

Knowledge, attitude and practice towards breastfeeding among lactating mothers in Urban Patna, Bihar

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Breast feeding practice is almost universal and one of the important aspects of living beings. Breast feeding is not only good for infant's health but also very important to mother's health. There is world wide promotional campaign regarding the breast feeding and its health impact. However, despite of its several health benefits in support of breast feeding, its prevalence has been remained low worldwide. This lack of negligence is mainly due to lack of understanding of mothers to exclusive breast feeding (EBF). It is also evident that, this lack of EBF is prevalent mainly in developing countries like India. Hence, the objective of this study was to examine the knowledge and attitude towards breast feeding and among Indian postnatal mothers. This study was conducted in urban areas of Patna district, Bihar, India. The mother nourishing children between 0-2 years of age selected. Breast feeding knowledge of mothers was examined by giving printed questionnaire containing different types of structured question regarding their current knowledge on breast feeding. The number of selected mothers (n=100) of same age group were evaluated and observed that 100 per cent were knowing that mother's milk is the best food for the children. Only 57 per cent of mothers were having knowledge that the breast feeding should be started within half an hour of child birth and 92 per cent were having knowledge of exclusive breast feeding should be given upto 6 months. Hence, this study shows that in spite of having basic knowledge regarding EBS, lack of adherence to EBS is the main cause of such lower percentage of BES practice. Although, lack of knowledge regarding EBS is also among the limiting factor for low EBS rates in Patna, India and extensive campaign for the upliftment of knowledge and practices are required. This study showed a lack of understanding of the importance of breast feeding and poor adherence to exclusive breast feeding 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.

Key Words : Breastfeeding, Children, Nutrition, Childhood, Health

How to cite this article : Lakshmi, Vijay (2019). Knowledge, attitude and practice towards breastfeeding among lactating mothers in Urban Patna, Bihar. *Food Sci. Res. J.*, 10(2): 203-206, DOI : 10.15740/HAS/FSRJ/10.2/203-206. Copyright@ 2019: Hind Agri-Horticultural Society.

INTRODUCTION

Exclusive breastfeeding for six months as recommended by WHO and American Academy of Pediatrics (AAP) has a number of benefits to the growing infant. The WHO recommends that for the first six months of life, infants should be exclusively breastfeed

to achieve optimal growth, development and health. In addition to calories and proteins breast milk contain bioactive factors like IgA, lactoferrin, K-casein, cytokines, growth factors, glutathione peroxides etc, which have anti-infective, antioxidant and growth promoting properties (Hamosh, 2001). In the early stages of a baby's life, breast milk meets all of their nutrient needs and no other foods or fluids including water are necessary. Breastfeeding also confers intermediate and long-term benefits on both the child and the mother, such as protect

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children against a variety of acute and chronic disorders. Infants not breastfed are between 6 and 10 times more likely not to survive the first months of life. Formula-fed infants also have increased risk of long-term diseases with an immunological basis, such as asthma, type 1 diabetes, celiac disease, Crohn’s disease, ulcerative colitis and childhood leukemia. The WHO recommends that breast milk provide at least 50 per cent of calories for a child between 6 and 12 months of age and one-third of calories between 12 and 24 months of age.

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 per cent (NFHS-3 report 2005-06). This signifies poor implementation of breast feeding policies in health care settings and also raising concerns towards 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 mothers.

In India, breastfeeding appears to be influenced by social, cultural, and economic factors. In 1991, Breastfeeding Promotion Network of India (BPNI) was established to protect, promote and support breastfeeding (Gupta, 2002). Furthermore, the Government of India has also undertaken National Rural Health Mission (NRHM), which intends to implement Integrated Management of Neonatal and Childhood Illnesses (IMNCI) through the existing healthcare delivery system. Poor practices and attitudes toward exclusive breastfeeding have been reported to be the major reasons for poor health outcomes among children, particularly in developing countries.

Hence, this study was conducted to acknowledge the current status of EBF practices in Patna district of Bihar State, India.

METHODOLOGY

After obtaining Institutional ethical clearance, we conducted this observational study in randomly selected hospitals and maternity clinics of Patna from January 2019 to February 2019. One hundred mothers attending pediatrics outpatient department were randomly selected. A structured questionnaire was prepared based on infant and young child feeding guidelines. After obtaining informed consent from parents, questionnaire was filled-up. Illiterate mothers were interviewed by volunteers and their responses were filled up in the questionnaire. All the data were tabulated and analyzed.

OBSERVATIONS AND ASSESSMENT

Results show (Table 1) that the demographic details of parents interviewed with 30 per cent of their children less than six months. Most of their children (59%) were born by normal delivery process.

Questions regarding knowledge, attitude and practice were asked in the next segment of interview (Table 2). Although 57 per cent had the knowledge to initiate breastfeeding within half an hour of delivery, only 36 per cent started giving breastfeeding so. A good number of parents 92 per cent of mothers gave exclusive breastfeeding for six months. Those who didn’t practice exclusive breastfeeding gave mainly cow’s milk (37%). Weaning as recommended was started from six months of age by 64 per cent of mothers. They also continued breastfeeding in addition to complimentary feeds. They gave breastfeeding at hourly (18%), two hourly (26%) intervals or whenever required (6%).

Table 3 shows data about breastfeeding problems and consultations. Preferred counselor for breastfeeding

Table 1: Demographic details

Demographics		Percentage (%)
Age of child	<6mths	30%
	>6mths	70%
Gender of child	Male	65%
	Female	35%
Type of delivery	Normal	59%
	Caesarean	41%

Attribute of breastfeeding		Percentage (%)
Knowledge of time of starting BF	Within 1/2hr	57%
	1-4 hrs	26%
	1-3 days	17%
	1 week	0%
Practice of time of starting BF	Within 1/2hr	36%
	1-4 hrs	25%
	1-3 days	36%
	1 week	3%
Knowledge about colostrums	Good	87%
	Bad	13%
Is mother's milk best for children	Yes	100%
	No	0%
Duration of exclusive breastfeeding	3 months	6%
	6 months	92%
	9 months	2%
	12 months	0%
	18 months	0%
Top feeding used	Packaged milk	23%
	Fresh Cow's milk	37%
	Fresh Goat's milk	6%
	Formula milk	5%
	None	29%
When was weaning started	6 months	64%
	1 year	36%
	2 years	0
Was BF continued after weaning	Yes	87%
	No	13%
Frequency of breast feeding	1 hr	18%
	2 hrs	26%
	3 hrs	30%
	4 hrs	20%
	Whenever required	6%

Question		Percentage (%)
Counselor to discuss breastfeeding issues	Doctor	76%
	Nurse	2%
	Relative	22%
If stopped BF early, reason for stopping	No breast milk	12%
	Baby didn't drink	20%
	Mother became pregnant	2%
	Baby became sick	0
	Mother became sick	4%
	Didn't stop BF	62%
Consultation during sickness	Doctor	92%
	Relatives	6%
	Friends	2%

issues was usually a doctor (76%). Similarly 92 per cent of times consultation during sickness was a doctor. Baby didn't drink the milk (20%) was the main reason for discontinuing breastfeeding.

This study was conducted to acquire knowledge, attitude and practice of EBF among mothers with children less than two years of age. In our study, among 100 nourishing mothers, 100 per cent knew that mother's milk is the best food for the baby, however, practice regarding early start EBF was found only in 36 per cent, which may be found due to lack of antenatal counseling regarding breast feeding within appropriate time of delivery. In our study colostrum has been considered bad by 13 per cent of mothers. Three percentage of mothers didn't know about the exclusively breastfeed duration for their child. Mothers should be educated about the benefits of exclusively breastfeeding till six months. 57 per cent of the mothers were having knowledge that breast feeding should be initiated within ½ hr. of birth. About 36 per cent of mothers initiated breast feeding within ½ hr. of birth and 25 per cent initiated within 4 hrs. Frequency of breast feeding per day in this study were 18 per cent per hour, 26 per cent two hourly, 30 per cent three hourly and 20 per cent 4 hourly. When top feeding was used, mothers relied on cow's milk (37%), formula milk (5%) and packaged milk (23%). Hence, health education should also include appropriate and safe usage of artificial feeds. Weaning was started appropriately after six months in

64 per cent of infants. Baby didn't drink well (20%) was the main reasons for stopping breastfeeding. This could have been tackled by giving hands on practical training through lactation workshop and appropriate support by health workers during the time of need. This study shows that, there is a gap between knowledge and practice. Intervention measures are needed to increase the attitude and practice of breast feeding. Hence, there is a need for awareness programmes regarding breast feeding in this area as Magawa (2012) has also shown in his study that breastfeeding within one hour of delivery reduces mortality rate of children. So, to improve the rates of full breast-feeding, specific information about the beliefs and practices that influence this outcome is needed.

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Received : 17.05.2019; Revised : 17.09.2019; Accepted : 23.09.2019