ORIGINAL RESEARCH PAPER

Volume-7 | Issue-11 | November-2018 | PRINT ISSN No 2277 - 8179

INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

BREASTFEEDING AND NURSES - A SURVEY OF THE VARIOUS FACTORS AFFECTING THEIR KNOWLEDGE, ATTITUDE AND PRACTICES.

Paediatrics

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ABSTRACT

Background: Breastfeeding support from health professionals can be effective in influencing a mother's decision to initiate and maintain breastfeeding. This paper is aimed at finding the knowledge, attitude and practices of nurses regarding breastfeeding, working in maternity and neonatal departments.

Methods: This is a cross sectional study conducted among 100 nurses working in maternity and neonatology departments in two tertiary care hospitals in coastal Andhra Pradesh. The nurses' knowledge, attitudes and practices were assessed with the help of a self-administered questionnaire with multiple choice questions. Socio demographic data including previous personal breastfeeding experience, previous training in newborn care programmes is also included. Chi square tests with p value and correlation coefficient were calculated and results were analysed.

Results: Several factors were found to influence breastfeeding knowledge and attitudes, including training in at least one of the newborn care training programmes($p<0.05$); especially Facility Based Newborn Care (FBNC) training programme($p<0.05$). Educational qualification, prior personal breastfeeding experience, place of working did not have a significant impact on their breastfeeding scores.

Conclusions: Based on this study, it appears that a specialised breastfeeding/ newborn care training programme can improve breastfeeding knowledge, attitudes and practices among nurses, thereby helping and guiding breastfeeding mothers.

KEYWORDS

Breastfeeding, Knowledge, Attitudes, Navjaat Shishu Suraksha Karyakram, Facility Based New-born Care, Integrated Management of Neonatal and Childhood Illness

INTRODUCTION:

Breastfeeding is one of the immediate newborn care interventions that reasonably reduces neonatal mortality.1 Exclusive breastfeeding for the first six months of infant life has been shown to improve child survival.2 To achieve the health and optimal growth of infants, the World Health Organization(WHO) and the United Nations Children's Fund(UNICEF) recommends that all infants should be exclusively breastfed for the first 6 months and continue to receive breast milk until 2 years of age along with supplementary foods.3 There are a range of factors known to influence a mother's decision to initiate and maintain breastfeeding including the practical, emotional support, and encouragement from health professionals.4 A Cochrane review reported that breastfeeding support from health professionals can be effective in extending the duration of breastfeeding.[5]

Comprehensive Lactation Management Centres(CLMCs) have been proposed to be set up in a phased manner by the Government of India in July 2017 , at medical colleges and large district hospitals for providing comprehensive lactation support and management for all mothers within the hospital. Facilities for collection, screening, processing, storage and dispensing of donated human milk for babies without access to their own mother's milk and expression and storage of mother's own breast milk for consumption by her baby are available in CLMC.6 There needs to be a specific lactational counsellor trained in IYCF programme to run such a unit. However, currently in Andhra Pradesh we do not have such functional units. The nurses and other health care professionals need to take up the role of a lactational counsellor whenever possible. It is therefore important that nurses working in the outpatient and inpatient antenatal departments, delivery rooms, neonatal intensive care units, post natal wards acquire knowledge about breastfeeding and develop skills to support and provide appropriate care to pregnant women and to mothers with infants, in order to support mothers to breastfeed. Spiby et al7 identified a range of educational interventions for healthcare professionals aiming to increase knowledge and support breastfeeding, however due to methodological limitations, they were not able to support any specific approach.

The nursing staff working in two tertiary care mother and child hospitals were included in the present study. Previous exposure to training modules focussing on neonatal care like Navjaat Shishu Suraksha Karyakram(NSSK), Facility Based New-born care(FBNC) programme, and Integrated Management of Neonatal and Childhood Illnesses(IMNCI) were considered. The NSSK programme is a Government of India initiative which is a two-day training module for health care providers with emphasis on basic new born care and resuscitation. FBNC programme is a 19-day training programme for doctors and nurses, as a part of initiative for strengthening of newborn care in India, also for setting up of Special Newborn care (SNCU), one for each district hospital. The IMNCI package is an 8-day training module emphasising on problems from new born to 5 years of age.

AIMS & OJECTIVES:

1. To describe knowledge, attitude and practices of nurses towards breastfeeding.

2. To find out the various socio-demographic factors affecting their knowledge, attitude and practices.

3. To find out the impact of training programmes specialised in newborn care for nurses on the knowledge, attitude and practices of nurses.

MATERIALS & METHODS:

This is a cross sectional, descriptive, hospital-based study conducted among 100 nurses working in maternity and neonatology departments in two tertiary care hospitals in coastal Andhra Pradesh.

INCLUSION CRITERIA:

1. All the nurses (including Auxiliary nurse midwife) working in maternity and neonatology departments among two tertiary care mother and child hospitals in coastal Andhra Pradesh who consented for this study.

EXCLUSION CRITERIA:

1. The nurses who refused to consent for the study.

The nurse's knowledge, attitudes and practices were assessed with the help of a questionnaire with multiple choice questions. The questionnaire contained demographic data like age, working experience, qualification, working cadre, previous personal breastfeeding experience, information about training in any one of the newborn care training programmes like Navjaat Shishu Suraksha

Karyakram (NSSK) ,Facility Based Newborn care (FBNC) and IMNCI programme. A total of 18 questions, 6 questions each for knowledge, attitude and practices related to breastfeeding, in the form of multiple choice questions were given. The final scores(out of 18) were recorded and analysed. A low score meant a score <=9/18; mid score: 10-13/18 and high score >=14/18. Chi square tests with p value and correlation coefficient were calculated and results were analysed.

RESULTS:

The demographic data has been represented in Table 1

Table : 1 Demographic data

	Median	Range
Age (in years)	32.5	20-56
Work experience (in years)	7	1-31
Knowledge score (out of 6)	5	2-6
Attitude score (out of 6)	5	1-6
Practices score (out of 6)	4	2-5
Total score (out of 18)	14	7-17

Of the 100 nurses who participated in the study, 51% demonstrated high scores; 40 % had mid- scores; only 9 % had low scores.(Table 2)

Table: 2 Overall scores of nurses (n=100)

Overall scores (out of 18)	No.	%
Low score (<=9)	9	9
Mid score (10-13)	40	40
High score (> =14)	51	51

Of the 100 nurses in the study only 34 had training in various programmes. Table 3 shows the number of nurses trained in various programmes.

Table : 3 Trained in special newborn care programmes (n= 34)

	Number
NSSK	10
FBNC	21
IMNCI	3

Several factors were found to influence breastfeeding knowledge and attitudes, including training in at least one of the new born care training programmes($p<0.05$); FBNC training programme($p<0.05$). Prior personal breastfeeding experience, place of working did not have a significant impact on their breastfeeding scores.(Tables 4,5,6)

Table : 4 Qualification wise breakup of scores, n=100

Qualification	Number (%)	High score	Mid score	Low score
ANM	7 (7%)	5	2	0
GNM	67 (67%)	29	29	9
B Sc (Nursing)	25 (25%)	17	8	0
M Sc (Nursing)	1 (1%)	0	1	0

Table : 5 Previous personal breastfeeding experience

Previous breastfeeding experience	Number	%
Yes	45	45
No	55	55

Table : 6 Various factors affecting the nurses score and their level of significance

	p value	Significance
Age < 30 years	0.6728 (p >0.05)	Not significant
Qualification	0.034923 (p<0.05)	Significant
Work experience	0.32308 (p >0.05)	Not significant
Previous breastfeeding experience	0.702468 (p >0.05)	Not significant
Trained in newborn care programme	0.00129 (p <0.05)	Significant
Trained in Facility based neonatal care	0.000908(p <0.01)	Significant

Correlation between different variables in the study are checked, the results of which are depicted in Table 7

Table 7 : Correlation between different variables in the study

Variables	"r" (Pearson's correlation coefficient	Correlation
Knowledge and attitude	0.3381	Weak positive correlation
Knowledge and practice	0.4482	Weak positive correlation
Attitude and practice	0.6107	Slight positive correlation
Age and score	0.1241	Weak positive correlation
Work experience and score	0.1123	Weak positive correlation

DISCUSSION:

The study is designed to assess the nurses' level of knowledge and attitude to breastfeeding practices. The results showed that the level of knowledge of exclusive breastfeeding among nurses is indeed high. The result further showed nurses who have attended training programmes had better knowledge compared to those who had no training. It could be presumed, therefore, that the training programmes helped to increase the knowledge of the nurses. The need to encourage continuing education among nurses cannot be overemphasised.

The analysis of results of this study showed that demographic factors like personal breastfeeding experience or working experience did not have any statistically significant effect on breastfeeding knowledge scores ($p> .05$) whereas qualification and training programmes had significant impact on the breastfeeding practices. Although the overall knowledge on the benefits of breastfeeding was high, knowledge on the exclusiveness of breastfeeding in the first 6 months of life seems to be poor. Similarly, their knowledge on the time of initiation of breastfeeding was also poor. The quality of knowledge on breastfeeding was also compromised by several misconceptions that are common among nurses. However, as a correlation has been noted between attitude and practices, programmes enhancing the knowledge and hence change the attitude and practices must be strongly enforced. Training of nurses is of essential because of their continuous interaction with antenatal, natal, postnatal mothers as well as their relatives, thereby enabling holistic care. Successful breastfeeding is feasible with proper training of nursing staff in specialised new born care and breastfeeding programmes. Periodic assessment of nurses' knowledge, attitude and practices as well as their adherence to the ten steps of Baby Friendly Hospital Initiative needs to be done to achieve better breastfeeding rates.

CONCLUSION

Although the nurses' knowledge on the benefits of breastfeeding for mother and child seems to be adequate among nurses, their knowledge on several aspects of breastfeeding was poor. In particular, knowledge on the exclusiveness of breastfeeding was lacking among the majority of nurses. Therefore, to make sure that breastfeeding is successfully promoted, it needs to be included comprehensively into the nursing curriculum. Nurses need to gain adequate knowledge, develop the right attitude and acquire proper skills to initiate and establish exclusive breastfeeding via comprehensive new born care training programmes.

ACKNOWLEDGEMENTS:

We would like to thank the participants for their cooperation.

DECLARATIONS:

Funding: None
Conflict of interest: None declared
Ethical approval: Not required

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