A Study to Assess the Knowledge and Practice of The Primi Mothers Related to Breast-Feeding in Post Natal Ward in Selected Tertiary Care Hospital.

Mrs. S. Bhaktiswarupa1*, Prof (Mrs).Niyati Das2, Ms. Purnima Sahoo3, Mrs. Rasmiranjita Parhi4, Ms. Debasruti Bhunia5

1Tutor, Kalinga Institute of Nursing Sciences Kiit Deemed To Be University, Bhubaneswar, Odisha, India
2Vice Principal, Kalinga Institute of Nursing Sciences Kiit Deemed To Be University, Bhubaneswar, Odisha, India
3Asst. Prof. Kalinga Institute of Nursing Sciences Kiit Deemed To Be University, Bhubaneswar, Odisha, India
4MSc Nursing, Kalinga Institute of Nursing Sciences Kiit Deemed To Be University, Bhubaneswar, Odisha, India
5MSc Nursing, Kalinga Institute of Nursing Sciences Kiit Deemed To Be University, Bhubaneswar, Odisha, India

DOI: 10.36347/sjams.2020.v08i01.007 | Received: 19.12.2019 | Accepted: 27.12.2019 | Published: 13.01.2020

*Corresponding author: S. Bhaktiswarupa

Abstract

A Quasi Experimental research was conducted among primi mothers to assess the knowledge and practice on breastfeeding. One-shot Case Design was used in this study. 30 samples were selected through purposive random sampling and data were obtained by using self structured questionnaire and checklist. The study was conducted at Pradyumna BAL Memorial Hospital, Bhubaneswar. The data were analyzed by using descriptive and inferential statistics. 67% mothers have good knowledge about breastfeeding and 26% mothers have average knowledge about breastfeeding. 66.6% mothers have good practice and the value of r is 0.64 shows that there is a positive co-relation between the knowledge and practice.

Keywords: Breast Feeding, Knowledge, Practice.

INTRODUCTION

“A newborn baby has only three demands. They are warmth in the arms of its mother, food from the breasts, and security in the knowledge of her presence; breastfeeding satisfies all three”.

As a global goal for optimal child health and nutrition, all women should be enabled to practice exclusive breastfeeding (EBF), and all infants should be fed exclusively on breast milk from birth to 6 months of age [1-3]. The factors that influence initiation, maintenance and duration of breastfeeding are social and cultural traditions, infant maturity at birth, degree of commitment, and literacy of the mother and level of modernity. Breastfeeding is considered to be a traditional practice in India and it is believed that it comes ‘naturally’ to Indian mothers. Yet statistics show a rather dismal picture. As per national family health survey-3 (NFHS-3), only 46% of the Indian infants between 0 and 6 months are exclusively breastfed [1]. The birth of the baby is an important event in the family. It is therefore important for the Mothers to have a healthy baby. Breast milk is the best food for the babies as breast fed babies are healthier than formula fed babies. Child birth and breast feeding are unique experiences for women. They can only be cherished and nurtured by the health care workers, the baby friendly way. Human milk is a remarkable and renewable resource. It cannot be duplicated. Human milk has no substitute and the breast is nature’s apparatus for feeding the baby. Breast feeding is an art [3].

In recognition of the immense importance of breast feeding, the Baby Friendly Hospital Initiative (BFHI) was launched by UNICEF/WHO in 1991. Breast feeding results in decreased problems such as infections and such other medical problems to the mother as well as the baby.

Breast milk is not only the best but is also a must for the babies. Lack of breast feeding – especially exclusive breast feeding during first few months of life is important as it reduces the risk factors for the infant mortality and the morbidity rate [4]. WHO estimates that 1.5 million of infant’s life can be saved each year through increased breast feeding? Breast feeding is the most important thing for every mother. It is the unique
experience to be cherished. Sometimes certain simple problems faced by the mother’s results in stoppage of the breast feeding or started giving artificial milk or commercial infant formula feeds to the baby. Problems may be like the flat nipples, inverted nipples, breast engorgement, swelling, sore nipples or not enough milk. These problems are preventable if due care is taken from the pregnancy period to prepare for the breast feeding. Breast milk is the best source of nutrition for the baby. The foundation for breast-feeding is established in the first few weeks after delivery. Proper techniques are crucial for successful breast-feeding. Although some aspects of breast-feeding technique come naturally, learning new skills also is important. Breastfeeding technique is a learned skill for both mother and newborn. Breast feeding techniques comprises of commencement of breast feeding, breastfeeding positions, latching on, taking your baby off the breast and burping [5]. Breastfeeding is the ideal from of feeding in the neonate. Artificial feeding exposes the infant to infection and results in over a million death annually worldwide due to its ill effects. World breast feeding week is August first week (1-7 days). The 10th Five year plan of Government of India (2003-2007) had set a target to increase exclusive breast feeding rate to 80% during first 6 months from the current level of around 40.5% and increased rate initiation of breast feeding within one hour to 50% from the current level of about 15% and increased rate of complementary feeding from 33.5% to 75% to reduce infant and childhood mortality and improve health and development of infants and young children. There is a crucial window of opportunity provide the support and information necessary for breast feeding [6].

**NEED OF THE STUDY**

Currently only 31% of Indian mothers’ practices demand feeding must be practiced by educating mothers regarding breast feeding in order to improve the health of the mother and the baby. The mother of today has adapted to the recent trends of lifestyle replacing traditional ones.

There are many changes one of which is changes in cultural diversity and the majority of mothers (68.3%) breast feed on the day of delivery while 31.6% of mothers rejected colostrum as bad for the child, whereas 81.3% considered it is good[2]. Recent study from Ghana found that 22% of deaths newborns would have been prevented of new borns started breast feeding, within one hour of birth, irrespective of whether they were exclusively breast feed later or not. Extrapolating the data to other countries, the same researches estimated that if 99% of infants started breast feeding on the first day of life a total of 867,000 lives could be saved worldwide and if they started breastfeeding within one hour of birth, then 31% of all neonatal death could be the prevented, which amounts to 1,117,000. India can save its 2, 50,000 babies annually by just one action[7].

**OBJECTIVES**

The objectives of the study are:
- To assess the knowledge regarding breast feeding of new born of the primi mothers.
- To assess the practice regarding the breast feeding of new born of the primi mothers.
- To assess the relation between the knowledge and practice regarding breast feeding of the primi mothers.

**METHODOLOGY**

A Quasi Experimental research approach is used in this study. This approach was selected because to assess the knowledge and practice among primi mothers on breastfeeding. The design used for the study is One-Shot Case Design. In present study the Purposive Random Sampling was used to select the sample and data were obtained by using demographic variables, structured questionnaire for knowledge and checklist for practice among primi-mothers on Breast-Feeding in Pradyumna Bal Memorial Hospital, Bhubaneswar.

**RESULT AND INTERPRETATION**

In this study the majority 93% of participants were in the age group of 19-24 year. With respect to educational status 33.3% of mothers have completed matriculation and graduation that is 33.3%. 87% of mothers were housewives. Majority women are coming >67% are having income more than Rs15000 per month. Most of the primi mothers were getting information from their family members (53%) 16.

### Table 1: Distribution of Sample According To Knowledge Score

| Level of knowledge | Frequency | Percentage |
|--------------------|-----------|------------|
| Good               | 20        | 67%        |
| Average            | 8         | 26%        |
| Poor               | 2         | 7%         |

The knowledge regarding breastfeeding of new bore of the primi mothers. Among 30 sample good (67%) 20, average (26%) 8 and poor (7%) 2. The distribution of the level of practice the good (66.67%) 20 in numbers, average (30%) 9 in numbers and poor (3.34%) 1 in number.
Table-2: Range, Mean, Median, Mean score %, Standard Deviation of practice of Primi-Postnatal Mothers:

| Area    | Maximum Score | Range | Mean | Median | Mean score Percentage | Standard Deviation |
|---------|---------------|-------|------|--------|-----------------------|-------------------|
| Practice| 10            | 5-10  | 7.93 | 8      | 79.3%                 | 1.28              |

The range of the practice of primi postnatal mothers were 5-10, mean 7.93, median 8, mean score percentage 79.3% and the standard deviation was 1.28.

Table-3: Analysis to Find out The Relationship between the Knowledge and Practice of the Primi Mother Regarding Breastfeeding

| Knowledge | Mean | Standard Deviation | R- Value |
|-----------|------|--------------------|----------|
| Knowledge | 7.57 | 1.40               |          |
| Practice  | 7.93 | 1.28               | 0.64     |

The relation between the knowledge and practice regarding breastfeeding of primi mothers. Here calculated “r” value was 0.64, which lies in between 0 - +1 which represents that there is positive correlation between knowledge and practice.

**CONCLUSION**

There is a positive relation in between knowledge and practice after the effective health teaching. The potential need to improve the level of knowledge and practices among primi mothers on Breast feeding. Most of the students gain knowledge from health care worker in clinical settings, so we need to improve clinical practices and teach in clinical area as well as in clinical as well as in college.

**REFERENCES**

1. National fact sheet, India. 2005-2006 National Family Health Survey (NFHS-3)
2. Shailaja KG. A study to assess the knowledge and confidence of primipara mothers regarding exclusive breastfeeding in postnatal units of selected hospitals of Belgaum, Karnataka. Nightingale Nursing Times. 2008 Mar;3(12):29-32.
3. Mr. Grossman LK. Mothers knowledge regarding breast feeding. International Journal of Nursing Studies. 2005; 42: 409-411.
4. World Health Organisation. Protecting, promoting and supporting breast-feeding: the special role of maternity service (a joint WHO/Unicef statement). Geneva: WHO; 1989
5. Mrs Selvanayaki. Knowledge, attitude and practices of breast feeding. Nurses of India. May 2008; 12:11-12.
6. Nair. Knowledge & practice of breast feeding in primigravida mothers. Nursing Journal of India.2005; 16:9-11.
7. Mr Grossman LK. Mothers knowledge regarding breast feeding. International Journal of Nursing Studies. 2005; 42: 409-411.