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KNOWLEDGE, ATTITUDE AND PRACTICES OF NOURISHING MOTHERS ABOUT BREAST FEEDING, ATTENDING URBAN HEALTH CENTRE: A CROSS-SECTIONAL STUDY FROM KISHANGANJ, BIHAR

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ABSTRACT: BACKGROUND: Breast feeding is almost universal, but there are many barriers for proper breast feeding practices. Despite the well-recognized importance of exclusive breast feeding (EBF), this practice is not widespread in the developing countries like India. This is mainly due to lack of understanding and poor adherence of mothers to EBF practices for the first 6 months postpartum. Also, the knowledge and practices of early breast feeding are suboptimal among mothers. **OBJECTIVE:** To know knowledge, attitude and practices of nourishing rural mothers about breast feeding and their association with demographic variables. **MATERIALS AND METHODS:** The study was a cross-sectional study, performed in M.G.M.M.C. & L.S.K Hospital, Kishanganj, Bihar, between December-2013 to January-2014. A total of 129 nourishing mothers of children between 0-2 years of age were selected. Breast feeding knowledge of the mothers was evaluated by giving them a printed structured questionnaire containing different types of questions regarding breast feeding. **RESULT:** Among 129 nourishing mothers, 100% knew that mother's milk is the best food for the baby. 71.3% of the mothers were having knowledge that breast feeding should be started within ½ hr. of birth. 86.8% of the mothers were having knowledge that EBF should be given upto 6 months. **CONCLUSION:** This study showed a lack of understanding of the importance of breast feeding and poor adherence to EBF for the first 6 months of baby's life. A lot of gap is present between literate and illiterate mothers in breast feeding practices, which need to be changed.

KEYWORDS: Knowledge, Breast feeding, Attitude, Practice.

INTRODUCTION: Breast-feeding is a cultural norm in India. Irrespective of the fact that breast-feeding in India is almost universal, psychosocial and cultural barriers still exists to early breast-feeding. The exact reasons for this delay are not clearly known. Despite the well-recognized effectiveness of exclusive breast feeding (EBF) for the first 6 months of an infant life for reducing infant mortality, adherence to this practice is not widespread in the developing world. Hence, we conducted this study to assess and evaluate breast-feeding knowledge, attitude and practices and the factors influencing them among women. Promotion of EBF practices for the first 6 months of an infant's life is one of the most effective interventions for reducing infant morbidity and mortality in resource-constrained settings¹. It is estimated that a breast-fed baby is 14 times less likely to die from diarrhoea, 4 times less likely to die from respiratory disease and 2.5 times less likely to die from other infections than a non-breast fed infant. The World Health Organization (WHO) recommends EBF for the first 6 months of life^{2,3}. Numerous studies have shown the advantages of EBF for growth, immunity and prevention of illness in young infants⁴⁻⁶. Conversely, several studies have associated

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lack of EBF with high infant mortality & morbidity from malnutrition and infections^{7,8}. Despite the well-recognized importance of EBF, this practice is not widespread in the developing world and the increase at the global level is very modest with much room for improvement^{9,10}.

According to National Family Health Survey-3 report, even though the percentage of institutional deliveries are high (90%), the percentage of children who received breast-feeding in one hour was just 52%¹¹. This signifies poor implementation of breast feeding policies in health care settings and also signifies the missed opportunity to educate the mother and her relatives about the importance of EBF. In the settings, where the practices of institutional delivery is high, the staffs of health care facility should ensure education of the mothers, regarding exclusive breast feeding (EBF), positioning and attachment of infants to the breast before discharge from the health care facility. At the village level, village health nutrition day can be utilized for health education of future mothers and support for breast-feeding mothers¹². To achieve this, staff of the health care facility should be educated and trained in the importance of EBF, positioning and attachment of breast.

OBJECTIVES: To know knowledge, attitude and practices of nourishing rural mothers about breast feeding and their association with demographic variables.

MATERIALS AND METHODS: The present study was a cross-sectional study, performed in M.G.M. Medical College & L.S.K Hospital, Kishanganj, Bihar. Institutional Ethical Committee approval was obtained. Study was done between December-2013 to January-2014. A pre-designed, pre-tested study schedule in the form of structured questionnaire was used for collecting data. In this study schedule, both open and close ended questions were kept. Privacy of the individuals was maintained and consent of the mothers was also taken before including them in the study. Those mothers who accepted were included and those who denied were excluded.

Sample size: A total of 129 nourishing mothers of children between 0-2 years of age attending urban health center (Preventive Clinic) of M.G.M.C, Kishanganj, for immunization of their children were selected during the study period. They were provided printed structured questionnaire containing questions regarding best food for the baby, time of initiation of breast-feeding after birth, importance & knowledge about colostrum, prelacteal feeds, frequency of breast-feeding per day, duration of exclusive breast-feeding, status of breast feeding in baby's illness, and duration of breast-feeding. Structured questionnaire also covered demographic variables that included mother's age, mother's education, father's education, mother's employment status, total family income, family's size, mode of delivery, gender of last child, history of neonatal hospitalization, number of children, and religion of mothers and fathers. Position of the baby during breast-feeding and attachment of the baby's mouth to the breast were assessed by direct observation while feeding. Breast-feeding knowledge of the mother was evaluated.

Criteria of Selection of Participants:

- **Inclusion Criteria:**
 1. Nursing mothers with child less than two years age group.
 2. Given informed consent to participate in study.
- **Exclusion Criteria:**
 1. Known HIV positive serology or AIDS.

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2. Known case of tuberculosis.
3. Taking any anti-cancer drugs.
4. Non-lactating mothers.

Statistical Analysis: This was done in percentage, proportion, compared with chi-square test. Data were primarily analyzed descriptively and then the observations in this study were compiled.

RESULTS: Among 129 nourishing mothers, 100% knew that mother's milk is the best food for the baby. 71.3% of the mothers were having knowledge that breast feeding should be initiated within ½ hr. of birth (Fig-1). Most of the mothers among them (51.2%) initiated breast feeding within ½ hr. of birth. 31.0% initiated within 4 hrs. 4.7% within 12 hrs. and 7.8% within 24 hrs. (Fig-2). 73.6% of the mothers believed that colostrum increases the immunity (Fig-3) and 81.3% were offering colostrum to the baby (Fig-4). Those who were not offering colostrum to their baby were mainly due to their belief that either it is harmful for the baby or baby cannot digest it easily. 71.3% of the mothers were not offering prelacteal feed to the baby, while 28.7% of them were giving them, either in the form of honey, water or cow milk (Fig-5). Frequency of breast feeding per day in this study were 6-9 times in 38.8% of the mothers, 1-5 times in 31.0%, 10-12 times in 26.4% and more than 12 times in 3.9% of the mothers (Fig-6). 86.8% of the mothers were having knowledge that EBF should be given upto 6 months (Fig-7). 0.8% of the mothers were giving EBF for 1-2 months, 7.8% for 2-4 months, 34.1% for 4-6 months & 43.4% for more than 6 months duration (Fig-8). 82.2% of the mothers continued BF, if baby become ill, 8.5% decreased the frequency of BF and 9.3% of them stopped BF (Fig-9). Most of the mothers among them believed that BF should be continued for upto 2 yrs. of age.

DISCUSSION:

Practice of infant-feeding: A global evidence based public health resolution recommends EBF for the 6 months of life and continued BF upto 2 yrs. of age and beyond¹³. In low resource countries, the prevalence of EBF at 6 months is generally low and varies from 9%¹⁴ to 39%¹⁵. The sizeable gap between BF practice in developing countries and international recommendations indicate that more attention should be given to the promotion of EBF. EBF promotion, therefore, has become a global health priority with maximum impact on both maternal and child health in developing countries.

Knowledge and Attitudes towards breast feeding: Even though most rural mothers regarded breast feeding as the best for their babies, knowledge about the benefits of breast feeding & hazards of infant formula feeding was very low.

CONCLUSION: This study showed a lack of understanding of the importance of breast feeding and poor adherence to EBF for the first 6 months post-partum among rural mothers. Also, the knowledge and practices of early breast feeding were suboptimal among the mothers in this rural area of Kishanganj district. A lot of gap is seen between literate and illiterate mothers in breast feeding practices, which need to be changed. The positive changing trends are seen in aspects of colostrum feeding.

RECOMMENDATION: As EBF promotions improve infant survival, more attention in health planning should be given to its promotion. In particular, breast feeding promotion should target the large

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proportion of women, who have missed formal education about infant feeding in school. Greater emphasis should be given at children's and antenatal clinics to educate mothers about the importance of EBF for the first 6 months of their infant's life, the advantages of breast-feeding and potential hazards of feeding a baby with infant formula. Also, Research & public health efforts like one-to-one "Breast feeding counseling and health education on nutrition" to the mother by health workers should be promoted. Breast feeding counseling with emphasis on correct technique can improve the EBF rates. There is a need for awareness programs regarding breast feeding in this area. To improve the rates of full breast-feeding, specific information about the beliefs & practices that influence this outcome is needed.

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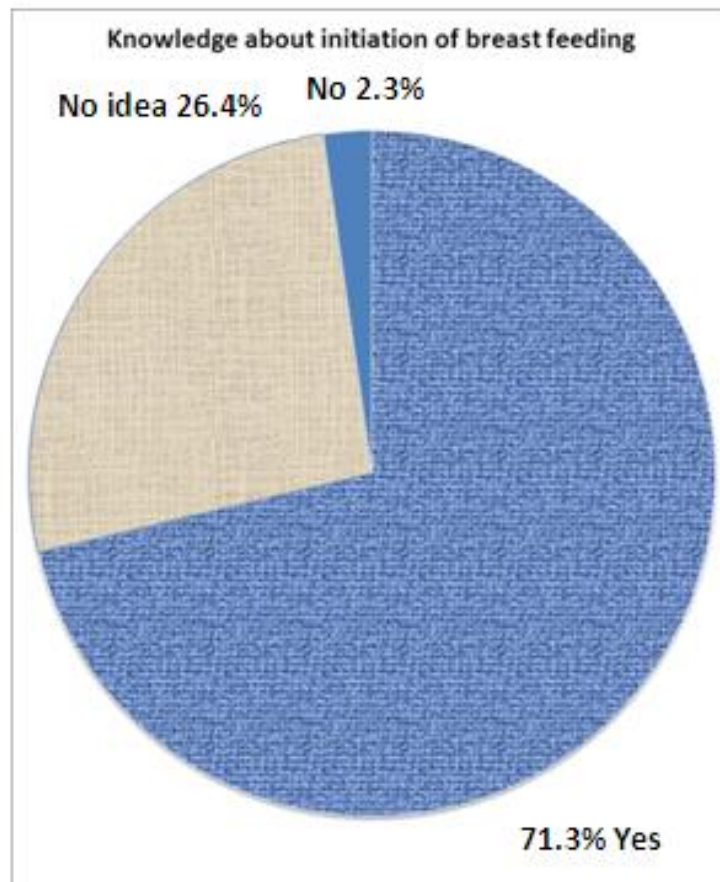


Fig. 1: Breast Feeding within ½ hr of birth

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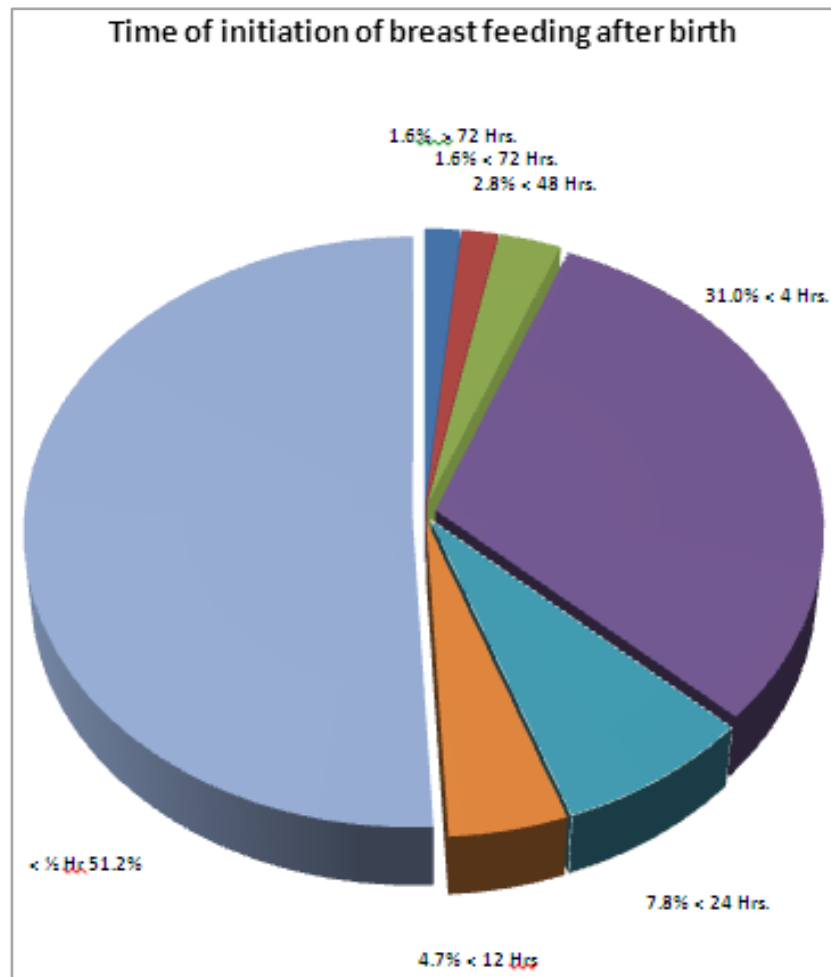


Fig. 2

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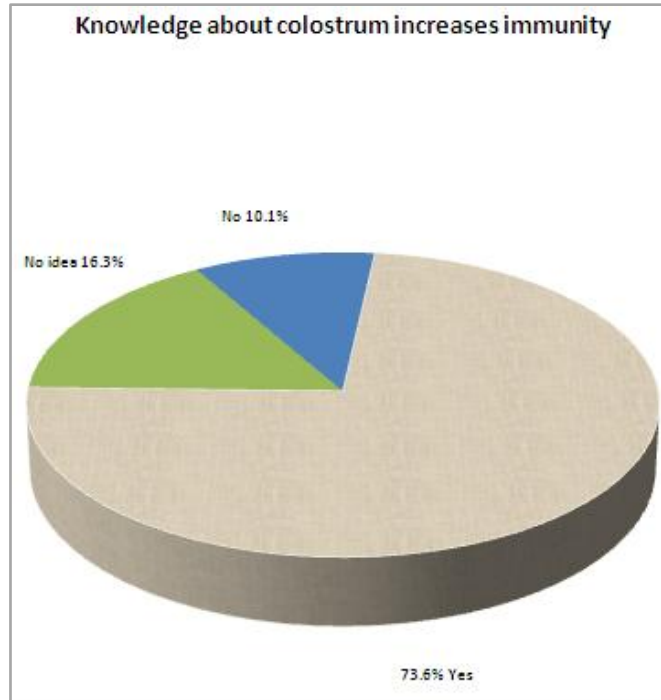


Fig. 3

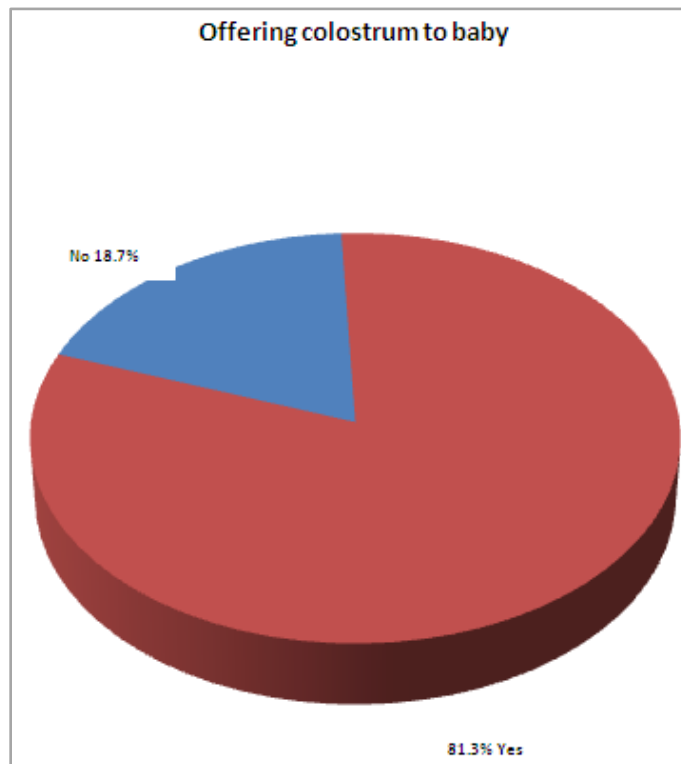


Fig. 4

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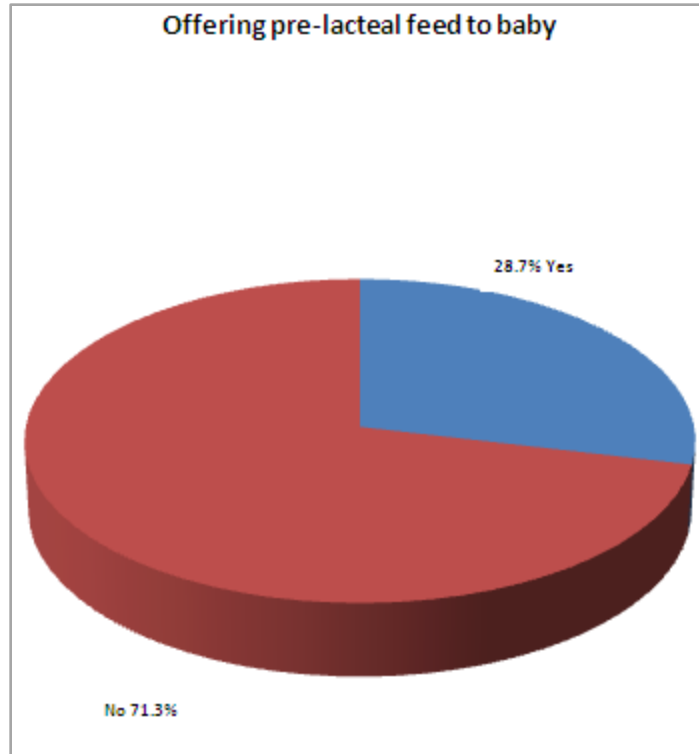


Fig. 5

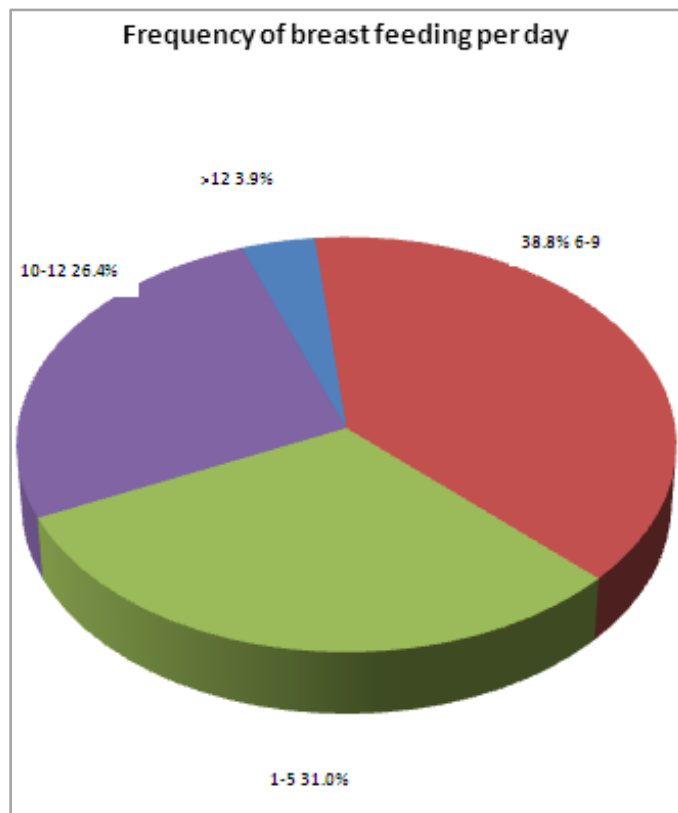


Fig. 6

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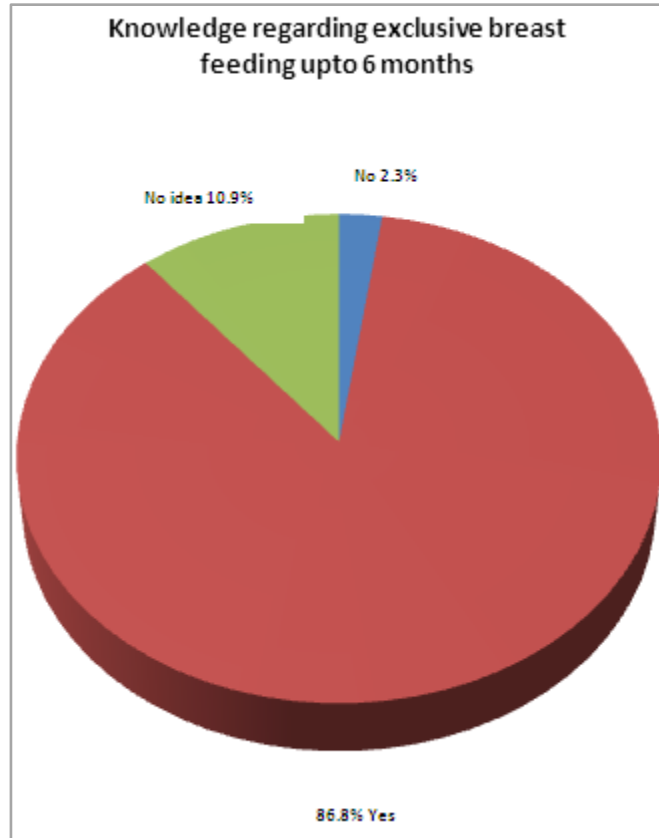


Fig. 7

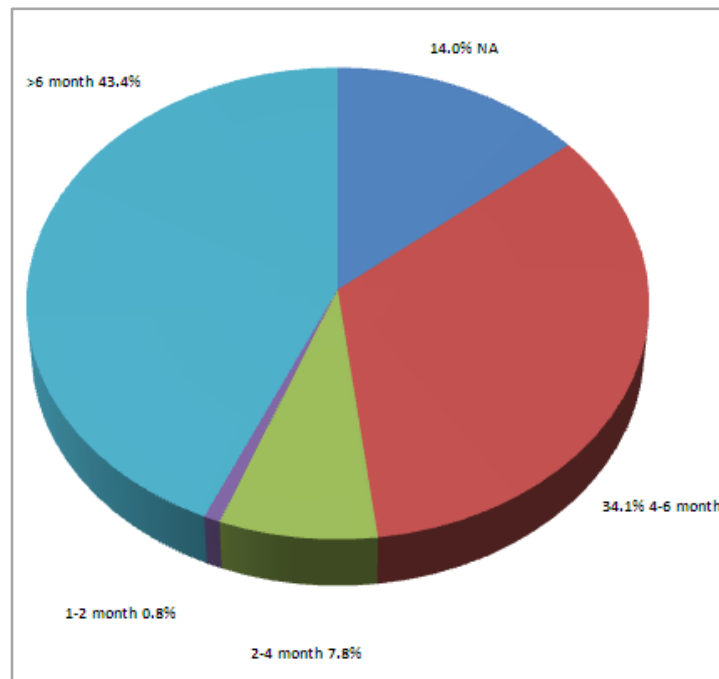


Fig. 8: Duration of exclusive breast feeding

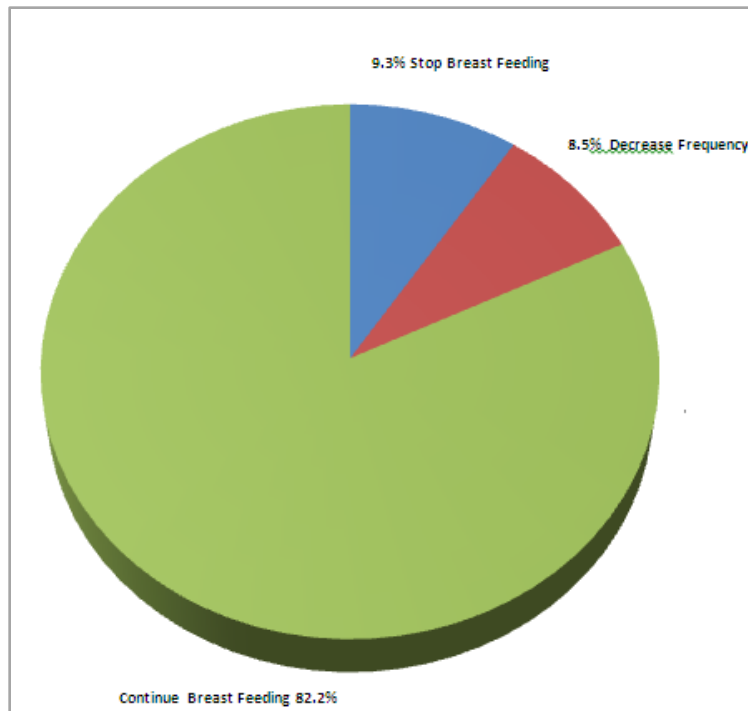


Fig. 9: KAP Gap about Breast Feeding Status of Breast feeding if baby become ill

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