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## Research Article

### KNOWLEDGE REGARDING BREASTFEEDING AMONG PRIMIGRAVIDA MOTHERS

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Primigravida, Breastfeeding.

#### ABSTRACT

**Background:** Very first act after birth is to suck our mother's milk. It begins at birth. This is an act of affection, compassion, without that act newborn cannot survive. Breast feeding is the nature's gift for growth and development of children. It is one of the extraordinary gifts of nature and reward for both baby and mother in many aspects. Exclusive breastfeeding should be practiced for the first six months of life to achieve optimum growth and development of health in India. Breastfeeding is almost universal, but the exclusive breast feeding is quite low. Primipara mothers have many doubts and fears about breast feeding. Present study was conducted for promotion of the knowledge regarding breast feeding among primigravida mothers attending antenatal OPD of Govt. Gandhi Nagar Hospital, Jammu.

**Aim:** To assess the knowledge regarding breast feeding among primigravida mothers attending antenatal OPD of Govt. Gandhi Nagar Hospital, Jammu.

**Methods and Material:** The study design was descriptive. Total of 100 mothers were included as a study subjects using purposive sampling technique. The instrument used for data collection was a self structured knowledge questionnaire. Tool was validated by the groups of experts from various fields. Pilot study was conducted and the reliability of the tool was checked by internal consistency (spilt half method) and it was found to be 0.9. The tool was reliable so the main study was conducted in OPD of Govt. Hospital, Gandhi Nagar, Jammu. The data was collected by using questionnaire and discussion developed by researcher. The collected data was tabulated, analyzed and interpreted by using descriptive and inferential statistics.

**Results:** Results of the study showed that 12% mothers have poor knowledge, 77% had average knowledge and 11% had good knowledge in Govt. Hospital, Gandhi Nagar, Jammu. The knowledge score was significantly associated with the age of mothers, education, occupation, type of family, number of family members and the dietary pattern ( $p > 0.05$ ) whereas score was not statistically significantly associated with the religion of the mothers ( $p < 0.05$ ). The study concluded that most of mothers had average knowledge regarding breastfeeding.

**Conclusion:** The investigator hopes that the distribution of pamphlets helps to increase their level of knowledge regarding breast feeding. Effective measures should be taken to mothers with relevant information with the involvement of media, doctors and community health programmes.

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#### INTRODUCTION

##### Background of Study

*"Breastfeeding may not seem the right choice for every parent; it is the best choice for every baby."*

The benefits of breastfeeding for the health and wellbeing of the mother and baby are well documented. WHO recommends early (i.e. within one hour of giving birth) initiation of breastfeeding. A recent trial has shown that early initiation of breastfeeding could reduce neonatal mortality by 22% which would contribute to the achievement of the Millennium Development Goals. In many parts of the world, the rates of early initiation of breastfeeding are extremely low: 17% in Eastern Europe and Central Asian countries and 33% in Asia-

Pacific, the highest rates (about 50%) are in Latin America, the Caribbean, East and North Africa. However, for many countries no data are available. Breastfeeding confers short-term and long-term benefits on both child and mother including helping to protect children against a variety of acute and chronic disorders. According to a study conducted in rural Ghana, it was concluded that if all women initiated breastfeeding within 1 hour of birth, 22% of the infants would be saved from death. In the Indian context, this means that 250,000 neonates can be saved from death annually by just one act-initiation of breastfeeding within 1 hour of birth.

Breast milk is the nature most precious gift to the newborn. It is must to meet the nutrition as well as emotional and psychological needs of the infant. Breastfeeding is safest,

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cheapest and best protective food for infants. It prevents malnutrition and allows the child full development. Breast milk contains all the nutrients in the right proportion which are needed for optimum growth and development of baby up to 4 to 6 months. It is essential for brain growth of the infant because it has high percentage of lactose and galactose. Breast milk is easily digestible. It promotes close physical and emotional bandage with the mother by frequent skin to skin contact, attention and interaction. It reduces the risk of breast and ovarian cancer of mother. Early initiation of breast feeding enhances maternal infant bondages.

However most mother discontinue breastfeeding due to various reason. Knowledge related to the importance of the breastfeeding is one the major cause for mother to discontinue breastfeeding. Breast feeding is considered as natural food for infants but due to various cultured beliefs and practice in India only one fourth of infants are breastfeed during the first hour after delivery. Majority of them stated that breastfeeding was delayed for 3 days because of different cultural practice. It was reported that regular breastfeeding should be initiated only when mother becomes pure after ritual bath. Negative attitude towards colostrums and delay in initiation of breast feeding should be changed by educating mother about advantage of breast feeding within half an hour after birth. The committees on nutrition and the Canadian and pediatric society strongly recommended breast feeding for full term infants in 1993. In spite of the recommendation there was a decline in breastfeeding. The decline seems to be greatest in young primiparas.

According to UNICEF and WHO have initiated a scheme called Baby Friendly Hospital Initiative which includes giving knowledge about breast feeding to rural women who deliver at home and who are unaware of the modern health care system. Baby friendly hospital initiative was launched in 1992. This approach has been shown to be effective in increasing exclusive breast feeding rates. Revised Baby Friendly Hospital Initiative global criteria (2006) started a new interpretation 2006 to help mother to initiate breast feeding within half an hour. It recommended that newborns skin to skin contact with their mothers immediately following birth for at least an hour and encourages recognizing their newborn readiness to breast feed. WABA (World Alliance for Breastfeeding Action) has designated August 1-7 as a "World Breast Feeding Week". WABA is a network of organization and individual in collaboration i.e; the WHO and UNICEF to promote and support breastfeeding during last decade especially during first four month of life.

According to WHO/UNICEF, at least 1 million deaths per year from diarrhea; infections are absolutely preventable through breast feeding. As breast feeding has so many advantages for mothers as well as children but in spite of having knowledge mothers neglect it because of lack of time and superstitious beliefs. This is supported by a study conducted by Mrs.V.Selvanayaki, [2003] on knowledge, attitude and practices of breast feeding among employed mother with below six months of age child. This study revealed that majority [45%] of the mothers had average knowledge and 67% had positive attitude towards breast feeding but practices was partially adoptive for 52% and completely adoptive for 43% of

mothers. However majority of them were not practicing exclusive breast feeding. The key to successful breastfeeding is Information, Education and Communication (IEC) strategies aimed at behavior change. Very few women in India have access to counseling services on infant and young child feeding. Hence the researcher felt need to be assess the knowledge of exclusive breast feeding among primigravida mothers with a view to develop an information guide sheet as well as to find their association with various factors (socio demographic and socio economic factors)

**Statement** A descriptive study to assess the knowledge regarding breast feeding among primigravida mothers attending antenatal OPD of Govt. Gandhinagar hospital, Jammu, 2015.

### Aims

1. To assess the knowledge regarding breast feeding among primigravida mothers attending antenatal OPD of Govt. Gandhinagar hospital, Jammu
2. To co-relate knowledge with various socio-demographic variable of primigravida mothers

**Material and Methods** The study design was descriptive. Total of 100 mothers were included as a study subjects using purposive sampling technique. The instrument used for data collection was a self structured knowledge questionnaire. Tool was validated by the groups of experts from various fields. Pilot study was conducted and the reliability of the tool was checked by internal consistency (spilt half method) and it was found to be 0.9. The tool was reliable so the main study was conducted in OPD of Govt. Hospital, Gandhi Nagar, Jammu. The data was collected by using questionnaire and discussion developed by researcher. The collected data was tabulated, analyzed and interpreted by using descriptive and inferential statistics.

### RESULTS

**Table No 1** Variables showing socio demographic profile of study subjects

Variables	Group (N=100)	
	Frequency(f)	Percentage (%)
<b>Age (Years)</b>		
18-20		17.0
21-23	17	29.0
24-26	29	38.0
27-29	38	16.0
**Mean age $\pm$ SD, Range: 23.5 $\pm$ 2.75, 18-29	16	
<b>Education</b>		
Illiterate	06	06.0
Matric	45	45.0
Twelth	28	28.0
Graduate	21	21.0
<b>Occupation</b>		
Non working	61	61.0
Working	39	39.0
<b>Religion</b>		
Hindu	81	81.0
Sikh	16	16.0
Muslim	02	02.0
Christian	01	01.0
<b>Type of Family</b>		
Joint	85	85.0
Nuclear	15	15.0
<b>No. of Family Members</b>		
1-5	40	40.0
6-10	54	54.0

11-15	05	05.0
16-20	01	01.0
*Mean ± SD, Range: 6.2 ± 2.84, 2-20		
<b>Dietary Pattern</b>		
Vegetarian	48	48.0
Non vegetarian	52	52.0

Table 1 Reveals percentage distribution of study subjects according to various socio demographic variables like age, occupation, education, religion, type of family, no. of family members and dietary pattern. It depicts that majority 38% of the primigravida mother were in the age group of 24-26 yrs followed by 29%, 17% & 16% in the age group of 21-23, 18-20 & 27-29 respectively with the mean age of 23.5 ± 2.75 years. As per the occupation, 61% were non working and 39% were working. According to the education, majority 45% were matric followed by 28%, 21% & 6% were twelfth, graduate and illiterate respectively. In case of religion, most of the primigravida mothers were Hindu i.e. 81% and 16% belongs to Sikhism, 2% were Muslims and 1% were Christians. 85% mothers belongs to joint family where as only 15% belongs to nuclear family. Among 100 samples, 52% were non vegetarian and 48% were vegetarian. And the no. of family members, 54% of mothers had 6-10 members in the family, 40% (1-5), 5% (11-15) and 1% (16-20) members in the family.

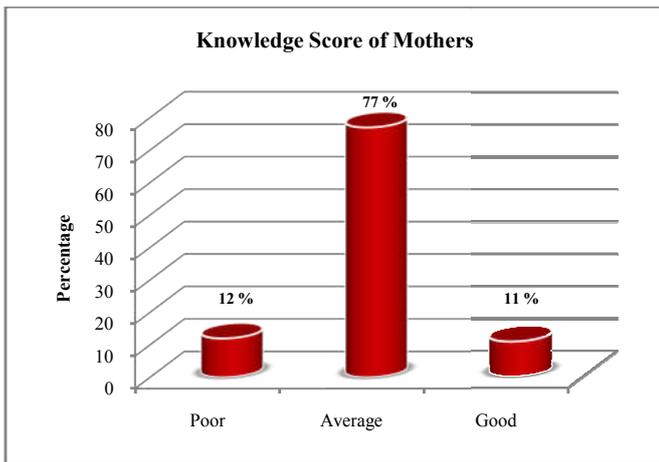


Figure 1 Percentage distribution of study subjects according to knowledge score

Figure 1 depicts the knowledge score of primigravida mothers based on the self structured questionnaire. It was found that most of the mothers i.e, 67% mothers had poor knowledge, 31% had average knowledge and remaining 2% had good knowledge regarding breast feeding with the mean knowledge score of 14.82 ± 3.911 ( Range: 8-28).

Table No 2 Assessment of mother’s knowledge about advantages and disadvantages of breastfeeding

S.No	Items	Know (%)	Don't know (%)	Not sure (%)
1.	Colostrums is enough in the first few days	99	01	—
2.	Breast milk is easily digested	90	09	01
3.	Has stable temperature	93	07	00
4.	It is available at any time	89	08	03
5.	It provides immunity against infection	88	09	03
6.	It decrease neonatal jaundice	88	12	00
7.	Decrease infant diarrhoea	76	21	03
8.	Breast feeding increases emotional satisfaction	67	32	01
9.	Increases incidence of anemia	85	12	03
10.	Leads to vitamin deficiency	71	22	07

Table No 3 Assessment of mother’s knowledge about contraindications of breastfeeding

S.No	Items	Know (%)	Don't know (%)	Not sure (%)
1.	Maternal psychological & mental illness	94	6	0
2.	Breast cancer in a lactating mother	65	32	3
3.	Maternal heart failure	72	26	2
4.	Maternal anemia	67	32	1
5.	Cracked nipples	64	32	4
6.	Breast abscess	65	37	8
7.	Breast engorgement	64	33	3
8.	Surgical interference of breast	73	23	4
9.	Maternal malnutrition	59	38	3
10.	Maternal diabetes mellitus	62	32	6
11.	Maternal typhoid fever	55	41	4
12.	Drug intake by mother e.g. antibiotics	53	44	3
13.	Mother receiving chemotherapy	68	31	1
14.	Cleft lip and cleft palate	83	15	2
15.	Infantile diarrhoea	88	9	3

Table No 4 Assessment of mother’s knowledge about benefits of breastfeeding for them

S.No	Items	Know (%)	Don't know (%)	Not sure (%)
1.	Breast feeding leads to uterine involution	36	62	2
2.	Helps mother body to return to normal	40	59	1
3.	Provides emotional satisfaction to mother	75	21	4
4.	Decrease incidence of breast and ovarian cancer	84	15	1
5.	Saves time	89	9	2
6.	Saves money	93	6	1
7.	Reduces troubles	96	3	1

Table No 5 Association of knowledge with the selected demographic variables

Demographic Variables	Level of Knowledge			Chi square df p* value
	Poor (0-10)	Average (11-20)	Good (21-30)	
<b>Age (years)</b>				
18-20	01	15	01	7.421 6 0.284*
21-23	01	26	02	
24-26	08	25	05	
27-29	02	12	02	
<b>Education</b>				
Illiterate	01	05	00	6.633 6 0.356*
Matric	09	31	05	
Twelfth	01	24	03	
Graduate	01	18	02	
<b>Occupation</b>				0.038
Non working	04	33	02	2 0.361*
Working	08	45	08	
<b>Religion</b>				
Hindu	12	60	09	14.872 6 0.021*
Sikh	00	02	00	
Muslim	00	16	00	
Christian	00	00	01	
<b>Type of Family</b>				2.715
Joint	01	14	00	2 0.257*
Nuclear	11	64	10	
<b>No. of Family Members</b>				
1-5	04	33	03	5.283 6 0.508*
6-10	06	41	07	
11-15	02	03	00	
16-20	00	01	00	
<b>Dietary Pattern</b>				2.038
Vegetarian	03	33	02	2 0.361*
Non vegetarian	09	45	08	

All the socio demographic variables expected to be associated with knowledge regarding breast feeding among primigravida mothers were analyzed to find the association between them. Chi-square test was used to find the association among various socio demographic variables with the knowledge score of mothers. As per socio demographic data summarized in the Table 5, it was shown that the knowledge score was significantly associated with the age of mothers, education, occupation, type of family, number of family members in the family and the dietary pattern ( $p>0.05$ ) whereas the knowledge score was not statistically significantly associated with the religion of the mothers ( $p<0.05$ ).

## DISCUSSION

Children are our future and our most precious resources. After birth the health of the baby depends on the nurturing practices adopted by the families. The basic food for infant feeding is milk. Breastfeeding is the most natural method. Breast milk is the natural food for babies. It provides energy and the nutrients needed for the first months of life and it continues to provide up to half or more of a child's needs during the second half of the first year. The care of a child needs to begin in the first few hours of life with exclusive breast feeding and appropriate intervention at 4 to 6 months in the form of timely complementary feeding. Good nutrition is one of the basic components of health and as particulars of optimal child development survival and maintenance of health throughout life. The nutritional and health status of infants depends mainly on the feeding practices of the community. Early life is a period of rapid growth with the weight of infant doubling by 6 months and tripling by one year of age various studies were conducted to determine the level of knowledge regarding breast feeding among mothers. Most of the studies reported that mothers were not having adequate knowledge regarding breast feeding. On the same lines the present study was undertaken with an objective to assess the knowledge regarding breastfeeding among primigravida mother who attended the antenatal OPD in Govt. Hospital, Gandhi Nagar, Jammu. In present study purposive technique was used to select the sample and self structured questionnaire was used to identify the knowledge regarding breast feeding. Study was conducted on 100 subjects who met the inclusion criteria. Informed written consent was obtained from each study subject before inclusion in the study. Findings of the present study were supported by John R (2005) descriptive survey on "knowledge, attitude and practices of employed mothers about breast feeding in selected areas of Mangalore city." The results showed that 28% of mothers had poor knowledge, 57% had average and only 15 % had good knowledge regarding breastfeeding. It also showed that 73% of mothers have knowledge regarding the benefits of breast feeding but only 24% of them had knowledge regarding 'expression and storage of breast milk. Results of present study also reveal that 12% had poor knowledge, 77% had average and only 11% had good knowledge about the breast feeding. Results of both the studies are comparable.

Furthermore a cross sectional study conducted by Khan N *et al* (2011) to assess the knowledge and attitude of the people related to breast feeding in Madina Hospital, Faisalabad by interviewing the people visiting the hospitals as attendants. The sample size is 200; result of this study showed that the

knowledge & attitude towards breast feeding was significantly associated with education and socio-economic status. Whereas present study was conducted on 100 samples and results of both studies are comparable as in this study also there was significant association found between the knowledge score with the education level of the mothers. Bada M *et al* (2013) conducted a study in Nigeria regarding knowledge and attitude & techniques of breast feeding. Based on cumulative breast feeding knowledge and attitudes scores, 71.3% of the respondents had good knowledge while 54.0% had positive attitude. Study concludes that Nigerian mothers demonstrated good knowledge and positive attitude towards breast feeding. But in the present study only knowledge of mothers was assessed and the results showed that most of the Indian mothers had average (77%) knowledge regarding breastfeeding Slama BF *et al* (2010) assessed the knowledge, attitudes and practices of primiparous women with regard to exclusive breastfeeding and the use of formula milk. Results showed that the knowledge, attitudes and practices of the mothers were unsatisfactory concerning the golden rules for successful breastfeeding, the ideal duration of exclusive breastfeeding and the food to include when introducing complementary feeding. This might be due to a low level of schooling and information, hence the need for improving strategies for maternal care during the antenatal and postnatal periods.

Findings of present study clearly indicate that there was inadequate knowledge among primigravida mothers regarding breastfeeding. And the knowledge of mothers was significantly associated with various socio demographic variables like age, education, type of family, occupation etc.

However, further studies on efficacy as well as effectiveness of structured teaching programmes should be conducted so that the breast feeding practices of mothers can be improved and through adequate knowledge a more positive attitude can be developed regarding breast feeding, which will support preventive rather than curative care.

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