age, 14% at 6 months, 8% at 8 months, 17% at 12 months and 35% breastfed the baby for more than a year. The women who practiced early weaning had professional and job-related restrictions. So, it can be anticipated that inadequate attention was paid towards providing facilities and proper environment that may support a working mother to breastfeed her child. Different studies reported in literature showed findings similar to our analysis. Extended working hours (59% working for 8-12hours) have been identified as the main barrier to continue breastfeeding. Majority of the respondents were aware of the importance of breastfeeding, weaning and the appropriate time for initiation of weaning as per the WHO guidelines. But they were forced to start early weaning due to their work commitments.

Of all the women surveyed, 64% had the facility of daycare center at work. But only 14% preferred to leave their children at the daycare center as 73% felt the center to be unhealthy and unsafe. 91% of the women stated that they could not breastfeed easily at work and 52% said that they were forced by their job to stop breastfeeding and start early weaning i.e. before 6 months. 22% of the women who left their babies at home had to hire a caretaker for this purpose while 31% were doing it by themselves and 47% had a family member to help them out. 77% of the women preferred homemade food during weaning whereas 23% used packaged products. Bottle feeding was the most popular mode of feeding even though most respondents knew of its disadvantages. Overall, 60% of the women said that their job affected their relationship with their child. 48% of the women stated that their child was happy and healthy while 44% found their baby to be mostly irritated. As majority of the mothers preferred bottle feeding so diarrhea, vomiting and ARI were the chief complaints of 87% of the mothers. Similar results were concluded by the research conducted in the Tertiary Care Hospital in Karachi the statistics of which are mentioned in the literature [22].

Although this study was conducted among working mothers yet surprisingly a good proportion (77%) of them preferred homemade food for weaning and rest

of the 23% used commercial products. Reasons behind preferring the homemade meals over the commercial ones were that the former were healthy, hygienic, cheap, clean and economical. Kulsoom et al in her study observed that 47% of mothers were using commercial products at the initiation of weaning i.e. at 6 months of age. In a similar study, it was stated that the packaged products were vastly fed to the child by illiterate mothers from poor families rather than mothers from upper socio-economic class.^[23] Findings of this study support the results of our study since our study participants were educated and were less likely to feed packaged goods to their child. Our study participants were highly qualified (46%) and understood the superiority of home-made goods over commercial products. Overall, our study and its results agree to the expectations mentioned in the introduction and the literature review.

Since, it was pointed out in various studies that work environment was the main barrier for professional mothers to continue breastfeeding, so it is fair to recommend that such policies should be developed at the government and institutional levels that promote this practice and eradicate the barriers. The baby friendly hospital initiative is a program launched by the government of Pakistan to promote healthy infant feeding practices.^[24] In addition to such a program, hospital policies should be modified to provide social support and incentives for the promotion of breastfeeding among professional mothers. There is a lot that needs to be done both by the government as well as on the community level for the support of the working women in order for them to be able to provide nutrition to their child and for them to be able to fulfill their daily duties along with their motherly responsibilities.

CONCLUSION:

Based on this study this conclusion can be established that working women are well aware with the time of initiation of weaning and the proper weaning practices for their child. They had good knowledge regarding the hygiene, proper and healthy food and were able to fulfill other necessities of their children. It is very much clear that the day care facilities provided in the Government hospitals are not up to the mark and should be improved. Moreover, the doctors specially faced the issue of long duty hours which was an important barrier in practicing proper weaning practices. There should be reduction in working hours to 8 hours per day according to UNICO working schedules. The government can make things better by establishing day care centers and separate rooms for mothers to

wean their infants at the work place. Positive steps taken at the Government and private levels can support the mothers to perform their motherly duties as well as do their jobs more efficiently.

REFERENCES:

1. Lipsky S, Stephenson PA, Koepsell TD. Breastfeeding and Weaning Practices in Rural Mexico. *Nutr Health*. 1994;9(4):255-63
2. Cameron M, Hofvander Y. 3rd ed. New York: Oxford University Press; 1983. Manual of Feeding Infants and Young Children; pp. 110–31.
3. Fagbule DO, Olaosebikan A. Weaning practices in Ilorin community, Nigeria. 1992 *AprJun*;11(2):92-9
4. Chaudhry R, Humayun N. Weaning practices and their determinants among mothers of infants. *Biomedica*. 2007; 23:120–4.
5. Liaqat P, Rizvi MA, Qayyum A, Ahmed H. Association between complementary feeding practice and mothers' education status in Islamabad. 2007 *Aug*;20(4):340-4
6. Duijts L, Jaddoe V, Hofman A, Moll H. Prolonged and Exclusive Breastfeeding Reduces the Risk of Infectious Diseases in Infancy. *PEDIATRICS*. 2010;126(1):e18-e25.
7. Nordin S, Boyle M, Kemmer T. Position of the Academy of Nutrition and Dietetics: Nutrition Security in Developing Nations: Sustainable Food, Water, and Health. *Journal of the Academy of Nutrition and Dietetics*. 2013;113(4):581-595.
8. Mehkari S, Zehra N, Yasin H, Rauf A, Jaliwala H, Zehra T et al. Breastfeeding and Weaning: Awareness and Practices among Female Health Providers working in a Tertiary Care Hospital of Karachi-Pakistan. *International Journal of Women's Health and Reproduction Sciences*. 2014;2(5):281-286.
9. Bryan R. The Development of Weaning Practices Among Women of the Mombasa District, Its Effects on Children's Public Health Issues, and the Proposition of Intervention Plans. Independent Study Project (ISP) Collection [Internet]. 2006 [cited 23 August 2016];(262). Available from: http://digitalcollections.sit.edu/isp_collection/262
10. Morgan J. Does weaning influence growth and health up to 18 months?. *Archives of Disease in Childhood*. 2004;89(8):728-733.
11. Memon S, Sheikh S, Kousar T, Memon Y. Assessment of infant feeding practices at a tertiary care hospital. *Journal of Pakistan*

- Medical Association. 2010;.
12. S. Mohammad E, R. Ghazaway E, E. Hassan E. Knowledge, Attitude, and Practices of Breastfeeding and Weaning Among Mothers of Children up to 2 Years Old in a Rural Area in El-Minia Governorate, Egypt. *Journal of Family Medicine and Primary Health Care*. 2014;.
 13. Liaqat P, Rizvi M, Qayyum A, Ahmed H. Association between complementary feeding practice and mothers education status in Islamabad. *Journal of Human Nutrition and Dietetics*. 2007;20(4):340-344.
 14. Vart P, Jaglan A, Shafique K. Caste-based social inequalities and childhood anemia in India: results from the National Family Health Survey (NFHS) 2005–2006. *BMC Public Health*. 2015;15(1).
 15. Impact Of Community Based Awareness Campaign On Breast -Feeding Among Lactating Women In Chandigarh. *The Internet Journal of Health*. 2008;7(1).
 16. Ryan A, Zhou W, Arensberg M. The effect of employment status on breastfeeding in the United States. *Women's Health Issues*. 2006;16(5):243-251.
 17. Kumar V, Arora G, Midha I, Gupta Y. Infant and young child feeding behavior among working women in India: Implications for global health policy and practice. *International Journal of MCH and AIDS*. 2015;.
 18. Kulsoom USaeed A. Breast feeding practices and beliefs about weaning among mothers of infants aged 0-12 months. *The Journal of the Pakistan Medical Association*. 1997;:54:60.
 19. Lukman H, Kaswadharma K, Lubius I, Manoeroeng S. Factors influencing the practice of bottle feeding in infants at the well-child clinic, Dr. Pirngadi Hospital Medan. *PAEDIATRICA INDONESIA*. 1991;31(3-4):75:83.
 20. Kong S Lee D. Factors influencing decision to breastfeed. *J Adv Nurs*. 2004;46(4):369-379.
 21. Mehkari S, Zehra N, Yasin H, Rauf A, Jaliwala H, Zehra T et al. Breastfeeding and Weaning: Awareness and Practices among Female Health Providers working in a Tertiary Care Hospital of Karachi-Pakistan. *International Journal of Women's Health and Reproduction Sciences*. 2014;2(5):281-286.
 22. Kulsoom USaeed A. Breast feeding practices and beliefs about weaning among mothers of infants aged 0-12 months. *The Journal of the Pakistan Medical Association*. 1997;:54:60.
 23. Baby-Friendly Hospital Initiative A Boon In Disguise!. *The Internet Journal of Health*. 2009;9(2).