



## Original Research Article

### Breast Feeding Knowledge Attitude and Practices amongst Mothers of Rural and Tribal Region

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#### Abstract

**Introduction:** *The practice of breast feeding is popular since ancient times. Though some mothers understand the importance of breast feeding, but others are less knowledgeable on the benefits of breastfeeding and complementary feeding. We planned this study to assess the knowledge, attitude and various patterns practiced (KAP) by antenatal and post-natal mothers.*

**Methods:** *This questionnaire based study was carried out among antenatal and postnatal mothers admitted at MGMSC Khaneri, a Hospital draining the rural and tribal population. Information on maternal KAP on exclusive breast feeding (EBF) was collected through structured questionnaire from a total of 102 mothers. Data regarding demographic characteristics of the mothers, as well as KAP on breastfeeding was collected and evaluated.*

**Results:** *A total 102 mothers were included in this study. Out of them, 49 (48%) were antenatal fullterm primi-para and 53 (52%) were multipara with prior experience of breast feeding. The age ranged from 18 to 35 years with a mean age of 26 years. Maximum (84.3%) of them were from joint family with middle class socio-economic status. Amongst lactating mothers approximately 83.3% mothers initiated breastfeeding within one hour of delivery and 95.1% mothers continued EBF for 6 months. Most of the lactating mothers learned the practice of breast feeding from elders while 51.9% received counseling from medical staff. Pre-lacteals were given by 7.8% mothers. The majority of mothers knew about breast feeding and had a positive attitude towards EBF. Regarding recommended duration, maternal & neonatal benefits of EBF, mothers were less knowledgeable.*

**Conclusion:** *The majority of mothers knew about EBF and had a positive attitude towards EBF but did not know the recommended duration or maternal and neonatal benefits of breast feeding. Breastfeeding counseling and health education on nutrition to the mother by health workers should be promoted during antenatal visits.*

**Keywords:** *Breastfeeding, Knowledge, Practices, Attitude, Lactating mothers.*

## Introduction

Exclusive breastfeeding (EBF) is defined as feeding of child exclusively with breast milk till six months of age with initiation of breast feeding within one hour of delivery. EBF excludes all supplemental foods or drinks including water but allows the infant to receive ORS (oral replacement solution), drops and syrups (vitamins, minerals and medicines).<sup>[1]</sup> According to Carol Ballony, Executive Director, UNICEF 2004 'there is no better way than breast feeding to make sure that child gets best start in life'.<sup>[2]</sup> The WHO and UNICEF recommend exclusive breastfeeding (EBF) for the first 6 months of life.<sup>[3]</sup> Globally, only 38% of infants are exclusively breastfed.<sup>[4]</sup> The World Health Assembly (WHA) has set a global target to increase the rate of exclusive breastfeeding globally to 50% by 2025.<sup>[5]</sup>

According to Indian survey, only 46% of children are breast fed between 0-1 month of age.<sup>[6]</sup> Apart from providing optimum nutrients, EBF protects baby from infection related mortality. The risk of mortality in non-EB fed is twice than the EB fed babies in 1-6 months age group. Breastfeeding is also advantageous to mother, as it reduces postnatal bleeding duration and the risk for malignancies.<sup>[7]</sup>

The knowledge, attitude and practice of exclusive breastfeeding is greatly influenced by cultural, demographic, social, biophysical and psychosocial factors. In India, the rates of early initiation, exclusive breastfeeding are far from desirable. There have been studies on knowledge, attitude and practices towards breastfeeding in India but there is need to assess the extent of practice of breastfeeding and impact of current policies.<sup>[8]</sup>

This study was undertaken to assess the knowledge, attitude and practices (KAP) towards EBF along with demographic characteristics.

## Methods

This is a questionnaire based study done on antenatal primi-parous and multi-parous mothers admitted in the antenatal and postnatal wards. The objectives were to assess the KAP of

breastfeeding among these mothers. An informed written consent was obtained from the mothers. All full term antenatal and postnatal lactating mothers were included in this study. Exclusion criteria were refusal for giving the consent and pregnant women having a child with any kind of malformations or mother herself having serious illness or postpartum complications or any malignancy.

A face-to-face interview by using a pre-designed, self-administered, standardized questionnaire regarding KAP of breastfeeding was conducted. The questionnaire, included data about maternal age, parity, type of delivery, place of delivery, education, employment, socioeconomic status, residence, initiation and duration of exclusive breastfeeding and complementary feeding practices. Simultaneously health education was given to all the mothers who were interviewed regarding the advantages of breastfeeding. The questionnaire was simple to understand and had multiple responses for ease of completion and analysis. The questionnaire consisted of 41 close-ended (e.g. yes/no, agree/disagree) questions, all categorized in 4 sections. The first part included demographic parameters like maternal age, parity, type of delivery, place of delivery, education etc. Subsequent parts had questions related to KAP regarding breast feeding. Questionnaire responses were collected, evaluated on master chart and final results were analyzed as shown below.

## Results

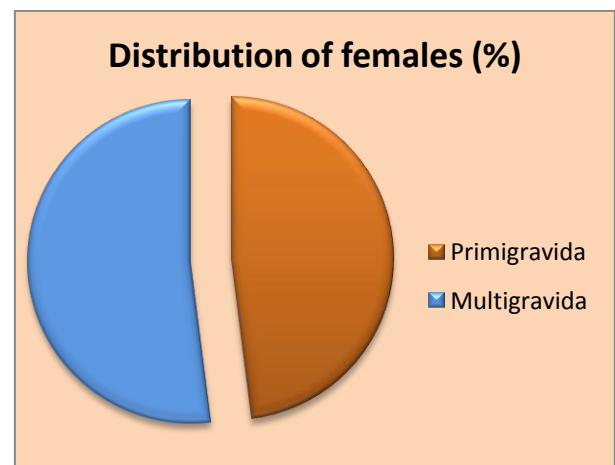


Figure-1

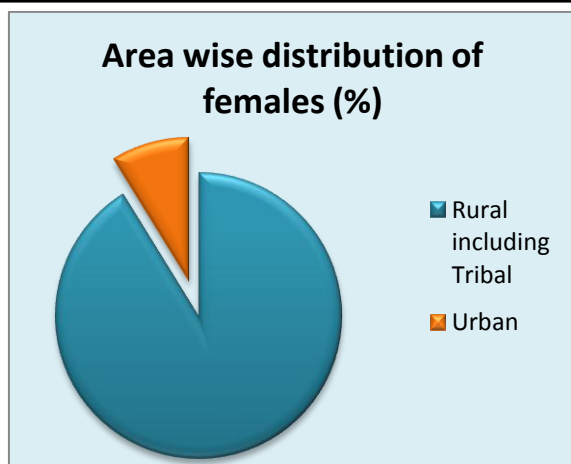


Figure-2

A total of 102 mothers were enrolled for this study. Out of them 49 (48%) were antenatal fullterm primi-para, 53 (52%) were multipara with prior experience of breast feeding (Figure-1). Age ranged from 18 to 35 years with a mean age of 26 years. Most 93 (91.2%) females were from rural or tribal background and 9(8.8%) females belonged to urban area (Figure-2). As per living conditions, 53 (52%) were living in pakka house and 49 (48%) in kachha house. Almost all females were living in joint families and in 86(84.3%) cases more than 4 members were sharing the same

house. Educational characteristics revealed that 46 (45.2%) females were matric pass followed by 34(33.3%) 12<sup>th</sup> pass, 9(8.8%) were graduated and rest were educated upto or below 8<sup>th</sup> class.

53(51.9%) mothers had received antenatal counselling regarding benefits of breastfeeding and amongst them maximum were counseled by staff nurses and rest by ASHA workers and Aanganwadi workers. Majority [95(93.2%)] of deliveries were conducted in Hospital, only 3(2.9%) deliveries were taken at home and 4(3.9%) deliveries occurred on the way to hospital. More than half [65(63.7%)] deliveries were conducted by normal vaginal route and rest by caesarian section. With respect to knowledge of mother regarding breastfeeding, almost all were aware about nutritional advantages of breast feeding. Though most mothers had good knowledge regarding various components of EBF but some mothers were less knowledgeable. Majority of mothers had favorable attitude towards breastfeeding and almost every mother agreed that breast milk is the best milk. Details of maternal knowledge, attitude and practices towards BF have been described in table 1.

Table-1: Maternal knowledge, attitude and practices on breast feeding.

Sr. No.		n(%) (n=102)
1.	<b>Breast feeding counseling:</b>	
	Received	53(51.9)
	Not received	49(48.1)
2.	<b>First feed should be given to baby:</b>	
	Within 30 minutes	37(36.3)
	30 min-1hour	57(55.9)
	>1hour	8(7.8)
3.	<b>EBF should be given upto:</b>	
	6 months	62(60.8)
	9 months	40(39.2)
4.	<b>Breast milk should be baby's first feed</b>	102(100)
5.	<b>Breast feeding initiated:</b>	
	Within 30 minutes	37(36.3)
	30 min to 1 hour	57(55.9)
	1 to 4 hours	8(7.8)
	>4 hours	Nil
6.	<b>Reason for giving Post lacteal feeds:</b>	
	Inadequate milk output	57(55.9)
	Poor sucking by baby	13(12.7)
	Local Taboos	13(12.7)
7.	<b>Bottle feeding:</b>	
	Given	49(48)
	Not given	33(32.4)
	No response	20(19.6)
8.	<b>Feeding in public places:</b>	
	Breastfeed	73(71.6)
	Bottle feed	25(24.5)
	No idea	4(3.9)

Regarding Breastfeeding Practices it was noticed that amongst lactating mothers (or with experience of lactation) almost all mothers breastfed their babies with breast milk. Most [85(83.3%)] mothers started first feed within one hour of birth and 17(16.7%) mothers between 1-6 hours after delivery. 57 (55.9%) mothers reported that due to inadequate milk secretion they added formula feeding along with breast milk during initial 5-15 days. Most of these mothers were those who had undergone cesarean section. Breast feeding was continued upto 6 months by 97(95.1%) mothers, though it was not EBF in all due to addition of pre-lacteals and formula feeds during initial days. In this study, colostrum was given by all mothers to their babies. Out of 102 mothers, 8(7.8%) administered pre-lacteal feeds either by spoon, finger or cotton wick among pre-lacteals, ghutti, honey and glucose were used commonly. Majority of mothers breastfed their babies on demand and very few followed scheduled timings. Major reasons for weaning in this study were, 84 (43.8%) mothers felt that breast milk was inadequate and 40 (20.8%) stopped on advice of elder females (relatives advice).

### Discussion

The WHO, UNICEF and the American Academy of Pediatrics recommend that breastfeeding should begin within the first hour of a baby's life and should be exclusive for the first six months of life.<sup>[9]</sup> Thereafter, breastfeeding should continue along with complementary feeding until two years of age<sup>[10]</sup> To promote breastfeeding, the WHO and the UNICEF developed a Baby Friendly Hospital Initiative (BFHI) in 1991, which was then adopted by 20,000 hospitals in 156 countries all over the world.<sup>[11]</sup>

This study revealed that majority of the mothers had good knowledge and a positive attitude towards breastfeeding which they put into practices. Misconception, customs and pseudo beliefs regarding breast feeding practices are still prevalent in this community which needs to be addressed.

The current study showed that almost all mothers practiced breastfeeding to their babies. Only few mothers never breastfed the babies due to insufficient secretion of milk. In our study 83.3% initiated breast feeding within 1 hour, while rest of mothers initiated feeding within 24 hours. Similar findings have been reported by Mohamed et al.<sup>[12]</sup> 45.7% mothers continued exclusive breastfeeding for at least 6 months in collaboration with the findings of Kishore et al.<sup>[13]</sup> Recent review of 17 Saudi cross-sectional studies revealed a rate of initiation of breastfeeding between 90% to 99% and rate of exclusive breastfeeding for at least 6 months between 1% - 43%.<sup>[14]</sup> Further, the current rates of EBF generally match WHO global data which showed that 43% of infants in their first 6 months of life were exclusively breastfed.<sup>[15]</sup> In earlier studies mothers considered colostrums as dirty or non-digestible milk. In our study the practice of discarding initial milk was not observed. Practice of pre-lacteals is very common in the community, similarly pre-lacteals were also given by 7.8% mothers in our study. This finding is against the study by Naseem et al,<sup>[7]</sup> where this rate was upto 27 % thus indicating that mothers of this region are aware about the benefits of initial milk.

In our study 78% of the mothers had knowledge of breastfeeding and its benefit. This finding is better than those reported in previous studies.<sup>[16]</sup> The higher awareness reflects the fact that more than three-quarters of mothers were delivered in the hospital so they got opportunity to acquire health education about breastfeeding.

The majority of mothers knew that breast milk is best feed and it should be baby's first feed. Most of the mothers also knew that the baby should be put on breast within the first hour of birth. Though most of the mothers were well aware about the nutritional benefits of breast milk but they don't had any knowledge about other benefits of breast milk. Similar to our results, study in Ambo Ethiopia found 90.8% of mothers were knowledgeable about EBF.<sup>[8]</sup>

The findings of our study show that maternal attitude towards exclusive breastfeeding was positive. The positive maternal attitude towards EBF can probably be explained by the various breastfeeding promoting strategies like health education and publicity through mass media.

### Conclusion

We conclude that there is quite good knowledge and positive attitude towards breast feeding which is practiced since long times. But still there is need strengthen their knowledge about EBF, maternal and neonatal benefits of breast milk and avoiding pre-lacteals. Further promotion of EBF counseling by medical staff is recommended.

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