

Utilization of Exclusive Breast Feeding Methods among Nursing Mothers in Nigeria

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Abstract

The paper discussed the concept of breast feeding, breast milk as an ideal for the growth and development of the child. The paper also highlighted the importance of breast feeding and family planning. The need for exclusive breastfeeding, composition of breast milk, advantages of breast feeding on the baby and the mother were also discussed. The paper went further to discuss the problems of exclusive breast feeding, factors that influence satisfactory breast feeding. Based on the discussion, recommendations and conclusion were made.

1. Introduction

Breastfeeding is the process of feeding the infant with mother's milk by putting the nipple of the mother's breast into the mouth of the baby. Breast milk is of two types: Colostrums which is the initial yellowish and sticky milk produced from mother's breast from 37 weeks of gestation to about seven days after delivery and mature milk which is whitish in colour and is effectively produced from about 10th day following delivery. Exclusive breastfeeding is the practice of feeding the infant for the first six months of life on breast milk only. Without any other type of food, not even water. Exclusive breastfeeding is recommended as the best feeding alternative for infants up to six months and has a protective effect against mortality and morbidity.

According to official publication of the Tanzania medical students Association (1999), Colostrums is important for the baby as it contains more protein (10% compared to 1% in mature milk), Immunoglobulin (IGA), Lactoferrin, white blood cells, vitamin A, Zinc and less fat. These are important for immune defences of the baby during the initial days of life.

Exclusive breastfeeding is associated with multiple advantages to both the baby and the mother. On the baby's side there is acquisition of passive immunity against infection nutrients for physical and mental development, emotional security and closeness to the mother. Being a dynamic and physiologically sensitive process, breast milk production is adjusted to suit the infant's requirement according to environmental changes for example, breast milk will contain more fat during cold seasons.

The current World Health Organization (WHO, 1991) recommendations on breastfeeding stipulate that breastfeeding should start immediately following delivery for the baby to get Colostrums. The infant should thereafter be exclusively breastfeeding for up to six months of life, day and night on child's demand. During this period, no fluid including water should be given to the baby.

However, there is a room for giving oral medication to the infant should he/she fall sick. Breastfeeding should still continue until the child is two years age. The use of feeding bottle, teats and pacifiers is discouraged as it is associated with poor hygiene and the risk of gastrointestinal infection to the infant.

Globally, there is a declining trend of breastfeeding. Reasons for declining in breastfeeding include lack of confidence on the part of the mothers that the child is getting enough, increased work load especially on the urban woman which makes them to be separated from their babies for longer hours, decline in social

support, discomfort on the part of the mother by breastfeeding in public and intense promotion of Commercial milk formulae.

Globally, there are new initiatives to encourage exclusive breastfeeding. These include the international code of marketing Breast milk substitutes and baby friendly Hospital Initiative (BFHI) – mothers can obtain information about exclusive breastfeeding when they are attending antenatal clinic and following hospital delivery. Mass helpful in disseminating public education on breastfeeding.

The mother will also benefit from exclusive breastfeeding by experiencing lactation amenorrhea, fast return of the uterus to its normal size, prevention of post partum hemorrhage, reduced risk of getting cancer of the breast and ovary, low risk of Osteoporosis and emotional satisfaction.

Exclusive breastfeeding is one of distinct characteristics of mammals as exemplified by man, who is endowed with superior social, mental and biological adaptation over the animal forms.

Around the world today, people want to live healthy lives, raise well-nourished children and provide them with opportunities for the future. Today, the increasing concern over material and child health has much emphasis on the multiple advantages of breastfeeding. The initial secretion from the mammary gland is a yellowish fluid containing protein and sugar but not fat, which is called colostrum and is replaced by milk within concentrated protective antibodies for the baby and is important for the growth of the baby. The height of lactation, up to 1.5 litres of milk may be formed each day and to supply the nutrient for this, it is important for the mother to have adequate supplies in her diet. It is particularly important for her to take supplementary calcium, phosphate, vitamin D to guard against decalcification on her bones and teeth (Derek, 2002).

2. Breast Milk as an Ideal for the Growth and Development of the Child

Breastfeeding is an unequalled way of providing ideal food for the healthy growth and development of infants and has a unique biological and emotional influence on the health of both mother and child. The anti-infection properties of breast milk help to protect infant against diseases, and there is an important relationship, between breastfeeding and child spacing (W.H.O, 1993)

Exclusive breastfeeding was also identified as a way of spacing birth or planning families, supporting this line of argument, Nonye, (1994), maintained that exclusive breastfeeding delays the return of ovulation and may give a longer period of infertility. The continual survival of babies are known to rely heavily on the milk provided by the mother. When the mother cuddles and feeds her baby, the baby feels reassured, loved and catered for (Nwoye, 1994). He further opined that the mother also experienced a deep satisfaction by realizing that she has done a noble job by giving her baby what no other person can.

Exclusive breastfeeding has numerous nutritional immunological and psycho-social benefits. For the mother, it enhances her relation to her infant, it is inexpensive, and it is intrinsically convenient and may be effective in preventing breast cancer.

Breast feeding is the best food available for infants and is nutritionally superior to infant formula and to cow's milk (Elger, 1987). It contains the right proportion of fats, proteins, vitamins and minerals, in relation to cows' milk. It contains several additional amino acids necessary for mental development.

Agbalaka (1997) stated that motherhood is a rewarding career. To be a mother is difficult and dangerous but no one else can replace her. The power of doing good and doing harm is beyond the measure and it is done in private where no one can stop the but themselves. He further went on to state that children need relationship with their mothers. Nothing else can substitute for this need. Such relationship gives the child security. Deprived and unhappy children will grow up to make bad parents, who in turn bring up more unstable children.

Breastfeeding as a practice is as old as creation itself. Infact mammals are naturally endowed with the capacity of feeding the young with breast milk.

American Academy of Pediatrics (1997), recommended that woman should breastfeed their babies exclusively for six months. It is also recommended that children should receive breastfeed milk for the first year of life.

According to Christemsson (1997), full breastfeeding means that the baby may have been exclusively breastfeed. Also means that the baby receive nothing other than breasts milk. Exclusive breastfeeding can be seen as the act of feeding the baby with the natural milk from the mother for the period of six months.

Today, the increasing concerns over maternal and child health have led to much emphasis on the multiple advantages of breastfeeding. The initial secretion from the mammary gland is a yellowish fluid containing protein and sugar but not fat, which is cholesterol and is replaced by milk within two or three days. Others containing concentrated protective antibodies for the baby and is important for the growth of the baby. The height of lactation, up to 1.5 litres of milk may be formed each day and to supply the nutrients for this, it is important for the mother to have adequate supplies in her diet. It is particularly important for her to take supplementary, calcium, phosphate, vitamin D to guide against decalcification of her bones and teeth.

3. Breastfeeding and Mothers Health

It is extremely unusual for a mother to be unable to breastfeed in the country on account of ill health; even diabetic mothers breastfeed satisfactorily. Breastfeeding can have a significant impact on a mother's health. Nursing mother's burn 500 or more calories in a day than woman who are not pregnant or nursing because they work to speed up their weight loss after child birth. Also nursing of a baby causes the womb to contract and reduces blood flow after delivery and creates a less chance that the mother will later develop breast or even cancer of the uterus. One thing that is not in doubt is the effect of a healthy diet, nursing mothers' need to maintain a well balanced diet that includes variety of fresh fruits, vegetables, calcium, parental vitamins and a mineral amount of caffeine, to produce enough milk for their babies. Overall Fred (2001) opined that, if a nursing mother is properly instructed and knows all the precautions she should take; exclusive breastfeeding can be a rewarding and even relaxing experience.

4. Importance of Breastfeeding and Family Planning

According to Egbunonu (1993), a significant number of woman of child bearing age who need family planning are lactating mothers. In advanced Countries, breastfeeding declined with industrialization. He further maintained that in Nigeria almost all mothers initiate breastfeeding at birth but do not maintain it for a reasonable period.

The need for family planning in child survival strategies is recognized by Labbok (1989), who opined that, breastfeeding is an important area of the strategy and it is beneficial both to the mother and the child. Consenting to Labbok's opinion, the writer suggested that breast milk is the ideal, best for infants food. It contains immunoglobine and bodies that fight infection. It protects against allergy, it is economical, it makes for bonding and love for the mother. Breast milk helps uterine contraction and ovulation furthermore, it reduces the chance of the mother developing breast cancer it also gives complete satisfaction and fulfillment of motherhood and lactation amenorrhea resulting from breastfeeding can be used for family planning.

According to Happer and Row (2001), it is ordinary the case that the sucking action of the baby on the mother's breast, prevents ovulation. As long as no ovulation take place no new conception is possible. This is usually true as long as the mother is completely breastfeeding her baby. Total breastfeeding means that she nurses him six to eight times a day according to the needs of the baby, and does not give him solid food. Under these condition 86% of women do not ovulate during the first three months after birth.

Normally, the first menstruation of breastfeeding mother is so-called withdrawal bleeding which means that it was not preceded by an ovulation. This will be the case, for 95% of mothers who are totally breastfeeding; their first menstruation will not be preceded by an ovulation.

Breastfeeding delays the resumption of ovulation and the return of the menstrual cycle; this is most reliable in the first six months. Lactation amenorrhea, which is the breast feeding, related suppression of the menstrual cycle after birth is associated with a decreased ability to become pregnant. It has been observed that if a woman is fully or nearly breastfeeding, in not less than six months (Post partum) she is about 98% protected against any un-planned pregnancy.

5. The Need for Exclusive Breastfeeding

5.1 Child Health Benefits:

Human milk is species-specific and all substitute feeding preparations differ markedly from it, making human milk uniquely superior for infants feeding.

Exclusive breastfeeding is the reference or normative model against which all alternative feeding method must be measured with regard to growth, health, development, all other short and long-term outcomes. In additions human like – fed premature infants receive significant benefits with respect to protection and improve developments outcomes compared with formula fed premature infants. From studies in preterm and term infants the following outcomes have been documented.

5.2 Infection Diseases:

Research in developed and developing countries of the world, including middle-class population in developed Countries provides strong evidence that human milk feeding decreases the incidences and/or severity of a wide range of infections diseases including bacterial meningitis, bacteria, diarrhea, respiratory track infection, necrotizing enterocolitis media, unitary tract infection, and late-onset sepsis in preterm infants. In addition, tosteomatal infant mortality rates in the United States are reduced by 21% in breastfed infants.

5.3 Neuro Development

Breastfeeding has been associated with slightly enhanced performance on tests of Cognitive development. Breastfeeding during a painful procedure for new born screening provides analgesia to infants.

5.4 Maternal Health Benefit

Important health benefits of breastfeeding and lactation are also described for mothers. The benefits include decreased postpartum bleeding and more rapid uterine involution attributable to increased concentrations of oxytocin, decreased menstrual blood loss and increased child spacing attributable to lactational amenorrhea, earlier return to pregnancy weight, decreased risk of hip fractions and osteoporosis in the postmenopausal period.

5.5 Community Benefits

In addition to specific health advantages for infants the mothers economic, family and environmental benefits have been described. These benefits include the potential for decreased annual health care cost of \$3.6 billion in the United States, decreased Costs for public, health programs such as a special supplement nutrition program for woman, infants and children (WIC), decreased parental employee observes and associated loss of family income, more time for attention, to siblings and other family matters as a result of decreased infant illness; decreased environmental burden for disposal of formula, cans and bottles and decreased energy demands for production and transport of artificial feeding products. These savings for the

country and for families would be offset to some unknown extent by increased costs for physical and lactation consultations. Increased office visit time, and cost of breast pumps and other equipment all of which should be covered by insurance payments to providers and families.

6. Composition of Breast Milk

- Protein 1.5%
- Fat 3.5%
- Lactose 7.0%
- Water 87.8%
- Salt 0.2%

Derek (2002), states that breast milk is a – alkaline fluid, bluish white in colour with a specific gravity. It is actively involved in the prevention of infections. It is also an immunizing agent especially against diarrhea which is a great killer of children.

7. Advantages of Breastfeeding on the baby

Uni and Richard (1988) in their study noted that mainly breastfed infants were found to be significantly fed. The growth and morbidity study concluded that a decisive step should be taken in order to re-establish prolonged breastfeeding in developing countries.

Infants exclusively breastfed directly from the breast are likely to be contaminated by pathogenic organisms and the incidence of neonatal infection is therefore reduced especially that of gastroenteritis and even death.

Breastfeeding reduces exposure to pathogens in the environment, giving protection by immunization, providing antibacterial and antiviral substances and supplies the correct mix and density of nutrients. The immature infant's gut is adapted to the nutrition and protection of breast milk. Antibodies from cholesterol and breast milk protect the gut and provide some immunity against other infections.

Babies on breast milk alone never get constipated and their stools are not offensive, no nagging cry at night.

8. Advantages of Breastfeeding on the Mother

Christensson (1996), confirmed that mothers are able to maintain a unique physical and devotional bond with their babies during breastfeeding. Breastfeeding directly contributes to increase birth intervals by tending to reduce the resumption of fertility in the mother, this is more pronounced with exclusive breastfeeding. It is related to lactation amenorrhea and has led to new recommendations for decisions by individuals on family planning (UNICEF, 1992).

They further stated that breastfeeding lowers the life time risk of breast and ovarian cancer and as well as inhibiting the nature of menstruation and allows women to build up their stores of iron and alleviate anemia.

Musa (1981) stated that breastfeeding costs less than bottle feeding. There is no formula to buy, nothing to process, no packaging, no fossil fuel used in transportation and no waste to dispose of.

Successful breastfeeding brings a great sense of calm, emotional pleasure and satisfaction, also fulfillment of motherhood and femininity. It helps the mother to recover after delivery.

9. People's Opinion about Infants Poor Feeding

Faced with the increasing infant morbidity and mortality in a world rapidly advancing technologically, the UNICEF, WHO, with support of world teachers, health experts and non-governmental organizations launched the baby friendly hospital initiative (BFHI) in June 1991.

It was realized that the achievement of exclusive breastfeeding globally would not be possible in an environment where breast milk substitutes are freely distributed. This was the opinion of Njepuone (1995) when he maintained that the sales promotion and economic growth of the multinational infant food manufacturers are encouraged through aggressive marketing and intensive promotion. Many mothers and health care providers have been wrongly made to believe that infants under six months require extra fluids in addition to breast milk especially in hot climate.

10. Problems of Exclusive Breastfeeding

The following problems could be experienced while breastfeeding, and should any of these occur measures should be taken to deal with them.

They include:

- i. Diminished secretion of milk: may be due to absence of milk secreting tissue in the breast or reduction of the number of milk secreting cells. Anxiety and lack of self confidence makes the mother to produce less amount of milk hence poor let down reflex.
- ii. Inability to breastfeed exclusively: This is situation where by the mother fails to breastfeed her baby very well on demand for at least 8 to 10 times in 24hours. This may be as a result of ignorance and at times the nature of work or business or the mother may create this problem. To prevent this problem new trend of expressing breast milk has been mapped out for working class mothers. The mother can express the breast and keep the milk for the baby in a flask to last for 12 hours or in deep freezer to last for 24 hours without the milk going sour.
- iii. Cosmetic Reasons: Mothers refuse to exclusively breastfeed because of fear of alteration in the breast figure or shape. It should be disclosed to such mothers that nature has made it that breast must go flabby whether sucked by baby or not as this will help to prevent. Such problem posed to exclusive breastfeeding
- iv. Modernization: Some mothers refuse to breastfeed their babies exclusively because they feel that breastfeeding babies exclusively is not for modern woman so they depend on Cow's milk in order to show themselves as belonging to the high class. Many women perceive their bodies not only as internally fragmented but as split off from themselves as persons and as incumbents of social roles.
- v. Class and Education: A woman's level of education and social class affects her motivation to breastfeed but their effects are different in parts of the world. In many industrialized countries, breastfeeding nowadays is becoming woman more common among educated and upper class women.

11. Factors that Influence Satisfactory Breastfeeding

- i. The mother must have been instructed and so is confident in her ability.
- ii. The mother must be comfortable.
- iii. The mother must be free from anxiety as much as possible.
- iv. The mother needs sufficient rest, especially where she first goes home and has to cope with extra domestic duties.
- v. She needs adequate diet with extra protein, mineral and vitamins also some extra which could be inform of fruit juices.
- vi. The child mouth and jaw development should be normal and the child healthy.
- vii. Breastfeeding should be on demand and at more frequent intervals. The child should be allowed time to suck both the fore and hind milk and each breast emptied properly during each feeding session

12. Recommendations

1. Primary health centers and mass media should educate the rural women on the importance of exclusive breast feeding.
2. Seminars and workshops should be organized in different higher institutions and secondary schools for nursing mothers to obtain necessary knowledge and right practices for breast feeding.
3. Mothers who are doing exclusive breast feeding should eat adequate and balanced diet to help for the flow of the breasts milk.
4. Mothers should put bib on the children before breast feeding; so that the child should not dirty his wears, if he throws out the breast milk from his mouth.
5. Mothers should build confidence that the milk will come. There is considerable variation in the time and manner in which the milk comes in. It often starts to come in on the third or fourth day of the baby's life. It tends to come earlier in mothers who have had a child before later in new mother.
6. Mothers should breast feed their babies or regular schedules based on the hospital rules when in hospital. Some children are brought to their mother at (6am, 9am, 12noon, 3pm, 6pm, 2am)

13. Conclusion

From the discussion so far, one can safely say that exclusive breast feeding to the best method of feeding and rearing the child.

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