

Original Research

To assess postnatal mothers' knowledge, attitudes, and practises regarding breast feeding

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ABSTRACT:

Aim: The purpose of this study is to assess postnatal mothers' knowledge, attitudes, and practises regarding breast feeding.

Methods: The study population included 100 post-natal mothers admitted to the hospital as part of a prospective cross-sectional study conducted in the Department of nursing After delivery, on the second post-natal day, a face-to-face interview was conducted using a pretested questionnaire. **Results:** The majority of them (83 percent) were between the ages of 18 and 25, with a mean age of 23.9 and a standard deviation of 3.52. The majority of the mothers (86%) belonged to the Hindu religion and were housewives (64%) who lived in nuclear families (66 percent). Mother's milk is healthiest for infant, according to the vast majority of moms (95 percent). The majority (64 percent) were aware that breast feeding should begin within half an hour after vaginal birth and two hours after a caesarian section. Approximately 81% of moms were aware that exclusive breastfeeding meant providing exclusively breast milk until their child was 6 months old. When asked about the frequency of breastfeeding, the majority of women (64 percent) said they would nurse every second hour. Almost half of moms (52%) believe that breast feeding benefits solely the infant, while only 38 percent believe that it benefits both the mother and the baby. Although 90% of women were aware of correct posture and attachment for breast feeding, only 44% were aware of symptoms of adequacy of feeding. The most prevalent reason given by women who chose formula feeding was concern about insufficient breast milk. **Conclusion:** Because antenatal breastfeeding counselling promotes good breast feeding practises, existing antenatal breastfeeding counselling should be strengthened by informing all pregnant women about the benefits of breastfeeding and motivating them by reducing their erroneous beliefs about breastfeeding and educating them that breast feeding is the healthiest and safest way to feed babies.

Keywords: Breast feeding attitude, knowledge, practise, sociodemographic variables

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INTRODUCTION

Breastfeeding has been identified as an effective strategy for achieving the Global Strategy for Women's, Children's, and Adolescents' Health (20162030), which was published alongside the Sustainable Development Goals as a plan for eradicating unnecessary deaths within a generation.¹ Breast feeding has long been seen as a fundamental human action necessary for baby survival. There is already circumstantial evidence that breastfed newborns have an advantage over nonbreastfed babies in terms of nutrition, cognitive capacities, IQ, and general health.

Not just in childhood, but also in adulthood, when it reduces the risk of diabetes, obesity, hypertension,

cancer, and a variety of other disorders. The WHO recommends exclusively breast feeding (EBF) for the first 6 months of life following delivery.² It indicates that only breast milk should be supplied, with no other drinks or solids, including water. EBF, on the other hand, permits the use of oral rehydration solution (ORS), drops or syrups containing vitamins, minerals, and medications. Breast milk cannot meet their requirements beyond 6 months, thus babies should begin getting nutritionally appropriate and safe supplemental meals while continuing to nurse for up to 2 years or longer.

Breast feeding is beneficial to both moms and newborns. According to a recent Lancet breastfeeding series, proper nursing might help avoid

20,000 maternal deaths from breast cancer each year.³ Breastfeeding exclusively for the first 6 months is also a natural contraceptive that may help with birth spacing.⁴ A World Health Assembly resolution in 2012 endorsed a comprehensive implementation plan on maternal, infant, and young child nutrition, outlining six global nutrition targets for 2025.⁵ By 2025, the fifth target was to increase the rate of exclusive breastfeeding in the first 6 months to at least 50% from baseline (20082012) breast feeding rates of 38%.⁶ In low and middle income countries, only 37% of infants younger than 6 months are exclusively breastfed.⁷ Furthermore, according to global estimates, only 42 percent of newborns are breastfed within an hour of birth⁸, and only 46 percent continue to breastfeed until the age of two.⁹ Infants who are exclusively breastfed are 14 times more likely than nonbreastfed children to survive the first 6 months of life, according to global research.¹⁰ Even after strong recommendations in favour of exclusive breast feeding, the practise of EBF seems to be unpromising in our setting. Only 54.9 percent of infants aged 0-6 months are exclusively breastfed, according to the National Family Health Survey Round 4 (NFHS4). EBF is hampered by traditional feeding habits, the introduction of prelacteal feeds like as water, honey, jaggery, or sugar water, and food supplements before to 6 months.

A variety of variables impact mother's knowledge and attitudes about exclusive breastfeeding, including family pressures, literacy level, sociocultural traditions, maternal age, marital status, family

income, social class, family size, site of delivery, and time of initial nursing start. Most non-exclusively breastfed infants eat water, milk, formula, or additional food in addition to breast milk, which often leads to illnesses in dangerous surroundings.

MATERIALS AND METHODS

After receiving clearance from the protocol review committee and the institutional ethics committee, the prospective cross-sectional research was conducted out at the Department of Nursing. The research population consisted of 100 postpartum moms admitted to the hospital. Mothers who refused to participate in the trial and those suffering from severe or mental illness were excluded. After birth, on the second post-natal day, a face-to-face interview was done using a pretested questionnaire. The proforma includes questions about the research population's knowledge, attitude, and practise of breast feeding, as well as sociodemographic information. The data was summarised using frequency and percentage descriptive statistics. Based on their responses, respondents' questionnaire ratings of knowledge, attitude, and practise were rated as excellent or bad. The Chi square and Fischer exact tests were employed to examine the relationship between knowledge, attitude, and practise and sociodemographic characteristics. If the frequency was less than 5, the Fischer test was employed, while chi square was used if it was more than 5. The significance threshold was chosen at p 0.05. The Statistical Package for Social Sciences (SPSS) software was used to analyse the data (version 25.0).

RESULTS

Table-1: Socio-Demographic characteristics of studied population.

Character	Group	Number (%)
Age	18-25	83 (83%)
	Above 25	17 (17%)
Religion	Christian	1 (1)
	Hindu	86 (86)
	Muslim	13 (13)
Education	Illiterate	10 (10%)
	Secondary high school	10 (10%)
	High school	53 (53%)
	Graduate	27 (27%)
Occupation	Housewife	64(64%)
	Employee	36 (36%)
Type of family	Joint	31 (31%)
	Nuclear	66 (66%)
	Single parent	3 (3%)
Parity	Primi parous	56 (56%)
	Multi parous	44(44%)
Antenatal counselling	No	6(6%)
	Yes	94 (94%)
Antenatal counselling received from	Social health worker	27 (27%)
	Doctor	41(41%)
	Nurse	21 (21%)
	Others	11(11%)
Gestation at birth	Term	94 (94%)

	Preterm	8(8%)
Type of delivery	Vaginal	58 (58%)
	Caesarean section	42 (42%)
Baby gender	Male	43 (43%)
	Female	57(57%)

The current research included 100 moms who had given birth in our hospital's postnatal department. Table 1 depicts the sociodemographic characteristics of the examined population. The majority of them (83 percent) were between the ages of 18 and 25, with a mean age of 23.9 and a standard deviation of 3.52. The majority of the moms (86%) belonged to the Hindu faith and were housewives (64%) who lived in nuclear homes (66

percent). Almost 36% of the moms in the survey were employed. The majority of the moms in the research group were primi-para (56 percent). Almost 94 percent of the babies were born on time. The number of male and female newborns delivered was about equal. Table 2 depicts the study population's answers to critical questions on their knowledge, attitude, and practise of breast feeding.

Table-2: Knowledge, attitude and practise of breast feeding among post-natal mothers.

Question	Response	Number (%)
Best milk for baby	Mothers	95(95%)
	Cow	1 (1%)
	Infant formula	1 (1%)
	Don't know	3 (3%)
Advantage of breast milk	Only to baby	52 (52%)
	Only to mother	3 (3%)
	Both	38(38%)
	None	4 (4%)
	Don't know	3 (3%)
Pre lacteal feed to be given	Yes	9 (9%)
	No	91(91%)
Aware of position and attachment of breast feeding	Yes	90(90%)
	No	10 (10%)
Aware of signs of adequacy of feeding	Yes	44 (44%)
	No	56 (56%)
When did u initiate breast feeding?	Within 2hrs	94 (94%)
	6hrs	2 (2%)
	1day	4 (4%)
How often do you breast feed your baby?	Every 2 hr.	64(64%)
	4hr	15 (15%)
	Advice of family members	2(2%)
	When child cries	19(19%)
Only breast milk up to	3 months	5 (5%)
	6 months	81 (81%)
	Till I resume work	3 (3%)
	Family advice	2 (2%)
	till baby is sucking	6 (6%)
	Don't know	3 (3%)
Did you discard the colostrum?	Yes	4 (4%)
	No	96 (96%)

Mother's milk is healthiest for infant, according to the vast majority of moms (95 percent). The majority (64 percent) were aware that breast feeding should begin within half an hour after vaginal birth and two hours after a caesarian section. Approximately 81% of moms were aware that exclusive breastfeeding meant providing exclusively breast milk until their child was 6 months old. When asked about the frequency of breastfeeding, the majority of women (64 percent) said they would nurse every second hour. Almost

half of moms (52%) believe that breast feeding benefits solely the infant, while only 38 percent believe that it benefits both the mother and the baby. The majority of women (56 percent) said that the main benefit of breast milk is sustenance for the infant, while only 40% were aware of the maternal bonding and immunological advantages. Prelacteal feeds should not be provided to more than two-thirds of mothers (91%) and 44 percent of the study population recognised that infant sucking is an essential stimulation for breast

feeding. Although 90% of women were aware of correct posture and attachment for breast feeding, only 44% were aware of symptoms of adequacy of feeding. 35% of moms were aware of breast feeding's nutritional benefits. Prelacteal feeding were provided to 15% of newborns in multiparous moms, with the majority of them receiving cow's milk or honey. In the research, 4% of moms wasted their colostrum. Approximately 10% of moms in the research group said that they would discontinue nursing once they returned to work. In the research, over 78 percent of multiparous

women exclusively breastfed their last born kids. Antenatal counselling was obtained by 96 percent of moms, with the bulk of them being provided by physicians (45 percent).

Approximately 37% of moms reported issues such as breast engorgement, exhaustion, back discomfort, nipple soreness, caesarean section pain, and kid not sucking during breast feeding. The most prevalent issue was discomfort after a caesarean section. The most prevalent reason given by women who chose formula feeding was concern about insufficient breast milk.

Table-3: Analysis of association of sociodemographic characters with breast feeding practises.

	Breast Feeding Practises		P VALUE
	Good=90 N (%)	Poor=10 N (%)	
Religion			
Christian	1 (1.11)	0 (0.00)	0.66
Hindu	79 (87.78)	7 (70)	
Muslim	10 (11.11)	3(30)	
Total			
Education			
Illiterate	6 (6.67)	4 (40)	0.17
Secondary high school	10 (11.11)	0 (0)	
High school	48 (53.33)	5 (50)	
Graduate	26 (28.89)	1 (10)	
Occupation			
Employee	32 (38.46)	4 (40)	0.25
Un employee	58 (64.44)	6 (60)	
Family			
Joint Nuclear	29 (32.22)	3 (30)	0.65
Single parent	58(64.44)	7 (70)	
	3 (3.33)	0 (0.00)	
Parity			
Multi	42 (46.67)	2 (20)	0.62
Primi	48 (53.33)	8 (80)	
Antenatal Counselling			
No	5 (5.56)	1 (10)	0.047
Yes	85 (94.44)	9 (90)	

P value <0.05 is taken as significant

Table 3 illustrates the relationship between sociodemographic characteristics and breast feeding practises. There was a statistically significant relationship between prenatal counselling and postnatal moms' attitudes and breastfeeding practises. Despite the fact that a large number of educated women living in nuclear households practised appropriate breast feeding, it was not statistically significant.

DISCUSSION

Breast feeding is a natural way of giving nutrients for newborn growth and development. However, its use is determined by maternal knowledge, attitude, job, family support, and other aspects. In our research, the majority of them (83 percent) were between the ages of 18 and 25, with a mean age of 23.9 and a standard deviation of 3.52. The majority of the moms practised Hinduism (86 percent). According to an Ekanam et al research, 52 percent of respondents were from the medium socioeconomic category, yet the majority were

Christian. It might be due to demographic differences throughout the country. Our research population's moms were mostly housewives (64 percent). Previous research likewise found that the majority of mothers (94 percent, 57 percent) in their study were housewives.¹¹⁻¹³ Up to 94 percent of the study group received prenatal breastfeeding counselling, the majority of which was provided by clinicians (39 percent). This is higher than the previous study¹⁴, in which 70% were counselled antenatally, indicating greater public knowledge and access to health services at all levels.

Approximately 91 percent of moms in our research were likely to practise exclusive breast feeding. This is consistent with a recent research on nursing and weaning behaviours conducted by Mehdi and Mahanta, which found an exclusive breast feeding rate of 69.35 percent.¹⁵ According to UNICEF statistics from 2008 to 2012, 46.5 percent of Indians exclusively breastfeed. The higher incidence in our research is due to the fact that it was conducted in a hospital. Colostrum is the

initial phase of breast milk produced after birth, and current scientific study has proven that, in addition to being the finest sustenance for newborns, it is also an immune enhancer. In our investigation, we discovered that 93 percent of people are aware of colostrum.

This contradicts a recent research by Ben Slama et al¹⁶, who found that 43 percent of women were unaware of the benefits of colostrum. According to Bahl et al.¹⁷ and Vimla et al.¹⁸, who showed that 91.7 percent and 100 percent of mothers practised colostrum feeding, respectively, there is greater knowledge of colostrum among mothers. Kumar D et al¹⁹ also observed that around 88 percent of moms had strong colostrum knowledge and practise. In our investigation, we discovered that 9 percent of newborns were provided prelacteal meals. This is comparable to Udgiri R et al, a hospital-based research that found that 13% of newborns were provided prelacteal feeds such as honey and sugar water.²⁰ However, there was a greater percentage of pre lacteal feeding (41%) in the Manas Pritham et al investigation.²¹ This was most likely due to the fact that the research included moms from low-income families, as well as hospital and home births. In our research, around 89 percent of moms were aware of the proper posture for breast feeding, while approximately 58 percent of women in the Kumar A, et al study were aware of the optimal position. This distinction is due to the fact that the later research only included primiparous moms. More than half of the women in our survey had a favourable attitude about nursing. Several studies have revealed a direct relationship between a good attitude and effective exclusive breast feeding practice,²²⁻²⁴. Positive parental views regarding newborn feeding are said to be an essential factor in children's nutritional health.²⁵ In a study on primipara mothers' knowledge, attitude, and practise of breastfeeding conducted by Girish S, et al, it was discovered that 92 percent of mothers had inadequate knowledge about the time of initiation of breastfeeding and 38 percent of mothers had inadequate knowledge about the duration of exclusive breastfeeding.²⁶ In our survey, 63 percent of moms were aware of how to start breast feeding. Breastfeeding was started within 4 hours after birth in 63% of the cases. These results are comparable to those of Kumar D et al¹⁹, who found that it was 58 percent. According to UNICEF statistics (2008-2012), India's rate of early breast feeding initiation is 41%. The major cause for the delay in starting breast feeding is weariness and discomfort after the caesarean operation, according to a research conducted by Shwetel B, et al.²⁷

According to our findings, there is a statistically significant link between prenatal counselling and appropriate breast-feeding practises. There was a

higher number of educated women from nuclear households who breastfed, but there was no statistically significant link. Kumar D et al discovered a statistically significant link between mother education and excellent breast-feeding practises.

CONCLUSION

Antenatal counselling promotes good breast feeding practises; therefore, existing antenatal breastfeeding counselling should be strengthened by informing all pregnant women about the benefits of breastfeeding and motivating them by dispelling their misconceptions about breastfeeding and educating them that breastfeeding is the healthiest and safest way to feed babies.

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