

**Attitude towards breast-feeding amongst Indian  
working women in the estate**

*( A case study at Changkat Asa Estate, Tanjung Malim)*

oleh

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Latihan Ilimah  
Bagi Memenuhi Sebahagian  
Daripada Syarat-syarat Untuk  
Ijazah Sarjana Muda Sastera

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... Prmasvary



## *Synopsis*

This Graduation Exercise is a case study concerning the aspects of infant feeding practices among the Indian working women in Changkat Asa Estate. Specifically, it is about the attitudes of the women towards breast-feeding and their performance. In order to provide a clear and systematic picture, this study is divided into various chapters.

Chapter one gives a general introduction of the objective, scope and significance of this study. It also includes the target group chosen, the area selected, the methodology used and lastly the problem encountered in this study.

Chapter Two contains the background characteristics of Changkat Asa Estate such as location, history, size, demography and occupational structure. It also touched on the aspect of amenities in this estate.

Chapter Three presents the definitions of relevant concepts and theories used in this study. Special attention is given to the concept of role.

Chapter Four provides the bio-data of the respondents and their families. Matters that are mentioned are age of respondents and their husbands, level of education, the family size and the household income etc.

Chapter Five is totally devoted to the findings concerning infant feeding practices. The women's attitude towards breast-feeding and their performance is given emphasis. It also touches on the level of awareness and knowledge of the women concerning breast-feeding and infant formula. The factors which influence determine the women's performance and attitude towards breast-feeding are also mentioned in this chapter.

Chapter six provides a summary of the findings and its significance. The relationship between the findings and relevant concepts discussed in Chapter Three is also mentioned. This chapter also contains suggestion recommendation put forth to improve the performance of breast-feeding among the women in the estate.



## *Sinopsis*

Latihan Ilmiah ini adalah kajian kes mengenai aspek amalan penyusuan bayi dikalangan pekerja wanita India di Estet Changkat Asa. Khususnya, ia menyentuh sikap wanita dan perlakuan mereka terhadap amalan penyusuan ibu. Untuk memberi gambaran yang jelas dan sistematik, kajian ini dibahagi kepada beberapa bab.

Bab Pertama memberi pengenalan umum mengenai objektif, skop and kepentingan kajian ini. Ia juga mengandungi maklumat tentang kumpulan sasaran dan bidang yang dipilih, methodologi yang digunakan dan juga masalah yang dihadapi dalam kajian ini.

Bab Kedua mengandungi butir-butir mengenai latarbelakang Estate Changkat Asa seperti lokasi, sejarah, saiz-demografi and struktur pekerjaan. Ia juga menyentuh aspek kemudahan yang terdapat di estat ini.

Bab Ketiga menyentuh tentang konsep dan teori-teori yang digunakan dalam kajian ini. Lebih perhatian adalah diberi kepada konsep peranan.

Bab Keempat memberi maklumat mengenai bio-data responden dan keluarga mereka. Perkara yang disentuh adalah seperti umur responden dan suami, takap pelajaran dicapai, saiz keluarga dan pendapatan seisi rumah.

Bab Lima hanya memberi maklumat tentang hasil kajian mengenai amalan penyusuan bayi. Tumpuan adalah diberi kepada sikap wanita dan perlakuan mereka terhadap penyusuan ibu. Bab ini juga menyentuh soal tahap kesedaran dan pengetahuan wanita mengenai penyusuan ibu dan formula bayi. Faktor-faktor yang mempengaruhi dan menentukan perlakuan wanita dan sikap wanita terhadap penyusuan ibu juga adalah dibincangkan dalam bab ini.



Bab Enam memberi ringkasan hasil kajian dan signifikasinya. Perkaitan hasil kajian dengan konsep yang relevan dalam bab tiga juga disentuh. bab ini juga mengandungi cadangan dan saranan untuk memperbaiki peraluan penyusuan ibu dikalangan wanita di estat.

University of Malaya

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## Chapter 1.

### Attitude towards breast-feeding amongst working Indian women in the estate.

( A case study at Changkat Asa estate, Tanjung Malim )

Breast-feeding is not a new concept or phenomena. In fact, this is the original and natural method of infant feeding that has evolved ever since human beings inhabited the earth. A general definition of breast-feeding is *'The act of the mother nursing her baby at the breast'*. The suckling gesture of the baby at the mother's breast is actually an indication that a nourishing process is taking place. In addition, the baby is also, being supplied with warmth, stimulation and protection by the mother.

#### 1.1 Objectives of this study.

The objectives of this study are as follows ;

- 1) To assess the performance and attitudes towards breast-feeding among the Indian women of different age groups; below and above 40 years old. This is to determine if the age factor has any influence on the infant-feeding practices.
- 2) To study the association of socio cultural and economic factors with the attitudes towards breast-feeding and its performance. The socio traditional values, taboos and impact of commercial promotions on infant formula. The economic factors are women's involvement in employment as wage-earners, income of the family and material laws.
- 3) Various aspects related to infant feeding practices such as substitutes for breast milk and lactation period will also be looked into.
- 4) To view the level of awareness and knowledge related to breast-feeding, artificial formula and advertisement on infant formula among the women in this study.



- 5) The study will also focus on the material diet and maternal health in relation to infant feeding practices.

## 1.2 Scope

This study is confined to the Indian working women of a rubber estate. The main reason for selecting one particular estate instead of many fieldwork sites was to ensure the control of the extraneous variables and to cut down the research cost. Only 'Indian women' was chosen as the study group because the writer being an Indian herself anticipated more cooperation and better rapport with her own ethnic group.

The classificatory of Indian women in this study refers to those

- 1) Working women aged between 20-55 years
- 2) Married with at least one child.

The criteria for the lower age limit is based on the assumption that most Indian women in the estate marry before they reach 20 years old. 55 years is set as the maximum age limit since it is the retirement age.

In terms of infant feeding practised by the Indian women, the scope is limited to the types of initial feed such as breast-feeding, bottle-feeding or mixed feeding (excluding solid weaning diet) given to the youngest child. However, focus will also be given to the other children to obtain relevant information regarding infant feeding practices among the women in this study.

## 1.3 Significance of the study

In recent years, much attention has been focused on the significance of breast-feeding throughout the world, especially in developing countries. International Organisations such as WHO and medical authorities such as Jelliffe (1968), Wong (1971), Addy (1976) have emphasized the importance of breast-feeding.

At the 27th World Health Assembly in 1974, a declaration was made regarding infant nutrition and breast-feeding. In the declaration it was stated,

' The 27th World Health Assembly reaffirming that breast-feeding has proved to be the most appropriate and successful nutritional solution for the harmonious development of the child ..... recommends strongly the encouragement of breast-feeding as the ideal feeding in order to promote harmonious physical and mental development of children .....'

Following the declaration 3 medical officers, Teoh ( 1975), Balakrishnan and Hasbullah bin Haji Hussein (1977) carried out studies related to breast-feeding in rural areas in Malaysia. Teoh conducted his research in rural Perlis by interviewing 714 mothers of all the ethnic groups; Malays, Chinese and Indians. In his study, he calculated the incidences of breast-feeding in relation to age, race, parity, income and education of the mother. The study by Balakrishnan and Hasbullah bin Haji Hussein was carried out in Kelantan and a total of 461 mothers of all ethnic groups were interviewed regarding the duration of breast-feeding without supplements, the infants' age when solids were introduced and the awareness of mothers on the advantages of breast milk.

Both studies produced important findings regarding breast-feeding pattern among the three ethnic groups.

However not many studies and research have been carried out on any one particular ethnic group in rural areas. For example in the estates studies on health status among the Indians in the plantations have been carried out by Kandiah N and T.B.Lim (1977), Koay (1982) and Mirnalini (1982) but none studied infant-feeding practices.



From the evidences laid down, it is obvious that scholars in Malaysia have not attempted an indepth study on infant-feeding practices in the plantations.

Therefore, this study with its sociological approach to the performance and attitude towards breast-feeding amongst the Indian women in the plantation is actually one of the first attempts to fill the gap.

It is hoped that the findings in this study would be beneficial to the health authorities in Malaysia in relation to the implementation of health programs in the rural areas.

If at all the findings reveal that attitude, performance and incidences of breast-feeding are unsatisfactory and low, government agencies can take the necessary measures to improve the situation.

This study can also be used as a valuable source of reference by future scholars to do a comparison study on various ethnic groups in Malaysia.

#### **1.4 Research Method**

What follows is a description of the methods used for sampling respondents and collecting data, analysis of which is presented in subsequent chapters.

##### **1.4.1 Sampling procedure.**

The total list of the names of women workers in the rubber estate was obtained from the estate clerk. The number of women amounted to 50. All 50 of them fulfilled the criteria;

- i) Age between 20-55 years
- ii) married with at least one child.

However out of the 50 women 40 were selected using simple sampling methods, giving each and everyone equal opportunity to be selected as samples to represent all the working women in this estate.

#### 1.4.2 Collecting Data

The 2 main sources of information used in this study are; primary data and secondary data. The prime source of the former data is from a fieldwork carried out by me at Changkat Asa estate, a few miles off Tanjung Malim town. The duration of the fieldwork was one month, from 1st May until 31st May 1987.

However before setting out with the actual fieldwork, a pilot survey and pretest of the interview schedule was conducted. The pilot survey was necessary for me to familiarize myself with the estate and its residents. The purpose of the pretest was to test the applicability and suitability of the questions in the interview schedule in the context of the estate.

During the fieldwork 40 women were interviewed with the aid of an interview schedule. The interview schedule was used as a guide aimed at proceeding with the questions systematically. Although 2 types of questions were set; open ended and close ended ones, the former was used more extensively. This is because the writer did not want to influence the respondents' replies or answers.

The normal routine of interviewing began at 2.30 p.m and ended between 6.00 - 7.00 p.m. However, on Sundays I set out much earlier, at about 9.00 a.m. The interviews could not be carried out in the mornings (during the weekdays) because all the women went out to work and returned home only after 2.00 p.m.

During the one month of fieldwork, I travelled daily to the site from town which is approximately 3 miles away. Due to the irregularity of bus services to the estate, sometimes hitch-hiking was the only solution.



Besides interviewing, other methods of obtaining information such as observation was also adopted. It proved to be a useful tool for double checking during interviews with the respondents.

Further materials were gathered through informal interviews with officials of the estate; in particular the estate manager, the hospital attendant (H.A), nurses from Kalumpang Health Centre who make monthly visits to the estate and a midwife from Ulu Bernam.

Secondary data was mainly acquired through library research. However an informal interview with Prof. Madya and Dr. Chen S.T of the Paediatrics Department in University Hospital (U.M) also proved to be an important source of secondary data. Library research on existing knowledge of breast-feeding was undertaken in order to obtain a general idea about the subject matter and to identify concepts and definitions. The libraries used to gather secondary information are as follows.

- i) The main library in U.M
- ii) The Antropology and Sociology Dept. Library U.M.
- iii) The Medical Library U.M
- iv) The Library of the Consumer Association of Penang (CAP)

### 1.5 Research Problems

Interesting though it was, the research operation was not without its problems, most of which were encountered during the field-work.

The prime obstacle was gaining entry into the estate. At first permission was not granted by the head office of the estate management in Ipoh. However, with the cooperation and assistance of the estate manager the fieldwork was made possible.

The difficulty of eliminating suspicion from the minds of the women workers when conducting the interview was another problem. In the early stages of the fieldwork, it was apparent that the residents in the estate were suspicious about my identity and motives. There was on unpleasant incident

when a respondent accused me of being a management spy and practically chased me out of the house.

Another problem was that most of the women were not used to personal questions from an outsider except from officers in government agencies. To overcome this problem, an indirect and informal approach was adopted at each interview, mainly to make the respondents feel at ease to win their confidence and thereby to obtain their cooperation. It was a good thing that there was no language barrier for Tamil was a common language among the women.

Nevertheless, despite the many positive responses from the various respondents, I was convinced that certain facts have been purposefully concealed by some, probably due to personal reasons.

As an Indian proverb says, 'Tell the truth but never the unpleasant truth'.

However, although inaccuracies did occur, these have been reduced by a considerable degree through methods of cross checking. Personal observation and casual conversations helped a great deal.

One problem that could not be overcome was the unsuitability of the environment in the respondents' homes during the interviews. Many a time, the writer had to bear the noisy atmosphere due to the childrens' laughters and cries.

Among the older women, the accuracy of their response is very much doubted due to the problem of memory especially questions that are related to incidences that happened many years back.



## Chapter 2

### Background of Changkat Asa Estate

#### 2.1 Location and History of the estate.

Changkat Asa estate is well known for both its oil palm and rubber cultivation. It lies in the district of Ulu Bernam, 5 miles away from Tanjung Malim town. Today Changkat Asa estate is easily accessible by a Mac Adam road, the result of a developmental project carried out 20 years ago.

According to its estate manager, Changkat Asa estate came into being as early as 1900. Further details regarding this matter were also not available. Information concerning the estate's management from the year 1900 till the 1950s were not available. Changkat Asa estate is actually a subsidiary of Kuala Lumpur Kepong Berhad (KLK Bhd) which is a member of Malaysian Agricultural Producers Association (MAPA). Prior to KLK Bhd, Changkat Asa was owned by 2 companies, the first being Rubber Estate Agency (REA) and the second, Malaya Estate Group Agency Limited, (MEGAL) Kuala Lumpur Kepong Bhd took full control of Changkat Asa in 1970.

At present KLK Bhd is still the owner of Changkat Asa estate but it is under the management of Taiko Plantations Berhad.

#### 2.2 Size of the estate

Today, Changkat Asa estate occupies a total area of 979 hectares though at one time, it was only half the present size. The following figure illustrates the present use of land in Changkat Asa estate.

Table 2.1

Use of land	Hectare	%
Rubber - matured lots	233	23
Oil Palm - matured lots	4858	49
- in matured lots	127	13
Replanting to oil palm	48	5
building, site, road	35	3.5
NEB reserve	45	4.5
waste land	13	1.3
T.O.L	7	0.7
<b>Total</b>	<b>979</b>	<b>100</b>

\* source information provided by the estate manager

Initially Changkat Asa estate cultivated only rubber trees. In the latter part of the 1960s, the company prior to KLK Bhd decided to grow oil palm trees as well, with the intention of diversifying their crops. As shown in table 2.1, rubber is no longer the sole cultivation, in fact oil palm outweighs rubber in terms of land usage.

### 2.3 Demographic Structure

Table 2 is formulated to show the population of Changkat Asa estate according to ethnic groups.

Ethnic breakdown of population - Table 2.2

Ethnic Group	Number	%
Malays	110	11.7
Indians	817	87.2
Chinese	10	1.1
<b>Total</b>	<b>937</b>	<b>100</b>



As indicated in table 2, the Indians are preponderant compared with other ethnic groups. This is related to the historical factor in the late 19th and early 20th century. During this period, Indians from India were brought by the British planter to work as labourers in the rubber plantations of Malaya.

At present, most of the Indians in Changkat Asa estate are actually the third or Fourth generations of the immigrants. The presence of Malays and Chinese in the estate is partly due to the enforcement of the Immigration Act 1953 restricting foreign labour and the overall demand for labour during the 1960s.

It should be noted that among the estates of the region, Changkat Asa estate enjoys the reputation of having an old and established population. However, majority of the people in this estate are non-working dependents. These include children below 16 years old and retired non-pensioned old people. Most of the youths between 16 to 25 years of age no longer follow their parents' footsteps where work is concerned. They have either left the estate for a temporary period or for good, in search of a better and more challenging life.

Most domestic families on Changkat Asa estate are **nuclear families**. The average estate nuclear family consists of approximately 6 members, although in some households the number swells up to 10 or more. One interesting aspect that is prevalent in Changkat Asa estate is the existence of social networks between households. This is to say that most of the workers have relatives either related by blood or marriage in the estate, despite the fact that each runs a separate household.

Table 2.3

Percentage of linguistic groups among the respondent

Linguistic group	Number	%
Tamilians	30	75
Telegus	7	17.5
Gaunder	3	7.5
Malayalee	-	
Ceylonese	-	
<b>Total</b>	<b>40</b>	<b>100</b>

The figures in table 3, clearly indicate that the Tamilians are the dominant linguistic group, followed by the Telugus. This figures can also be used to represent the whole of the Indian community in Changkat Asa Estate. Not only are the Tamils the dominant linguistic group in the estate but majority of them are Hindus. This trend also prevails in other estates in Malaysia due to historical factors.

As noted by Arasaratnam (1979) not only are 80% of Indians in Malaysia Tamil speakers but a large percentage of them are also Hindus.

The questions as to why the Tamilians and Telugus seem to constitute the large portion of the Indians in this estate can be explained by Ampalavanar's (1972) statement,

'The labouring class is generally constituted of the lower caste originating from Madras and Andhra provinces'.

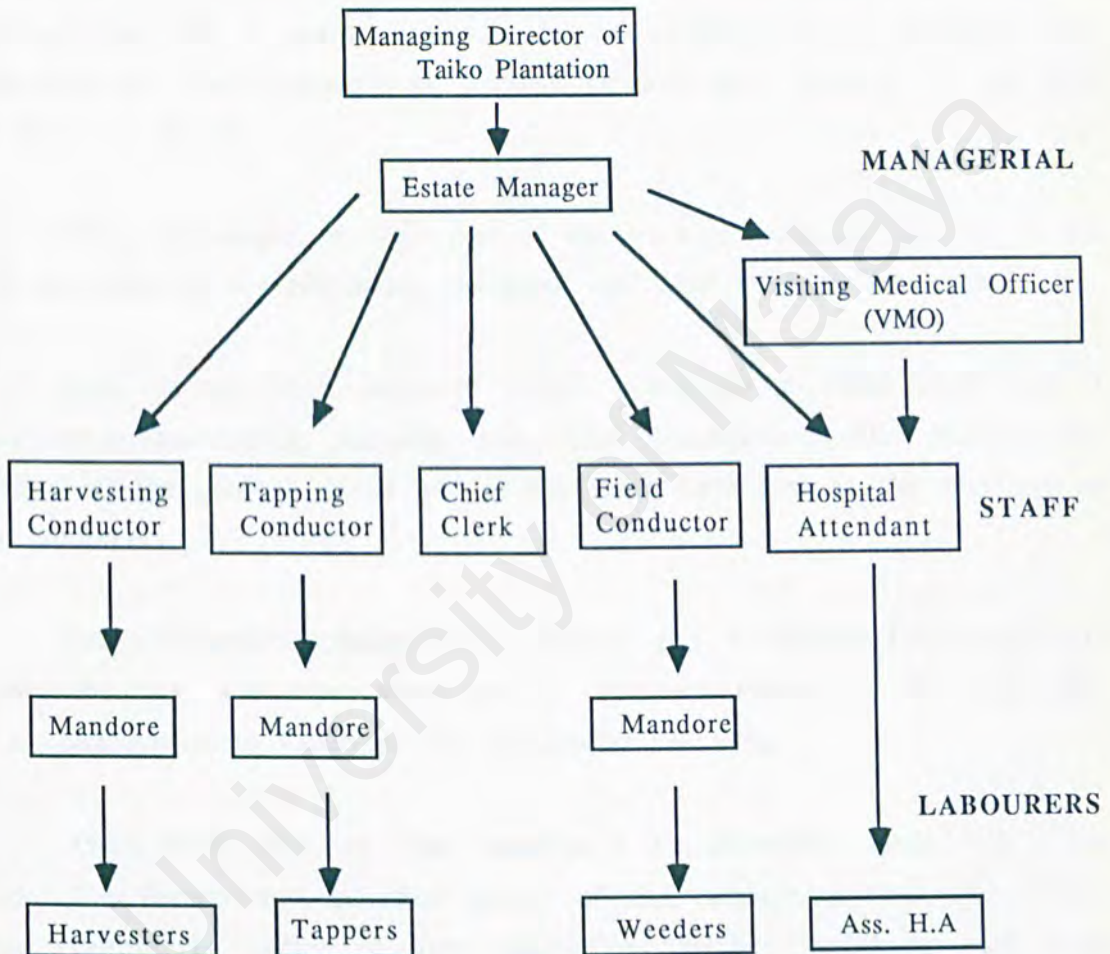
Since the Tamilians and Telugus originated from Madras and Andhra provinces respectively, they form the big portion of the Indians in Changkat Asa estate as well.



## 2.4 Occupational Structure

The following chart indicating Changkat Asa's economic organization clearly depicts the foregoing social class formation

Figure 1 - Economic Organization - Occupational Structure



The economically active population in Changkat Asa estate can be divided into 3 distinct classes : *managerial*, *staff* and *labourers*. There are 2 main differences in the occupational structure;

- i) Labourers are paid a daily rate depending on their output whereas the members of the staff and management receive a monthly salary.

- ii) The management and staff comprise only men whereas both men and women work as labourers. This indicates the existence of gender bias in the estate's employment.

In Changkat Asa, the estate manager is the man of the highest authority. He is directly responsible to the Managing Director of Taiko Plantation. The present estate manager is a Chinese man who has been working there for 2 years. However, he has acquired vast knowledge and experience in estate management because he has been working in this line for nearly a decade.

Being a manager, a large part of his working hours is devoted to the field but most of his afternoons are spent on paper work in the office.

Next, is the staff category which comprises a chief clerk and 3 conductors; harvesting, tapping and field conductors. The chief clerk handles all the clerical duties and at the same time acts as the secretary to the manager.

The conductors consist of 2 Indians and a Malay. Conductors are indeed the first line supervisors that all labourers report to. The main task of a conductor is to supervise the workers in the field.

Apart from that, he also handles a considerable amount of office work. The formal and informal power of the conductors over the tappers and weeders in terms of tree allocation, rubber weighing and work evaluation make them powerful men in the labouring class. Residents in the labour line often approach the conductors for help when they have problems for example marital disputes.

The hospital attendant better known as the '*dresser*' has a good deal of interpersonal relationship with the labourers. He is responsible for the treatment of minor illnesses and issuing medical certificates when necessary. His tasks also include the inspection of the estate surrounding to ensure a healthy living environment.



The last group is the labour group which consists of the mandores (overseers), oil palm harvesters, tappers, weeders, drivers, etc. Although the mandore is categorised under the labour group, he receives a higher income. The mandores are actually under the supervisions of the conductors. A mandore's task is to lead the workers to the field and closely check on their performance.

The security of the estate is in the hands of the auxilliary Police Force who works on daily shifts.

The following illustrates the labour force in Changkat Asa estate.

Table 2.4 - Changkat Asa's labour force until April 1987

Occupation	Ethnic	Indian	Malay	Chinese
Tappers		72	-	
Harvesters		27	14	1
Weeders		38	4	
Line Sweepers		4	1	
Child Minder		1		
Water Pump attendant		1		
Auxilliary Police Force		-	3	
Driver		5	-	
Contract Labourers		-	2	1
<b>Total</b>		<b>150</b>	<b>23</b>	<b>2</b>

\* source - information provided by the manager

As indicated in table 5, the majority of the Indians still predominate their traditional job; tapping. There isn't a single Malay or Chinese tapper. Probably they lack the skill required for tapping. Malays are more involved in the oil palm sector where the majority work as harvesters. However, the Chinese labour force contributes only a little to the productivity since there are only 2 Chinese labourers in this estate.

Between the three hierachical groups; manager, staff and labourer there is little social interactions outside matters related to estate production. The interaction between the labourers and staffs is less impersonal and formal compared to the interaction between the labourers and the manager.

On the whole, the hierachical structure of the whole organisation is quite rigid and there is not much scope for mobility. A dresser, a clerk or a conductor has very little chance of improving his position though he may be enjoying a special status by virtue of his position such as better housing benefits.

Similarly, a weeder would not be easily absorbed into the tapper group because the nature of the latter's occupation requires some amount of skill.

Overall, the labourers in the estate represent the most depressed and exploited sector of the estate community. They are trapped in an environment that prohibits and limits physical as well as psychological mobility.

As Zain (1970) acknowledged,

'The Indian labourers not only produce rubber for export but also grow up, marry, save, consume, quarel and cooperate and dies in the estate'.

## 2.5 Amenities

The physical layout of Changkat Asa estate has all the characteristics of a planned community. The settlement itself shows the influence of centralised control over community living. Being self-sufficient in almost all respects, Changkat Asa estate has its own laterite road, houses, a creche, temples, surau and shops as well as a dispensary, a kindergarden and a school. In other words, the management provides the basic amenitis for its workers all within the estate.



### 2.5.1 Housing facilities

The most striking feature of the settlement area viewed from a high advantage point is the planned nature of the settlement with rows of estate labourers' houses. Staff quarters are not part of the labour line.

There are two types of houses in the labour line, the first being wooden structures and the other brick ones. The former were built between 1955-1957 while the later were built recently between 1974-1982. All together there are exactly 160 units; 80 old units and 80 new units. Although both types of houses are semi-detached, the brick houses are relatively bigger and more spacious compared to the older units. This is probably because they were constructed in accordance to the Worker's Minimum Standard of Housing Act of 1966 which requires the management to provide a covered floor space of not less than 260 sq. ft in an area of a household of not more than 5 adults.

Basically the old units are too small and congested and they restrict the occupants movement in the house. Besides this most of the units are in bad condition. This being the case, the occupants in the old units are actually deprived of a proper shelter. The effects of poor housing on its residents can be seen in the words of Alvin L. Schorr in his books, 'Housing Policy and Poverty'.

According to the manager, allocation of new housing units depends on a few criteria;

- i) whether both husband and wife are working in the estate
- ii) the years of service
- iii) household size

The manager also stated that the company has intention to build more units in 1988, that is if everything works out as planned.

### 2.5.2 Health facilities

In compliance with the labour law which stipulates that the health of the workers and their dependents is the responsibilities of the employer, Changkat Asa estate provides medical facilities for its workers.

The estate clinic is open daily from 8.00 - 10.00 a.m., 5 days a week only because the same Hospital Attendant is responsible for other estate clinic in the other divisions. The Hospital Attendant in Changkat Asa can be regarded as a backbone of the estate medical service. Common illnesses treated are cold, fever and diarrhoea; mostly among the children. However, acute severe illnesses and severe injuries are treated at the district hospital of Tanjung Malim.

According to the Hospital Attendant, although an amount of \$700 is provided by the estate for medical supplies, it is inadequate for the proper functioning of the clinic.

This was apparent when I came across patients bringing their own medicine containers such as tupperwares and cups to the estate clinic.

Casual conversation with the respondents regarding the estate's health service revealed that most of them were unsatisfied with it. They said that the medicine prescribed by the Hospital Attendant was ineffective and they had to pay a considerable amount for better medical services in town. However, a few appreciated the free medical service in the estate.

In addition to free medical service in the estate, the workers are also entitled to free medical treatment in the clinic owned by the estate VMO.

### 2.5.3 Water and Electricity Supply

The management provides free water supply to all the households in the estate. However, the water supply is only available for a few hours daily, between 2.00-6.00 p.m. Supplying electricity is no longer the responsibility of the management since it is supplied by the National



Electricity Board (NEB). Although the workers have to pay for their electricity bills, most of them do not seem to mind as now they have electricity supply throughout the day.

#### 2.5.4 Temples

In Changkat Asa, there is a total of 3 temples. The Muniandy Temple built by the management many years back is now forsaken by the workers in preference for the Maha Mariamman Temple built in 1968 by the government. There is also another Mariamman temple (Nookalama - in Telegu) built by the Telegus in the estate. Many years back, the Tamilian and Telegus used to worship together in this temple. However, due to some misunderstanding, most of the Tamils worship at the Maha Mariamman Temple now.

The annual temple festival in the estate is celebrated in the month of March for 3 consecutive days and is celebrated on a stupendous scale. According to the treasurer of the temple Committee, an amount of \$1600 is spent annually for this auspicious festival.

During the annual villa celebration, everyone in the estate irrespective of age, status and caste work together as one big family. In conjunction with the festival, the workers are given one day off from work.

#### 2.5.5 Creche

In accordance with the Workers Minimum Standard of Housing Act of 1966, Changkat Asa estate provides a child care centre better known as 'creche'. The function of the creche is to take care of young children while their parents are out to work. The creche is open from 6.00 a.m. till 3.00 p.m. An Indian and a Malay woman are employed as 'ayahs' at the creche by the management.

At the time of this study, there were 50 children under the care of the ayahs. Although the act covers only children 3 years of age and below, there were at least 15 children above the age limit. These children were left



at the creche since there were no elderly people in the family to look after them.

Through personal observation at the creche, I realised that the condition of the creche was unsatisfactory; the 2 ayahs were just unable to cope with so many children. Fans, mattresses, pillows nor toys were provided for the children. The children had to sleep on a wooden platform, while smaller babies were put to sleep in 'buayans' which were usually stained with urine.

#### 2.5.6 Other facilities

There is a sundry shop and a coffee shop in the estate. Both the shops are run by an Indian man. The estate management charges him \$80 monthly for the use of the premises. The sundry shop supplies the daily necessities for the workers. Although the price of goods here is relatively high, most of the workers are willing to shop here since it is very convenient for them. Furthermore, the shop keeper in the estate allows credit.

The coffee shop serves as a common meeting place for the men workers. Food as well as alcohols such as beer and toddy are available. According to the hospital attendant, alcoholism is not a serious problem in the estate.

A football field is also provided by the estate management. Every day, rain or shine, groups of youngsters can be found playing on the field. Football seemed to be the most popular sport among the youngsters and adults. This is probably due to the lack of other recreational facilities. Although there is a badminton court, it is underutilised.

#### 2.5.7 School

Most of the children in Changkat Asa estate attend the Tamil National Type School in the estate. This school was built in 1968. There was a school constructed in 1937 in the accordance to the Immigration Law in 1912 prior



to the present school. Why do most parents send their children to the Tamil primary school?. The reasons are as follows :

- 1) Sending the children to the school in the estate is cheaper than sending them to schools in towns since transport expenses are not involved. If they are sent to schools in town, the transport expenses is \$10 month per child.
- 2) Most parents want their children to be proficient in their mother tongue and learn about Indian culture.
- 3) Some of the parents were advised by the teachers to send their children to the Tamil School.

#### 2.5.8 Activities in the estate

The Bell Club with its 130 members contributes much to the estate community. The traditional Indian art of self-defence -'*Silamba kalai*' is taught twice a week at this club. The ongoing kindergarten in Changkat Asa is the result of the initiation taken by the Bell Club. Seven years ago, there was no kindergarten.

All the estate workers excluding the staff and contract workers are registered under NUPW as members. According to NUPW's incumbent secretary in the estate, the branch in Changkat Asa has been operating for over a decade.

He also stated that the new community hall constructed by the government worth \$50,000 was due to the effort of NUPW in the estate. However the old community hall built by the management is still in use, more frequently in fact for gatherings and meetings compared to the new one due to its ideal location.

In terms of political activities, nothing much can be said since the MIC branch was only recently set up.

## 2.6 Summary and conclusion

The main purpose of this chapter is to highlight the enterprising nature of the estate and some of its features which are not found in other types of such agro-industrial structures. The description also focused on the living conditions in the estate.

In the settlement pattern, there is a great degree of centralised control over community living. Among the workers, an almost independent society has been established; a society that has been provided with the necessary amenities such as housing, medical facilities, religious requirements, a kindergarten and a creche - the basic amenities are provided but the quality of the amenities is altogether another matter.

The demographic structure of the population here shows the predominance of South Indian Tamil-speaking Hindus. Another notable feature is the small size of the working population and the high dependency ratio in the Changkat Asa estate.



## Chapter 3

### Concepts and Theories

#### 3.1 The Concept of Attitude

The concept of attitude is actually derived from Latin : '*aptus*' and '*aptitude*', the former has the significance of fitness and adaptedness, the latter a subjective or mental state of preparation for action.

Since the early decades of the 20th century, many psychologists have attempted to define this abstract concept. One of the earliest attempt was by Droba D.D (1933:63) who defined attitude as

'A mental disposition of the human individual to act for or against a definite object'.

Another classic definition of attitude given by Walter (1934) is ,

'The specific mental disposition toward an incoming experience whereby that experience is modified; or a condition of readiness for a certain type of activity'.

Of the two definitions stated above, Walter has given a more elaborate and specific definition. Walter regards experience as an important element since it has some amount of influence on one's perception and also prepares oneself to react in a specific situation.

In 1935, Allport managed to produce a dynamic and concrete definition which is still accepted today. He states that attitude is

'A mental and neural state of readiness, organized through experience, exerting a directive or dynamic influence upon the individual response to all objects and situation with which it is related' (1935:810).

The key word in Allport's definition is 'experience', which he regards as the main determining factor in attitude formation. It is obvious Allport and Walter share the same view. Both regard experience as an important component in attitude formation.

The definitions given by these three social psychologists have proven to be useful since most of the present social psychologists refer to their work as a guide. In contrast to Allport's definition. Kretch and Crutfield who were strongly committed to a cognitive approach defined attitude as

**'An enduring system of 3 components centering about a single object, the belief - the cognitive components, the effects connected with the object - the feeling component and the disposition to take action with respect to the object - the action tendency component'. (1962:147)**

The first component cognitive consists of all the cognitions one has about a particular object - the facts, knowledge and beliefs concerning the object. The second component; feeling/affective consists of all the person's affect or emotions towards the object especially evaluation. The third component; action tendency/behavioral consists of the person's readiness to respond or act regarding the object. In other words, one's attitude towards any object/idea comprises of three interrelated and interconnecting components.

One significant difference between Allport's and Kretch's definition is the fact the latter omitted reference to the origin of the attitude and instead concentrated more on the current subjective experience. On the contrary, Allport who was influenced by the learning approach, emphasized on the former.

Taking into account both Allport's and Kretch's definition of attitude, one's behaviour and action can best be explained. In actual fact, there is a



direct correlation between one's attitude and behaviour. This is stated by Kretch and his associates, Crutchfield and Ballachey,

**'Man's social action - whether the actions involve religious behaviour, ways of earning a living, political activity or buying, selling goods - are directed by his attitude'.**

**(Azjen 1983:13)**

This study is carried based on the assumption that one's attitude reflects one's behaviour and vice-versa. For example, if a woman shows positive attitude towards the idea of a mother nursing her child, then it is very likely that the woman also breast feeds her baby. Conversely, if a woman shows negative attitude towards breast-feeding, it may not be through her own willingness. Also, if a woman says she breast-feeds all her children, this can also be used as an index to show that she has a positive attitude, unless she too is forced to do it. However before reaching a final decision on whether the woman has a positive attitude or not other factors also need to be taken into account.

Allport's emphasis on past experience as an important element in attitude formation will also be taken into account in this study. Basically, past experience in attitude formation is actually linked with cultural determinants such as socialization process in the family and community, learning process and an individual's background in religious aspects etc.

These factors play an important role in attitude formation and it can also be assumed in the context of this study that the cultural determinants mentioned above, influence the attitude of the Indian women in the estate towards breast-feeding.

### **3.2 The Concept of Women and Work**

Work is a universal concept that prevails in any society but it has to be defined first to avoid misconceptions and confusion later on. The concept of work as understood and practised by modern societies varies



compared to primitive societies. This is elaborated by Gross (1958) in his book 'Work and Society'

'To the individual in a modern industrial society, work is usually identified with the means of earning a living. In simpler societies, the relationship between work and such basic necessities as food, clothing, shelter is a direct one for the individual, as for a comparatively small group of 10, they consume only what they are able to produce.'

However, Gross's view is not shared by Mc Luhan. The latter argues that work does not exist in simple societies. He says,

'Work does not exist in a non literate world. It begins with the division of labour and the specialization of functions and tasks in sedentary agricultural communities.'

(Mc Luhan 1971:33)

The point Mc Luhan is trying to make is that the concept of work only emerges with the introduction of division of labour in agricultural communities. In other words, only when there is a division of labour among the individuals, can a task be regarded as work.

Another attempt to define the concept of work was made by Fox and Sharlene (1982). According to them, work is an activity or expenditure of energy that produces services and products of value to other people.

In other words, any activity that produces valuable services and benefits other people can be regarded as work. Fox and Sharlene did not take into account the aspect of wage as payment to an individual for the expenditure of his energy.



This definition is applicable in any society whether it be a simple or modern society. However, economists do not share the same opinion. A general and common definition of work by the economists is stated by Fransella and Frost.

**'As a labour power which could be sold for a wage  
which in turn could buy other commodities  
necessary for the worker and his family.  
(1977:17)**

As a conclusion, we can say the concept of work depends on the reference of time and space. What is regarded as work, today might not be accepted in years to come. However, in the context of this study, I have opted to face the economist's view and idea to define 'working woman'. A working woman is a woman who sells her labour power outside her home in return for a wage in the form of money.

### **3.3 The Concept of Role.**

To understand the relationship between the performance of breast-feeding and the role of a woman as a mother, it is vital to look into the definition of role. There has been much disagreement and debate among social psychologists and sociologists in coming up with a common definition for this concept. Banton (1965) in his book 'Roles' writes about the differences in opinions regarding this concept among many scholars such as Linton, Newcomb, Kingsley Davis and T.R. Sabin.

An attempt was made by Wallace to define the concept of role. He articulated role

**'as a routinely performed activities which  
depends for its continuity on the routine  
performance of other activities.  
(1969:84)**

From this definition, we can regard 'role' as an action which is performed daily and it very much depends on other activities for its continuity.

According to Gross (1972:33)

'Role can be defined as a set of expectation or in terms of our definition of expectations. It is a set of evaluative standards applied to the incumbent of a particular position'.

On the whole, Gross's definition is an improvement compared to Wallace's. He focusses more on how a person is expected to react and behave depending on a standard norm in a society.

Using a functionalist approach, Talcott Parson defines role as the following.

'Every member of a social unit be it a ship, or a football team, an individual has one or more parts to play. He has tasks to perform and is entitled to receive services from other people in recognition of his contribution. Those cluster of rights and obligation constitute role ..... By right is here understood a socially sanctioned claim either upon other person or upon society in general. By obligation is meant a socially sanctioned expectation binding a person to meet certain legitimate claim.'

(Banton 1965:28)

The important aspect highlighted by Parson, is the fact that an individual has functions to perform based on rights and obligations set by the society.



In 'The Study of Man' (1936) Linton explains that role represents the dynamic aspects of a status. On the whole, Linton's idea is parallel to Parson's when he states,

**'When (an individual) puts his rights, duties into effect, he is performing a role'.**

The characteristics of the concept of role can be summarised as a set of expected behaviour which comprises of status, rights and obligations.

In daily life an individual plays multiple roles. For example, a married woman plays the role of a wife, mother and houseworker all at the same time. All these can be categorized as private role since it involves a woman within the household domain itself. But when a woman goes out to work, she is actually playing an additional role as a wage earner. In other words, she is actually performing a public role which was predominated by the men only. When an individual plays too many roles, sometimes conflicts in roles can arise including conflicts between private and public roles. For instance, a working woman might not be able to perform the expected role as a mother due to her involvement with her public role.

Therefore, in this study of the attitudes and performance of Indian working women towards breast-feeding, the focus will be given to their dual roles - private and public roles that they play today.

### **3.4 Role of Man and Woman : Theoretical Perspective**

Why is it that the basic expectation of a society that woman should stay at home and attend to their husband's and children's needs while the men go out to work to support his family?. I will attempt to answer the reasons for differentiation in roles as above by focussing in sociological and religious perspectives.

In the sociological approach, two controversial groups emerged so as to determine the factors that differentiate the role of a man and woman, one being the 'biologist' and the other the environmentalist.



The biologists argue that biological factor is the prime determinant of the role differentiation. As a result of biological differences, women are engaged in less strenuous activities such as cooking, cleaning and attending to other household chores. In other words, with regard to woman's physical weakness relative to man and with the reproduction function, they are tied to the household with the task of caring for their children. On the other hand, men who are physically stronger and do not have the responsibility of conceiving and delivering babies, thus have more freedom to get involved in more activities such as hunting, logging and construction etc.

The task that women are involved in, can be categorized as feminine work whereas the men engaged themselves in masculine work.

The biologists view can be substantiated using primitive societies as an example. In this society, there already existed a division of labour depending on the age and sex factor. As a result of this division, women were assigned to look after their children while the men went out to work as sole breadwinners.

In the biologists group, Winch can be regarded as one of the most prominent scholar. In a review based on Murdock study on societies around the world, he stated that division of labour based on sex societies occurred repetitively over a long period until finally it became a fixed role and was established as part of culture and norm. As a result, no one questioned it and it was regarded as a natural characteristic of mankind. Bott in 'Family and Social Network' very aptly explains this.

'All couples took it for granted that there should be a basic definition of labour between husband and wife in which the husband was primarily responsible for supporting the family financially



and the woman was primarily responsible for looking after the children and seeing that housework and cooking were done'.

(1957:197)

On the other hand, the environmentalists were convinced that the prime role determinant between men and women was not biological heredity but social conditions and culture in a society. They argue that physical and emotional characteristics that are innate in women do not hinder the women from participating in a man's job-outside their household domain. However they do not deny that there is a difference in role between the 2 gender, only the discrepancy is not rigid. They agreed there is male dominance in societies but they believed this can be overcome.

One scholar who can be grouped under the environmentalists is Engels. His argument is presented in his book 'The Origin of Family, Private Property and the State' (1972). In his work, Engels provided a basis for explaining the origins of female subjugation through tracing certain developments in the growth of the family as an institution and then relating these developments to changes in the mode of production. Dividing the progress of society basically into three stages - savagery, barbarism and civilization, he tried to show how the role women play in society passed through a series of changes, in keeping with social and economic changes, in order to become what it is today.

In the savagery period, Engels showed that the process of 'hunting and gathering' respectively assigned to the male and female members of the savage tribe, were 'social tasks' that were of equal importance and value to the society. He said that the division of labour between the two sexes was determined by causes entirely different from those that determine the status of woman in society. Although women were assigned to the tasks, based on her biological functions of child bearing and rearing, women also contributed and were active in economic and political spheres. This is due to the fact that child care was the responsibility of the entire community and



biological motherhood carried very little special social status for the women.

With the transition of Barbarism, Engels claims that the position of women underwent changes. The transition of property from being communally owned to becoming the property of individuals is seen as the reason why women's position receded. The change from hunting agriculture eventually resulted in a sedentary residence pattern. The restriction on movements imposed by the process of child bearing confined the women to their homes. The men being more free to move about, were more actively involved in agriculture and even warfare. As a result of warfare, a surplus of production and wealth was often created. The men began to control this surplus and finally propagated the right of man to own and inherit property, on an individual basis.

Thus in the latter stages of barbarism, men were said to have established economic and social dominance over women. All this set into motion a hierarchy of tasks where men's tasks were higher than those of women. In the era of civilization, male supremacy in regards to property ownership nurtured into a social norm which resulted in the formation of the patriarchal system.

From Engel's argument, it is obvious that women's role became confined to the household due to the emergence of property ownership by men. Although the biological function of a woman is important to a certain extent in determining the women's role, a more important factor is the emergence of private property in the hands of men.

However, Engels further adds that women's subjugation and male dominance can be overcome through the participation of women in public industry.

Dahlstrom (1967) supports Engels's argument that the emergence of patriarchal legacy was the main reason in influencing the role women played. According to Dahlstrom, in the patriarchal system, women were regarded as incapable of managing their own affairs and this helped to



create a situation whereby women became dependent their husbands. This resulted in both the women and men playing different roles. Dahlstrom elaborated on this,

**'Political authority was reserved to men. As virtuous wife and fertile mother, the women assumed a privileged and protected position. In the household, the women was responsible for important aspects of production'.**  
(1967:21)

Mitchell (1976) in an article entitled 'Women, the longest Revolution', argues that the female role which is closely linked to the area of production, reproduction, sex and the socialization of children is largely caused by social coercion. Mitchell also states that social subordination of women is not the consequence of bio-historical fact.

In conclusion, we say that the biologists emphasise on biological factor as the prime determinant in differentiation in roles between men and women. On the other hand, environmentalist focus on social situation, such as the emergence of property ownership in the hands of man and patriarchal system as the main reason.

### **3.5 Role of Women : Hindu perspective.**

The role of Indian women workers in Malaysia has its roots in the traditional model of Indian women in ancient India which is influenced by Hinduism. The relationship of woman to the notion of role has undergone much changes even in traditional India. It is indeed a fallacy to maintain that in traditional India, women's role was confined to the home and family.

In ancient India, in the early Vedic ages, women seem to have enjoyed equal rights with men. In other words, there was no differentiation in roles between men and women. Following the teachings of the Vedas, the Hindu legislators gave equal rights to men and women by declaring that,

'Before the creation of this phenomenal universe, the first born lord of all creatures divided his own self into two halves, so that one half should be male and the other half female'

(Abhedananda 1963:254)

The wife and husband being equal halves of one substance were regarded equal in every respect and both took equal part in all duties - religious and social. All these illustrates that women's role were not only limited to their biological function but extended also to religious and social function outside the household domain. The women enjoyed a high status and work together with men even outside the household. Much of the agricultural work for example was carried out by the women.

Women in the Vedic period were also given equal rights in education and freedom of movement like the men. P. Kapur's paper entitled 'Women in Modern India', claims that according to most authorities, women were held not only as centres of domestic life but also as pivots of the entire social organization, right up till 300 B.C.

However, after this period the roles and duties of woman began to be restricted to the household and areas related to it. Manu, the Hindu law giver who was one of the principal Hindu kings of his times and who later became a very important religious law maker differentiated the roles a man and woman should play. He stated,

'There is a vital structural differences between man and woman ..... Each one is suited for different kind of work. Man intended by nature to do all the rough and hard work for earning bread while woman is designed for household affairs, duties less strenuous but requiring a good deal of love, affection which none but she alone can bestow.

(Das 1962:39)



Manu indirectly stated that due to physical differences between a man and woman, each should perform different roles, for example a woman's role should be related to household duties such as looking after and caring for her children and husband.

Manu further added

**'to be mothers were women created'**

This clearly shows that the prime role of a women, according to Manu is actually being a mother. Manu also said that mothers have to act as the caretaker of her children and is not permitted to separate from them on any account.

All this explains further that Hindu woman's place is at home and her role is being a mother and taking care of her children.

Radhakrishnan in 'Great women of India' corroborates what Manu has said by stating

**' ..... the biological formation of the woman and constant subjection to pregnancy and delivery necessarily being in their train at state of helplessness leading to dependence. This biological and structural peculiarity of women is responsible for the role which has been fastened upon them.**

(Das 1962:42)

So only with the introduction and implementation of Manu's law did women begin to perform different roles from men. From a position of co-equal with men, she was given a subordinate rank. Her role involves being a good mother, wife and was supposed to be responsible only in the household domain and not outside.

### 3.6 Role of Women : Historical Perspective

Today it is evident that most women are playing a private as well as a public role. As commented by Fransella and Frost,

'At the present time, large numbers of women including mothers are doing what they are not supposed to be doing - they are at work, either by necessity or choice'.

(1977:21)

This statement challenges the common assumption of a woman's role. However it cannot be denied that woman's role as breeder - feeder producer is still regarded as important in present day. Boulding comments on this,

'From the earliest and simplest hunting and gathering folk to the most industrilized society of the 20th century, the breeding of babies of woman, above and beyond other processes in which she is engaged'.

(1977:55)

So, while the present day women are involved in public role, they have not abandoned their private role. Thus, they are actually playing both roles at the same time.

Theoritically, women's involvement in public role is caused by many factors such as industrialization, capitalism, mechanization, technological innovation, higher education attainment and change in values.

As a review of Shreiner's book entitled 'Women and Labour', shows in the uncivilized period, women played a private role which was restricted to the household domain. Gradually, as time passed on, they began to contribute towards family economy by working in the field. However, due to the location of the fields near the household, there was no clear



distinction between the role of a woman as a mother and worker. She was able to perform the duty as a mother and worker at the same time.

However, due to industrialization, women entered the labour market outside of their home and they were paid for their services even if they were discriminated in terms of wages. Shreiner's discussion was based on the situation in Britain when it underwent Industrial Revolution which inevitably changed the women's role from private to dual roles.

Industrialization as one of the factor that changed the role of women is also explained by Marx (1930). Marx stated that women's role prior to industrization was limited to domestic tasks only. Industrization e.g with the use of machinery, women's labour as well as children's were first sought means of cheap labour. In other words, due to the introduction of machinery, there was a heavy demand for women's labour, thus getting the women involved in the wage economy outside their home.

According to Holter (1970) women's role underwent changes as a result of technological development and change of values in the society. With technological advancement and achievement in education, women were given the freedom to choose the roles they wanted to play. Thus women were able to compete with men and play the pre-male dominated public role. Also, the change in the pattern of the economy from self-sufficiency to consumption orientated resulted in women working outside their household to earn money. Thus men were no longer the sole breadwinner.

Dahlstrom (1967) shares the same opinion as Holter. According to Dahlstrom, due to industrialization, traditional societies went through a tremendous change. This further resulted in changes in values and attitudes of the society, which gave women an oppertunity to acquire education. This process gradually changed the role of women from a private to a public role.



Shorter (1976) explains how the role of women in France in the 16-19 centuries underwent changes as a result of capitalism. He claims that prior to capitalism, women's role was subordinate in the economy and only focussed on daily domestic chores such as cleaning, cooking and child bearing. He added that only after capitalism, did women enter the market economy and brought in resources from outside as wages.

In theory, women's role underwent drastic changes from private to public roles as a result of industrialization, mechanization, capitalism and change in political structure, social system and value system in a society due to the processes mentioned earlier. However, regardless of all these processes which undoubtedly opened the door for women's participation in the wage economy these processes alone cannot explain why the women wanted to play public role. It's obvious that there must have been various push factors as well to explain this phenomena.

Although there are many reasons, I will only touch on two important factors. The first reason is that women who have acquired a high level of education set out to work basically for self-satisfaction. Their motive is not to fulfil the economic necessity in their families.

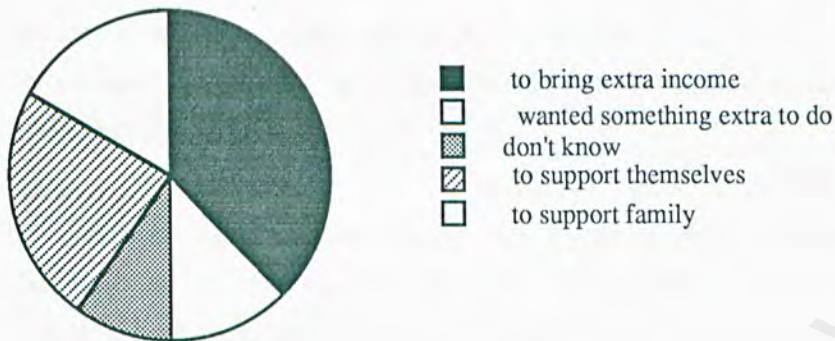
The other reason is that some women play the public role out of sheer economic necessity. Basically, the husband's income is insufficient to support and maintain the proper functioning of a family. In other words, they are driven out to work due to poverty in their families. Lois states,

'It is noted that women give money as their main reason for working and cliche though it might be, it is undoubtedly a major motivation'  
(1963:24)

Another study by Roper Organization carried out in U.S in 1980 reveals the same finding as Lois. The main motive women gave for working is economic necessity.



Below is a pie chart to illustrate the findings of Roper Organization.  
(Fox and Sharlene 1982:37)



The women in the second category also share something in common. Most of them either have no education at all or have a low level of education, thus they normally get lower wage compared to the first group.

The Indian working women in this study can be categorized into the second group since majority of them have low attainment level in education and they seek employment as a result of financial difficulties.

### 3.7 Role of Indian Women in the estate.

Although the traditional role of an Indian woman as Manu states - must be a devoted mother-caretaker of her children and wife to her husband and her role is restricted within the household, in present day, there is a breakthrough from the traditionally assigned female activities whereby Indian women are very much involved in 'male activities'. To understand the change of roles of Indian women in Malaysia historical factors must be taken into account. The participation of Indian women in the estate is closely linked with the Industrial Revolution.

Indian women first entered Malaysia along with their menfolk who came to work in the plantation sector. The British entrepreneurs in search of cheap labour - chose Indians from South Indian due to many reasons. In the early stages, majority of the Indians who migrated to Malaya were men.

It was only later that the British administration specifically urged for the migration of Indian women to combat immorality and also to provide a constant supply of labour, through conjugal family units. Then, Indian women in the plantation began to be significant in the late 1920's. As Sandhu notes - women made up 25-45% of the total labour force in the Malay States and more than 80% were involved in the agricultural sector.

(1969:245)

The women sought employment as a result of economic hardship - income brought in by their husband were insufficient. The women, usually having low level of education or none at all were employed in factory work - such a processing rubber, tapping and field work like weeding.

**'In 1947, out of the 50,068 women workers in the rubber industry, 40,524 or 81% were tappers and the rest weeders and factory workers on the estate'**

(Del Tufo - 1947:442-445)

Besides playing the public role, the Indian women were still playing their expected role in the household (private role). Involvement in the public role does not mean that employed mothers perform fewer household chores compared with the non-employed mothers. The explanation for this could probably be related to traditional role conceptions as can be seen in the following statement.

**'However, a cursory acquaintance with the Hindu culture would reveal that the internalization of some roles concerning household are so firmly established that the Hindu women find it hard to ignore their household duties, inspite of their newly assumed wage earner role'.**

(V.V.P Rao & V.N Rao 1975:194)

In other words Indian women in the estate were playing multiple roles. The multiple roles the women play can result in conflict of roles for example between their private role (expected role) and public role. A



woman is thus torn between 2 roles - one, trying to be a good mother by wanting to nourish her child with the natural method and on the other hand, trying to bring in extra income for her family. Keeping an open mind, leaving aside the criteria of whether there is a positive or negative attitude towards breast-feeding and its performance, I would like to look into the effect of dual roles women play towards these matters. In other words, emphasis is placed on the public role Indian women play and how it affects the performance of a woman as a mother in nourishing her child through.

## Chapter 4

### Bio Data of Respondents and their Families

This chapter will provide the bio-data of the respondents and their families to help in the later analysis.

#### 4.1 Age of respondents and their husbands.

The table below shows the age of the respondents and their husbands at the time of this study..

Table 4.1

A g e	Husbands		Respondents	
	No	%	No	%
< 20	-			
20 - 24	-		2	5
25 - 29	3	7.9	6	15
30 - 34	5	13.2	6	15
35 - 39	10	26.3	8	20
40 - 44	5	13.2	8	20
45 - 49	2	5.3	6	15
50 - 54	6	15.8	3	7.5
> 55	7	18.4	1	2.5
	38	* 100	40	100

\* 2 husbands - have passed away

The figures in table 1 are a rough approximation given by the respondent but they are sufficient to illustrate the age pattern among the respondents and their husbands.



Relatively most of the women are in their late thirties and early forties, thus making up 40% of the total number of respondents. The average age of the respondent is 38 years. The respondents aged between 20-39 years constitute 55% while those between 40-55 years make the other 45%.

These percentages were taken into account when I divided the respondents into 2 categories; women below 40 years of age and above 40 years of age. In the category below 40 years, there are 22 women whereas in the other there are only 18 women. This proves that there are more women in the former category.

Most of the respondents' husbands are in their late thirties and above. The mean age for the respondents' husbands is 43 years. This indicates that on the whole, the men are much older than the respondents.

#### 4.2 Age of Marriage

Table 4.2

Age	Husbands %	Respondents	
		below 40 years	above 40 years
< 10	-	-	5.5
11 - 15	2.5	13.6	50
16 - 20	20	45.5	39
21 - 25	57.5	36.4	5.5
26 - 30	17.5	4.5	-
31 - 35	2.5	-	-
36 - 40	-	-	-
<b>Total (No)</b>	<b>40</b>	<b>22</b>	<b>18</b>

The table above shows that the age of marriage for the men is relatively higher than that of the women in both categories.

Approximately 1/2 of the men (57.5%) married at the age of 21-25. There is only one case whereby the man got married at the age of 13. About 20% of them got married between 26-35 years old. The average marriage age for the men is 23 years.

Now let us look into the womens' category one by one. Among the women below 40 years of age, most of them got married in their late teens and early twenties. About 45.5% of the women got married between 16-20 years, followed by 36.4% of them who got married between 21-25 years. There is only one woman who claimed to have got married at the age of 26 but her reason for marrying late was not disclosed. The mean age of marriage for women below 40 years old is 18.5

Among the women above 40 years old, there is a distinct dissimilar pattern. The majority of them got married before they reached 21 years of age. About 50% of the women in this category got married between 11-15 years old. Another 39% replied that they were in their late teens at the time of their marriage. There was only one extraordinary case whereby a respondent got married at the age of 24. In this age group, the mean age of marriage is 15. This figure is relatively lower than that indicated by the other group.

From the analysis of the figures in table 2, two findings can be put forward.

- i) Indian women in the estate marry at an earlier age than the men.
- ii) The majority of the women above 40 years old got married at an earlier age than the women below 40 years old.

One of the reasons why Indian women marry at such an early age compared to the men is closely linked to Hindu traditional beliefs practised in India a very long time ago. It is said in the **Baudhyana Dharmasutra**



'Let him give his daughter, while she goes still naked, to a man who has not broken a vow of chastity and who possess good qualities, or even to one destitute of good qualities, let him not keep (the maiden) in (his house) after she has reached the age of puberty '.

(Kapadia 1958:138)

This partly explains why the parents get their daughters married off on reaching puberty. This explanation can also be substantiated by the Brahmanic work of the early Christian era whereby a father is said to feel happy to dispose of his daughter in marriage between the ages of 10 and 12. This sacred works also enjoins,

'The father or guardian incurs the sin of destroying an embryo at each appearance of menses as long as the girl is unmarried after puberty'.

(Kapadia 1958:139)

Therefore, a girl is married off as fast as possible once she reaches puberty. Otherwise, the father will incur a sin. Kapadia gives social factor to illustrate why Indian women on the whole marry at an early age. As stated by Kapadia,

'Woman is not fit to be independent. At every stage in her life she should be under the dominion of someone, her father, her husband a son. The idea of marriage was the transference of the father dominion over her in favour of her husband. This tranference should take plave before a girl reached the age when she might question it. This was an additional factor influencing the age of marriage (1958:42)

Kapadia's statement above clearly explains that in the patriarchal legacy, a woman is deemed to be incapable of looking after herself thus making it necessary for her to be under the dominance of a man all her life.

The factors such as traditional Hindu beliefs and patriarchal legacy explains why most Indian women in the estate are married off by their parents at such an early age. However among the women below 40 years old, the age of marriage is relatively higher compared to the women above 40 years. This could be due to the changes in values and attitudes among Indian families in the estate as a result of the modernisation, urbanization and industrialization process.

On the whole, most of the men got married after they reached 20 years of age. This is probably due to 2 reasons. Usually when the girls parents decide to get her married off, they seek a matured and self-supporting men. The men should make a living for himself and be able to support their daughter. Another reason is that the men themselves find it difficult to support a family should they marry young. Thus, because of the girl's parents' expectations and the men themselves, most of the men decided to settle down after they reached 20 years of age.

#### 4.3 Level of education among respondents and their husband.

Table 4.3

Level of Education	Husbands		Respondents	
	No	%	No	%
Primary level:				
Std. 1	2	5	-	
2	1	2.5	-	
3	1	2.5	6	15
4	1	2.5	2	5
5	2	5	4	10



Level of Education	Husbands		Respondents	
	No	%	No	%
6	21	52.5	12	30
Secondary Form 1-2	2	5	1	2.5
L.C.E	2	5	-	-
M.C.E	1	2.5	-	-
No education	7	17.5	15	37.5
<b>Total</b>	<b>40</b>	<b>100</b>	<b>40</b>	<b>100</b>

From the figures in table 3, we can conclude that not all the respondents and their husbands attended school. Those who did had low levels of education.

On the whole, we can say that the rate of illiteracy is higher among the respondents. This is because only 62.5% of them received formal education compared to 82.5% among their husbands.

Although 82.5% of the men attained formal education, none managed to go beyond Form 5. Out of 70% of the men who attained education at primary level, only 17.5% were able to complete Std. 6. This is because most of them dropped out of school at an early age.

Among the women the same pattern is prevalent but the casualty rate is higher. Out of 60% of those who attended school at the primary level, more than half dropped out of school before reaching Std. 6.

Among the men, the highest level of education attained is MCE. There was one man who managed this far. However in the case of the respondents, none succeeded in pursuing their education beyond Form 2.

Of those respondents and their husbands who received some form of formal education, 53.8% attended Tamil medium school. 7.5% attended Telugu medium schools whereas only 2.5% attended Malay and English medium school.

On the whole, we can say that more men have attained formal education compared to the women. Why is this so? It is my contention that the parents felt education for girls was deemed to be not as important as for the boys. Most Indian parents felt that it was impractical to give a girl education. This is because once she reaches puberty, she will be married off and become a housewife.

The table below is actually a further illustration of table 3. This table is tabulated to indicate the differences in education attained between the 2 categories of women.

Table 4.4

Level of Education	Respondents			
	below 40 (%)		above 40 (%)	
Primary level	16	72.7	8	44
Secondary Form 1-2	1	4.5	-	
LCE	-		-	
MCE	-		-	
No education	5	22.7	10	56

On the whole, more women below 40 years old obtained formal education compared to the older women. Approximately 77% in the former group had formal education compared to only 44% in the latter. This clearly shows that women in the younger age group are more fortunate than the older women where education opportunity are concerned. This is probably due to the change in interest and values on the part of their parents. Education was no longer deemed to be necessary for the boys alone.



#### 4.4 Family Size

Tabel 4.5 - Size of the family

No of children	No. of respondents	Average Age
1 - 2	4 (10%)	24
3 - 4	15 (37.5%)	37.1
5 - 6	12 (30%)	36.08
7 - 8	7 (17.5%)	42.42
9 - 10	2 (5%)	49.5

Out of the 40 respondents, 37.5% of them have 3-4 childrens. 30% of the women have 5-6 childrens. On the whole, the average number of children for each respondent is approximately 5. The average number of children would have been higher if it was not for the high infant mortality rate. 42.5% of the respondents reported cases of infant and toddler death among their children. The infant mortality rate was slightly higher among the women above 40 years old. For these women, the average infant mortality is 2.375. While among the women below 40 years, the average infant mortality is 1.1.

One possible answer for this is that most of the women above 40 years started having babies at an early age. Since the majority of them got married before the age of 20, this factor eventually affected the health of the infants. If there were no cases of infant mortality, the average number of children for each respondent would be 6.

Although the average number of children is 5, this number will not remain static for very long because those who have 1-6 children at present are still within the child bearing age and there is a possibility that the size of the families might get larger in years to come.

#### 4.5 Occupation of respondents and their husbands.

Table 4.6

Type of work	Husbands		Respondents	
	No.	%	No	%
tapper	17	45	30	75
weeder	1	3	10	25
harvester	3	8		
mandore	1	3		
gardener	2	5		
tractor driver	2	5		
loading the tractor	2	5		
own business	3	8		
dispenser	1	3		
retired	6	15		
<b>Total</b>	<b>38</b>	<b>100</b>	<b>40</b>	<b>100</b>

As shown in the table above, 77% of the women respondents are tappers while only 25% of them are weeders. Among the menfolk, even though relatively most of them (45%) are in tapping field, unlike the women, they are also involved in other jobs.

The type of work both the respondents and their husbands are engaged in now are attributed to the low education attained among them. Thus this signifies the direct correlation between education and occupation.

One distinct feature illustrated in the table is that there are more women tappers than men tappers at present. This is clearly shown in the table whereby there are 30 women tappers compared to 17 men tappers. This pattern was not in existence in the past. Historical data reveals that in the past, men were the sole tappers in the plantations. However today they no longer monopolize this job.



In relation to the type of work, the men are involved in, the majority of them (89%) work within the estate. Those working out of the estate are either self-employed and run their own business or are working in the town.

Eventhough a number of men have retired but most of them still contribute towards the family by assisting their wives in tapping. For those who are involved in the estate work, their work starts as early as 6.00 a.m. and finishes shortly after 2.30-3.00 p.m. For most of the workers, the afternoon is a time for rest after a day's work in the field. For others, it is the time to earn extra money for their families by doing additional part time jobs both within and outside the estate.

Through the interviews with the respondents, I found that only 3 of them and 4 of their husbands are involved in part time jobs.

The type of part time jobs by the respondents and their husbands is shown below

Table 4.7

Type of jobs	Husbands	Respondents
Pruning of oil palm trees	1	2
chauffering	1	-
assistant in the saundry shop	2	-
washer women in the manager's house		1
none	34	37
<b>Total</b>	<b>38</b>	<b>40</b>

This proves that the majority of the respondents and their husbands do not have part time jobs. The lack of women's involvement in part time jobs is due to lack of time. Once they come back from work, they have to switch roles to their private roles as mother, wife and housewife. The small number of men doing part time work indicates they lack the initiative to

improve their standard of living. I strongly believe that if there is more participation from the men in part time work, the lives of their families can be improved.

4.6 Relationship of members in the household to respondent.

Table 4.8

Relationship	No	%
children & husbands	30	75
mother in-law	2	5
mother	3	7.5
daughter in-law	1	2.5
others	4	10
Total	40	100

It is interesting to note that 75% of the respondents claimed that their household is composed only of their children and husband. Only 5% of the respondents below 40 years old have their mother in-laws staying with them whereas 7.5% have their mothers staying with them either temporarily or permanently. Through observations, I realised that these mothers were acting as baby sisters while their daughters go to work.

The table above shows that the nuclear family made of by the respondents, husband and their unmarried children is the most popular family structure in the estate.

However, a few months before this study was undertaken, there was a case of the joint family. Due to some misunderstanding the family member eventually separated and went their different ways. It seemed that 2 brothers were staying in the same household with their families. The elder of the two was the head of the family and attended to both the families needs. At the time of my study, both families were still residing in the estate but in different households. The traditional Indian family do not exist in



the estate nowadays. It is possibly related to limited space in the labourer's house which do not allow the accomodation of many people. Insufficient income to support so many members in the family is another reason.

Even though the prominent family structure is the nuclear family, the size of it sometimes ranges from 2 in one family to 11 members in another family. The average number of members in a household was found to be 5.35. The number of members in a household is smaller among the women above 40 years old sincemost of their children are either married or are working outside the estate.

#### 4.7 Household income

On the topic of income, I will focus on the number of wages earners in a family to determine the household income. Besides this, the household size will also be taken into account to evaluate the economic status of the respondents and their families.

Below is a table to illustrate the type of wage earners in a family.

Table 4.9

Type of wage earners	Age Category	
	Women below 40	Women above 40
Respondent only	4.5%	17%
Respondent & husband	95%	22%
Respondent, husband, children	-	28%
Respondent & children	-	33%
<b>Total number</b>	<b>2 2</b>	<b>1.8</b>

It is obvious that in the younger age category, there are only 2 types of wage earner; namely 'respondents only' and 'respondents and their husband'. The women in this category have no working children to contribute into the household. In the other age group, children do play an important part as wage-earners in a family. As a result of this, the total

household income among the younger women is much lower. This is proven in the table below.

The relationship between the number of wage earners and the households average income is shown in the table below

Table 4.10

No. of wage earner	Average income
1	265
2	516
3	664
4	900
5	-

Since most of the households of the women below 40 years have only 2 wage earners, the average household income is \$516. The household income which exceeds \$600 is common among the women above 40 years old. This is due to the contribution of more than 2 wage-earners in a family.

However this does not mean that in those households where there are more than 2 wage-earners, the standard of living is higher than the rest. Other factors such as the household size also has to be taken into account. The total household income in relation to it's household size is tabulated into a table as shown below.

Table 4.11 - Total household income by household size

Household size	Income (\$)									Total houshold
	200-299	300-399	400-499	500-599	600-699	700-799	800-899	900-999	1000-1099	
1										-
2		1								1
3		-	4		1					5
4		1			2	1				4
5		1	4	1	2					8



Table 4.11 - Total household income by household size (cont...)

Household size	Income (\$)									Total houshold
	200- 299	300- 399	400- 499	500- 599	600- 699	700- 799	800- 899	900- 999	1000- 1099	
6	1			3	1				1	6
7			1	3	2	1	1			8
8			1			1				2
9				1	1			1		3
10				1						1
11							1			1
Total	1	3	10	9	9	4	2	1	1	40

On the whole, the household income of the respondents ranges from \$200-\$1000. The majority of the households (70%) earn between \$400-\$700 with a mean household income of \$728. Although the mean household income is high, it does not necessarily indicate that all the workers in the estate have a high economic status. When the factor of household size is taken into account, this will prove that most families in the estate have a low economic standard. Take this for an example. A household of 3 wage earners with a total income of \$900 cannot be regarded as economically better off than a household with an income of \$700. A household of 9 members with a total income of \$900 is in no better position compared to a household of 4 members with an income of \$700.

As shown in the table above, although some households have an income of \$800 - \$1000, with an average household size of 8, they actually do not have a high standard of living.

Using the household size and household income as a determinant of economic status among the respondents, it can be said that generally, women below 40 years with an average of 5 children are financially worst off than the older women. This is due to the children's involvement in work in the latter category. However, among the women above 40 years who have 8-11 members in a household, they also face financial difficulties. Only a small portion of the respondents are financially stable and secure.



## Chapter 5.

### Infant Feeding Practices

The aim of this chapter is to describe infant feeding practices and ascertain the attitudes towards breast-feeding among Indian women in this study. The factors that influence the attitudes towards breast-feeding and its performance will also be looked into. Generally it can be said that breast-feeding is determined by economic and socio-cultural factors.

#### 5.1.1 Infant feeding practices.

The infant feeding practices in this study refers to the youngest child. The findings from the survey are indicated in the table below.

Distribution of infant feeding by age (for the youngest child)

Table 5.1

Age (months)	Breast-feeding		Type of feeding				Bottle-feeding	
			Mix-feeding					
	Women below 40 years	Women above 40 years	Women below 40 years	Women above 40 years	Women below 40 years	Women above 40 years	Women below 40 years	Women above 40 years
	%	%	%	%	%	%	%	%
1	73	72	18	11	9	17		
2			73	78	29	22		
3			22	78	68	22		
4			14	56	86	44		
5			14	56	86	44		
6			9	50	91	50		
12			5	22	95	78		
24			—	22	100	98		
36				6	—	94		

Breast-feeding was found to be the common infant feeding practice in this study. 73% and 72% of women below and above 40 years respectively solely breast-fed their youngest child after birth.

Next to breast-feeding solely some women also partially breast-fed (mix-fed) their babies. The figure is 18% and 11% in the age category of below and above 40 years respectively. The third type of infant-feeding used was bottle-feeding. Among the younger women, only 9% bottle-fed in the initial stages after delivery whereas 17% in the other group bottle-fed.

Although breast-feeding is a popular practice, those women who breast-fed fully after delivery did so for a duration of one month only. In the second month, they either switched totally to bottle-feeding or continued with breast-feeding partially. Most women in both the age groups continued with breast-feeding partially after one month.

This is illustrated by the tremendous increase under 'mix feeding' in the second month. Among the younger women, from 18%, the figure increase to 73%. In the other group, from 11% in the first month the figure increased to 78% in the second month.

Under 'bottle-feeding', the increase in % is not so significant in the second month. There is an increase of only 18% and 5% in the age category of below and above 40 years in the second month.

Two significant patterns visible in the table are;

- i) The percentage of women in both groups who mix-fed gradually declined in the following months.
- ii) The percentage of women in both groups who bottle-fed gradually increased in the following months.

Although both these patterns are present in both groups there is a difference in trend. For example under the 'mix feeding' category, there is a sudden decline in the third month from 73% to 32% in the younger age group. However in the other group, the sudden decrease is apparent only after 6 months, a drop of 50% to 22%. This means that the declining rate is relatively higher in the younger group.



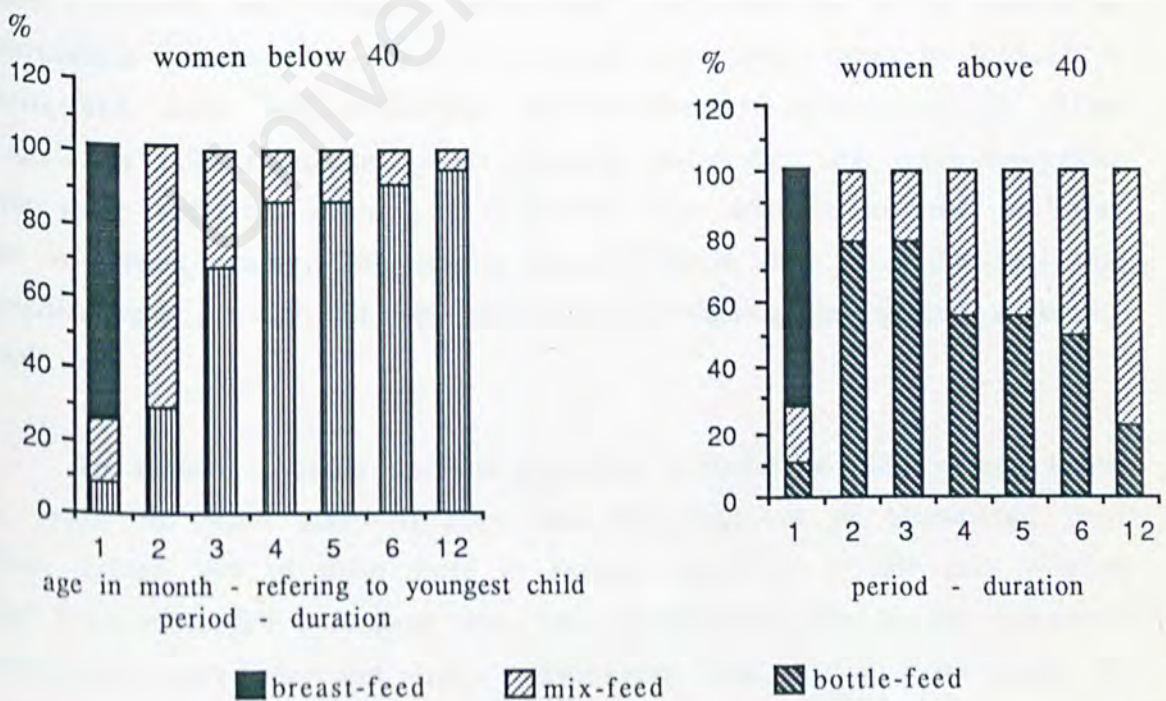
In other words, after 2 months, most women below 40 years old switched totally to bottle-feeding whereas most women in the other group did so only after 6 months. Another distinct difference between both groups is related to the duration of partial breast-feeding. In the younger group, the longest duration was 1 years where as some women in the other group continued for 3 years.

Although there are differences in both groups, the mean period of breast-feeding is almost the same. Among the older women, the mean period is 4.5 months whereas in the other it is 3.1 months.

On the whole, we can say that the younger women are not indifferent towards breast-feeding as we might have expected. This is proven with the high percentage who either breast-fed fully or partially after delivery.

The data illustrated in diagram 1 is reproduced into graphs as shown below.

Diagram 1



To cross check if all women did actually have positive attitudes when they breast-fed, they were asked if they were forced by anyone to do it. All denied it. In fact, breast-feeding was regarded as an enjoyable experience in their life. This proves that Indian women in the estate, regardless of their ages have a positive attitude towards breast-feeding. Even those who chose to bottle-fed initially were actually in favour of breast-feeding. However due to some circumstances, they were forced to bottle-feed. The reasons given by them are as follows.

Table 5.2 - Reasons for bottle-feeding

Reason	Age Group	
	below 40	above 40
No milk secretion	-	1
Baby's preference	1	-
Medical reason	1	2
	2	3

The reasons above point out that even though these mothers have positive attitudes and wanted to breast-feed, they could not do so because of unavoidable circumstances. This also proves that these women's decision to bottle-feed were not influenced by commercial promotion of infant formula by milk companies. It is common knowledge that milk companies with their aggressive efforts have always been blamed for the declining rate of breast-feeding. The results of this study point out the fact that advertisements actually did not succeed in influencing the women to bottle-feed.

To achieve a better analysis regarding attitudes, all the women below 40 years old were asked if they had any intention to breast-feed their future babies. All of them were in favour regardless of the fact whether they have breast-fed before or not. This is probably due to the successful mothering experience and other advantages that make them want to continue to breast-feed their future babies.



The discussion above points out that all the women regardless of their age and the type of infant feed given to their youngest children have a positive attitude towards breast-feeding.

### 5.1.2 Reasons for breast-feeding

The reasons why the Indian women breast-feed will be discussed in this section. They were asked to give reasons for breast-feeding. The answers most frequently given by the respondents were then ranked from No. 1-7.

The findings are shown according to their importance in table 5.3

Reasons	Age Group	
	below 40 rank	above 40 rank
good for the baby	1	1
free	6	4
health of mothers	3	2
not prone to infections easily	2	5
closeness to child	5	6
delay pregnancy	7	7
convenient	4	3

Although the reasons differ in terms of importance between both groups, the prime reason given was similar that is 'breast-feeding is good for the baby'. Such knowledge was mostly acquired from their mother, mother in-law and nurses. Reasons such as cost and convenience were less frequently mentioned. However, I believe that free cost of breast-milk did play an important part among those who breast-fed.

The second most frequent reason given by the younger women for breast-feeding was that breast-milk protected the babies from infections. However, among the older women 'health of mothers' was found to be the second most frequent reason. According to them, breast-feeding prevents

the engorgement of the breast and thus lactating mother would not fall sick. The least important reason is 'to delay pregnancy' which was given by only 1 or 2 women in both age categories.

### 5.1.3 Reasons for supplementing breast-milk with artificial formula at the initial stages.

Reasons given for supplementing breast milk with artificial formula were insufficient breast milk and convenience of bottle-feeding. The women said that bottle-feeding is convenient because it takes less time and allows them to cope with the housework. It is also convenient because other family members too can bottle-feed the baby when they are busy. Besides this, it helps the baby to adapt itself to artificial formula so that there won't be a problem when the mother goes to work.

### 5.1.4 Reasons for stopping breast-feeding

Before proceeding with the reasons that curtails the period of lactation, it is important to look into the ideal duration of breast-feeding as mentioned by the women.

Table 5.4 - Ideal duration of breast-feeding

Period	Age Group	
	below 40 years	above 40 years
< 6 months	-	-
6 - 12 months	3 (14%)	2 (11%)
more than one year	5 (23%)	8 (44%)
as long as possible	10 (45%)	7 (39%)
don't know	4 (18%)	1 (6%)

Looking at the table above, it's obvious that the ideal duration is much longer than the actual duration as seen from diagram 1. The majority of the women in both categories gave 'above 6 months' or unlimited months' as the ideal duration. In reality, all women 'breast-feed wholly' for



only one month although some continued breast-feeding partially (partial weaning) for a few months with the mean period of breast-feeding being 3.1 and 4.5 months respectively in both age groups.

With this evidence, the fact remains that women in both categories stop breast-feeding their babies completely at an early stage. Why is it that those women in both categories who breast-fed fully after delivery without any supplementation of infant formula continued to do so for a period of one month only. Even though it cannot be denied that most of them continued partial breast-feeding for a few months even if the duration was short.

The important factor to explain the short duration of complete breast-feeding is actually linked to the women's involvement, with their public role as wage earners. They could not breast-feed totally for a longer period because they had to go back to work one month after delivery. In other words, their involvement in wage economy has indeed acted as a definite obstacle to the performance of breast-feeding among the women.

Related to the women's involvement in their public role which restricts breast-feeding period are the maternity law and the type of work they are involved in.

In Malaysia, it is stipulated in the Labour Act 1985 that a working woman in the private sector is entitled to 60 consecutive days of paid maternity leave for the first 5 children. This is in conjunction with Dr. Mahathir's 70 million population policy. Prior to this, working women were entitled to maternity leave for the first 3 surviving children.

In the context of this study, all the women above 40 years old and most women below 40 years old were influenced by the latter policy. Only a few in the younger age category are affected by the latest policy.



Since most of the respondents had more than 3 children and the questions directed were concerning their youngest child, it's very obvious that they were not entitled for the maternity leave of 60 days. All of them took unpaid leave for a period of one month only. This is partly the reason to explain the short duration of breast-feeding instead of 2 months as stipulated by the maternity law. Although the women showed a positive wish to breast-feed for a longer duration, they did not stop work permanently or take longer unpaid leave because of their commitment to their families' welfare and well-being. They said if they stopped work for a few months their families would have financial difficulties. Since the income brought in by the husbands are insufficient for the proper running of the family, the financial situation would be greatly affected if the women stopped work just to breast-feed their babies.

Wages paid to the labourer's in the plantation sector are extremely low. If a woman stopped work for many months, its effect would be greatly felt by her family members especially the children. They might be deprived of a proper diet and other essentials in life. The common statement given by the women aptly describes their financial situation.

'If I stop work, who is going to feed the rest of my children. My husband's income is inadequate for all'.

However, a few women said they did not take a longer period of unpaid leave in fear of being sacked by the management and risk unemployment which they could not afford. The strict management is understandable considering the fact that the estate is under capitalists whose main motive is to maximise their profit. If the lactating women were given extended leave, the estate would face labour shortage and this might result in the decline of profit.

It is actually surprising to discover that although women in both categories who had for 3 or less number of children were entitled for 60 days of maternity leave, they too breast-fed for a period of one month only. Further probings revealed that these women took a month's leave prior to their delivery. Thus leaving only 30 days for confinement and to breast-



feed totally. This takes us to the question of why the women took approximately 30 days leave before their delivery instead of 60 days after delivery. The answer to this lies in the type of work they are engaged in. Tapping and weeding might not seem difficult tasks for a normal working women but they are for an expecting one. A tapper besides tapping, has to deal with other strenuous and back-breaking tasks such as carrying latex of more than 10kg for some distance to the shed. Basically, women in the estate deal with physically straining tasks so the expecting women is forced to stop work during the 8th month of pregnancy. This leaves only one month for any working mother who wishes to breast-feed fully.

Even among those who were not entitle to maturity leave. Most took approximately a month's leave before delivery because they were unable to cope with the strenuous tasks involved. Generally although many faced financial difficulties when they stopped work they had no choice. Only a few continued working until the delivery date with the assistance of their children because of the bad financial situation in the family.

The Labour Act 1955 and the agreement reached between NUPW and MAPA in 1972 which requires the employer/company to provide maternity leave a month before and after delivery is also responsible in influencing the women to stop work a month before delivery. Most of the women also gave this reason to explain why they had to go back to work one month after delivery. Although the present maternity law does not specify 30 days before or 60 days after delivery, the young women still prefer to take a month's leave before delivery. Even now the Hospital Assistance in Changkat Asa estate said he usually advised the women to stop work approximately a month before delivery.

It is my belief that even if it was not stated in the labour law that expecting women should be allowed to stop work a month before delivery, the women in the estate would have still taken leave before delivery because of the difficult tasks involved.



The discussion above points out that the women were unable to breast-feed fully longer than a month because of their involvement in work force. As much as they would like to breast-feed their babies, they are unable to do so because they have to think of the welfare of their other older children as well. This it can be said that women's role in the wage-economy is an important one. The main motive for working was to augment the family's income. In fact they were forced to go back to work one month after delivery out of sheer economic necessity.

In conclusion, it can be said that related factors such as maternity law and the type of work involved in by the women and their motive for working explain why the women do not stay at home more than a month after delivery. This situation also applies to those women who are not entitled to the maternity leave.

Other reasons for complete weaning at an early stage are shown in the table below.

Table 5.5

Reasons	Age Group	
	women < 40 years	women > 40 years
- no more breast-milk secretion	36	56
- decided to stop breast-feed completely after getting wet in the rain	20	36
- baby was taken care by relatives outside the estate	13	-
- no time to breast-feed	13	-
- medical reasons	6	8
- baby's preference for artificial formula	6	-
- pregnancy	6	-
No. of respondents	20	15



As shown above, most women were forced to stop breast-feeding partially when there was no more breast milk supply. The decrease of breast milk happened once they started work. These women associated the decrease in breast milk supply with the weather. Since they were involved in outdoor activities such as tapping and weeding and were exposed to the sun most of the day, they felt that the hot weather causes the breast-milk to dry up. However, this is a misconception.

The actual reason is related to the lack of sucking of the baby at the mother's breasts when she is at work. It is stated in the '*Guidelines on breast-feeding For Medical and Health Staff*' by the Malaysia Paediatrics Association (1985:3) that the quantity of breast milk production is related to the amount of suckling stimulus; frequency, intensity and duration with which the baby nurses. Since all women are either tappers or weeders, their work sometimes takes them 2-4 miles away from home depending on their allocated sites. Thus they are separated from the babies in terms of space. Besides this, working under a capitalist management with fixed and rigid working regulations, makes it impossible for the lactating mothers to go back home to nurse their babies at feeding time. Even though they have a short break in between their work, it is impossible for them to go back home and then return to work because of the distance ; 2-4 miles. However, it might be possible if the management themselves provide transport for lactating mothers. Since the mothers are only able to breast-feed after work, this results in the drop in breast-milk production which subsequently reduces the period of lactation. Even if they had wished to prolong the duration of nursing, it might not be possible because of the absence of breast-milk supply.

In relation to the rigidity of present working regulations, I would like to highlight the situation many years back. According to a 76 year old grandmother, who was a tapper, she was able to breast-feed all her babies without any supplementation for a period of one year. She said that she usually went back home at 9.00 a.m and 11.00 a.m to breast-feed her babies. This was because the estate management was more lenient. If such was the case today, the performance of breast-feeding among the estate women would be more successful.



Another important reason why the women stopped breast-feeding early is related to the Indian traditional belief. Basically, estate working women are involved in outdoor activities, are liable to get wet in the rain frequently. Related to this is the traditional Indian belief that a lactating mother should stop breast-feeding if she gets wet in the rain. Otherwise the cold will be transmitted through the breast-milk to the baby. The figures in the table shows that even the younger women believe this folk tale. However, a few women in this category did not believe in such an explanation.

In actual fact, a mother can continue with breast-feeding even if she has a cold. It has been stated in medical books that intercurrent cough and cold in the mother will not be transmitted through breast milk. The woman's explanation reveals that they are not exposed to corrent information due to lack of education. If more women are educated, the duration of breast-feeding partially could be prolonged.

An important factor for the early weaning period among the younger women is also related to the non-existence of the traditional Indian family i.e. joint family. About 13% of the women in this category had to completely stop breast-feeding when they send their babies to be looked after by their relatives outside the estate while 13% said they did not have the time to breast-feed.

In other words, there is lack of assistance from the elderly members in the family due to the breakdown of the traditional Indian joint family. As mentioned in earlier chapter, the nuclear family is the most popular family structure in this estate. Due to this factor, some babies are fostered out once the mothers start work. Even though a creche is available in the estate, these women do not like the idea of sending their babies there due to the low quality of care.

Those women who said they did not have the time to breast-feed resorted to bottlefeeding. Bottlefeeding was found to be convenient for the women since their elder children and even their husbands could do it while they attend to housework. Without the assistance and support from elderly



members of the family, these women are unable to spare the time to breast-feed. Most women below 40 years old stressed that they were solely responsible for all the household work. Since the women are playing a public role, they can attend to the housework such as cooking, cleaning and washing only after work. The heavy burden of playing dual roles and lack of assistance from elderly members makes it difficult for some women to even 'breast-feed partially' successfully

An important thing worth noting is that none of the older women had their babies fostered out or said they did not have the time. This could probably be due to the existence of joint families many years back in the estate.

On the whole, it can be said that women in both age groups were forced to stop breast-feeding completely not because they wanted to. The prime factor which is responsible for early weaning is woman's involvement in their public role due to economic necessity. Factors such as maternity law, type of tasks involved, the strict and rigid working regulations which are actually linked to women's involvement in their public role limit a successful nursing period. Other factors such as traditional beliefs, lack of education, non-existence of the joint family also prohibits a longer duration of lactation even if it is only partial breast-feeding.

#### **5.1.5 Factors that influenced the women to breast-feed**

Generally it can be said that those women who breast-feed did so because they were influenced by external and internal factors. Although all the women in this study claimed to have breast-fed willingly, it is preposterous to say that they did so because of an innate tendency. In other words, before these women had internalized a positive attitude towards breast-feeding and initiated breast-feeding, they were influenced by various elements.

In this section, focus will be given to the various factors that influenced the women to breast-feed.



### Advice: Internal and external source

Advice from various sources do play an important part in establishing a positive attitude towards breast-feeding. Advice in this context can be categorised into 2; internal and external sources. Internal sources, refer to the family members whereas external sources refer to any sources outside the family. First, lets look at the various internal sources who advised and influenced the women. The table below show the various advisers in the family as mentioned by the respondents.

Internal advisers.

Table 5.6

Age group	Sources							
	Husband	Mother in-law	mother	husband & mother in law	husband & mother	mother in law & mother	husband mother & mother in-law	None
	%	%	%	%	%	%	%	
below 40	14.6	9.6	14.6	4.5	14.6	14.6	32	-
above 40	17.6	28	11	11	17	17	6.5	6.5

As shown in the table above, internal advisers in both categories are their mother, mothers in-law and husbands. The most outstanding feature in the table is that majority of the women in the younger age group claimed they were advised to breast-feed by 3 members in the family. The information in this table indicates only the various advisers but not the most influential person. The following table will illustrate this.

Most influential adviser

Advisers	Age Group	
	below 40	above 40
husbands	36	17
mothers in-law	24	44
mothers	36	28
Others	-	5.5
None	-	5.5



Among the older women, 44% claimed that their mothers in-law were the most influential persons, followed by their mothers. No doubt husbands too advised their wives to breast-feed. However their influence is less significant among the older women. One women claimed that no one advised her to but she breast-fed all her children because it was the natural thing to do.

In the case of the younger women, the most influential persons were their mothers and husbands. In this group, the mothers in-law were no longer the preponderant advisers, probably because the women no longer live with their mothers in-law.

The most obvious pattern between both groups is that among the women above 40 years the influential advice was more female centered. However in the younger age group, the men can be regarded as equally important.

The reason why in the older age group, men were not the most influential advisers lies in the traditional conception of the role a woman plays since the men felt that women as child beares and feeders would know what was best for the babies, they left this area in the hands of the older women. However, in the younger women, the men seemed to have shown a greater interest regarding this matter. This indicates a change in the traditional conception of the role of a man and woman. The fact that the man also advise their wives to breast-feed indicates one important fact, that is the men in the estate do not regard the woman's breast merely as a sexual subject but also is a mechanism to nourish the young. In cases where the men did not advise their wives to breast-feed, the respondents claimed that their husbands were not displeased with them. The common assumption that the men in the present generation do not like their wives to breast-feed prove wrong.

Another feature worth noting is the decline of the mothers in-law's influence. They were the most influential advisers in the older category but the least important in the other. This is probably related to the breakdown of the traditional family structure from the joint family to the



nuclear family and now since most mothers in-law do not stay in their son's house they do not exert the same amount of influence on their daughter in-laws as they did before.

External Source of Advice. Table 5.8

Sources	Age Group	
	below 40	above 40
Doctors	9	5
Nurses & midwives	60	39
Friends	23	27
No one	9	27

In both groups, most women claimed that the nurses and midwives were the most important source of external advice. However, in the older age group, they seemed to have played a lesser part. This is because most women in the older age category did not attend any ante natal checkups for all their children and they also gave birth at home. Thus many were not advised by the nurses. Most did not go for ante natal checkups because they could not afford the transport cost and the clinic was too far away from the estate. Furthermore there was a visiting medical officer who came once a month to the estate and examined the expecting mothers.

Some of the younger women said that in addition to encouraging them to breast-feed, the nurses also recommended the proper diet to ensure abundant milk supply.

Advice from friends is equally important in both categories. An important feature worth noting is that high incidence of older women than younger women who did not receive any external advice. However, they still breast-feed all their babies. This proves that external advice was less important among the older women in terms of influence. Although advice from nurses was more important among the younger women than among the other, most of them said that family members were a greater influence.



I would like to highlight the fact that in comparing the internal and external sources, the former had more impact among women in both groups. However, external sources did act as an additional reinforcement towards breast-feeding.

In conclusion, we can say that the women internalized positive attitudes towards breast-feeding as the result of advice and encouragement given primarily by family members. The women accepted the advice and then initiated breast-feeding willingly.

#### Past Experience and Learning Process.

Another factor which is responsible for the internalization of positive attitudes towards breast-feeding among the Indian women is related to their past experiences. Almost all the women in this study who breast-fed their children admitted they themselves had been breast-fed by their mothers. Once they become mothers, they willingly nursed their children. Recent research suggests that the mother-baby contact in the mother's own infancy is also related to the ability to breast-feed in adulthood.

Some of the women said they were aware that babies ought to be breast-fed even when they were still young. This is because they had seen their mothers nursing their younger siblings. In other words, they had internalised a positive attitude towards breast-feeding through a learning process in the family. Breast-feeding was thought as the best and natural way to nourish the young since their mothers had done it. In actual fact, these women were following the role model of their mothers. They too try to be good mothers like their mothers had been. One way was to breast-feed their children.

#### Norm in the community.

Breast-feeding is also found to be the norm in the estate. It is still regarded as the best way to nourish the young. A woman on becoming a mother is expected to carry out the physiological function.

Although breast-feeding is expected of a mother, most women breast-fed not because they were afraid of the sanction which will be cast upon them. They initiated breast-feeding willingly and had internalized positive attitudes towards breast-feeding. But the norm does exert some amount of influence on the women.

The factors discussed above such as advice from various members, role modeling and the learning process are important elements that have internalized positive attitudes among the women to breastfeed. However breast-feeding as part of the norm in the community too does reinforces their decision to breast-feed. Actually all these variables are interdependent with one another, and have to be seen as a whole. However, advice from family members during pregnancy and after delivery is the most important variable.



5.2.1 Breast-feeding patterns

With regards to the infant feeding pattern, I took into account when the women first initiated breast-feeding their babies.

The answers given are shown in the table below.

	Age Group	
	below 40	above 40
Immediately after delivery	1 5%	
1 hour	6 30%	
3 - 6 hours	2 10%	1 6.6%
6 - 12 hours		1 6.6%
12 - 18 hours	1 5%	
18 - 24 hours	1 5%	
2 days	4 20%	3 20%
3 days	5 25%	9 60%
5 days		1 6.6%
	20	15

The figures above show a distinct dissimilarity between the two age groups. In the older age group, majority of them initiated their first feed 3-5 days after delivery. However, in the other, most of them initiated breast-feeding within the third day of delivery. Many started to breast-feed within one hour after delivery. This was because most of them were advised by the nurses while a few were encouraged by their mothers to initiate nursing as soon as possible. Those women in both groups who initiated breast-feed after 2 days did so because they were influenced by various factors. Reasons given are shown in the table below.

Table 5.10

Reasons	Age Category	
	below 40	above 40
1) Nurses advises to breast-feed a few days later	11	25
2) Mother's body must be clean before starting breast-feeding	44	-
3) Meconium must come out of the baby's body before one can breast-feed.	11	17
4) felt too weak to breast-feed		8
5) Colostrum is harmful for the baby		8
6) There was no breast milk flow for the first few days	22	42
<b>Total number of respondents who answered</b>	<b>9</b>	<b>12</b>

44% of the women below 40 years initiated breast-feeding a few days after delivery because they were influenced by traditional belief. Even though 33% out of 44% admitted that they were advised by the nurses to breast-feed immediately after delivery, they did not do as advised. This is because they strongly hold on to the belief that a mother's body ought to be clean before breast-feeding can be initiated. Since they had their first bath a few days after delivery, they were unable to breast-feed earlier.

Among the older women, the majority said they did not breast-feed immediately after the delivery because there was no milk secretion. 22% in the younger age group gave the same reason. The women associated the absence of milk flow with the Indian traditional beliefs. They said they were not allowed to consume rice in the first few days after delivery. They believe that there was milk flow only after they had consumed rice.

Another important reason which influenced the older women to breast-feed 2 or 3 days later is their nurses' advice.



Other traditional beliefs such as the meconium factor and the harmfulness of colostrum are also important among the older women. 17% said they were advised by their relatives to initiate breast-feeding after all the meconium ( the Indian women called it - katthe pee) was out of the baby's body. This usually takes a few days.

Although colostrum (initial flow of milk) actually contains abundant amount of antibodies, a few women said that it was harmful to the babies. Such a belief was also recorded by Julie Burns (1980:205) in her study on the Guetamalan communities. According to her, the Guetamalans defined colostrum as pus, dirty water, poisoned and spoiled milk.

On the whole it can be said that the younger women still hold on to traditional beliefs. This is why some did not initiate breast-feeding a few hours after delivery. The delay in starting breast-feeding is an indication of the necessity for proper education of the parents.

An important point worth noting is the differences in advice given by the nurses in both age group. In the older age group, most of them were advised by the nurses to initiate breast-feeding a few days after birth. However, in the other group, nurses advised them to breast-feed as early as possible. The answer to this pattern lies with the launching of Breast-feeding Campaign in Malaysia in 1976. Health staff such as nurses and midwives were instructed to encourage and advice all the mothers especially those expecting their first baby to breast-feed their babies as early as possible after delivery.

#### **5.2.2 Substitute for breast-milk**

This section will focus on the type of supplement and substitute used by women in both categories and the factors that influence them to select a particular infant formula.



The table below shows the substitutes for breast-milk.

Types of substitute	Age Group	
	below 40	above 40
Sweetened condensed milk (SCM)	5%	14%
Infant formula	95%	55%
SCM and Infant formula	-	-
Fresh cow's milk	-	-
<b>Total no</b>	<b>22</b>	<b>18</b>

As indicated in table 8a, 2 types of feed were used as replacement for breast-milk; SCM and infant formula. It is also evident that SCM and Infant Formula were not given together at the same time. None of the women in both categories fed their babies with fresh cow's milk. This is probably due to the knowledge of its unsuitability to the infant.

The majority of the younger women substituted breast-milk with infant formula whereas in the other group, only 55% did this, SCM was also found to be less popular among the younger women. This is because most women in the younger age category have acquired formal education and have been advised by the nurses against SCM. They are more aware of the unsuitability of SCM as a replacement for breast milk.

The infant formula purchased by the women in both categories share a similar trend. All the women used only locally-made infant formula. None of them bought imported brands.

When asked if they had heard of imported brands such as Nan or SMA, most of them gave a negative reply. 64% of the women below 40 years old and 89% in the other group had not heard of such products. The findings show that majority of the women in both groups were unaware of imported brands. So this explains why they did not purchase such products.



However, even among those who had heard about it, they did not purchase imported brands . The common answer given by the younger women was that the imported brand were too expensive and they could not afford to buy them. However, a few respondents said they did not have trust in the expensive brands and so decided against buying them.

The following section will determine the reasons that influence the women when choosing a particular locally-made infant formula. The table below illustrates the findings.

Table 5.12

Reasons	Age Group	
	below 40	above 40
1) Commercial promotion		
- display products	-	11%
- in the shop	-	-
- radio	-	6%
- T.V.	14%	-
- pamphlets distributed by mothercraft nurse	-	6%
- posters in clinic	4.5%	-
- samples given by nurses	23%	-
2) Recommendation		
- family members	23%	11%
- Friends	14%	22%
- Nurses	32%	6%
- Doctors	4.5%	11%
3) Price :		
- Cheap	-	27%

As indicated in the table, recommendation of a particular brand by family members, friends, nurses, doctors had influenced the women below 40 years when selecting an infant formula. However, the nurses were the most influential people. This explains why 'Dumex' infant formula which was recommended by the nurses was found to be popular among the estate women. Also some women who bought Lactogen and Dutch Baby for their babies, said these brands were suggested by the nurses at the clinics and hospitals.

In most cases, the same brand was given to all their children. This is due to brand loyalty. They said they did not change the infant formula for each child because they had trust in it. Only a few women changed the brand for their children, to see if it was better than the one used before.

In the other age group, recommendations from friends, family members, doctors are found to be more important than advice from the nurses. The prime factor which influenced the women in these category when buying a particular infant formula is the price. This explains why those who took into account the cheapness of the brand bought Milkmaid for their babies. Although some were aware of the harmful properties of SCM for infant feeding, they said they could only afford to buy the cheapest product which was within their budget.

Commercial promotions were found to be more influential among the younger women than the other women. There are three interrelated reasons to explain why this is so. The main reason is because of the heavy commercial promotion by the milk industries in the 1960's till the early 70's. There were commercial promotions before this period but they were at a smaller scale and did not have an impact on the women in the plantation.

During the 1960's till the early 70's, various tactics were adopted by the milk industries to increase the sale of the various types of infant formula. Among those used are through; direct advertising to new mothers by employing mothercraft nurses, supplying maternity homes and



hospitals with milk samples and by displaying poster in the clinics and hospitals and advertising on television (t.v) and radio. However, the most effective tactic among the younger women, is the distribution of milk samples by the nurses in clinics and hospitals, advertisements on t.v and displays of posters in clinics.

Besides the massive commercial promotion of infant formula during the era, there are also 2 reasons to explain the effectiveness of the tactics used by milk industries. Firstly, most of the women in the younger age category owned a television set in the 70's, so they were more exposed to the advertisements on infant formula.

Secondly, the majority of the younger women also went for ante-natal check-ups and gave birth in the hospitals. Samples were distributed to them by the nurses. Also they were more exposed to the posters on various types of infant formula in the clinics and hospitals. In other words, women below 40 years in the study became one of the target groups for the milk industries.

On the whole, it can be said that most women above 40 years old were not exposed to commercial promotions. Even if commercial promotions were in big scales before the 1960's, it would not have affected them greatly in their choice of infant formula. This is because most women in this category did not go for ante natal check-ups for all their children and they also gave birth at home. This being the case, it is not surprising why samples distributed by the nurses did not influence them in their choice of infant formula they bought. Also, television was only introduced in Malaysia in the late 60's and reached their homes much later, thus the level of exposure to various types of infant formula was limited. In summation, we can say that the role of nurses through distribution of samples on behalf of the milk companies and recommendations of certain brands of infant formula has the most impact on the younger women.

However, after mid 70's commercial promotions by milk companies declined tremendously and did not play active role as before. This is because in the mid 70's, international bodies such as WHO emphasized the need for developing countries to take the necessary steps to encourage breast-feeding and also to review the sales promotion techniques of infant formulas by milk companies. In conjunction with the Breast-feeding Campaign in Malaysia in 1976, the Ministry of Health enforced the Code of Ethics for infant formula products in 1979. Among the restriction is that milk companies are not permitted to advertise in the mass media such magazines, newspaper, brochures and samples etc.

Since the code was only introduced a decade ago, the commercial promotions prior to this period had already influenced most of the younger women in their choice of infant formula. However, future mothers will not be affected by the samples and recommendations provided by the nurses due to the introduction of Code of Ethics.



In this section, emphasis is on the qualitative data to examine the attitudes, opinions and level of awareness concerning various aspects of breast-feeding and artificial feeding.

### 5.3.1 Figure Conscious

There is a common belief among ignorant mothers in some communities in the world that breast-feeding can spoil one's figure and cause the breasts to sag.

However this common belief has been proven wrong and unjustified by medical sciences. Breast sagging is found to be the result of continuous pregnancies, lack of supportive bra during pregnancy and nursing and not due to breast-feeding. Furthermore, breast-feeding is actually a good way for gaining back one's former shape because the fat laid down during pregnancy is utilized while breast-feeding.

To acquire information whether the women in this study believed in negatives effects such as the sagging of the breast and the loss of their figure, the respondents were asked this question, 'Some women do not breast-feed because they are afraid of their breast sagging and lossing their figure. Do you feel the same way?.'

All women in both categories who breast-fed claimed that they were not afraid of such negative effects. Some did not even believe them. Some of the respondents were shocked by my questions. They found it hard to believe that some mothers are as cruel as that. They further added

**'if a woman is so beauty and figure-conscious, she should not give birth in the first place and become a mother'.**

For the Indian women in this study, old and young it is important for a mother to nurse her baby . She should only think of the well-being of her baby. There is no room for figureconscious women in the motherhood role. As an Indian saying goes,

**'A mother is like a burning candle'.**

Literally translated, a burning candle melts itself to give life to others around it. The same can be said of an Indian mother, she is willing to sacrifice herself for the sake of her children in other words, it is an infant-centered attitude.

An interesting event worth mentioning is the way one respondent responded when I asked her if she was afraid of the negative effects of breast-feeding. At the time of the interview, she was in the midst of nursing her one month old baby. To justify that her breast did not sag she stopped nursing and lifted her blouse to show me that after breast-feeding 5 children, her breasts did not sag.

The discussion above reveals that women regardless of their age regard the role of a mother as a serious and important one. Breast-feeding like reproduction is regarded by all of them as a natural function that all mothers should perform. In other words, the ideal perception of a mother is to perform this basic physiological function. If a mother does not breast-feed she is actually denying her baby's birth right.

A grandmother substantiated this statement by saying,

**'All the women in the estate even the young ones breast-feed unlike those women in towns. The moment a baby is born, a bottle is stuffed into the baby's mouth'.**

### **5.3.2 Feeling of shyness to breast-feed**

Women in both categories felt that breast-feeding was something intrinsically natural and one should not feel embarrassed. However their response differed when I asked if they would breast-feed in public or crowded places.



Table 5.13

Question : Do you feel shy to breast-feed in crowded places.

Answers	Age Group	
	below 40	above 40
Yes	75%	40%
No	25%	60%

The majority of the women below 40 years old admitted that they felt shy to breast-feed in public places or even in their own living rooms where there were many outsiders especially men. Some however, added that they did not mind nursing their babies in front of the women but when there were men around, they preferred to nurse in the privacy of their bedroom. Although 25% admitted that they were not shy to breast-feed if there was a crowd at home, the thought of nursing in public places did not appeal to them.

Conversely, 60% of the older women admitted they were not shy to breast-feed in crowded places and many had nursed in public places as well. Why is it that most of the younger women feel shy to breast-feed in front of men and public places?. I think the answers lies with the process of modernization, attainment of education and the influence of the mass media. Younger women regard the breasts as something personal and would not like to expose them to outsiders especially the men. However, they do regard the breasts as a mechanism to fulfill the biological needs of a baby.

### 5.3.3 Awareness concerning breast-milk and artificial formula.

I used several questions to assess the awareness of the women concerning breast-milk. The results are shown below.

Table 5.14 - Awareness about breast-milk.

Questions	Age Group			
	below 40		above 40	
	Yes	No	Yes	No
1) Do you know that breast-milk is the best milk for your baby?	73%	27%	72%	28%
2) Do you know breast-milk protects your baby from infection in the first 6/12 months of life?	41%	59%	22%	78%

It is encouraging to know that the majority of the women in both groups know that breast-milk was the best milk for babies. However most of them were not aware of the protective characteristics of breast-milk. As shown in the table, less than half in both groups were aware about this fact.

From the analysis above, we can conclude that although the level of awareness of the protective characteristics of breast-milk is generally low in both groups, the level is much lower among the older women. Basically, the unawareness is caused by the lack of education among these women. The majority of these older women either had no formal education or only managed to complete primary education. Since many of them are illiterate, they are not exposed to such knowledge. Also most of them are not educated by medical authorities such as nurses. Besides better education, the younger women who attended ante-natal check-ups unlike the older women were probably were informed by the nurses about such facts and thus are more aware.



In relation to the women's opinions about artificial formula they were asked to rank artificial formula as better, as good as or not as good as breast-milk. The table below shows their awareness.

Table 5.15

Category of respondents according to infant feeding practised at the initial stages.	Artificial milk is better than	Response		
		As good as breast-milk	Not as good as	Don't know
mix-fed		2.5%	12.5%	
bottle-fed	5%	5%	-	2.5%
breast-fed	-	5%	60%	7.5%
	5%	12.5%	72.5%	10%

As expected only a small percentage(%) felt that artificial milk was better than breast-milk and all these women are those who bottle-fed their babies initially. A very high percentage (72.5%) believed that artificial formula was not as good as breast-milk and 60% out of this were those who breast-fed. Even among those who mix-fed initially; the majority were aware that the quality of infant formula was not equivalent to breast-milk. They said most infant formulas cause diarrhoea, constipation and 'cholic' to the babies. In other words, '*breast-milk was the best*', This undoubtedly justifies the fact that they have been forced to supplement with artificial formula even though breast-milk was the best.

On the whole, women in both categories were very much aware of the superiority of breast-milk though they might not know the scientific contents in it. This is due to lack of education among the women.

Also related to the aspect of artificial formula is the impact of advertisements of infant formula on the perception of the women in this study. In order to obtain the information, respondents were asked 'Do you believe in the advertisements on infant formula?'. Below is a table to indicate their level of awareness and attitude towards advertisements on infant formulas.

Table 5.16

Do you believe in the adverts on infant formula.

Age Group	Answers		
	Yes	No	Don't know
below 40	36%	55%	9%
above 40	44%	50%	6%

It is encouraging to know that more women in both age groups did not believe in the advertisements. However a small percentage said they did not know whether to believe or not. The majority of the women who did not believe in the advertisements said that the main reason for the advertising is for the company to make profit and not because the product is good. A few others added that the milk companies are actually forced to advertise because they have very poor sales. The responses given by the women clearly indicates that although most women had basic level of education or no education at all, they proved themselves to be rational thinkers and they are not easily deceived by advertisements.

As a conclusion I would like to stress that even after being exposed to various forms of advertisements in infant formula, most of the Indian women in the estate hold on to the belief that nothing is equivalent to breast-milk. Although some say that artificial formula too is good, they are not convinced by the commercial promotions which say that it is better than breast-milk. The fact remains that the impact of advertisement is insignificant among the women in this estate. Their decision to supplement with artificial formula and to wean early is due to their role as wage-earners.



#### 5.3.4 Attitudes towards expressing breast-milk.

Today, expressing breast-milk and then storing it in the refrigerator is one solution for working mothers to continue providing breast-milk for their babies. With this technique, supplementary of infant formula is not required for a long time.

Before examining the women's attitude towards this technique, I asked them if they had heard or seen this technique being used before. Their response is shown below.

Table 5.17

Age Group	Answers	
	Yes	No
women below 40	8 (36%)	14 (64%)
women above 40	2 (11%)	14(89%)

Although some women have heard and even seen such a technique being used, the fact remains that the majority of them in both categories were not aware of such a technique. Those who have seen it said their mothers had attempted this method for their younger siblings. Although refrigerators were not used many years back, this method was still possible. It seems the traditional method of storing breast-milk was by adding pepper (mollegu in Tamil) or rice grain into it. This prevents the breast-milk from turning sour for at least a few hours.

Peculiar and strange as it may seem, none of the women who have either seen or heard about it practised it. Some said they did not have enough breast-milk to store and so did not attempt it. Others said expressed milk was smelly so they felt it was unsuitable for their babies.

To those younger women who have not heard or seen this technique, I told them 'Most working women in the urban areas are practising such a technique, so if someone teaches you would you consider doing it?. As expected majority of them did not welcome this idea. For most of them this was a peculiar method. This was apparent from the puzzled and shocked expression on their faces. However a few said they might do it. The reasons given by the women why they do not want to try this technique are many. Some did not want to express milk because they felt it was best to feed directly from the body. A few said that the baby will catch a cold if the breast-milk is stored in the refrigerator. Some others believed that once expressed, breast-milk was unsuitable for the baby. This was because the milk will turn sour. One respondent said this technique was not practised because she had no time to spare.

Even after assuring some of the women that breast-milk will not turn sour if kept in the refrigerator and it will be suitable once heated up, their responses proved that they were not interested in such a technique nor will they even contemplate trying it. Their responses such as

**' Nothing is equivalent to giving breast-milk direct from the breast',**

all the more indicates that the technique of expressing breast-milk did not appeal to them.

On the whole, it can be said that although all women in this study generally have a positive attitude towards breast-feeding and would like to breast-feed fully, they do not welcome the idea of expressing breast-milk. However given time and more exposure and education on this technique, the younger women might have a change in attitude in the future.



#### 5.4.1 Maternal diet and maternal health

Maternal diet during pregnancy and lactation is greatly subjected to the influence of the family's income, education, customs, taboos and other traditional values. In this section, I would like to prove that most Indian women in the estate do not have a sufficiently good diet during their pregnancy and lactation. Subsequently the low quality of maternal diet has extreme effects on the infants and the lactating mothers themselves.

To get the nutritional level and pattern among the expecting and lactating mothers in this estate, 10 households from the younger age group were taken as samples. To make a simple analysis, I classified fresh food such as vegetables, meat and fish as nutritious food. The expenditure on such food and the frequency it was prepared monthly was then used as an indicator.

Table 5.18

Household	Monthly Income per house hold. \$	Monthly Expenditure on fresh food (vegetables, meat& fish)	No of members in the family	Frequency (vegetables, meat and fish is cooked)		
				Vegetables	Meat	Fish
A	\$600	\$200 (3.3%)	3	daily	1-1week	2-1 week
B	645	\$ 50 (7.8%)	6	daily	1-1week	2-1 week
C	400	20 (5%)	4	daily	1-1mthly	1-1 week
D	200	30 (15%)	7	daily	2-1mthly	1-1 mth
E	600	60 (10%)	6	daily	2-1mth	daily
F	500	60 (12%)	6	daily	2-1week	2-1week
G	480	50 (10%)	7	daily	2-1week	2-1week
H	600	50 (8%)	9	daily	1-1week	1-1week
I	800	100 (12.5%)	10	daily	2-1week	2-1week
J	645	100 (20%)	7	daily	1-1week	3-1week

The table exhibits the correspondence between various variables such as income, family size and expenditure on nutritional food and the frequency it was prepared.

The average sum allocated for nutritional food in each household is \$72. However, the expenditure on nutritional food is not proportionate to the family size. For example, household A spent \$200 monthly for 3 members, household B spent \$50 for a family size of 6 while household D spent \$30 for 7 members and household H spent only \$50 for 9 members. From this expenditure pattern, it's obvious that members in a big household are unlikely to have a balanced diet. The problem of malnutrition is highly probable among them.

The frequency of fresh food that was prepared is also an important indicator of the nutritional level among family members. All 10 respondents claimed that they prepared vegetables daily, but not meat and fish. However, majority of the women cooked fish more frequently than meat. They said preparing fish was much cheaper. In most cases, fish was prepared twice weekly whereas meat was cooked twice in a month.

Combining two variables which are the expenditure on fresh food and the frequency it was cooked with the family size, it is very obvious that nutritional intake is insufficient among family members. This could lead to improper growth of the children and the expecting mothers.

Besides low household income which affects the amount spent on nutritional food, ignorance among the Indians in the estate about cheap but nutritional food also leads to malnutrition.

#### **5.4.2 Maternal diet during pregnancy and lactation**

Using this expenditure model, it will be easier to determine the dietary patten among the expecting and lactating mothers in the estate.



A large proportion of the women in both categories admitted they were on a normal diet just like everyone else in the family during all their pregnancies. However, the quality of the food consumed by them can actually be questioned.

Only 10% and 14% in the older age group and younger age group respectively claimed to have changed their dietary pattern. According to them, more milk products, meat, fish and citrus fruits were consumed. The rest just ate their normal diet food such as rice with curry and vegetables. As shown in the previous table, the expenditure spent on nutritional food is very low. It is my assumption that this pattern will not change even when the women are expecting. Thus most Indian women are deprived of proper diet during their pregnancy.

An interview with the midwife at the Ulu Bernam Midwife clinic further revealed that malnutrition particularly anaemic cases was a common occurrence among expecting mothers in this estate. She also added that those mothers who were found to be anaemic were given free milk powder regularly. This was in conjunction with the Rancangan Makanan Tambahan which was implemented by the government in 1984. However even this did not seem to improve the nutritional level among the expecting mothers. This was because most expecting mothers ended up giving the milk powder to their children. Only when the mothers were told by the midwife that the milk was unsuitable for children did they start consuming it themselves.

This occurrence also reveals that the Indian women in the estate neglect their own health for the well-being of their children. The unsatisfactory nutritional status of the expecting mother is also further aggravated by their strong hold on the traditional values. It is common among the Indian woman to eat only after their children and husbands have eaten. This fact also hinders the expecting mothers from obtaining an adequate share of the family diet to meet their own requirements.



A change in dietary pattern occurred after delivery among majority of the women in this study. This was because they were influenced considerably by traditional beliefs. There were restrictions and taboos concerning diet after delivery which most women followed.

The Indian women are very particular about the food that they consumed during their confinement. The food that a lactating mother eats are often implicated in the causation of infant illness as they are believed to transmit effects through the mother's milk. As a result, many types of food are avoided by lactating mothers especially during confinement.

It is common among the Indians as well as the Malays and Chinese to classify food as 'hot' and 'cold' on intrinsic qualities unrelated to actual temperature. During confinement, regardless of the fact whether the mother is nursing her infant or not, food categorised as 'cooling' is prohibited. Most of the women said they were advised not to consume 'cooling' food during this period.

Almost all the women in both groups said they avoided 'cooling' food such as sugar cane, jack fruit, cucumber, tomato, banana, pumpkin, pineapple and mangoes etc. On the other hand, the main kind of food that was consumed during this period was 'heaty food' such as pepper, spices and salted fish. Although heaty food was encouraged, chillies was prohibited. According to some respondents, since the uterus had not healed completely chillies might inhibit the recovery process.

During confinement most of them ate rice with an Indian traditional remedy which is spicy curry with ingredients such as pepper, herbs, roots (various types of spices in Tamil- codie, murekethe, pullie, sathe kuppai, chukkekk, mollegu, sittarathei, ommum, mallee). This traditional curry was eaten with rice to regain one's health after delivery. Women in both categories took this traditional remedy for a period of one month. In other words, this was a universal diet among women in both categories during their confinement. Only a few women in the younger age group did not consume this remedy because there were no elderly women to prepare it or refused it because of its smell.



In relation to the restrictions, some women also reduced the use of coconut. It is believed that coconuts cause the breast-fed child to vomit. Besides this, most woman drank and bathe with warm water. It is believed that if lactating mothers drank cold water, the baby will catch cold and fall ill.

With regards to breast-feeding, the Indian women also consumed specific kind of food to increase the milk supply. The food which was considered most effective and consumed by many women was *garlic*. Besides this, some women also ate 'ikan bawal', salted fish, shark fish, asoeftida for the some purpose. These particulars type of food was eaten during the lactating period and not earlier than that.

It is interesting to note that the women in this study ate garlic in different ways depending on the individuals. Most preferred to add additional amount of it in the spicy curry. A few women especially among the older age group ate raw garlic with brown sugar. This method was not popular among the younger women. Some women also ate grilled garlic to increase their milk supply. According to an old grandmother, eating raw garlic was the most effective method to stimulate breast-milk supply.

To summarise, traditional beliefs concerning food are still being practised among the younger women in the estate. The majority of them (70%) believed and practised the traditional beliefs regarding food restrictions.

It has been said by many medical sources that cultural practices such as restrictions on diet could be detrimental to the health of the mother and infant. According to Dr. Siti Hasmah (1985:120), custom and food restrictions actually bring bad effects such as paleness, longer time for recovery, and peripheral neuritis to the mother. They also bring about low quality and quantity of breast-milk.

According to Millis (1958:1-8) the traditional diet during lactation fails to supply the additional nutrition necessary for the adequate supply of good quality breast-milk and in many cases breast-feeding could cause a depletion of nutrients from the mother's body.

For example, traditional restriction on cooling food such as fruits and vegetables during confinement seriously lowers the intake of Vitamin C and A among the women which is necessary not only for the maintenance of the mother's health but also the infants.

Millis also says that the dietary restrictions during 4 weeks of confinement deplete the maternal reserves. There is a continuous loss from the mother in breast-milk without replacement from nutritional food during the period. As a result, there will be adverse effects on the health of the mothers and infants.

On the whole, it can be said the nutritional level among women in this study is greatly affected by traditional beliefs on food restrictions, family's income and also by their ignorance.

Since the maternal diet during pregnancy and lactation among the Indian women are generally inadequate, breast-milk supply reduces at an early stage. This is also one factor which contributes to early weaning. Most of the infants in the estate suffer from nutritional deficiency. An interview with a staff nurse from Kalumpang Health Centre revealed that adequate weaning diet were not provided to the infants which resulted in the low growth rate.



## Chapter 6

### Conclusion

On the whole the most popular infant feeding practise among women in both age groups was breast-feeding. This can be proven by the percentage of women who either totally or partially breast-fed their youngest child after delivery. Although the focus of this study was on the youngest child only, additional information gathered revealed that the same type of infant feeding was given for the rest of the children by the respondents 73% of the women below 40 years old and 72% above 40 year old breast-fed totally for the first month after delivery. However another 18% and 11% of the women in both groups could only partially breast-feed. In other words, artificial formula was used as a supplement. the third type of infant feeding given at the initial stages was bottle-feeding. 9% and 17% in the younger and old age category respectively bottle-fed their children.

All those who breast-fed had internalized a positive attitude towards breast-feeding. The old or the young were not afraid of the effects such as losing shape or breast sagging as a result of breast-feeding. They regarded women who did not initiate breast-feeding because they were figure conscious as a disgrace to the motherhood role. Their perception of a good mother is a woman who breast-feeds her child. In other words, they have an infant-centred attitude.

Most of them who breast-fed were aware of the fact that breast-milk was best for the baby and infant formula was not as good as breast-milk. They acquired such knowledge through their mothers in-law, mothers and nurses. Even among those who partially breast-fed (mix-fed), most of them were aware that artificial formula was not as good as breast-milk. However, they still gave artificial formula as a supplement because they had no choice. Some could only partially breast-feed because they did not have enough milk secretion. Others said they did not have the time to fully



breast-feed. This also serves to point out the fact that various commercial promotions on infant formula did not succeed in influencing the Indian women, young or old into believing that infant formula was better than breast-milk. Thus it can be said that those who had to supplement with artificial formula were not influenced by this external factor.

Indeed those who bottle-fed (9%:17%) initially were not in favour of bottle-feeding. On the contrary, they too showed a positive attitude towards breast-feeding. However, due to some circumstances such as medical reasons, no milk secretion and baby's preferences for the bottle they could not initiate breast-feeding.

Besides showing a positive attitude towards breast-feeding all those who breast-fed partially or totally in the first month initiated breast-feeding on their own free will. They were not forced by anyone to do it. However internal and external factors did play a part in influencing the women to breast-feed. Advice from family members such as mothers-in-law, mothers and husbands are the most important external influences in both groups. However among the women below 40 old years advice from nurses and midwives also played an important part. Although breast-feeding can be regarded as a norm in this estate, the women were not forced to do it.

Internal factors such as own childhood experience of being breast-fed and role modelling of this mothers act as a reinforcement to the advice given by the various sources. For example, if the respondent's mother-in-law or mother advised her to breast-feed, this does not necessarily mean she will willingly do it.

However, if the respondent herself knows that she had been breast-fed when she was an infant or had seen her mother nursing her siblings, this might act as a reinforcement to the advice given. In the end, the women would initiate breast-feeding willingly.



Since most of the women in both age groups chose to breast-feed either totally or partially, this points out the fact that differences in age has not resulted in a change in infant feeding practises. The general assumption that young women in the present generation no longer breast-feed has been proven wrong by this study. However a general statement with regards to the women in both age groups below and above 40 years old can be made here. Practically all the Indian women in this estate did and still continue to breast-feed all their children. In brief the most popular infant feeding practised among the old and young women is breast-feeding.

However, their performance on breast-feeding is very discouraging. All those women in both age groups who breast-fed totally, did so for a period of one month only. On the second month after delivery, most of them were not able to continue breast-feeding totally. Most could only partially breast-feed (partial weaning) and some switched totally to bottle-feeding (complete weaning). The average duration of partial breast-feeding was also short i.e 3.1 months amongst women below 40 years old and 4.5 months for women above 40 years.

The answer as to why the women totally breast-fed for a period of one month and the short duration of partial breast-feeding lies in the women's role in the wage-economy. Since most of the respondents had more than 3 children, they were entitled to maternity leave when they had their youngest child. They could afford to take only 30 days unpaid leave after delivery. All the respondents interviewed did not stay home longer than a month. As much as they would like to breast-feed fully, they are not able to do so. This is related to their work schedule and financial situation. Since the income brought in by the husband alone is insufficient, the women were forced to go back to work one month after delivery. This problem is aggravated due to the big family size. The average number of children to each respondent was 5. But sometimes even the women below 40 years did had more than 7 children. Thus the women are put in a difficult position; whether to breast-feed their baby or support their families. In other words there is a conflict in role; as a mother (private role) and a wage earner (public role)



Since the families economic and financial position was more important, the women had to forego the other. Their participation in wage economy was basically a matter of survival. Without their contribution to their families would definitely face financial hardship.

Even those who were entitled to 60 days of maternity leave did not breast-feed totally for 2 months. This is due to the strenuous tasks of tapping and weeding. They are forced to take approximately 30 days off from work before delivery for rest. Thus leaving only a month for confinement and to breast-feed their baby. Those women who were not entitled to maternity leave also took a month of unpaid leave before the delivery. Although they were depriving the family of additional income, there was no alternative because they could not undertake the strenuous tasks of rubber tapping.

All these clearly indicates that although all those women who breast-fed totally had a positive attitude and wished to breast-feed longer, it was not possible for them to do so given the financial and work environment.

Another important factor to explain the early weaning or short duration of partial breast-feeding is indirectly caused by the women's involvement in their public role. Once they start work, they are physically separated from their babies. Working under rigid and strict working hours for 8-9 hours at a stretch for the capitalist system is also a hinderence to successful lactation. The women's work as tappers and weeder usually takes them 2-5 km away from the estate compound. Since the management do not allow the lactating mothers to go back and breast-feed whenever they wished during working hours, the babies are forced to be bottle-fed in the day. Even if the management was lenient and allowed them short breaks, the breast-feeding during their working hours.

These 2 factors directly force the women to turn to partial weaning. On the contrary, if a woman is not working was confined to the household domain, she would be able to breast-feed whenever she wishes since she was close in terms of space and was not under a strict management. Since



the women in the estate are only able to partially breast-feed after work once they rejoin the estate labour force this directly reduces the breast-milk production (prolactin reflexes) and thus reducing lactation period.

Another factor to explain the early weaning is associated with the traditional belief among the Indian women. Since the women's work is basically associated with outdoor activities, they are more liable to get wet frequently. Although there still was breast-milk secretion, after getting wet in the rain, some of the women above and below 40 years old stopped breast-feeding completely. This was because they believed cold from the mother can be transmitted to the baby through the mother's milk. The prevalence of this belief even among the younger women reveals that they are still deeply rooted to traditional beliefs.

The non-existence of the traditional Indian family structure (joint family) is also responsible for the early weaning. Usually when the women started work, most of them sent their babies to the creche. Some employed an old nanny and paid them approximately \$15-\$20 each month. Although there are such services in the estate, some of the women would rather foster their children to be looked after by their relatives outside the estate. Since there was no elderly member in the family to look after the baby and their services provided by the 2 institution above were unsatisfactory, they were forced to be separated from their babies. In other words, they could not breast-feed at all once they started work. Also since there was no assistance with the household chores from the elderly members in a nuclear family. Some of the women were not able to breast-feed after coming back from work. To them bottle-feeding was more convenient.

The inadequately of maternal diet during pregnancy and lactation also influenced the women's performance in breast-feeding. The study shows that most of the women below and above 40 years did not follow a proper diet during ante-natal and post-natal period. The reasons for the inadequacy of maternal diet is primarily caused by traditional beliefs-taboos, the practice of first serving the children and husband, ignorance



about proper diet family's income and family size. Such factors can influence the quantity and quality of breast-milk. Thus the low level of breast milk secretion and the early deterioration of breast-milk supply as the result of poor maternal diet is also one reason which forces the women to stop breast-feeding completely at an early stage.

To conclude, we can say that the women's involvement in the public role is the most important factor that hinders the performance of breast-feeding. In other words, it actually conflicts with their private role as mothers who would like to breast-feed for a longer duration since their involvement in the wage-economy is crucial to their families, in terms of finance, they are forced to forego their other duty, which is to breast-feed. If they chose to stop work or take additional days of unpaid leave (which the management would not allow) so that they can breast-feed fully, they would actually be inflicting financial problem on the family. In the case of the newborn child, there is no alternative, he/she could still survive with artificial formula. all this explains why the women do not take beyond a month of leave after delivery.

The strenuous tasks involved such as 'tapping and weeding is also an important factor in relation to the women's public role which explains why those women who are entitled for 60 days of paid leave, have only 30 days after delivery to breast-feed. Both these factors explain why the women have only a month to breast-feed totally.

Related to the women's public role is the factor of rigidity and strict working hours under a capitalist management and the distance from work which prohibits the women to breast-feed fully and also causes the breast-milk supply to decline much earlier

Other factors such as traditional beliefs, non-existence of the joint family, the unsatisfactory care at the creche, the inadequate maternal diet all contribute to reduce the breast-feeding performance among the Indian women in this study.



## Ways to overcome the problem.

One thing that has to be borne in mind in improving the performance of breast-feeding among the women is not to internalize a positive attitude towards breast-feeding. Since all the women already have a positive wish to breast-feed, the way to improve the performance of breast-feeding is not by telling them about the goodness of breast-milk. On the contrary, prime focus should be directed to the public role they play.

Firstly, the Government should amend the present maternity leave from 60 consecutive days to 90 days for the estate working women. At present even though the number of children entitled to maternity leave has been increased from 3 to 5, this fact has not improved the situation. Due to the strenuous tasks, there is usually only a period of one month for the women to breast-feed. With 90 days, the women will at least have 2 months to breast-feed fully without taking unpaid leave. If possible, the Government should also try to introduce a new law to the estate management requiring them to allow the women to work 1/2 a day for the first 3 months after delivery once the women start work and be paid a full salary. However no pay leave for 6 months after delivery will not have any impact on the performance at all. This is because even if the women were allowed to take 6 months of unpaid leave, they would not stop work. They would rather go to work than stay at home to breast-feed.

At present, the paid maternity leave is based on the basic rate on the women's wage. If the wages for 90 days leave is based on 90% of the highest wage for the year, this would certainly improve the performance of breast-feeding. More women would decide to breast-feed fully for 2 months instead of going back to work one month after delivery.

The management should also play an important part in order to improve the performance of breast-feeding. It should allow the lactating mothers to come back home during working hours so that they can breast-feed their babies. Transport should be provided by the management. At present, most of the women are sent to their working sites by a tractor. On the way back, they have to take a bus. Others either go with their husbands



on motorbikes, bicycles or go on foot. Allowing the women to go back during working hours and providing transport for the lactating mothers would enable the women to breast-feed fully for a longer period without any supplementation of infant formula during the day. Also with frequent suckling, more milk would be produced thus the weaning period would be prolonged. To enable the management to save money, they could allocate all the lactating mothers in one tapping site nearest to the estate compound so that time can be saved in going to and fro from work after each feed.

The estate management should also improve the facilities in the creche. It should increase the number of child minders so that they are able to cope with the children of various ages. The child minders hired should also be qualified so that the quality of care can be improved. Mattresses, toys, pillows, fans should also be provided to create a better environment for the children. This will certainly prevent the future mother from sending their babies out of the estate and thus breast-feeding for a longer period could take place. Since there is a lack of assistance in the household chores, the husbands should take a more active part by helping their wives.

Since expressing and storing breast-milk is one of the best way to improve the performance of breast-feeding, it should also be adopted by the Indians in the estate. Although the women have internalized a negative attitude towards this technique, and with proper education from various bodies, this technique can be a success. What the government has done especially through the mass media such as the T.V is insufficient. What is required is to educate the women about the goodness of this technique and how to practise it. The nurses and midwives should play a more important part in informing and educating the women about this technique. Since the expressed milk needs to be stored in a refrigerator the management should provide one in the creche. Before the women go to work, they can leave the expressed milk at the creche for the use of her baby while she is at work.



Since the younger women hold deeply to the traditional belief that after getting wet in the rain, a mother should stop breast-feeding, they should be educated about their false belief. The nurses, midwives and even the mass media eg. T.V, radio should play an active part in educating the women. Also due to strong attachment to traditional beliefs concerning food, the women should be told that traditional taboos on food such as cooking food is actually not food for maternal health. Since most of the women usually did not know how to manage their low income, they were not able to purchase nutritious food. In this area too they need to be taught how to purchase cheap but nutritious food in order to have an abundant milk supply and thus the breast-feeding period can be prolonged in the future.

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