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## Research Article

# Knowledge, attitude and practice of breast feeding at a tertiary care centre in the government medical college and hospital, Aurangabad, India

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## ABSTRACT

**Background:** Mother's milk undoubtedly represents the best nourishment for the child during first months of life. The benefits of breastfeeding (BF) specially, exclusive breastfeeding (EBF), are well established. No artificial feed can replace breast milk, its specific nutrients and protection against diseases. All women should be encouraged to exclusively breastfeed their infants up to 6 months of age and thereafter to continue along with appropriate and adequate complementary foods, for up to 2 years of age.

**Methods:** In the present study, we aimed to study knowledge, attitude and the feeding practices in a tertiary care centre. The descriptive study was conducted in Obstetrics and Gynecology Department of Government Medical College and Hospital, Aurangabad.

**Results:** 200 postnatal women were included in study. Women were interviewed personally with the help of a fixed questionnaire regarding their knowledge attitude and feeding practices. 60.5% of women started breast feeding their infants within 2 hours and 100% women were feeding within 24 hours of birth. Delay in initiation was seen in women having a caesarean section. 89% received mother's milk as their first feed. 84% were aware of its nutritive value.

**Conclusions:** Efforts need to be made to help mother to initiate feeding early specially in caesarean section. Women need to be made aware of benefits of breast feeding and proper techniques. Health care providers and nursing staff should be encouraged to actively participate in proper counseling and training of mothers.

**Keywords:** Exclusive breast feeding, Knowledge, Attitude, Practice

## INTRODUCTION

There is a universal consensus about the fundamental importance of breastfeeding for children's adequate growth and development and for their physical and mental health. Breastfeeding, particularly exclusive breastfeeding, and appropriate complementary feeding practices are universally accepted as essential elements for the satisfactory growth and development of infants as well as for prevention of childhood illness. This has culminated in a publication by the World Health Organization (WHO) recommending that infants up to 6 months of age should be exclusively breastfed.<sup>1</sup>

Exclusive breastfeeding, which giving breast milk only and no other liquids, except drops or syrups with vitamins, mineral supplements or medicines, is superior to non-exclusive breastfeeding with a protective effect against both morbidity and mortality.<sup>2,3</sup> Exclusive breastfeeding provides low cost, complete nutrition for the infant, protects him/her against infections including infant diarrhea, and prolongs lactation amenorrhea, thereby increasing birth spacing.<sup>4,5</sup>

The Federal Ministry of Health and Social Services in conjunction with UNICEF and WHO launched the Baby Friendly Hospital Initiative (BFHI) to protect promote and support breast feeding. Its main objectives are

promotion of early initiation of breast feeding (within 30 minutes of delivery), EBF for the first six months of life, breastfeeding on demand and rooming in practices and continuing breastfeeding with complementary feeds into the second year of life.<sup>6</sup> Very few women in India have right knowledge about breast feeding practices.<sup>7</sup> The main source of information to mothers is through family and friends, which is often inadequate.<sup>8</sup> Therefore, the present study was undertaken to assess breastfeeding knowledge, attitude and practice (KAP) of females delivered at a tertiary care centre.

## METHODS

This is a descriptive study, carried out in the Obstetrics and Gynecology Department of GMCH, Aurangabad (MS). Women within 24 hrs of delivery were selected until the desired sample size was attained. Mothers who lost their babies and those whose babies were admitted in NICU were excluded from the study. Informed consent was obtained from all mothers. All women were interviewed personally with the help of a fixed questionnaire, regarding their knowledge, attitude and feeding practices. Apart from a questionnaire based interview, a passive observation checklist was made taking into consideration the following points of Baby Friendly Hospital Initiative (BFHI), Initiation of breastfeeding, Technique of breast feeding, Prelacteal feed, Type of prelacteal feed, Practice of demand feeding, After that all women were counselled about Exclusive Breast Feeding and its advantage. All the data were recorded and analysed. Ethical committee permission was taken.

### Demography

- Age – 70% of the women were in the age group 25 – 26 yrs.
- Education – 62% of the women were educated up to high school level.
- 67.5% women were unbooked
- 60% were rural population and 40% were urban population.

## RESULTS

Breastfeeding knowledge of the participants was assessed. 61% of women had knowledge of breast feeding on demand. 81.5% of the participants reported that colostrum is good for the baby. 5% considered it either not good or possibly detrimental to the child's health. 84% were aware of nutritive value of breast milk. 27% knew the anti-infective property of the breast milk. 16% women knew about bonding properties while 14% were completely unaware about benefits of breast milk. In our study the large number of participants i.e. 179 (89.5%) of the mothers knew that exclusive breastfeeding should be given for 6 months. The knowledge regarding techniques of breast feeding ranged

from 84% for proper position the baby to 70% for burping practices.

**Table 1: Breastfeeding knowledge of the participants.**

Variable	Number	%
Knowing the frequency of feeding in the first month		
< 8 times/day	18	9
>8 times/day	51	25.5
Breastfeed on demand	122	61
Not sure	9	4.5
Knowing the advantage of colostrum Good	163	81.5
May expose child to risk	10	5
I don't know	27	13.5
Knowing the advantage of breast milk*		
Nutritional value	168	84
Anti-infective	54	27
Bonding	32	16
I don't know	28	14
Knowing the age up to which the child should receive only breast milk		
2 months	0	0
4 months	6	3
6 months	179	89.5
12 months	12	6
24 months	3	1.5
Knowing the proper technique of breastfeeding		
Position of the baby	168	84
Rooting reflex	68	34
Attachment of nipple	60	30
Burping	140	70

\*Many women knew more than one advantage of breast milk.

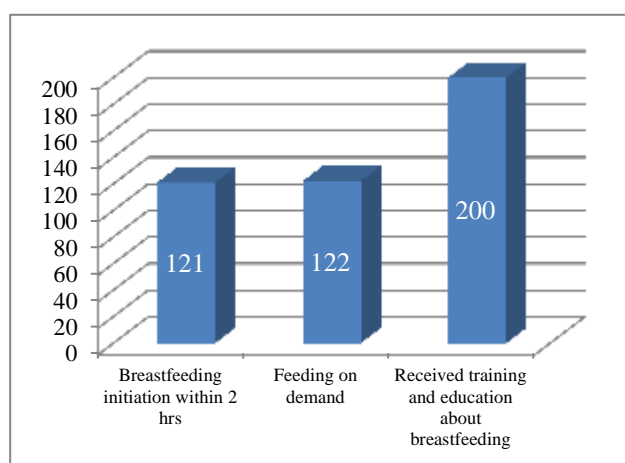
**Table 2: Breast feeding attitude of the women.**

Variable	Number	%
Reasons behind adoption of breastfeeding		
Religious background	5	2.5
Child health	174	87
Cleanliness and easy preparation	13	6.5
Other reasons (like local customs, following their ancestors)	8	4
Intention to breastfed next child		
Yes	200	100
No	0	0
Would recommend exclusive breastfeeding to my friends and relatives		
Yes	200	100
No	0	

**Table 3: Breastfeeding practice by the women.**

Variable	Number	%
Practice starting breastfeeding		
< 2 hours	121	60.5
2 - 4 hours	66	33
> 4 hours	13	6.5
Baby given prelacteal feed in hospital		
Yes	22	11
No	178	89
Content of First Feed		
Breast Milk	178	89
Honey	22	11
Difficulty in initiation of breastfeeding		
Yes	114	57
No	86	43
Reasons for late Initiation of breastfeeding		
Cesarean section	52	26
Colostrum is not good	4	2
Inadequate lactation	23	11.5
pain	12	6
Anxiety	13	6.5
Delay in shifting of mothers to the ward	10	5

Regarding the breastfeeding attitude of the participants, 87% said they breast fed for child's good health, 6.5% for its easy availability. 96.5% intended to breast feed their next child. 96.5% said they would recommend exclusive breastfeeding to their friends and relatives. Assessing the breastfeeding practice of the participants, 43% women did not have any difficulty in initiation of breastfeeding. 60.5% started breastfeeding within 2 hours. 100% were breastfeeding within 24 hours.

**Figure 1: Baby friendly hospital initiative practices.**

## DISCUSSION

Adequate nutrition is essential in infancy to ensure the adequate growth, health, and development of children. 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.<sup>9</sup> The unique nutritional and antibody properties and advantage of colostrum are now well recognized and documented<sup>10</sup>. In our study, 81.5% of the mothers knew that colostrum needs to be given which is comparable to others studies in India where the importance of colostrum was known to 75- 90% of the mothers.<sup>11,12</sup>

Exclusive breastfeeding is safe, easy economical and emotionally satisfying means of feeding babies, particularly in developing country like India. Present study revealed that almost 89% of mothers have started exclusive breast feeding while remaining 11% mothers have given honey as pre lacteal feed. So, in present study the initiation of exclusive breastfeeding was in 89%, which was higher than the national data, while prelacteal feed was 11% which was lower than the national data which was encouraging.<sup>13</sup>

The Baby friendly hospital Initiative (BFHI) was designed to promote early initiation of breastfeeding (i.e. within 30 min. of delivery). This study observed that 60.5% of the mothers initiated breastfeeding immediately after birth. The study from Western Nepal, India, obtained a higher rate (72.2%) of breastfeeding initiation.<sup>14</sup>

Findings from recent studies have shown that neonatal mortality could be significantly reduced by 22% when breastfeeding was commenced within the first hour.<sup>15</sup> The major reasons for late initiation of breastfeeding in our study were caesarian section (13%) and inadequate lactation 8%.

The limitation of my study is that this study was conducted in tertiary care hospital so it cannot be applicable to entire community.

## CONCLUSION

Even though all the children were breastfed, the knowledge and attitude was good but practice was low. Efforts need to be made to help mother to initiate feeding early especially in caesarean section. Women need to be made aware of benefits of breast feeding and proper techniques. Thus, there is an unmet need of proper counselling of the patients and attendants. Health care providers and nursing staff should be encouraged to actively participate in counselling, educating and training of mothers for breastfeeding.

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