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IMPACT OF LECTURE BASED EDUCATIONAL INTERVENTION ON EXISTING AWARENESS AND BELIEFS OF LACTATING MOTHERS TOWARDS EXCLUSIVE BREAST FEEDING.

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ABSTRACT **Background:** The World Health Organisation (WHO) defines exclusive breastfeeding as the practice of feeding only breast milk to the baby for the first 6 months of life, with no additional liquids or foods. Surprisingly, data from National Family Health Survey 4 reveals that only 54.9% of infants in India are exclusively breast fed up to 6 months of age. This situation is deeply concerning, and the most potent solution lies in enhancing maternal education and awareness regarding the importance of exclusive breast feeding. **Objectives:** 1. To assess the awareness and beliefs of lactating mothers towards exclusive breast feeding. 2. To compare the knowledge and beliefs of lactating mothers before and after lecture. **Methods:** A cross- sectional study conducted on 200 lactating mothers in the postnatal ward of Punjab Institute of Medical Sciences, Jalandhar from 1st September 2022 to 30th November 2022. Mothers were assessed through a self-administered questionnaire both before and after lecture, aiming to evaluate how the lecture influenced their existing knowledge and beliefs. Data was analysed through statistics software. **Results:** Our study indicated maximum number of mothers enrolled in the study were from age group 21-30 years (57.5%), were primigravida (43.5%), had completed 12th grade education (39%) and were primarily housewives (81%). Awareness data revealed that 72.5% mothers were familiar with the term "exclusive breast feeding", 52.5% were aware of initiating breast feeding within 1 hour of birth, but a significant 54% had no idea of benefits of breast milk. Following the lecture based education intervention, our study demonstrated a statistically significant improvement in awareness and beliefs of mothers towards exclusive breast feeding, with a remarkable 99% of mothers exhibiting positive changes (p- value-0.000). **Conclusion:** Increasing the rates of exclusive breast feeding stands as a paramount global public health priority, essential for protecting child health and ensuring their survival. This goal can be easily achieved through a twofold approach: first by assessing mother's knowledge about exclusive breast feeding by asking questions, and second, by engaging health care providers both in public and private sectors to provide comprehensive education and motivation to mothers. This collective effort is key to promoting and sustaining exclusive breast feeding practices, eventually contributing to improved child health outcomes worldwide.

KEYWORDS : Exclusive breast feeding, colostrum, primigravida, breast milk.

INTRODUCTION

Exclusive breastfeeding is defined as a way of giving only breast milk to the baby and no other liquids or solid, not even water with the exception of medicines and multivitamins. As per Centers for Disease Control and Prevention, 46% of babies are exclusively breast fed through 3 months and 26% are exclusively breast fed through 6 months in the United States. [1] Similarly, 54.9% of infants in India are exclusively breast fed up to 6 months of age (NFHS-4). [2] As per WHO guidelines, Exclusive breast feeding is recommended up to the age of 6 months, followed by continuation of breast feeding up to the age of 2 years along with complementary feeding to be started at the age of 6 months [3] Exclusive breast feeding has many benefits for both baby and mother. Nutritional content of the breast milk protects babies from gastrointestinal and respiratory infections, and chronic illnesses like obesity, allergic disorders, diabetes mellitus and hypertension. Moreover, it plays an important part in neurocognitive development of the child. [4,5]

Exclusive breast feeding causes lactational amenorrhea, hence contributes to spacing of pregnancies. Studies have also documented the beneficial effect of exclusive breast feeding in breast, ovarian and endometrial cancer. Other known favourable effects for mother are weight loss, reduction in postpartum haemorrhage, type 2 Diabetes mellitus and hypertension.[6]

However despite of so many existing advantages of exclusive breast feeding both for the mother and baby, supreme of the babies remain deprived of it due to several misconceptions and poor knowledge among lactating mothers. Hence, this study was planned to assess the awareness and beliefs of postnatal mothers towards exclusive breast feeding. Also impact of educating postnatal mothers on their existing understanding and attitude towards exclusive breast feeding was studied and the outcomes were compared to measure the effectiveness of teaching intervention.

MATERIALS AND METHODS

Study Design And Period:

A Cross sectional study was conducted among lactating mothers in the postnatal ward of Punjab Institute of Medical Sciences, Jalandhar, Punjab from 1st September 2022 to 30th November 2022.

Participants:

All postnatal lactating mothers admitted to postnatal ward of Punjab Institute of Medical Sciences, Jalandhar, Punjab from September 2022 to November 2022. Total number of mothers enrolled was 200.

Instruments:

Data collection methods included sociodemographic questionnaire (age, educational status, gravidity, parity and occupation). To assess awareness about exclusive breast feeding, 13 awareness questions were used (awareness about EBF, from where did you get to know about EBF, right time to give breast feed to baby after birth, what you do with the first milk/ colostrum, what food or liquid is given to under 6 months, awareness about prelacteal feed, is prelacteal feed required, whether breast milk alone is sufficient below 6 months, benefits of breast milk, role of breast milk in respiratory, GI infections and chronic illnesses, what would you like to give your newborn immediately after birth), and for assessment of beliefs based on Likert scale (1= strongly agree, 2= agree, 3= neutral, 4= disagree and 5= strongly disagree) 8 question based questionnaire was used.

Data Collection Methods:

A structured self-administered questionnaire was used to collect responses from the participants. The questionnaire was prepared in English primarily and subsequently translated in Hindi and Punjabi to ensure better understanding of questions among participants. After obtaining the informed consent from the participants, they completed the questionnaire. Subsequently, our faculty conducted an informative lecture on exclusive breast feeding and its associated benefits. During this session, any misconceptions were also addressed. Following the lecture, participants once again completed the questionnaire, allowing us to compare the pre-lecture and post-lecture results to measure the impact of the educational intervention.

Data Analysis:

Data was analysed using SPSS version 20.0 statistical package software and results are presented in the frequencies and percentages, and pre and post lecture data was compared.

Ethical Clearance:

The study was approved by the Institutional ethics committee. The participants were informed clearly about the purpose of the study and consent was obtained.

RESULTS

The study comprised 200 lactating mothers who were admitted to the

postpartum ward at Punjab Institute of Medical Sciences, Jalandhar, India. Among these participants, majority of mothers (115) were in the age group 21- 30 years (57.5%) and the mean age was 26.5 years. A total of 87 (43.5%) mothers were primigravida and all were married. In relation to educational backgrounds, 78(39%) mothers had completed their 12th grade education, while 6(3%) were illiterate. In terms of occupation, a significant proportion, 162 mothers were housewives (81%), while the remaining 38(19%) were employed in either government or private setup (Table 1).

Pre lecture results revealed that 143(72.5%) mothers were aware of the term "exclusive breast feeding," while 57(28.5%) were not familiar with EBF. When asked about the definition of exclusive breast feeding, 188(94%) mothers correctly responded that it means feeding the baby only breast milk till 6 months of age. However, 9(4.5%) mothers answered for breast milk with formula milk, 2(1%) for formula milk and 1(0.5%) for breast milk with sugar water or water. The major source of information about EBF were relatives (137) and hospital (43). 105(52.5%) mothers knew that best time to start feed after birth is <1 hour, while 84(42%) mothers answered >1 hour as the best time to start feed after birth. A significant number of mothers, 159 (79.5%) correctly knew that colostrum should be fed immediately, while 41 (20.5%) believed it should be discarded. Majority of mothers, 138 (69%) knew that only breast milk is sufficient for the first 6 months of life, but 62 (31%) were not aware of this fact. 76(38%) mothers were aware of the prelacteal feed and 27 (13.5%) answered that prelacteal feed is required. Surprisingly, only 68 (34%) mothers knew about the benefits of EBF, while 132 (66%) mothers were unaware of the benefits of EBF. In addition, only 64 (32%) mothers knew that EBF prevents diarrhoea and respiratory infections, while 131 (65.5%) were not aware of role of EBF in prevention of these health issues (Table 2). These findings highlight the varying levels of awareness among mothers regarding exclusive breast feeding, indicating the need of educational interventions to improve knowledge in this area.

Our study revealed that 86 (43%) mothers believed that prelacteal feeds are must for the newborn immediately after birth. A significant majority with 132(61%) agreeing and 51(25.5%) strongly agreeing, understood the importance of providing newborns with breast milk within an hour of birth. Most mothers, 121(60.5%) disagreed and 28(14%) strongly disagreed with the idea of throwing away the first milk. For the notion that only breast milk may not be sufficient for <6month old infant, 84 (42%) mothers disagree and 26(13%) strongly disagree. Majority of mothers, 130(65%) disagree and 40(20%) strongly disagree to the idea that giving water along with breastfeeding is important in first 6month of life. (Table 3) These findings are suggestive of a range of beliefs and attitudes among mothers, emphasizing the need of awareness campaign to address the misconceptions and promote optimal breastfeeding practices.

Our study indicated that there was a remarkable improvement in awareness and beliefs of mothers regarding EBF following the lecture based educational intervention. The awareness of mothers towards exclusive breast feeding increased from 72.5% (pre-lecture) to 99% (post-lecture) (p-value-0.000). Knowledge about initiating breast feeding within 1 hour of birth also improved significantly, rising from 105 mothers (pre-lecture) to 194 mothers (post-lecture) (p-value-0.000). All mothers (100%) gained knowledge from the lecture regarding the importance of feeding first milk immediately and sufficiency of only breast milk for the baby in first 6 months of life (p-value-0.000). Awareness regarding prelacteal feed increased significantly, with the number of mothers aware rising from 76(38%) pre-lecture to 192(96%) post lecture (p-value-0.000). In addition, participants significantly gained knowledge about benefits of EBF, role of EBF in prevention of diarrhoea, respiratory tract infections and chronic illnesses (p- value-0.000). (Table 4) Above findings favour the importance of maternal education in achieving 100% breast feeding in practice.

DISCUSSION

Exclusive breast feeding plays an essential role in fostering the optimal growth and development of a child. However, achieving a 100% practice of EBF among mothers hinges on the awareness and understanding of mothers towards exclusive breast feeding. While numerous studies are conducted on the knowledge, attitude and beliefs of mothers towards EBF worldwide, paucity of data in India propels us to measure the actual awareness and beliefs of mothers towards EBF in our Institute. Furthermore, the lack of substantial data documenting the impact of educational interventions on the knowledge and beliefs of mothers regarding EBF led us to conduct this research.

In our study, we found that 72.5% mothers were aware of the term "exclusive breast feeding". This level of awareness closely aligns with findings from other studies. A study conducted in Ghana showed that 74% mothers were able to define exclusive breast feeding.[7] Similarly, a study conducted by Revathi et al found that 82% mothers knew about EBF. [8]

Our study revealed that there was a significant gap in knowledge about EBF among mothers. 52.5 % mothers knew that breast milk should be given within 1hour, which is consistent with the results obtained from other studies conducted by Ballo et al (67%) [9] and Shirima et al (69%) [10]. We found that most of the mothers had inadequate knowledge regarding importance of colostrum (79.5%), preferred food/liquid below 6 months of age, breast milk alone sufficient for infants <6 months (69%), benefits of EBF (34%), role of EBF in prevention of infections (32%)and allergies (34%), and prelacteal feed (30.5%). Results were in comparison to studies conducted by Cascone et al[11]and Bashir et al [12]. Hence, voids in the knowledge should be taken into serious consideration and concerted efforts should be taken by all the health educators while proposing and implementing the breast feeding policies in the hospital. Each and every mother should be educated and encouraged to exclusively breast feed the baby for the first 6 months of life, especially any misconceptions should be clarified.

Our study also inspected beliefs of mothers towards EBF and most of the mothers believed that exclusive breast feeding is beneficial for the baby. This is in alignment with the general consensus about the benefits of EBF. However, most of the mothers agreed that prelacteal feeds are must for the newborn immediately after birth, which contradicts the importance of exclusive breast feeding. Many mothers also believed in throwing away the first milk. This is concerning as colostrum is highly nutritious and immunity booster. Similarly, most of the mothers believed that breast milk alone is not sufficient for the baby in the first 6 months of life, which contradicts the WHO guidelines emphasizing the need of only breast milk in the first 6 months of life to an infant. Results were similar to the studies conducted by Kim et al[13] and Swigart et al[14].

Our study also compared the results before and after lecture, which showed statistically significant improvement in awareness and belief scores (p-value-0.000), as presented in Table 4 and Table 5. This finding emphasizes the importance of educational interventions in enhancing the maternal understanding and awareness to practice exclusive breast feeding. This observation is in line with a study conducted by Shalaby H et al in 2019, who demonstrated that breast feeding focussed health education programs results in increased rates of women practicing EBF after improving their knowledge by receiving the health education intervention.[15] Health educators and health care providers plays a pivotal role in improving knowledge and motivating mothers to exclusively breast feed their infants.

Limitations of the study:

A small sample size of the study limits the generalization of the findings to the general population.

What Is Already Known?

Lack of awareness regarding exclusive breast feeding among mothers has been established by the low exclusive breast feeding rate globally.

What This Study Adds?

Educational interventions significantly enhance knowledge and attitude of mothers, making them a vital strategy that health care providers should advocate and promote to achieve a 100% exclusive breast feeding among mothers.

CONCLUSION

The conducted study has comprehensively assessed the knowledge as well as examined the beliefs of lactating mothers towards exclusive breast feeding. In addition, role of educating mothers about the exclusive breast feeding and its benefits was explored. The present research showed that mothers are inadequately occupied with the knowledge of EBF and educating them plays a significant role in increasing their knowledge as well as fostering a positive attitude towards practicing exclusive breast feeding. Therefore, increasing the common awareness among mothers by educating them, asking questions regarding EBF at health visits and addressing all the queries related to EBF patiently by the

health care provider can be a valuable strategy to achieve 100% exclusive breast feeding among lactating mothers.

Table 1: Sociodemographic Distribution Of Lactating Mothers.

Characteristics	Categories	Frequency	Percent (%)
1. Age (years)	<20	4	2
	21-30	115	57.5
	31-40	80	40
	>40	1	0.5
2. Gravida	G1	87	43.5
	G2	73	36.5
	G3	32	16
	G4	6	3
	G5	1	0.5
	G6	1	0.5
3. Education	Illiterate	6	3
	<10th class	51	25.5
	11-12 class	78	39
	Graduate	41	20.5
	Post graduate	24	12
4. Occupation	Unemployed	162	81
	Employed	38	19

Table 2: Awareness Of Lactating Mothers Towards Exclusive Breast Feeding (Pre-Lecture).

Questions	Variables	Frequency	Percent (%)
1. Are you aware of the term exclusive breast feeding?	No	57	28.5
	Yes	143	72.5
2. What is exclusive breast feeding?	A.Only breast milk till 6 months of age	188	94
	B.Breast milk with sugar water or water	1	0.5
	C.Breast milk with formula milk	9	4.5
	D.Formula milk	2	1
3.From where did you get to know about exclusive breast feeding?	Family	2	1
	Hospital	43	21.5
	Relative	137	68.5
	Relative, Family, Hospital	1	0.5
	Relative, Family, Hospital, social media	1	0.5
	Relative, Hospital	3	1.5
	Relative, Social media	2	1
	Social media	11	5.5
4. What is right time to give breast milk to baby after birth?	< 1 HOUR	105	52.5
	>1 HOUR	84	42
	>24 HOUR	11	5.5
5. What do you do with first milk/colostrum?	Feed immediately	159	79.5
	Throw away	41	20.5
6. Which food or liquid is given to under 6 months?	Breast milk + Sugar water	8	4
	Breast milk+ Sugar water +honey	1	0.5
	Honey	2	1
	Only Breast milk + Honey	1	0.5
	Only breast milk	188	94
7. Do you know about prelacteal feed ?	No	48	24
	Not aware	76	38
	Yes	76	38
8. Is prelacteal feed required?	No	61	30.5
	Not aware	112	66
	Yes	27	13.5
9. Do you think breast milk alone is sufficient for infant<6m of life?	No	7	3.5
	Not aware	55	27.5
	Yes	138	69
10. Do you have any idea about benefits of EBF	No	24	12
	Not aware	108	54
	Yes	68	34
11. EBF prevents diarrhea and respiratory infections among infants?	No	5	2.5
	Not aware	131	65.5
	Yes	64	32
12. EBF prevents chronic disease like allergies and diabetes mellitus among children?	No	3	1.5
	Not aware	131	65.5
	Yes	68	34
13. What would you like to give your newborn immediately after birth?	Breast milk	179	89.5
	Formula milk	1	0.5
	Honey	20	10

Table 3: Beliefs Of Lactating Mothers Towards Exclusive Breast Feeding (Pre Lecture).

Variable	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1.Prelacteal feeds like honey, sugar water etc. are must for the newborn immediately after birth	12	86	4	60	34
2.Giving newborn breast milk immediately within an hour is important.	51	132	2	12	2
3. Throwing away the first milk or colostrum is important	8	29	6	121	28
4.Only breast milk may not be sufficient for <6 month old baby	12	70	2	84	26
5.Giving water along with breastfeeding is important in first 6month of life	4	17	5	130	40
6. EBF carries benefits to mother and baby both.	73	68	20	11	0
7. EBF prevents recurrent URI and diarrhea.	30	55	52	8	0
8. EBF prevents allergic disorders.	29	55	48	10	0

Table 4: Comparison Of Awareness Of Lactating Mothers Towards Exclusive Breast Feeding Pre And Post Lecture

Questions	Variables	Pre Lecture		Post Lecture		P-value
		Frequency	Percent (%)	Frequency	Percent (%)	
1. Are you aware of the term exclusive breast feeding?	No	57	28.5	2	1	0.000
	Yes	143	72.5	198	99	
2. What is exclusive breast feeding?	A.Only breast milk till 6 months of age	188	94	200	100	0.000
	B.Breast milk with sugar water or water	1	0.5	0	0	
	C.Breast milk with formula milk	9	4.5	0	0	
	D.Formula milk	2	1	0	0	
3. From where did you get to know about exclusive breast feeding?	Family	2	1	2	0.5	0.000
	Hospital	43	21.5	150	75	
	Relative	137	68.5	24	12	
	Relative, Family, Hospital	1	0.5	1	0.5	
	Relative, Family, Hospital, social media	1	0.5	1	0.5	
	Relative, Hospital	3	1.5	18	9	
	Relative, Social media	2	1	2	1	

	Social media	11	5.5	2	1	
4. What is right time to give breast milk to baby after birth?	< 1 HOUR	105	52.5	194	97	0.000
	>1 HOUR	84	42	6	3	
	>24 HOUR	11	5.5	0	0	
5.What do you do with first milk/ colostrum?	Feed immediately	159	79.5	200	100	0.000
	Throw away	41	20.5	0	0	
6. Which food or liquid is given to under 6 months?	Breast milk + Sugar water	8	4	0	0	0.000
	Breast milk+ Sugar water +honey	1	0.5	0	0	
	Honey	2	1	0	0	
	Only Breast milk + Honey	1	0.5	0	0	
	Only breast milk	188	94	200	100	
7. Do you know about prelacteal feed ?	No	48	24	6	3	0.000
	Not aware	76	38	2	1	
	Yes	76	38	192	96	
8. Is prelacteal feed required?	No	61	30.5	182	91	0.000
	Not aware	112	66	3	1.5	
	Yes	27	13.5	15	7.5	
9. Do you think breast milk alone is sufficient for infant<6m of life?	No	7	3.5	2	1	0.000
	Not aware	55	27.5	1	0.5	
	Yes	138	69	197	98.5	
10. Do you have any idea about benefits of EBF?	No	24	12	0	0	0.000
	Not aware	108	54	1	0.5	
	Yes	68	34	199	99.5	
11. EBF prevents diarrhea and respiratory infections among infants?	No	5	2.5	0	0	0.000
	Not aware	131	65.5	4	2	
	Yes	64	32	196	98	
12. EBF prevents chronic disease like allergies and diabetes mellitus among children?	No	3	1.5	0	0	0.000
	Not aware	131	65.5	7	3.5	
	Yes	68	34	193	96.5	
13. What would you like to give your newborn immediately after birth?	Breast milk	179	89.5	200	100	0.000
	Formula milk	1	0.5	0	0	
	Honey	20	10	0	0	

Table 5: Comparison of beliefs of Lactating mothers towards Exclusive breast feeding pre and post lecture.

Variable	Strongly Agree		Agree		Neutral		Disagree		Strongly Disagree		p-value
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	
1.Prelacteal feeds like honey, sugar water etc. are must for the newborn immediately after birth	12	2	86	11	4	0	60	112	34	75	0.000
2.Giving newborn breast milk immediately within an hour is important.	51	78	132	120	2	0	12	1	2	1	0.000
3. Throwing away the first milk or colostrum is important	8	1	29	1	6	0	121	139	28	59	0.000
4.Only breast milk may not be sufficient for <6 month old baby	12	1	70	5	2	0	84	125	26	69	0.000
5.Giving water alongwith breastfeeding is important in first 6month of life	4	2	17	2	5	0	130	131	40	65	0.000
6. EBF carries benefits to mother and baby both.	73	140	68	59	20	0	11	1	0	0	0.000
7. EBF prevents recurrent URI and diarrhea.	30	88	55	109	52	2	8	0	0	0	0.000
8. EBF prevents allergic disorders.	29	90	55	106	48	3	10	0	0	0	0.000

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