



A study to assess the knowledge and practice of antenatal mothers regarding breast feeding in a selected rural community at Bhidki (Chargawan) Jabalpur (M.P.)

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ABSTRACT

The primary purpose of the study was to assess the antenatal mother's knowledge and practice towards breastfeeding and its relationship with variables in a selected village of Bhidki, Chargawan, Jabalpur M.P. This chapter dealt with analysis and interpretation of data collected from 100 antenatal mothers from a village of Bhidki, Chargawan, Jabalpur M.P. organized and analyzed using both descriptive and inferential statistics and has been presented in six sections. These are as follows: - Section I: Description of sample characteristics. Section II: Knowledge of antenatal mothers regarding breastfeeding. Section III: Practice of antenatal mothers regarding breastfeeding. Section IV: Correlation between knowledge and practice. Section V: Association between selected factors and the Antenatal Mother's Knowledge and Practice level. As regards sample characteristics, the majority of the antenatal mothers belonged to the age group of 21-30 years. Most of them were Hindus and Housewives by occupation. Most of them had educational levels as middle School or High School and above. There were more Multi-gravidae mothers (92%) as compared to Grand multi-gravidae (8%). The findings of the study revealed that 52% of antenatal mothers had the appropriate knowledge. A positive correlation was found between antenatal mothers' knowledge and practice. (0.09).

Keywords— Antenatal mother, Knowledge, Practice, Breast feeding, Relationship

1. INTRODUCTION

Breast-feeding of human infants has been a common feature irrespective of the culture of time, all over the world, because our very survival has depended on it. Whereas another mode of feeding of infants has differed as to what is fed, when, how and by whom, from time to time and has changed along the decades according to the changing concept regarding nutritional needs of baby, changing socio-cultural and lifestyles of women, but breast-feeding still remains the inter-national imperative. A woman is unique in feeding her baby compared to all other mammals, as there is both a long gestation period and immature newborn is capable of unaided locomotion and completely dependent on the mother. The newborn is unable even to reach the breast unaided. For a hundred million, breast milk is the only food for the baby. Plainly speaking without successful breast-feeding, the babies could not have survived.

WHO estimated that one million deaths a year can be prevented if all infants were breastfed for the first four months of life. In fact breastfeeding alone is adequate as the sole source of food for an infant up to first four to six months. The desirability of breast-feeding for at least four to six months is more important to the resources of poor countries as it protects against the interrelated syndromes and diarrhea and offers the child spacing contraceptives effect to some extent.

1.1 Need for the study

Breast milk is the most precious gift to the newborn. It is the ideal source of nourishment for infants during their first four to six months of life. Breast-feeding is an unequalled way of providing ideal food for the healthy growth and development of infants. At the same time, it has a unique biological and emotional influence on the health of both mother and child. Breast-feeding involves not only some instinctive behaviour but also learned behaviour. Its success depends on numerous physical and psychological factors. Earlier this century breastfeeding was considered as an integral part of child-rearing, it has led to different attitudes. To assess whether the mother is having the knowledge of existing pattern of breastfeeding is essential.

Infant feeding is a subject who initially did not receive the importance it deserved from the medical and the nursing profession. It was only from the 19th century onwards that any serious attempt was made to study the practices relevant to the subject. Scientific interest has waxed and waned over the year. Infant feeding practices can greatly influence the nutritional status of children and hence studies in this field are of immense importance to all those concerned with child health.

The problem of Maternal and Child Health care and nutrition have been identified and categorized as “problem require urgent attention” in our National Health Policy within the board framework of primary health care strategies.

There is widespread ignorance about the essentials of childcare including nutritional requirements and the common foods that supply the necessary nutrients. Most mothers and health workers have little idea of how much food a child needs for adequate growth hence the advice given is often conflicting and inaccurate. Often the foods suggested are expensive and beyond the reach of the common man. Therefore, each health personnel should be well equipped with knowledge of child nutrition to educate the mothers effectively, giving more emphasis on the fact that the child can be adequately nourished with little change in the feeding pattern and using inexpensive food items.

Since breast-feeding is a natural foundation for the infant’s health and nutrition, multi-pronged actions are needed to conserve and support this practice. In the absence of support programs, the trend to desist from breast-feeding may further catch up. In instances of low income and educational level, the superiority of breast-feeding becomes even more marked, and breast-feeding may, in fact, represent the only way of giving a child a fair chance of survival.

The prevalence and duration of breast-feeding have declined in many parts of the world for a variety of social, economic and cultural reasons. With rapid urbanization, industrialization and modernization many women started taking jobs away from home, resulting in a decline in breast-feeding. Adaptation of new lifestyle too had reduced the importance of this traditional practice in many societies.

WHO/UNICEF stated that common example of mothers for stopping breastfeeding is separating mothers from their infants at birth, glucose water, sugar water, honey, etc. by bottle before lactation has been initiated and routinely encouraging the use of breast milk substitutes.

Childbirth is a stresses situation to all mothers and especially for primipara. The stresses may vary in nature, physical factors, emotional factors, environmental factors, therapeutic factors, knowledge of mothers about breastfeeding and stress can lead directly to a reduction of milk supply through the inhibition of prolactin and oxytocin reflexes which release milk to the baby.

The children of today are the adults of tomorrow. Dr. Halfden Mahler’s Message for the World Health Day (1984) “Children’s Health Tomorrow’s Health” Lays emphasis on breastfeeding and its role in prevention of malnutrition and infection among children. Breastfeeding is one of the vital factors for the healthy growth and development of children and it is thus responsibility of mothers to perform this vital function.

Shah reported that parents from poor or middle-income group get misguided by seeing an example of healthy infant from a higher income group, by advertisements and put their children on supplementary food. Poor economic status to afford an adequate fuel for proper sterilization and poor supply of water makes bottle feeding a problem leading to gastroenteritis, malnutrition, and death. Therefore continuous surveillance act as a warning system to take appropriate action.

Looking at the other side of the picture, one can see that weaning is an important part of infant feeding. It should gradually begin at the age of six months. Ignorance on the part of the mother not knowing when to shift from breast-feeding to supplements, what to introduce and why to introduce may lead the child to be malnourished. In order to encourage useful practices and modify or alter the harmful practices, the knowledge of breast-feeding practices is essential.

World Breast Feeding Week 1-7 August 1998. Breast-feeding the best investment declared that breastfeeding is a national resource. Breast-feeding is a natural resource. Placing human milk in food balance sheets could increase its perceived value. Seeing the real size of this contribution in terms of the food supply to a nation is impressive and demonstrates to responsible policymaker the importance of this activity in terms that they can more easily relate to. The economic value of breast milk has been calculated to be Rs. 5916 or Rs. 11832 crores when priced at animal or tinned milk respectively. It can be compared with outlays of various departmental sectors in the central plan outlay of Government of India.

Breastfeeding is associated with lower morbidity in comparison with artificial feeding, at all ages. In a study conducted in India by Chitkara A.J. in 1989, the average incidence of morbidity in breastfed infants was four episodes per child annually as compared to 14.4 episodes per child annually in artificially fed infants. Diarrhea and vomiting occurred five times more frequently amongst artificially fed infants (66 episodes per 100 children/moth) than the breastfed ones (13.5 episodes per 100 children/month) in the same Indian study.

There is a good deal of prejudice against breast-feeding. So it is necessary to remove such misconception from the minds of the parents and to convince them that this subject will inculcate towards breastfeeding based on a sense of social responsibilities and equality.

Health for all by the year 2020, is the slogan which gives importance to the health care by the people and for the people this will remain a dream unless the people, especially the women are aware of their responsibilities towards their infants.

Finding of the study conducted by Mahendale, A.M. Revealed that breast milk contains suitable protein, fat, more milk sugar, enough vitamin, and water, enough iron, correct amount of salt, calcium, and phosphorus, antibodies, and leucocytes, that a baby needs for the first four to six months of life.

Findings of the study conducted by Nanda S.K. in the year 1996, Davis Adetugbo in 1997, WHO and UNICEF Report in 1998 revealed that 42.5 percent mothers started breastfeeding within six hours of child’s birth, 28.5 per cent initiated after 24 hours, 35 per cent started after three days. The factors associated with delayed initiation of breast-feeding were lack of knowledge of mother, ignorance of advantages of Colostrum. Young maternal age, tin milk supplement, elder’s bad ideas and influence, disinterest of mothers and dai’s denial. Finding of the study conducted by Freed, G.L. in 1993 revealed that 57 per cent of father held the opinion that breastfeeding is bad for breast, make breast ugly and interfere with sex.

Finding of the study conducted by Davis, A.A. in 1997, Yusuf Y. in 1997, Picado, J.I. in 1997 showed that breastfeeding considered dangerous to infant. Colostrum is discarded because it is dirty “pus-like” and harmful to the infant, expressed breast milk can be contaminated, poison and bewitched.

In a separate study, Kakkar observed that 17.2 per cent lactating mothers initiated breastfeeding within six hours whereas 28.3 per cent started late even after 48 hours.

Women understand women’s problem better and nurses have a wide range of opportunities as facilitators to assist in various breast function. The nurses, who are a popular figure in a community, have the responsibility of coordinating the service of various members of the health team, in order to encourage the continuation of breast-feeding. One needs to know the nature of the problem and its intensity so that the problem can be prevented, minimized or solved at the appropriate time.

Although a number of studies have been conducted in India and abroad on various aspect of breastfeeding, very few have dealt with the knowledge and practices of antenatal mothers about breastfeeding.

Therefore keeping all these views in mind, the investigator felt the need to determine the knowledge and practices of antenatal mothers regarding breast-feeding in a selected area in Chargaan, Jabalpur M.P.

Table 1: Mean and Standard Deviation Distribution of knowledge score on five areas of breastfeeding N = 100

S no.	Area of Knowledge	Maximum Score	Range of Score	Mean Score	Mean Percentage Score	Standard Deviation
1	Concept of Breast feeding	10	0 - 10	7.24	72.4	9.97
2	Advantages of Breast feeding	2	0 – 2	6.35	63.5	1.1
3	Antenatal Preparation of Mother	2	0 – 2	6.3	63	0.6
4	Techniques of Breast feeding	3	0 – 3	5.76	57.6	0.36
5	Common Problems related to Breast Feedings	3	0 - 3	5.7	57	1.8

Table 2: Frequency and percentage and distribution of subjects according to the practice score on breastfeeding N = 100

S no.	Level of Practice	Frequency	Percentage	Mean Score	Mean Percentage Score	Standard Deviation
1	Most appropriate Practice (>7)	0	0	0	0	0
2	Appropriate Practice (5 - 7)	78	78	5.53	55.30	0.61
3	Least Practice (< 5)	22	22	3.94	39.41	0.23

Most appropriate Practice: > 75 % (>7)

Appropriate Practice: 50 - 75 % (5 - 7)

Least Practice: < 50 % (< 5)

Table 3: Relationship between knowledge and practice N - 100

Knowledge	No.	Practice		
		Most Appropriate	Appropriate	Least Appropriate
1 Good Knowledge (16-20)	24	0	19	5
2 Average Knowledge (11-15)	59	0	52	7
3 Poor Knowledge (0-10)	17	0	7	10
	100	0	78	22

2. CONCLUSION

The conclusion drawn from the findings of the study are given below:

- Fifty-nine percent of antenatal mothers had average knowledge regarding Breast Feeding.
- Antenatal mother’s knowledge was highest in the area of concept of breast-feeding and lowest in the area of common problems related to Breast-Feeding.
- Knowledge and practice of antenatal mothers were positively significantly co-related. This implies that antenatal mothers who had higher knowledge also have a good practice of Breast Feeding.

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