KNOWLEDGE, ATTITUDE, AND PRACTICES TOWARDS EXCLUSIVE BREAST FEEDING IN POST NATAL MOTHERS AND ITS COMPARISON BETWEEN LOW VERSUS HIGH EDUCATIONAL STATUS MOTHERS ATTENDING TERTIARY CARE HOSPITAL AT MIRPUR AZAD KASHMIR. A COMPARATIVE CROSS SECTIONAL STUDY

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ABSTRACT

Objective: To access the knowledge, attitude and practices towards exclusive breast feeding among postnatal mothers.

Study Design: Comparative cross-sectional study.

Place and Duration of Study: Mohi-ud-din tertiary-care hospital Mirpur, Azad-Kashmir, from Mar 2017 to Feb 2018.

Methodology: Study was conducted among 200 postnatal mothers at tertiary care hospital, using a structured questionnaire by 'recall since birth' method. Analysis was done using SPSS version 17.

Results: Majority of the mothers were breast feeders, 27% were exclusive breastfeeding and 73% initiated breast feeding within 24 hours. The multivariate logistic regression showed that females who know exclusive breast feeding duration (95%CI-014, 1.381), breastfeeding better than artificial feed (95% CI-075, 1.182), mothers with hepatitis B, exclusive breastfeeding prevents pregnancy (95% CI-134, 1.220) and colostrum helps in immunity (95% CI-233, 1.436) were more educated and favored exclusive breastfeeding.

Conclusion: The majority mothers having good exclusive breastfeeding knowledge, initiated breastfeeding within 24 hours, had more positive attitude and practice towards exclusive breastfeeding than non-breastfeeding mothers.

Keywords: Attitude, Exclusive breastfeeding, Knowledge, Practice.

INTRODUCTION

Breast feeding, a skill, is the first physical, mental, and emotional collaboration between mother and child[1]. According to the United States Breastfeeding Committee[2] and the American Academy of Paediatrics[3], the physiological form of feeding for infant and child is breastfeeding. Breast milk contains nearly all the growing nutrients that prevents the infant from pollutants, infections, and allergens. The practice of breast-feeding may be partial, mixed or exclusive.

According to WHO[4], the exclusive breast feeding (EBF) provides an exclusive care for infant's optimal growth, is the initiation of breast feeding within an hour of child birth till the first six months of life without any other liquid or solid feeds. The infants thereafter are provided adequate supplements or formula diet with breastfeeding for a period of two years or more. The EBF makes the baby's immune system strong, improves vaccination response, protects the child against infectious diseases (diarrhea, respiratory diseases) and decreases the rate of infant morbidity and mortality[5]. Exclusive breast-feeding has a great importance in sociology, psy-chology, nursing, paediatrics, endocrinology and anthropology[6].

Inspite of great significance of EBF, its preva-lence is still low and <40% children are breastfeed exclusively worldwide, especially in the deve-loping countries. The mother's non-compliance towards EBF is considered to be due to poor knowledge, practice and attitude toward the breastfeeding, urbanization, maternal employ-

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ment, culture, and mother and child health status. The EBF has a great significance in the developing countries to improve health outcomes of children who are facing hygienic problems, inadequate sanitation and decreased availability of clean water[7,8].

The initiation of breastfeeding is delayed in >75% of the newborn babies. The known predictors include religious beliefs, social, cultural and maternal attitude towards the baby feeding; a positive attitude is associated with long duration of breastfeeding while a negative attitude works as a barrier for breastfeeding initiation and continuation[9].

A number of studies had assessed knowledge, attitude and practice towards breastfeeding; however, these are limited in Pakistan. The present study was designed to assess the infant feeding practice, knowledge and attitude towards EBF among lactating married mothers and to assist the health professionals, health workers and health promoters to prioritize their efforts for EBF practice

METHODOLOGY

This comparative cross sectional study was carried out at Mohi-ud-din Islamic tertiary care hospital, Mirpur, from March 2017 to February 2018. A total of 200 post natal mothers were selected who attended the vaccination centers or the Pediatric OPD for vaccination or other minor illnesses of their children. The mothers who gave birth between 37-42 weeks of gestation of healthy infants and aged 6 months were included in the study while mothers with preterm babies, multiple gestation, birth defects (congenital heart disease, cleft lip/cleft palate Down syndrome) and those who did not give consent were excluded from the study.

A self-structured questionnaire was constructed consisting of two sections; section A - the demographic characteristics of the participants, while Section B (assessed by obstetric and nursing expertise) was designed to investigate the participants' knowledge, attitude and practice towards EBF among the postnatal mothers. The questionnaire consisted of 17 items.

The questionnaires were retrieved immediately after completion from the females.

The data were analyzed using statistical software version 17 using descriptive statistics with frequency distributions. Multivariate logistic regression analysis was used to identify the independent predictor variables. The odds ratio with its corresponding 95% confidence interval was used and significance was taken *p*-value <0.05.

RESULTS

A total of 200 postnatal mothers participated in the study having a mean age of 23.07 ± 3.50 years. The majority (62%) were between 20-30 years, were married (95%), and belonged to Muslim Community (99%). About 40% had done their graduation, while one in ten could not read (10%). Half of the participants were earning more than Rs 30 thousand monthly, mostly employed in government sector (40%). Majority delivered in the hospital (84%) with spontaneous vaginal delivery (90%). The participants belonging to rural areas (59%) were multigravida (80%) (fig-1).

Majority (90%) of the study participants knew about EBF, its meanings (31.5%) benefits (26%) and were informed by health professionals (60%). More than half (73%) initiated breastfeeding within 24 hours of delivery and 42% continued EBF up to six months. Majority of mothers (50%-90%) believed that breast milk is better than formula milk, 35% agreed that colostrum helps baby immunity, and 32% stated that EBF protects children from infections and mothers to become pregnant (23%). About one fourth mother breastfed for baby wellbeing while (25%) due to family traditions. Most mothers (72%) believe that they should not breastfeed their babies if they are HCV or HIV positive and only 9.5% believed in breastfeeding if they are on medication. A majority of female (59%) didn't wash their breast before feeding (table-I).

Majority of the mothers (71%) preferred breast milk and believed that colostrum should

not be discarded (70%). They believed EBF is better than artificial feeds (85%), while half of the mothers (51%) agreed EBF for up to 6 months and two-third didn't agreed for giving extra food to their babies. Majority (82%) agreed that breast-feeding was more convenient and easy digestible, while 42% mothers thought formula feeding results in overfeeding of their babies. Majority (78%) of the participants desire long maternity leave, should be supported (52%) by owners and believed that female bosses were more supportive (58%). About half of the females thought that breastfeeding interfered with work output (table-II).

Nearly all mothers (94%) reported that they breastfed their last child and (60%) started immediate breastfeeding after delivery. Two thirds of mothers (63%) breastfed on demand, 52% gave additional cow milk till first 6 months. Most of the females agreed that they had seen advertisement for formula milk on TV (92%), while half of the women got formula milk samples from health centers, however, nearly noposter or flayers were noted in the hospital areas. About 89% mothers got information from health advisors to start breastfeeding within 30 minutes post-delivery time.

A statistically significant difference (p<0.05) was seen between the educated compared un-educated females regarding duration, knowledge and what is meant by EBF. Similar statistical significant difference (p<0.05) was also noticed when it was enquired that EBF prevents pregnancy, colostrum helped in immunity, breast feeding was better than artificial milk. A great percentage of the mothers believed that breast feeding should not be continued if mothers were suffering from HBV or HIV (p<0.05) (table-III).

Only those factors which showed statistically significant effect on EBF in chi squared test were included. The multivariate logistic regression showed that females who knew duration of EBF (OR-0.137; 95% CI 0.014, 1.381), Breastfeeding better than artificial feed (OR= 0.298; 95% CI 0.075, 1.182) mother with HBV, HIV could not feed (OR= 0.879; 95% CI 0.279, 2.773), EBF prevented pregnancy (OR=404; 95% CI 0.134, 1.220), Feed timing vary (OR=1.189; 95% CI 0.192, 7.369), Colostrum helps in immunity (OR=578; 95% CI 0.233, 1.436) were educated or highly educated and were in favor of exclusive breastfeed their kids for 6 months. The mothers who didn't know the meaning of EBF (OR=0.830; 95% CI 0.176, 3.913), and the EBF benefited

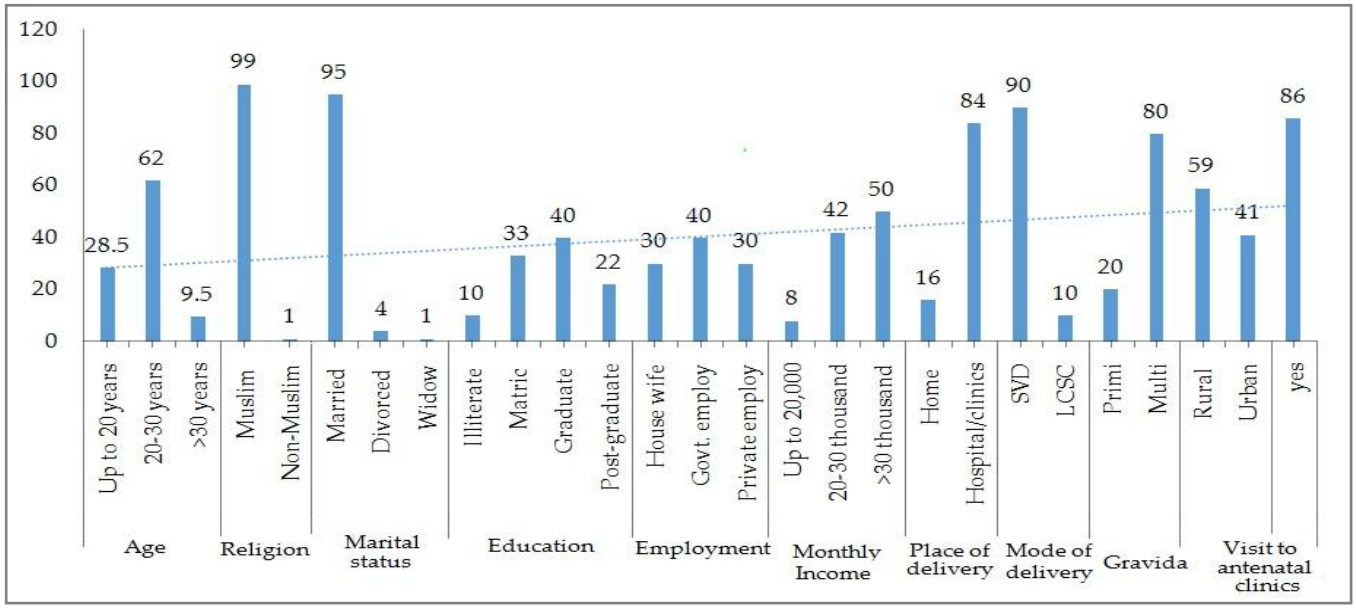

Figure: Socio-demographic characteristics of the study group.

(OR=0.839; 95% CI 0.170, 4.114), were less educated and were less likely towards exclusively breastfeed (table-IV).

Table-I: Knowledge of study participants towards breast feeding and exclusive breastfeeding.

Variables		Frequency	Percentage
Have you ever heard about exclusive breastfeeding?	Yes	180	90
	No	20	10
What was Source of information about exclusive breastfeeding?	Health helpers	110	60
	Friends	26	13
	Media	64	27
What is meant by exclusive breastfeeding	Yes	63	31.5
	No	137	68.5
Do you know the benefits of exclusive breastfeeding	Yes	52	26
	No	148	74
When should breastfeeding be started after delivery?	Immediate & within 24 hrs	146	73
	After 24 hr	44	22
	Never breastfed	10	5
For how long is exclusive breastfeeding needed?	<6 months	110	55
	6 months	84	42
	>6 months	6	3
What food you gave before start of breast feeding	Honey	130	65
	Water	45	22.5
	Other	25	12.5
Does exclusive breastfeeding for 6 month prevent child from infection?	Yes	63	31.5
	No	76	38
	Don't know	61	30.5
Does exclusive breastfeeding prevent pregnancy?	Yes	46	23
	No	94	47
	Don't know	60	30
Should Burping be done after each feed	Yes	179	89.5
	No	21	10.5
Does breast milk be fed if mother is on some medication	Yes	19	9.5
	No	160	80
	Don't know	21	10.5
Does breast milk be fed if mother is a patient of Hep. B and Hep C or HIV	No	144	72
	Yes	36	18
	Don't know	20	10
What is major reason for breastfeeding	Baby's well being	130	65
	Bonding/closeness to baby	10	5
	To save money	10	5
	Family traditions/cultural beliefs	50	25
Colostrum is important for the baby to maintain immunity	Yes	70	35
	No	46	23
	Don't know	84	42
Do you wash each breast with warm water before breast feeding	Yes	82	41
	No	118	59

DISCUSSION

Our results showed that majority of the participants had knowledge about EBF (90%) and knew its importance (52%) and duration (42%). These results are in agreement with a number of studies[6,10,11] who showed that female had knowledge, significance and recommended duration of EBF. In our study most of the female (71%) declared that they prefer breastfeeding for 6 months without any extra food and are consistent with study in Nigeria and by Margaret *et al*[12,13] which showed favorable attitude towards EBF up

to 6 months, however, studies conducted in Saudi Arabia and Congo showed EBF prevalence only of 8.3% and 2.8% respectively[14]. The difference may be due to different sociocultural

Table-II: Attitude and Practice of study participants towards exclusive breastfeeding.

Variables		Frequency	Percentage
Do you believe that colostrum should be discarded?	Yes	46	23
	No	140	70
	Don't know	14	7
What do you prefer to feed your baby for the first 6 months?	Breast milk	142	71
	Formula milk	22	11
	Mix	36	18
Do you think that EBF is better than artificial feeding?	Yes	170	85
	No	16	8
	Don't know	14	7
Do you agree that only EBF is enough for child up to 6 months?	Yes	102	51
	No	82	41
	Don't know	16	8
Formula fed babies are more likely to be overfed than breastfed babies	Yes	83	41.5
	No	93	46.5
	Don't know	24	12
Breastfed babies are healthier than formula fed babies	Yes	138	69
	No	52	26
	Don't know	10	5
Breast milk is more easily digested than formula	Yes	164	82
	No	24	12
	Don't know	12	6
Breastfeeding is more convenient and cheaper than formula	Yes	164	82
	No	18	9
	Don't know	18	9
Are you confirmtable to breastfeeding public areas	Yes	62	31
	No	124	62
	Don't know	14	7
Female bosses are more supportive than male bosses for breastfeeding	Yes	116	58
	No	84	42
Breastfeeding females allowed longer maternity leaves	Yes	157	78.5
	No	43	21.5
Breast milk in the workplace will interfere with work productivity	Yes	98	49
	No	81	40.5
	Don't know	21	10.5
Employers should provide private areas for breastfeeding	Yes	94	47
	No	57	28.5
	Don't know	49	24.5
Practice of exclusive breastfeeding			
Have you breastfeed your last child?	Yes	189	94.5
	No	11	5.5
When did you start breastfeeding after delivering your last child?	Immediate	119	59.5
	Within 24	61	30.5
	After 24 hrs	20	10
How frequently did you breastfed your last child?	On demand	137	63.5
	Regular	48	24
	Random	15	7.5
Have you given your last baby anything before initiating breastfeeding?	Yes	51	25.5
	No	149	74.5
What was given to your last child starting from birth to 6 month?	Breast milk	52	26
	Breast + Cow	105	52.5
	Formula milk	43	22.5
Have ever seen advertisement on television about formula milk.	Yes	184	92
	No	16	8
Got free formula milk sample at hospital during antenatal or delivered.	Yes	101	50.5
	No	99	49.5
Got any information from doctors, nurses or midwives about the benefits and management of breastfeeding	Yes	170	85
	No	30	15
The health staffs helped you to initiate breast feed within 30 min.	Yes	178	89
	No	22	11
Never see any poster or get any flyer, notebook, mother's card regarding breast feed in health center or your community	Yes	14	7
	No	186	93

background, education, economic status, use of different methodology regarding EBF.

In our study, counselling to practice EBF was done by health personals to 86% of the female who visited antenatal clinics and delivered in the hospitals/clinics. These results are in agreement with studies who declared that the women who delivered in a hospital were more likely to practice EBF than those who delivered at home[15,16].

Table-III: comparison of low versus high educated females regarding EBF Knowledge, Attitude & Practice.

Variables	Low educated females n=76, (%)	High educated female n=124 (%)	*p*-value	Like-hood ratio
Breast feeding better than artificial feeding				
Yes	53 (69.7)	117 (94.4)		
No	14 (18.4)	2 (1.6)	-	24.348
Don't know	9 (11.9)	5 (4)		
Duration of Exclusive Breast Feed				
<6 months	35 (46.1)	75 (60.5)		
6 months	36 (47.4)	48 (38.7)	0.020	7.882
>6 months	5 (6.5)	1 (0.8)		
Colostrum Helps in Immunity				
Yes	15 (19.7)	55 (44.4)		
No	32 (42.1)	14 (11.3)	-	28.083
Don't know	29 (38.2)	55 (44.4)		
Exclusive Breast Feed Prevents Infection				
Yes	26 (34.2)	37 (29.8)		
No	32 (42.1)	44 (35.5)	0.260	2.754
Don't know	18 (23.7)	43 (34.7)		
Exclusive Breast Feed Prevents Pregnancy				
Yes	8 (10.5)	38 (36.6)		
No	52 (68.4)	42 (33.9)	-	24.283
Don't know	16 (21.1)	44 (35.5)		
Mother with Hep B, HIV can Feed				
No	47 (61.7)	97(78.2)		
Yes	21(27.6)	15 (12.1)	0.017	7.905
Don't know	8 (10.7)	12(9.7)		
Timing of Feed				
On weeping	65 (85.5)	72 (58.4)		
Fixed regular time	9 (11.8)	39 (31.5)	-	17.953
Random	2 (2.7)	13 (10.4)		
Baby Healthier with Exclusive Breast Feed				
Yes	58 (76.3)	80 (64.5)		
No	17 (22.4)	35 (28.2)	0.086	5.612
Don't know	1 (1.3)	9 (7.3)		
Breast Feed Easily Digested				
Yes	62 (81.6)	102 (82.3)		
No	9 (11.8)	15 (12.1)	0.964	0.073
Don't know	5 (6.6)	7 (5.6)		
Do you know what meant by Exclusive Breast Feed				
Yes	14 (18.4)	49 (39.5)	0.002	10.196
No	62 (81.6)	75 (60.5)		
Did you ever heard Exclusive Breast Feed				
Yes	65 (85.5)	115 (92.7)	0.081	2.640
No	11 (14.5)	9 (7.3)		
Do you know benefits of Exclusive Breast Feed				
Yes	12 (15.8)	40 (32.3)	0.007	6.984
No	64 (84.2)	84 (67.7)		

Majority (63%) of the female were aware of EBF benefits and breastfed their babies believing

that EBF will help their baby to grow properly, builds infants' immunity (35%), decreases infection risk (32%) so reduces infant morbidity and mortality. These results are consistent with Elaine *et al*[17] and Paschal *et al*[18] who declared that EBF provide essential nutrients to new-born, prevents from infections, improves immunity and helps in optimal physical and mental growth. Breast milk is a perfect, complete natural food readily available, sterile, healthier and non-expensive than the formula feeds[19].

Our results are in line with Infant and Young Child Feeding 2010[20] guidelines, according to which initiation of breastfeeding should begin immediately after birth, preferably within one hour. In our study in some women feeding was delayed to 24 hours due to shifting from labor room, shifting of newborn babies to NICU, Caesarean section and in some cases family restriction. About 5% of the participants never breastfed their babies either due to illiteracy or other reasons like, increased work demands, cultural belief, insufficient milk and socio-economic status.

In our study the females belonging to higher socio-economic status were well educated (62%), well informed about the practice of EBF compared to less educated, low socioeconomic female. The results are in accordance with Veerbhan *et al*[21] who showed less educated and females of low socioeconomic status showed low EBF practice due to lack of support, cracked nipples, engorged painful breast, and working mothers.

Our results are in accordance with Su *et al*[22] and Agbo *et al*[23] who showed breastfeeding mothers feel shy while feeding their babies at work places due to self-embarrassment, inappropriateness of the location, or dislike by their partner that also create a negative impact on customers.

About half of the mothers agreed that breast feeding is better than formula milk, inspite 92% mothers observed advertisement of formula milk on TV. The results are in agreement with a number of studies showing breast milk is better than formula milk[24,25].

The breastfeeding called "perfect food" and is considered to be the best choice for babies. The breastfed infants more easily accept solid foods and have slightly higher IQs level. The breastfed mother feel bonding with her baby, gives care to her baby, burns calories and helps shrink the uterus, lower the risk of breast, uterine and ovarian cancer, lower blood pressure, decrease diabetic levels, and cardiovascular disease.

Majority of participants of our study showed that mother should not feed their babies either they have infection with hepatitis B or C viruses, AIDS or they are on some medication. Studies regarding breastfeeding in hepatitis B, C or AIDS are not in agreement with our studiesand showed little relevance that diseases as hepatitis B or C, herpes, measles, mumps and rubellaare transmitted via human milk, rather milk protect newborn infants by producing secretory immunoglobulin A[24,25].

Table-IV: Multivariate logistic regression for the predictors associated with exclusive breast feeding.

Variable	Coefficient	St.Error	Odds Ratio	95% CI	*p*-value
Do you know what meant by exclusive breast feed	-0.187	0.791	0.830	0.176-3.913	0.056
Do you know benefits of exclusive breast feed	-0.176	0.815	0.839	0.170-4.114	0.046
Do you know duration of exclusive breast feed	-1.987	1.178	0.137	0.014 –1.381	0.029
Mother with Hep B, HIV cannot feed	-0.129	0.586	0.879	0.279-2.773	0.048
EBF prevents pregnancy	-0.905	0.563	0.404	0.134-1.220	0.044
Colostrum helps in immunity	-0.548	0.464	0.578	0.233-1.436	0.238
When you feed your baby (Timing of feed)	-0.173	0.871	1.189	0.192-7.369	0.034
Breastfeeding better than artificial feed	-1.21	0.703	0.298	0.075-1.182	0.085

CONCLUSION

The majority of the participants had access to information on breastfeeding and many mothers initiated breastfeeding within few hours of birth.

Mothers should be encouraged to attend ante-natal clinic and the health professionals should educate mothers regarding benefits of EBF and to discourage supplementary foods unless advised medically.

CONFLICT OF INTEREST

This study has no conflict of interest to be declared by any author.

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