



KNOWLEDGE ON BREASTFEEDING AND PRACTICES ON INITIATION OF BREASTFEEDING AMONG POST CAESAREAN MOTHERS ADMITTED IN SELECTED HOSPITALS, GOALPARA, ASSAM WITH A VIEW TO DEVELOP AN INFORMATION BOOKLET: A DESCRIPTIVE STUDY

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ABSTRACT Breast feeding has been seen as one of the unique biological and emotional influence on the health of both mother and infant. It is an important determinant of infant health which prevents malnutrition and infections. Cesarean section is a surgery, it can certainly bring about some challenge for mothers who want to breastfeed. Whether it's planned or unexpected, the surgical delivery of a child can affect breastfeeding. Pain, anesthesia, the emotions of a Cesarean Section can affect breastfeeding. One of important factor increases the chances of a successful continuation of breastfeeding is early initiation of breastfeeding. Breastfeeding is associated with reduced infant and under-5 mortality and morbidity, protects the neonate from infection and promotes ideal nutrition with lower acute and severe malnutrition. **Aim:** The aim of the study was to assess the knowledge on breastfeeding and practices on initiation of breastfeeding among post caesarean mothers admitted in the selected hospitals, Goalpara, Assam with a view to develop an information booklet. **Method and Materials:** A descriptive design was used in this study and purposive sampling technique for obtaining adequate sample for the study. Study was undertaken on 100 post caesarean mothers in selected Hospitals of Goalpara, Assam. Study was undertaken on 100 post caesarean mothers who fulfils the inclusion criteria. Structured knowledge questionnaire and observation checklist was used to assess the knowledge and practices respectively. In this study, Nola j Pender's Modified health promotion model was used for Conceptual framework. **Results:** A total of 100 post caesarean mothers from Civil Hospital, Maternity & Child Health Centre Goalpara, Assam participated in this study. Out of 100 respondents it was found that majority i.e 75% of the respondents have inadequate knowledge, 25% of the respondents have moderate knowledge and none of them have adequate knowledge towards breastfeeding with the mean 6.54 and SD of 2.35. It was also found majority i.e 70% respondents had fair practice, 20% had poor practice and only 10% had good practice towards initiation of breastfeeding with mean of 4.91 and SD of 1.77. The co-relation between knowledge and practice were 0.278 which shows a fair positive correlation between knowledge and practice. There is significant association of knowledge with no of parity and practices with age, educational level, monthly family income and number of parity on initiation of breast feeding among post caesarean mothers. **Conclusion:** Thus, this study gives the area to improve knowledge and practice of post caesarean mothers on initiation of breastfeeding. Educational and hands on training can be implemented.

KEYWORDS : knowledge, practice, Initiation, post caesarean, breastfeeding.

INTRODUCTION

Breast feeding has a unique biological and emotional influence on the health of both mother and infant. It is an additionally an important determinant of infant health in the prevention of infections.¹

Caesarean section is a surgical procedure, it can certainly bring about some challenge for mothers who want to breastfeed. Whether it's planned or unexpected, the surgical delivery of a child can affect breastfeeding. Pain, the type of anesthesia, the emotions of a Cesarean Section can affect breastfeeding.²

Breastfeeding is important for infant health, such as promote healthy weight, fewer childhood illnesses, lower blood pressure and cholesterol levels, lower prevalence of obesity, and improved intelligence as adults.³

Breast milk contains various important components that necessary for the first 6 months of baby's life. The composition can vary according to the baby's needs, especially during the first month of life. the first form of milk that is colostrum can help the newborn's immature digestive tract to develop and reduce jaundice. After the first few days, as the baby's stomach grows the breasts start producing larger amounts of milk.⁴

Early initiation of breastfeeding can increase the chances of a successful continuation of breastfeeding. Breastfeeding can also reduce infant and under-5 mortality and morbidity rate, protect the neonates from getting infection and promote ideal nutrition thereby lowering acute and severe malnutrition.⁵

Cesarean delivery has a negative impact on initiation of early breastfeeding. The factors which are contributing to reduction of early breastfeeding are timing of the first feeding, interrupt bonding, postoperative care routines after caesarean delivery, delay mothers holding their infants.⁶

OBJECTIVE:

- To assess the knowledge on breast feeding among post caesarean mothers admitted in selected hospitals, Goalpara, Assam.
- To assess the practice on initiation of breast feeding among post caesarean mothers admitted in selected hospitals, Goalpara, Assam.
- To identify the correlation between knowledge and practice on initiation of breast feeding of post caesarean mothers admitted in selected hospitals, Goalpara, Assam.
- To find out the association of knowledge and practice of post caesarean mothers admitted in selected hospitals, Goalpara, Assam with demographic variables such as age, education, religion, occupation, monthly income, no of parity and type of family.

REVIEW OF LITERATURE

SECTION I: Literature related to knowledge of breastfeeding Malik S, Joshi P, Gupta P. and Sharma S (2020) conducted a cross-sectional, observational study on assessment of knowledge and opinion regarding breastfeeding practices during COVID-19 pandemic among paediatricians and obstetricians in India: an online survey done on 720 Doctors. The result showed that Only 294 (54.1%) participants have adequate knowledge regarding breastfeeding recommendations. The gap in knowledge between paediatricians and obstetricians was found statistically significant with a p value of <0.01. 15% of participants were not aware of any guidelines on breastfeeding during the COVID-19 pandemic.⁷

SECTION II: Literature related to practices of breastfeeding Reddy N. S, Sindhu K, Ramanujam K, Bose A, Kang G, Mohan V. (2019) has conducted a cohort study on exclusive breastfeeding practices in an urban settlement of Vellore, on 251 children. The result showed that within the first hour of birth in 148 (59%) infants breastfeeding was initiated. It was found that colostrum was given in 225 (89.6%) infants , 32 (12.7%) infants received prelacteal feeds. Exclusive breastfeeding up to four months was observed in 55 (22.1%),

95% confidence interval [CI] 17.1%, 27.5%) infants with only three (1.1%, 95% CI 0.2%, 3.5%) of the mothers continuing to exclusively breastfeed up to six months.⁸

SECTION III: Literature related to late initiation of breastfeeding Basu S, Upadhyay J, Singh P, Kumar M. (2020) has conducted a randomized and quasi-randomized controlled study on Early versus late fortification of breast milk in preterm infants in India. The result showed that no statistically significant difference between early feeding and late feeding of breast milk for any of the growth parameters—weight (standardized mean difference 0.13; 95% confidence interval (CI) – 0.09, 0.36); length (SMD 0.02; 95% CI – 0.20, 0.25); and head circumference (SMD – 0.10; 95% CI – 0.33, 0.12). Total parenteral nutrition days were similar.⁹

RESEARCH METHODOLOGY

Research Approach- quantitative research approach

Research Design- descriptive research design

VARIABLES:

Research Variables- knowledge and practices.

Demographic Variables- age, education, religion, occupation, monthly family income, number of parity and types of family.

Setting Of The Study- Civil hospital, Goalpara and Maternity and Child Health Centre, Goalpara, Assam

Population – post caesarean mothers

Target Population- the post caesarean mothers admitted in selected hospital.

Accessible Population- the post caesarean mothers admitted in Civil Hospital & Maternity and Child Health Center, Goalpara, Assam

SAMPLES AND SAMPLING TECHNIQUE-

Samples-the post caesarean mothers admitted in Civil Hospital & Maternity and Child Health Center, Goalpara, Assam and who fulfilled the inclusion criteria.

Sample Size-100.

Sampling Technique- purposive sampling technique

INCLUSION CRITERIA-

The Post caesarean mothers who were -

- Present on the day of data collection.
- Able to understand Assamese or English.

EXCLUSION CRITERIA-

The exclusion criteria in the study was who were:

- Not willing to participate
- Postpartum complications
- The baby who have any complication after birth

TOOLS

SECTION A: Demographic data.

SECTION B: Structured Questionnaire to assess the knowledge of the post caesarean mothers regarding breastfeeding.

SECTION C: Observational checklist to assess the practice of post caesarean mothers regarding initiation of breastfeeding.

TECHNIQUES – Interview and Observation

Validity of the tool

The prepared instrument along with the problem statement and objectives was submitted to nine (9) experts:

6 Nursing experts in the field of Child health Nursing.

3 Medical expert in Paediatric Department for establishing the content validity.

Reliability of the tool

The Reliability of the tool has done by Split Half Method Spearman-Browns Formula for knowledge and interrater method for practice. The reliability of knowledge questionnaire was 0.89. the reliability of practice level was 0.75.

Pilot Study

Duration- Pilot study was conducted from 14/11/2020 to 17/11/2020 at Civil hospital and Maternity & Child health center, Goalpara, Assam.

Setting- Marwari Maternity hospital, Athgaon, Guwahati, Assam.

Sample Size – 10

Sample- The post caesarean mothers admitted in Marwari Maternity Hospital, Athgaon, Guwahati, Assam and who fulfilled the inclusion criteria.

The study was found to be feasible.

Main Study: 14th December 2020 to 10th January 2021.

RESULTS

TABLE I: FREQUENCY AND PERCENTAGE DISTRIBUTION OF DEMOGRAPHIC VARIABLES OF POST CAESEARAN MOTHERS.

n=100

Demographic Variables	Frequency (f)	Percentage (%)
Age		
<18 years	1	1.0
18 – 23 years	58	58.0
24 – 29 years	24	24.0
30 – 35 years	15	15.0
>35 years	2	2.0
Education level		
No formal education	1	1.0
Primary education	44	44.0
High school	22	22.0
Higher secondary	27	27.0
Graduate	6	6.0
Post graduate and above	-	-
Religion		
Hindu	24	24.0
Muslim	76	76.0
Christian	-	-
Any other (specify)	-	-
Occupation		
Homemaker	71	71.0
Self employee	17	17.0
Private employee	8	8.0
Govt. service	4	4.0
Monthly family income		
≤Rs.10,001	15	15.0
Rs.10,002 – Rs.29,972	50	50.0
Rs.29,973 – Rs.49,961	30	30.0
Rs.49,962 – Rs.74,755	5	5.0
Rs.74,756 – Rs.99,930	-	-
Rs.99,931 – Rs.199,861	-	-
≥Rs.199,862	-	-
Number of parity		
1	55	55.0
2	39	39.0
3	6	6.0
≥4	-	-
Type of family		
Nuclear family	37	37.0
Joint family	63	63.0
Extended family	-	-

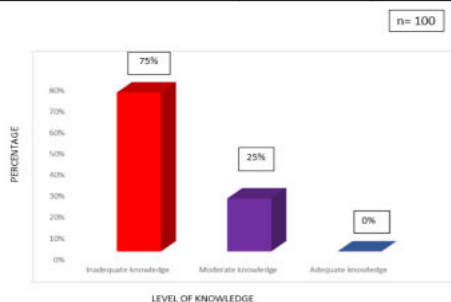


Figure 1: Bar diagram showing percentage distribution of post caesarean mothers according to their level of knowledge

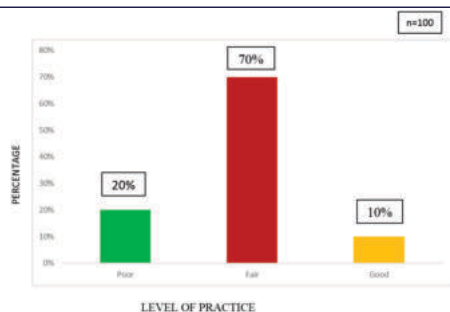


FIGURE II: Bar diagram showing that out of 100 post caesarean mothers majority i.e 70(70%) had fair practice

TABLE II: CO-RELATION BETWEEN KNOWLEDGE AND PRACTICES OF POST CAESAREAN MOTHERS REGARDING INITIATION OF BREASTFEEDING

n=100

Variables	Mean	S.D	Karl Pearson's Correlation Value
Knowledge	6.54	2.35	r = 0.278 p=0.005, S**
Practice	4.91	1.77	

**p<0.01, S – Significant

The data presented in Table II shows that overall mean score of the knowledge of the post caesarean mothers was 6,54 with standard deviation of 2.35 and overall mean score of practice was 4,91 with standard deviation of 1.77. the calculated coefficient correlation value is 0.278 which shows a fair positive correlation between knowledge and practice. This revealed that the knowledge on breast feeding increases their practice on initiation of breast feeding also also increases.

TABLE III: ASSOCIATION BETWEEN THE KNOWLEDGE WITH THEIR SELECTED DEMOGRAPHIC VARIABLES

n=100

SL No.	Demographic variables	Chi-sq	d.f	P-Value	Remarks
1	Age in years	3.712	4	0.446	N.S at p> 0.05
2	Religion	0.000	1	1.000	N.S at p> 0.05
3	Educational Qualifications	3.174	4	0.529	N.S at p>0.05
4	Occupation	2.608	3	0.456	N.S at p>0.05
5	Monthly family Income	2.116	3	0.549	N.S at p> 0.05
6	Number of parity	6.029	2	0.049	S at p< 0.05
7	Type of family	0.129	1	0.720	N.S at p> 0.05

*p<0.05, S – Significant, N.S – Not Significant

The table III portrays the association of level of knowledge on breast feeding among post caesarean mothers with their selected demographic variables.

It depicts that the demographic variable number of parity had shown statistically significant association with level of knowledge on breast feeding among post caesarean mothers with chi-square value of (X²=6.029, p = 0.049) at p<0.05. The other demographic variables had not shown statistically significant association with level of knowledge on breast feeding among post caesarean mothers.

TABLE IV: ASSOCIATION BETWEEN THE PRACTICES WITH THEIR SELECTED DEMOGRAPHIC VARIABLES

n=100

SL No.	Demographic variables	Chi-sq	d.f	P-Value	Remarks
1	Age in years	26.690	8	0.001	S at p≤ 0.001
2	Religion	3.509	2	0.173	N.S at p > 0.01
3	Educational Qualifications	23.176	8	0.003	S at p< 0.01

4	Occupation	8.506	6	0.203	N.S at p >0.01
5	Monthly family Income	21.938	6	0.001	S at p≤ 0.001
6	Number of parity	26.225	4	0.0001	S at p≤ 0.001
7	Type of family	3.475	2	0.176	N.S at p > 0.01

***p<0.001, **p<0.01, S – Significant, N.S – Not Significant

The table IV portrays the association of level of practice on initiation of breast feeding among post caesarean mothers with their selected demographic variables. It depicts that the demographic variables age, educational level, monthly family income and number of parity had shown statistically significant association with level of practice on initiation of breast feeding among post caesarean mothers with chi-square value of (X²=26.690, p=0.001), (X²=21.938, p=0.001) and (X²=26.225, p=0.0001) at p≤0.001. The demographic variable education level had shown statistically significant association with level of practice on initiation of breast feeding among post caesarean mothers with chi-square value of (X²=23.176, p=0.003) at p<0.01. The other demographic variables had not shown statistically significant association with level of practice on initiation of breast feeding among post caesarean mothers.

DISCUSSION:

The present study was supported by Ihudiebube-Splendor C, Okafor C, Anarado A, Jisieike-Onuigbo N, Chinweuba A, Nwaneri A et al has conducted cross-sectional descriptive survey study on Exclusive Breastfeeding Knowledge, Intention to Practice and Predictors among Primiparous Women in Enugu South-East, Nigeria on 201 primiparous. This study was found more than half (58.7%) of primiparous mothers had inadequate knowledge of EBF and only 62.7% had intention to exclusively breastfeed for 4–6 months. The Chi-square test result showed significant difference in the participants' place of residence (p = 0.024), EBF knowledge sources (p = 0.001), and EBF knowledge.¹⁰

CONCLUSION:

A total of 100 post caesarean mothers from Civil Hospital & Maternity child health center Goalpara, Assam participated in this study. Out of 100 respondents found that majority that is (75%) of the respondents have inadequate knowledge, (25%) of the respondents have moderate knowledge and 0% have adequate knowledge towards breastfeeding. Out of 100 respondents, majority that is (70%) respondents had fair practice, (20%) had poor practice and 10% had good practice towards initiation of breastfeeding. Through this study, the investigator concluded although the knowledge were inadequate but there was moderate practice towards initiation of breastfeeding among post caesarean mothers.

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