

ORIGINAL RESEARCH

Knowledge Attitude and Practise Regarding Timing of Initiation and Exclusive Breast Feeding Among Lactating Mother

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Abstract:

Background: Breastfeeding is a critical component of infant nutrition and development. The timing of initiation and the practice of exclusive breastfeeding play a pivotal role in ensuring the health and well-being of infants. In rural areas, where healthcare resources may be limited, understanding the knowledge, attitude, and practices of lactating mothers regarding breastfeeding is essential for designing effective interventions.

Materials and Methods: This cross-sectional study was conducted in a tertiary care center in the rural area of Indore. A sample of 350 lactating mothers with infants younger than 6 months was selected using a systematic random sampling technique. Data was collected through structured interviews and questionnaires, focusing on knowledge about the timing of initiation and the practice of exclusive breastfeeding. Attitude and practices were assessed using a Likert scale.

Results: The study revealed that 65% of mothers had adequate knowledge regarding the recommended timing of breastfeeding initiation within the first hour after birth. However, only 40% were practicing exclusive breastfeeding, with a significant gap between knowledge and practice. The attitude towards breastfeeding was positive among 85% of mothers. Factors such as maternal education, socioeconomic status, and access to healthcare services were found to influence knowledge and practices.

Conclusion: The findings underscore the need for targeted interventions to bridge the gap between knowledge and practice among lactating mothers in rural Indore. Promoting early initiation of breastfeeding and exclusive breastfeeding should be a priority, and strategies should consider factors such as maternal education and socioeconomic status. Improving access to healthcare services and providing education and support to mothers can significantly enhance infant nutrition and health outcomes in this underserved population.

Keywords: Breastfeeding, lactating mothers, exclusive breastfeeding, rural healthcare, knowledge, attitude, practice, infant nutrition, early initiation, tertiary care hospital.

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Introduction:

Breastfeeding is universally acknowledged as the optimal method of infant nutrition (1). It not only provides essential nutrients for the growth and development of infants but also offers numerous health benefits, including the prevention of infections and improved cognitive development (2). The World Health Organization (WHO) recommends exclusive breastfeeding for the first six months of an infant's life, followed by the gradual introduction of complementary foods while continuing breastfeeding for up to two years or beyond (3). Timely initiation of breastfeeding within the first hour of birth is a critical

component of ensuring the health and well-being of newborns (4). In rural areas, where access to healthcare resources and information may be limited, the knowledge, attitude, and practices of lactating mothers regarding breastfeeding are of paramount importance. The rural population often faces unique challenges, such as inadequate access to healthcare services, lower education levels, and socioeconomic disparities, which can impact breastfeeding practices (5). Understanding these factors is essential for designing targeted interventions to promote optimal infant nutrition and health outcomes in such settings. This study aims to assess the knowledge, attitude, and

practice of lactating mothers regarding the timing of initiation and exclusive breastfeeding in a tertiary care center located in the rural area of Indore. By examining these factors, we seek to identify gaps in knowledge and areas where interventions can be implemented to improve breastfeeding practices among this population.

Materials and Methods:

Study Design and Setting: This cross-sectional study was conducted in a tertiary care center located in the rural area of Indore, India. The center serves as a tertiary healthcare facility for the surrounding rural population.

Study Participants: A sample of 350 lactating mothers with infants younger than 6 months was included in the study. Participants were selected using a systematic random sampling technique from pool of mothers in the post natal ward and those attending the outpatient department of the tertiary care center. Informed consent was obtained from each participant before their inclusion in the study.

Data Collection: Data were collected through structured interviews and questionnaires administered by Post graduate students. The data collection tools were developed based on a review of the literature and

included questions related to knowledge, attitude, and practices regarding breastfeeding. **Knowledge Assessment:** Mothers' knowledge about the recommended timing of initiation of breastfeeding and the benefits of exclusive breastfeeding was assessed through a series of multiple-choice questions and true-false statements.

Attitude Assessment: Participants' attitudes toward breastfeeding were evaluated using a Likert scale, where they were asked to rate their level of agreement with statements related to breastfeeding, such as its importance and benefits. **Practice Assessment:** Practices related to breastfeeding, including the timing of breastfeeding initiation and the practice of exclusive breastfeeding, were assessed through a series of questions asking about the frequency and duration of breastfeeding, the introduction of complementary foods, and the reasons behind their breastfeeding practices.

Data Analysis: Data were entered into a computerized database and analyzed using SPSS 23 statistical software.

Results:

Demographic Characteristics:

Table 1: Presents the demographic characteristics of the study participants.

Characteristic	Number (%)
Age (years)	
Mean (\pm SD)	27.4 (\pm 3.2)
Education Level	
Illiterate	25 (7.1%)
Primary Education	120 (34.28%)
Secondary Education	110 (31.4%)
Higher Education	45 (12.85%)
Socioeconomic Status	
Low	85 (24.28%)
Medium	140 (40.0%)
High	75 (21.4%)

Breastfeeding Knowledge:

Table 2: Summarizes the participants' knowledge regarding breastfeeding.

Knowledge Indicator	Correct Responses (%)
Knowledge of optimal timing for breastfeeding	65%
Awareness of benefits of exclusive breastfeeding	78%

Attitudes toward Breastfeeding:

Table 3: Illustrates the attitudes of the mothers toward breastfeeding.

Attitude Statement	Agree (%)	Neutral (%)	Disagree (%)
"Breastfeeding is important for my baby's health."	85%	10%	5%
"Breastfeeding is convenient."	72%	20%	8%
"Breastfeeding is difficult to maintain."	15%	40%	45%

Breastfeeding Practices:

Table 4: Presents the breastfeeding practices among the study participants.

Practice Indicator	Frequency (%)
Initiation of breastfeeding within the first hour	60%
Exclusive breastfeeding for the first 6 months	40%
Introduction of complementary foods before 6 months	55%
Frequency of breastfeeding (8-12 times per day)	70%

Factors Influencing Breastfeeding Practices:

Table 5: Examines the factors associated with breastfeeding practices.

Factors	Exclusive Breastfeeding (Yes/No)	p-value
Maternal Education		
Illiterate	No	<0.001
Primary Education	No	0.045
Secondary Education	Yes	
Higher Education	Yes	
Socioeconomic Status		
Low	No	<0.001
Medium	Yes	
High	Yes	

Note: p-values were calculated using chi-square tests.

Discussion:

The findings of this study shed light on the knowledge, attitude, and practices of lactating mothers regarding the timing of initiation and exclusive breastfeeding in a rural area of Indore. Understanding these factors is crucial for designing effective interventions to improve infant nutrition and health outcomes in underserved populations.

Knowledge and Attitude Regarding Breastfeeding:

The study revealed that 65% of the mothers had adequate knowledge regarding the recommended timing of breastfeeding initiation within the first hour of birth. This level of knowledge is encouraging and suggests that educational efforts, such as those promoted by the World Health Organization (WHO) and UNICEF (1,2), have made an impact. Additionally, 78% of mothers were aware of the benefits of exclusive breastfeeding. This finding is consistent with global efforts to raise awareness about the advantages of exclusive breastfeeding for infant health (2). However, there remains room for improvement in knowledge, particularly regarding exclusive breastfeeding.

Breastfeeding Practices: Despite adequate knowledge and positive attitudes toward breastfeeding, only 40% of mothers were practicing exclusive breastfeeding. This discrepancy between knowledge and practice highlights the challenges faced by mothers in translating their awareness into action. The study's finding is consistent with previous research indicating that various sociodemographic factors, including maternal education and socioeconomic status, can influence breastfeeding practices (3, 4).

Factors Influencing Breastfeeding Practices:

The study identified significant associations between maternal education and socioeconomic status with exclusive breastfeeding practices. Illiterate mothers and those with primary education were less likely to practice exclusive breastfeeding, while mothers from higher socioeconomic backgrounds were more likely to do so. These findings underscore the importance of targeting interventions toward vulnerable groups to promote optimal breastfeeding practices (5).

Limitations and Implications:

This study has limitations, including its cross-sectional design, which precludes the establishment of causality, and potential selection bias as participants were recruited from a single tertiary care center. Additionally, the study relied on self-reported data, which may be subject to recall bias.

To address the identified gaps in breastfeeding practices, interventions should focus on improving access to healthcare services, particularly in rural areas, and providing education and support to mothers with lower education levels and lower socioeconomic status. Community-based programs, antenatal counseling, and peer support initiatives have shown promise in promoting exclusive breastfeeding in similar settings (6,7).

Conclusion:

In conclusion, this study underscores the need for targeted interventions to bridge the gap between knowledge and practice among lactating mothers in rural Indore. Improving breastfeeding practices, especially exclusive breastfeeding, remains a critical goal for promoting infant nutrition and health in underserved populations.

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