

Study of Breast Feeding Practices among Mothers Attending Anganwadi Centers in Urban Health Training Centre Area

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Abstract

Context: Mortality rate can be brought down to up to 20% lesser if the correct breast feeding and weaning practices are followed. *Aims:* To study of breast feeding practices among mothers. *Settings and Design:* A community based cross sectional study was carried out in Anganwadi centers of field practice area of urban health training center. *Methods and Material:* Data was collected in a pre designed pre tested study questionnaire. Information was obtained on demo demographic profile, questions regarding knowledge and practices of Breast Feeding practices were asked. *Statistical Analysis:* Data was analyzed using proportions. Chi square test was applied. p value of less than 0.05 was taken as statistically significant. *Results:* Majority of women had correct knowledge about breast feeding. Bottle feeding prevalence was 21.2%. About one fourth of the mothers did not feed colostrums to their babies. 17.2% of the mothers gave pre lacteal feeding to their babies. Honey was the most common pre lacteal feed used. Even 32.3% of the mothers who gave pre lacteal feed were advised to do so either by doctor or by nurse. 64.7% believed that pre lacteal feed was beneficial to their child. Elderly and literate mothers were found to have significantly better knowledge compared to the younger mothers. Other factors were not found to be significantly associated with knowledge. *Conclusion:* Majority mothers had shown correct knowledge and practices. But still a significant gap of 25-30% was found. Worst finding was doctors or nurses advising pre lacteal feeding.

Keywords: Breast Feeding; Colostrum; Mothers; Infants; Bottle Feeding.

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Introduction

Exclusive breast feeding has been recommended by World Health Organization (WHO). Exclusive breast feeding should be continued up to six months of age followed by weaning in addition to continued

breast feeding for another 1-2 years more. Studies have shown that there is reduction in the infant mortality and morbidity when these correct practices are followed. All are well versed with the advantages of breast feeding and correct breast feeding practices. But still we find that majority of mothers globally do not properly follow these guidelines. They breast feed their children but not exactly what is known as exclusive breast feeding. These incorrect practices lead to increased morbidity and mortality among infants. More than 50% mortality in under-five years can be attributed directly or indirectly to improper feeding practices [1].

It has been observed that there has been an upward trend of proper breast feeding practices in the developed world and at the same time there has been a downward trend of proper breast feeding practices in the developing world. In these areas bottle feeding has compounded the existing problem. This has been particularly found among the urban women dwellers [2]. Proper breast feeding practices as per the WHO are giving colostrums, initiation of breastfeeding within half an hour in case of normal delivery and within four hours in case of lower segment cesarean section delivery, avoiding pre lacteal feeds, exclusive breast feeding for six months i.e. even water is not given to the baby, avoiding bottle feeding, breast feeding on demand, initiation of healthy and hygienic feeding at six months of age along with continued breast feeding till the child is two years old [3].

These correct practices improve the child health and ensure long survival. In developing countries, it has been found that the mortality rate can be brought down to up to 20% lesser if the correct breast feeding and weaning practices are followed [4]. One study showed that with correct breast feeding practices 22% of the deaths can be prevented [5].

Hence present study was undertaken to study of breast feeding practices among mothers attending at Anganwadi centers in urban health training centre area.

Materials and Methods

Study Design: A community based cross sectional study was carried out.

Sample Size: The study was carried out among 198 selected mothers having a child up to two years of age.

Place of Study: The study was conducted in Anganwadi centers of field practice area of urban

health training center which is under department of Community Medicine, Malla Reddy Institute of Medical Sciences, Hyderabad.

Ethical considerations: Institutional Ethics Committee permission was taken before the start of the present study by submitting the protocol of the study to them. Mothers were informed about the nature of the study and informed consent was obtained from them.

Study period: The study was carried over a period of six months

Inclusion Criteria

1. Mothers having children up to the age of two years at the time of the study
2. Mothers attending the Anganwadi centers in the field practice area
3. Mothers willing to participate in the present study

Exclusion Criteria

1. Mothers found to be suffering from illness which prevented them to participate in the present study
2. Mothers not willing to participate in the present study

Methodology

After IEC approval the data was collected in a pre designed pre tested study questionnaire. The mothers attending all Anganwadi centers in the field practice area of Community Medicine, Malla Reddy Institute of Medical Sciences, Hyderabad were contacted. Information was obtained on demo demographic profile, questions regarding knowledge of Breast Feeding practices were asked, an assessment regarding awareness regarding colostrum, pre lacteal feeds was done.

Knowledge questions like Breast feeding is obstacle in illness, Breast feeding is needed to child, What is colostrums, How is colostrums structure, Breast should be cleaned before breast feeding, Breast feeding in case of twins, Breast feeding in case of breast abscess, What should be done in case of breast abscess, Why exclusive breast feeding should be done, Benefits of exclusive breast feeding to mother, Benefits of exclusive breast feeding to child, Quantity of breast milk depends upon size of the breast, Awareness about city milk bank, Weather infants become sick due to bottle feeding, Breast milk increasing factors,

Knowledge about correct breast feeding method were asked. Breast feeding practices questions like Supplementary feeding started at 6 months, Bottle feeding is useful, Time of initiation of breast feeding less than 1 hr, Colostrums feeding, Frequency of breast feeding (2 to 3 hrs), Pre lacteal feeding given, Duration of pre lacteal feeding given, Type of pre lacteal feeding given, Pre lacteal feeding advise given by, Pre lacteal feed is beneficial to child were asked.

Statistical Analysis

Data was analyzed using proportions. Chi square test was applied to study association between various factors and knowledge and practices of breast feeding. P value of less than 0.05 was taken as statistically significant.

Results

Table 1 shows knowledge of mothers related to breast feeding. A total of 18 questions were asked. In

11 questions majority of women had shown that they had correct knowledge about breast feeding. But in seven questions their knowledge was very poor. Majority had no knowledge on these questions like how the breast feeding should be done in case of twins, breast feeding during an episode of breast abscess, what should be done in case of breast abscess, benefits of exclusive breast feeding to the mother. They wrongly believed that quantity of breast milk depends upon the size of breast. No one knew about milk bank. 90% thought that bottle feeding causes no harm to the baby.

Table 2 shows breast feeding practices among the mother. Majority of the mothers have shown that their practices related to breast feeding were correct. Bottle feeding prevalence was 21.2%. About one fourth of the mothers did not feed colostrums to their babies. 17.2% of the mothers gave pre lacteal feeding to their babies. Honey was the most common pre lacteal feed used. Even 32.3% of the mothers who gave pre lacteal feed were advised to do so either by doctor or by nurse. 64.7% believed that pre lacteal feed was beneficial to their child.

Table 1: Knowledge of mothers related to breast feeding

Knowledge questions	Correct response	Number	%
Breast feeding is obstacle in illness	Yes	187	94.4
	No	11	5.6
Breast feeding is needed to child	Yes	190	95.6
	No	08	4.4
What is colostrums	Yes	148	74.7
	No	50	25.3
How is colostrums structure	Yes	149	75.2
	No	49	24.8
Benefits of colostrums	Yes	109	55
	No	89	45
Breast should be cleaned before breast feeding	Yes	150	75.7
	No	48	24.3
Breast feeding in case of twins	Yes	01	0.5
	No	197	99.5
Breast feeding in case of breast abscess	Yes	6	3.1
	No	192	96.9
What should be done in case of breast abscess	Yes	2	1.1
	No	196	98.9
Why exclusive breast feeding should be done	Yes	158	79.8
	No	40	20.2
Benefits of exclusive breast feeding to mother	Yes	13	6.6
	No	185	93.4
Benefits of exclusive breast feeding to child	Yes	166	83.8
	No	32	16.2
Quantity of breast milk depends upon size of the breast	Yes	94	47.5
	No	104	52.5
Awareness about city milk bank	Yes	00	0
	No	198	100
Weather infants become sick due to bottle feeding	Yes	20	10.1
	No	178	89.9
Breast milk increasing factors	Yes	132	66.7
	No	66	33.3
Knowledge about correct breast feeding method	Yes	112	74.7
	No	86	25.3

Table 3 shows association between various parameters and correct knowledge of breast feeding. Out of six factors studied only age of mother and education of mother were found to be significantly associated with knowledge of breast feeding. Elderly and literate mothers were found to have significantly better knowledge compared to the younger mothers.

Other factors were not found to be significantly associated with knowledge.

Table 4 shows association between various parameters and breast feeding Practices. Out of six factors studied no factor was found to be significantly associated with correct practices related to breast feeding.

Table 2: Breast feeding practices among the mother

Practice questions	Correct practice	Number	Percentage
Supplementary feeding started at 6 months	Yes	151	76.2
	No	47	23.8
Bottle feeding is useful	Yes	42	21.2
	No	156	78.8
Time of initiation of breast feeding less than 1 hr	Yes	190	95.9
	No	8	4.1
Colostrums feeding	Yes	148	74.7
	No	50	25.3
Frequency of breast feeding (2 to 3 hrs)	Yes	115	58
	No	87	42
Pre lacteal feeding given	Yes	34	17.2
	No	164	82.8
Duration of pre lacteal feeding given	1 day	21	61.8
	1 week	12	35.3
	1 month	01	2.9
Type of pre lacteal feeding given	a)Honey	13	38.3
	b)Jaggery water	00	00
	c)only water	01	2.9
	d)other	11	32.3
	e)mixed	9	26.5
Pre lacteal feeding advise given by	a)mother	07	20.5
	b)relatives	12	35.4
	c)aaya	0	0
	d)doctor/nurses	11	32.3
	e)mixed	04	11.8
Pre lacteal feed is beneficial to child	Yes	12	35.3
	No	22	64.7

Table 3: Association between various parameters and correct knowledge of breast feeding

Parameter		Correct knowledge (%)	Chi square	P value
Age of mother (years)	18-25	25	4.9	0.013
	> 25	42		
Education of mother	Illiterate	7.7	2.9	0.029
	Literate	33		
Education of father	Illiterate	15.4	0.9444	0.1656
	Literate	32.4		
Occupation of Mother	Employed	42.8	0.917	0.5383
	Not employed	30		
Occupation of Father	Employed	30.5	0.3019	0.5827
	Not employed	45.5		
Type of Family	Nuclear	34	2.913	0.8790
	Joint	22.4		

Table 4: Association between various parameters and breast feeding Practices

Parameter		Correct practices (%)	Chi square	P value
Age of mother (years)	18-25	79	0.006	0.4689
	> 25	79.7		
Education of mother	Illiterate	84.6	0.018	0.4460
	Literate	80		
Education of father	Illiterate	77	0.018	0.4460
	Literate	79.5		
Occupation of Mother	Employed	85.7	0.2236	0.3144
	Not employed	78.5		
Occupation of Father	Employed	80.2	0.8757	0.1747
	Not employed	63.6		
Type of Family	Nuclear	77.8	0.4477	0.2517
	Joint	83.7		

Discussion

A total of 18 questions were asked. In 11 questions majority of women had shown that they had correct knowledge about breast feeding. But in seven questions their knowledge was very poor. Majority had no knowledge on these questions like how the breast feeding should be done in case of twins, breast feeding during an episode of breast abscess, what should be done in case of breast abscess, benefits of exclusive breast feeding to the mother. They wrongly believed that quantity of breast milk depends upon the size of breast. No one knew about milk bank. 90% thought that bottle feeding causes no harm to the baby.

Majority of the mothers have shown that their practices related to breast feeding were correct. Bottle feeding prevalence was 21.2%. About one fourth of the mothers did not feed colostrums to their babies. 17.2% of the mothers gave pre lacteal feeding to their babies. Honey was the most common pre lacteal feed used. Even 32.3% of the mothers who gave pre lacteal feed were advised to do so either by doctor or by nurse. 64.7% believed that pre lacteal feed was beneficial to their child.

Out of six factors studied only age of mother and education of mother were found to be significantly associated with knowledge of breast feeding. Elderly and literate mothers were found to have significantly better knowledge compared to the younger mothers. Other factors were not found to be significantly associated with knowledge.

Out of six factors studied no factor was found to be significantly associated with correct practices related to breast feeding.

Asemahagn MA [6] had found that majority of mothers were doing exclusive breast feeding. It was more common in elderly mothers compared to the

younger mothers. This finding is comparable with the present study finding. The author also mentioned that exclusive breast feeding was more common among unemployed mothers, mothers with lesser income, mothers who had hospital delivery, and among those mothers who did not give pre lacteal feeding to their babies. The authors recommended that improvement in the knowledge of mothers is important.

Rasheed P [7] conducted a study among unmarried girls regarding infant feeding practices and observed that 67.1% were not aware about colostrum importance. 70.5% of the girls opted for interval feeding rather than feeding on demand. 40.2% of them did not prefer to breast for 18-24 months. Lactation promoting methods knowledge was found to be very poor. Knowledge on weaning was good only in 28% of the study subjects. The author emphasized to increase knowledge of unmarried girls on infant feeding practices as they are the future mothers.

Akinyinka MR et al. [8] found that majority of women had good knowledge regarding breast feeding practices. We also found that majority of women had good knowledge regarding breast feeding practices. The authors noted that 56.5% of the mothers started within one hour of delivery the breast feeding. But in the present study this proportion was 95.9%. The author found that the incidence of giving pre lacteal feeding was 24.1% compared to a lesser of 17.2% in the present study. The authors found that 30.7% of the mothers were giving bottle feeding, but in the present study it was lesser i.e. it was 21.2%.

Agho KE et al. [9] reported that exclusive breast feeding was more among women who were rich, mothers with more number of visits during their antenatal period, mothers having female infants. But overall the conclusion was that the exclusive breast feeding was less.

Ijarotimi OS [10] found that majority of women had good knowledge regarding breast feeding practices. We also found that majority of women had good knowledge regarding breast feeding practices. Author examined a relationship between body mass index and breast feeding frequency, but concluded that there was no significant relation between body mass index and breast feeding frequency.

Vijayalakshmi P et al. [11] observed in their study that 88.5% of the mothers were breast feeding their children. We also found that around 80% of the mothers were breast feeding their babies. But the author reported that only 36.9% of the mothers started breast feeding within one hour of delivery. In contrast to this finding, we found that 95.9% of the mothers in the present study started breast feeding within one hour of delivery. Author found that majority of women had good knowledge regarding breast feeding practices. We also found that majority of women had good knowledge regarding breast feeding practices.

Kamath SP et al. [12] noted that most of the mothers in their study already knew the importance of breast feeding. We also noted similar findings. The author also noted that majority started breast feeding within one hour of delivery. This is also similar to the present study. Only few did not feed colostrum to their babies. We found that 25.3% of the mothers did not give colostrum to their babies. 96.3% of the mothers gave opinion that it is healthy to do regular breast feeding. In our study we found that 95.6% of the mothers agreed that breast feeding was needed to their children. We noticed that 94.4% of the mothers felt that illness is an obstacle for breast feeding i.e. breast feeding should not be done if the child is suffering from illness. The authors also gave similar findings. The 6% mothers in their study felt that breast feeding should not be given during fever or cold, 18% felt this for diarrhea, and 26% felt this for vomiting. The authors reported that there was significant association between education status of mother and knowledge of breast feeding. This is similar to the finding of the present study.

Conclusion

It can be concluded from the present study that majority mothers had shown correct knowledge and practices. But still a significant gap of 25-30% of poor knowledge was found. Worst finding of the present study was doctors or nurses were found advising pre lacteal feeding. Breast feeding knowledge was found to be affected by age of the mother and education of

the mother. Breast feeding practices were not found to be significantly associated with any factors. There is need to increase awareness and monitor practices of breast feeding. Anganwadi worker can play a vital role in this.

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