

## BELIEFS OF WOMEN REGARDING FOOD DURING LACTATION

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### ABSTRACT

**Objectives:** To study the women's beliefs regarding diet during lactation and to see the relationship between dietary beliefs and their educational status.

**Study Design:** Descriptive study.

**Place and Duration of Study:** Vaccination centre established at Paediatrics out-patient department (OPD) of Military Hospital, Rawalpindi from February to July 2006.

**Material and Method:** One hundred and seventy mothers were interviewed by using a close ended questionnaire, based on convenience sampling technique. Data was analysed by using Statistical Package for Social Sciences (SPSS 17). Relationship between educational status and dietary beliefs was analysed and the results were considered significant if 'r-value' is more than 0.5 with 'p-value' less than 0.05.

**Results:** It was noticed that more women were convinced that amount of diet should be increased during lactation. It was also observed that almost equal number of women had the belief that some of the foods are to be restricted or not be restricted during lactation. The concept, however, changed with education and women with higher education advocated that no food should be restricted. A positive relationship was found between the education of the respondents and their belief regarding hot and badi effects of food. Women with lesser education had strong belief about hot or cold foods.

**Conclusions and Recommendations:** The findings reported in this study together with those previously reported by various authors, it is conclusive that the education has an influence on beliefs of the individuals. It is critically important for researchers to conduct additional research that addresses the concerns on the false beliefs so as to remove them from the society through education of health professional and the masses especially the women. The information thus obtained from the studies will help in addressing issues for improvement of nutritional knowledge and dietary practices in women.

**Keywords:** Lactation, breastfeeding, food habits, beliefs, nutrition, educational status.

### INTRODUCTION

Myths and beliefs arise when there are no answers to a logical and scientific question. In today's age of evidence-based practice, myths and beliefs are expected to die their own death. It is a well-known fact that the literacy level directly affects the beliefs and practices being followed in the community. Importance of lactation has a special place in Pakistan; however, different beliefs regarding intake of the food during lactation exist that can be detrimental for maternal health.

It is a well-known fact that strong socio-

cultural beliefs regarding food restriction exist in Pakistan as well as in other developing countries worldwide. This study has focused to check the role of education towards the women beliefs regarding diet alteration during lactation. The study has only been focused on the personal beliefs of lactating mothers and it excluded the socio-economic factors.

### PATIENTS AND METHODS

It is descriptive study carried out on 170 mothers who were interviewed by using a closed ended questionnaire, based on convenience sampling technique. The study was conducted at vaccination centre established at Paediatrics out-patient department (OPD) of Military Hospital, Rawalpindi from February to July 2006. Vaccination centre was especially chosen because the mothers coming to the centre were not

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mentally pre-occupied because of their child's ill health and were found to be very cooperative in the question-answer sessions. Collected data was analysed by using Statistical Package for Social Sciences (SPSS). Relationship between educational status and dietary beliefs was analysed and the results were considered significant if 'r-value' is more than 0.01 with 'p-value' less than 0.05.

## RESULTS

The age of respondents varied from 23 to 35 years with mean age of 28.36 years (SD  $\pm$  3.410 years). It was found that out of 170 respondents, 43 (25.29%) were having the education of primary or below, 62 (35.88%) were having an education over six grades but not more than and matric and 65 (38.83%) were matric and above.

There were 63 (37.06%) respondents who claimed that their source of information regarding diet intake during lactation was from their mothers, 32 (18.82%) said that it was their mother in law, 38 (22.35%) said that it was from both, 17 (10%) said claimed that information was from grandmother, 13 (7.65%) got the information from different friends and 7 (4.12%) said that it was from their doctors.

It was noted that 120 (70.6%) women believed that quantity of the diet affect the lactation whereas 22 (12.9%) said that it does not. Almost equal no of women (28) declined to answer (not knowing). Within 120 respondent in this category, 57 (47.5%) were having matric or above education, 45 (37.5%) were having education between 6<sup>th</sup> and 10<sup>th</sup>, whereas only 18 (15%) were having a primary education. Within the group of women who said that diet does not affect lactation, 13 (59.1%) of the women were having the education of primary and below. 9(40.9%) were having education up to matric level where as none of the women with higher education opposed it ( $r=0.306$  and  $p=0.001$ ).

It was also recorded that 54 (31.8%) of the women were taking normal quantity of the food during lactation. Most of these women (77.8%) were having better education (six and above). In

contrast, 107 (62.9%) women were taking more than the normal in which most of the respondent were having better education (75.7%). Only 9 (5.3%) were taking a lesser food during lactation ( $r=0.130$  and  $p=0.001$ ).

Seventy four (43.5%) women were restricting certain type of foods considering them badi whereas almost same number (75) was not; remaining 21 (12.4%) declined to answer the question. Again it was seen that women with education of primary & below were restricting some foods during lactation 30 (40.5%). Almost equal number 28 (37.8%) had six and ten years of education, 41 (54.7%) of the women were having better education and were not opposing the fact ( $r=0.263$  and  $p=0.001$ ).

Relationship between education level and beliefs of the respondents were analysed. A significant correlation ( $r >0.01$  and  $p <0.05$ ) between the two was establish. It was found that women with better education had more positive approach toward healthy food whereas false believes exist in the women belonging to lower education class.

## DISCUSSION

In this study, several beliefs were studied in 170 lactating mothers belonging to different education levels. The educational classes comprised of illiterates to primary, above primary (six) to matric and above matric.

This study focused on the belief of women in increasing or restricting some of the foods during lactation. The beliefs included the census of the women that some of the foods are to be restricted or enhanced during lactation, effect of foods on the mother in giving strength or increasing the quantity of milk and the hot or badi effects of food being consumed.

It was noticed that more women were convinced that amount of diet should be increased during lactation or the normal diet should be continued. This indicates that it is a well understood fact rather than a belief. It was also observed that almost equal number of

women had the belief that some of the foods be restricted or not be restricted during lactation. However, the individual percentage of the low education women was more towards restricting some foods. The concept, however, changed with education and more women with higher education advocated that no food should be restricted. This clearly indicates that education is playing a vital role in the beliefs. For the belief that some of the foods are to be increased during lactation; it was found that majority of the respondents were of the view that it should be increased. The variation in responses within the different food groups indicates the role of education.

It was found that in the belief regarding foods giving strength to mother, all the education classes had almost same beliefs as an average of 75.29% women agreed to the fact. Within the individual food group, it was seen that number of respondent increased with the education level. For the belief that foods increase the quantity of milk, the average number of respondents agreeing with the fact was found to be 61.53%. Although the response of the mothers was different from the average value for the cereals and meat but the increasing response trend vis-à-vis the higher level of education within the individual food group remained almost the same.

In the belief regarding hot effects of foods, although the overall percentage of the respondents agreeing to the fact (average 18.94%) remained low, still the effect of education was prominent within the individual groups. Within different food groups, it was noticed that the number of respondents in cereal group (38.25%) was more as compared to an average of 14.12% in the remaining food groups. However, the decreasing trend vis-à-vis higher education level within all the food groups remained the almost the same with no significant difference.

Relationship between beliefs 'hot & cold' effects of foods was studied in detail by Moni Nag<sup>1</sup> in study regarding beliefs and practices about foods in India where food items were

perceived as 'hot' are often believed to be harmful for pregnant and lactating women and those perceived is 'cold,' believed to be beneficial. The effect has also established by Kamil et al<sup>2</sup> in the study regarding cultural beliefs and practices in Malaysia by Malays, Chinese and Indian habitants. He determined that 'hot' and 'cold' foods perceived as bad for pregnant women are considered as good for the lactating mothers. 'Over-heating' is thought to result in miscarriages and skin rashes, 'under-heating' in bronchial asthma and cough. During post-partum period, in contrast to pregnancy period, 'hot' food like ginger, teel-seed oil, prunes and red wine are encouraged. Cold foods like vegetables and fruits are avoided lest they clot the uterine blood and impede the flow, causing it to go backwards into the body and cause nervousness or insanity. Ahlavist et al<sup>3</sup> in their study also highlighted the 'hot' and 'cold' effect of the food with first generation Iranian immigrants residing in Sweden. It was concluded in the study that wrong beliefs are still present in the immigrants irrespective of the high standards of living in a developed country. It is, therefore, inferred that the traditional beliefs and practices are not easily discarded by simply changing the environments.

The belief that some foods have badi effects was found in an average of 42.35% respondents. The difference was found in case of dairy products where number decreased to 36.47%. However, within all the food groups, decreasing response trend vis-à-vis increasing education level within all the class remained same.

The beliefs of restricting or increasing some of the foods or the effect of food on the mother's body can be psychological which can be attributed to source of information. In our culture, mothers and mothers in law play an important role and have a great influence on the lactating mother. Majority of the respondents (61.77%) were either matric or below and in our society, the women with such qualification do not have any excess to information through books etc and they rely heavily on the information passed on by their mothers or mothers in law. The fact

was also evident in our study as 78.24% of the respondents got the information regarding diet during lactation from their mothers, mother in laws or both. This fact was also confirmed in a study conducted at Karachi, Pakistan by Bukhari et al<sup>4</sup>. It was found the major sources of knowledge of breast-feeding were mothers (43%) and media (34%) although none seemed to be an effective one. Within the possessed information, it was found that a significant number of girls were found to have wrong ideas regarding breast-feeding. Even those with some 'right' concepts, it cannot be said with certainty that those 'right' concepts will be practiced, as it is also known that in this respect nutritional beliefs and practices differ.

In our study, a relationship was found between dietary beliefs of lactating mothers and their education. With increase in education, the traditional baseless dietary beliefs seem to fade away. The effect of education on the dietary habits has also been confirmed by Jiménez<sup>5</sup> in her study on rural Guatemalan mothers where she found that as women become more educated and literate they tend to rely less on traditional beliefs and practices. It has also been confirmed by a study conducted by Ergenekon et al<sup>6</sup> on women forced to migrate from their original villages and were currently living in the slums of Diyarbakir in Turkey. It was found that the education of mother appeared as a significant factor influencing the breast feeding practices. Women possessing higher education tends to have a positive attitude and discarded many wrong beliefs.

Niloufer et al<sup>7</sup> studied the association between the belief about food restricted during pregnancy and lactation only and found no relation with education level of the respondent. The study focused only on beliefs regarding restricting some of the foods during pregnancy and lactation.

A study carried out on the dietary habits of pregnant and lactating mother by Mehmood et al<sup>8</sup> found that the age of mothers, type of family,

literacy, family income, parity and gravidity had not significantly influenced the nutritional beliefs and practices on woman's food restrictions, only urban and rural differences were statistically significant.

Samin et al<sup>9</sup> during a study on pregnant and lactating mother found that lactating women did take special food items (67.86%), but did not omit any special food items (only 19.23% did). Reasons given for adding items to or restricting items from the diet during lactation were to increase milk and for the health of the child.

It can be seen that different regions have different perspective regarding beliefs and practices during lactation. The strong traditions beliefs cannot be easily be uprooted until and unless the root cause is not eliminated. Education to the mothers and family of the lactating mothers is as important as is the education to the lactating women. The crux of the study lies in the fact that by generating awareness among women, both lactating mother and her family, regarding complete balanced diet, and by avoiding wrong myths and beliefs, they can lead a healthy life by producing healthy babies.

## CONCLUSION

There is no doubt that breast feeding is invaluable especially in the developing world with lower socioeconomic and disadvantaged groups. The cultural practice to avoid certain nutritious foods with restrictive diet affects the overall health and well-being of the mother as well as the infant. The findings reported in this study together with those previously reported by various authors, it is conclusive that the education has an influence on beliefs of the individuals.

It is critically important for researchers to conduct additional research that addresses the concerns on the false beliefs so as to remove them from the society through education of health professional and the masses especially the women. The information thus obtained from the studies will help in addressing issues for improvement of nutritional knowledge and

dietary practices in women. Information relating to restrictions on the food should be another intervention health care workers must deliberate upon to improve the overall health of mothers as well as the infants.

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