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## **A study on knowledge & practice of breast-feeding among and women attending urban health centre, Shivaji Nagar, Mumbai**

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### **Abstract**

Breast feeding offers complete nutrition, early protection against illness and promotes growth and development of the baby. Exclusive breast feeding (EBF) for the first six months of life is important for effective protection against diarrhoea and respiratory infections.

**Aim & Objectives:** 1 A study to access the knowledge and practice of breast feeding among ANC women of an urban slum. 2. To study associated socio- demographic factors related to it.

**Method:** A cross sectional O.P.D. based study was carried out in the urban health centre. The study population consists of ANC women of an urban slum, visiting the ANC O.P.D. during October-November 2014.

**Result:** There were 100 ANC women following the inclusion criteria were included in the study. About, Fifty-two per cent of subjects belonged to the age group of 19-24 years. Maximum 38% subjects were educated up to S.S.C. and 60% were multipara. About 61% of subjects were having adequate knowledge of EBF. But, among multipara only 35% were correctly practising EBF. The association of education of subjects and knowledge of EBF was found to be statistically significant (p value = 0.001), while the association of family type and knowledge of EBF was not found to be statistically significant (p-value= 0.239) indicating education play key role for knowledge of EBF

**Conclusion:** More than half of the subjects had correct knowledge of EBF but only one third of them are correctly practising it. Also, the study result showed that the education had impact on the EBF practices.

**Keywords:** Breastfeeding, EBF, urban slum

### **Introduction**

Children bring fragrance and meaning to life. We can provide the best to them by proper nourishments, love, attention, care and good health. The ideal food for the young infant is human milk. Breast feeding on this earth dates back to more than million years and it is the ideal way of feeding the infants. Deaths of an estimated 820,000 children under the age of five could be prevented globally every year with increased breastfeeding. <sup>[1]</sup> According to NFHS 4, the percentage of exclusive breastfeeding for Maharashtra of urban & rural area was 60.6 and 51.3 respectively. In Maharashtra, by comparing exclusive breastfeeding data from NFHS 3 to NFHS 4, the percentage has increased from 53 to 56.6. <sup>[2]</sup> Exclusive breastfeeding for 6 months has many benefits for the infant and mother. Chief among these is protection against gastrointestinal infections which is observed not only in developing but also industrialized countries. Early initiation of breastfeeding, within 1 hour of birth, protects the new born from acquiring infections and reduces new born mortality. The risk of mortality due to diarrhoea and other infections can increase in infants who are either partially breastfed or not breastfed at all. Breast-milk is also an important source of energy and nutrients in children aged 6–23 months. It can provide half or more of a child's energy needs between the ages of 6 and 12 months, and one third of energy needs between 12 and 24 months. Breast-milk is also a critical source of energy and nutrients during illness, and reduces mortality among children who are malnourished. Children and adolescents who were breastfed as babies are less likely to be overweight or obese. Additionally, they perform better on intelligence tests and have higher school attendance. Breastfeeding is associated with higher income in adult life. Improving child development and reducing health costs results in economic gains for individual families as well as at the national level. Longer durations of breastfeeding also contribute to the health and well-being of mothers: it reduces the risk of

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ovarian and breast cancer and helps space pregnancies—exclusive breastfeeding of babies under 6 months has a hormonal effect which often induces a lack of menstruation. This is a natural (though not fail-safe) method of birth control known as the Lactation Amenorrhoea Method.

Every year first week of August has been celebrated worldwide as breastfeeding week globally. The theme of 2017 World Breastfeeding Week was ‘Women and work – Let’s make it work’ which emphasizes the need for better support systems and policies to enable working mothers to breastfeed.

### Aim & Objectives

- 1 A study to assess the knowledge and practice of breast feeding among ANC women of an urban slum.
2. To study associated socio- demographic factors related to it.

### Material & methodology

The present study was cross sectional O.P.D. based study was carried out in the urban health centre, Shivaji nagar, Mumbai. The study population consists of ANC women of an urban slum, visiting the ANC O.P.D. during 1<sup>st</sup> October-30<sup>th</sup> November 2014. The sampling method was convenient method sampling. Inclusion criteria was ANC women who are residing in study area from past 6 months, In case of primi para those who had attended at least one breastfeeding training session conducted in the urban health centre were included in the study and ANC women willing to participate in the study. Exclusion: Pregnant women < 18 years. All ANC women were selected & were interviewed with pre-structured questionnaire. Data was analysed using SPSS 20 version. Institutional Ethics Committee approval was obtained for the study.

### Result

- In the present cross sectional study there were total 100 ANC patients attending the ANC O.P.D. In our study 40% were primi para and 60% were multi para. Out of total 63 women had joint family, 30 had nuclear and 7 had extended type of family (Table 1). Out of total women 52%, 40% and 8% of women were in the age >31 years, between 25-30 years and 19-24 years respectively. (Fig-1)
- Majority 38% and 27% of ANC women were educated up to SSC and secondary class respectively. Only 3% of ANC women were illiterate. (Fig-2)
- In our study 61% and 39% study subjects had correct and incorrect knowledge of Exclusive breastfeeding respectively. (Fig-3)
- Excluding primi para only 21% were correctly following exclusive breastfeeding practise (Fig-4)
- In the present study 81.8% graduate ANC women, 71.4% and 76.3% ANC women educated up to HSSC and SSC had correct knowledge of exclusive breastfeeding whereas 66.70% of illiterate women had incorrect knowledge of exclusive breastfeeding. The association between education and knowledge of exclusive breastfeeding was found to be statistically significant (p=0.001) (Fig-5)
- In our study we found that 77.80% of ANC women who were graduates were correctly practising Exclusive Breastfeeding whereas 75%, 57.10%, 81.20% and 85.70% women who were educated up to HSC, SSC,

Secondary and Primary were having incorrect practise of exclusive breastfeeding respectively. However among the illiterate 33.30% and 66.70% were having correct and incorrect practise of breastfeeding respectively. The association between education & practise of exclusive breast feeding was found to be statistically significant (p=0.001) (Fig 6)

- In the present study among the women having joint family 41.0% were having correct knowledge of exclusive breastfeeding. However among the women having extended family only 2% women had correct knowledge of exclusive breastfeeding. The association between family type and knowledge of exclusive breastfeeding was not found to be statistically significant. (Fig 7)

### Discussion

In the present study, “A study on Knowledge & Practice of Breast-feeding among ANC women attending urban health centre, Shivaji Nagar, Mumbai” there were 100 subjects following the inclusion criteria among them 40 were primi para and 60 were multi para. Majority 52% subjects were above 31 years of age. Majority ANC women 63 belonged to joint family followed by 30 belonging to nuclear and 7 belonging to extended type of family. In the study of, “A study of knowledge, attitude and practices of breast feeding among primi para in a tertiary care hospital” by Dr Harshitha S *et al*, there was 46.75% subjects were between 21-25 years of age group and 67.25% of subjects had joint family.<sup>3</sup> MENON KRISHNENDU *et al* found that out of 120 lactating women, maximum women belonged to the age group of 23 to 27 years (56.7%) maximum of them were from nuclear family (71.7%).<sup>4</sup> In the study by Anindita Maiti *et al* two hundred and eighty six mothers were interviewed during the study. Most (97.2%) of the mother’s age ranged between 18-35 years. Majority of them (190 i.e. 66.4%) were between age group 21-30 years and 270 (94.40%) were Hindu. About 59.1% of the mothers belong to joint family.<sup>[5]</sup>

In our study out of total women 61% subjects had correct knowledge of exclusive breastfeeding but among the total multi para only 35% were correctly practising it. According to the study of Pathi and Das in Orissa only 8.6% mothers practiced EBF whereas, according to a study by Benjamin *et al* (1993) at Punjab and Aggarwal *et al* at Delhi, it was 57.7% & 63.50% respectively. In the study by Anindita Maiti *et al* 60.8% had practiced exclusive breastfeeding though 34.9% mothers had knowledge of exclusive breastfeeding till 6 months of baby’s age.<sup>[6, 7, 8, 5]</sup>

In our study majority 38% were educated up to SSC followed by 27%, 14%, 11% and 7% were educated up to secondary class, HSSC, graduation and primary class respectively. Only 3% were illiterate. We found that among the graduates 81.8% were having correct knowledge of EBF, those who were educated up to HSSC and SSC had >70% correct knowledge and among those who were educated up to secondary and primary had 59.30% and 85.70% incorrect knowledge of EBF respectively. Illiterates had 66.70% incorrect knowledge of EBF. The association between education & knowledge of EBF were found to be statistically significant. (p=0.01)

MENON KRISHNENDU *et al* found that educational characteristics reveal that more than 50% of the population (58.3%) were graduates followed by a total of 10% and

31.7% who had either completed their 10th or 12th standards respectively. A total of 58.3% of the population were professionals. These included professions such as teachers, clerks, housemaids etc. followed by those lactating women who were housewives (41.6%).<sup>[4]</sup> In the study by Anindita Maiti *et al* majority 102 (35.66%) had education up to secondary level where as only 34 (11.89%) were illiterate.<sup>[5]</sup>

In our study among those ANC women with joint family, nuclear and extended family type 41%, 18% and 2% had correct knowledge of EBF respectively. The association between family type and knowledge of EBF was not found to be statistically significant. (p= 0.218)

Conclusion: In the present study even though 61% subjects had correct knowledge but only 35% were practising it correctly (among multi para). In the present study we found that education plays a key role for having the knowledge of exclusive breast feeding however type of family does not play significant role on the knowledge of exclusive breast feeding.

**Declarations**

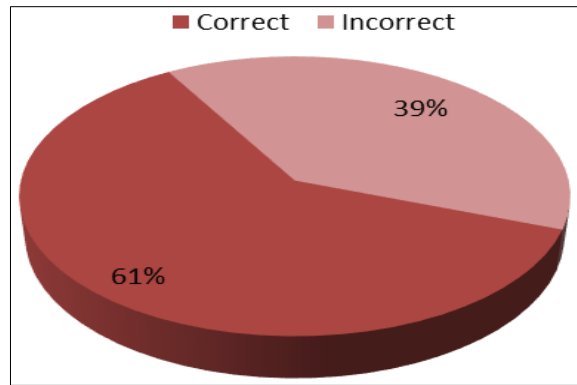
Funding: No funding sources

Conflict of interest: None declared

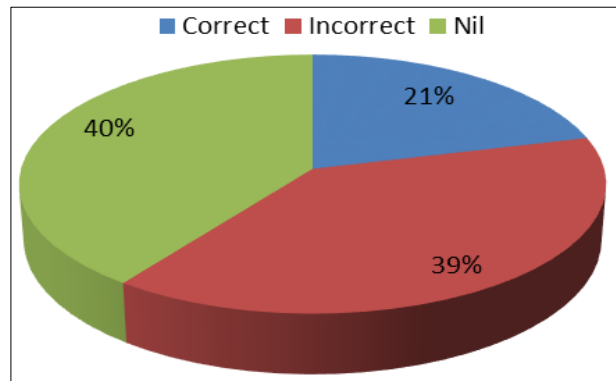
Ethical approval: The study was approved by the Institutional Ethics Committee

**Table 1:** Distribution of ANC women according to family type

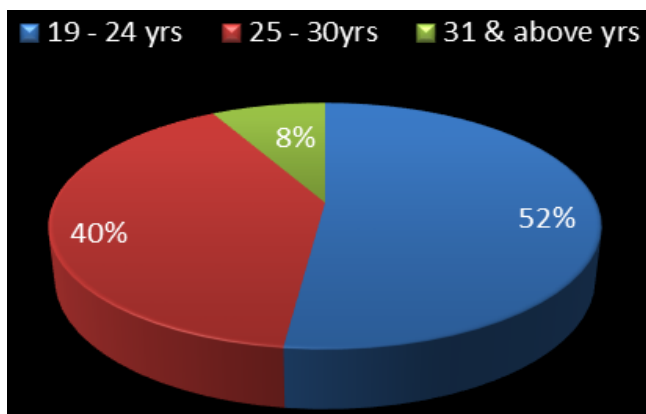
Family Type	No.
Nuclear	30
Joined	63
Extended	7
Total	100



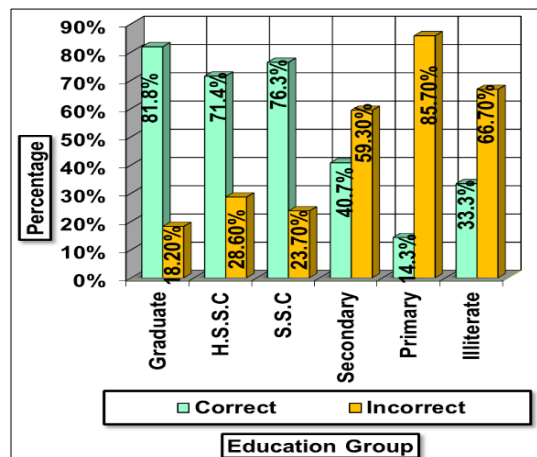
**Fig 3:** Knowledge of females about EBF



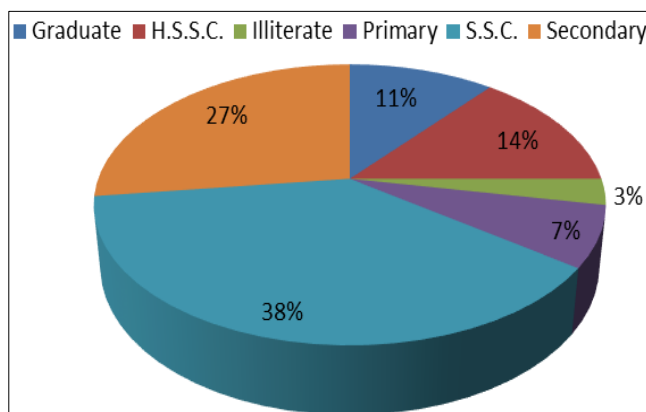
**Fig 4:** Practise of EBF by females



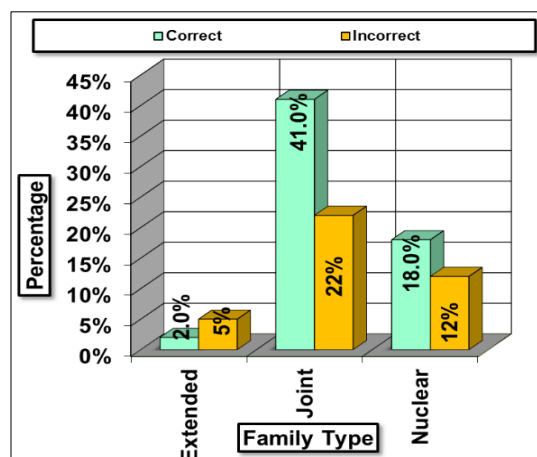
**Fig 1:** Age wise distribution of study subjects



**Fig 5:** Association of Education & Knowledge of Exclusive breastfeeding (EBF)



**Fig 2:** Education Wise distribution of study subjects



**Fig 6:** Association of Family type & Knowledge of EBF.

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