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# A STUDY TO ASSESS THE KNOWLEDGE AND PRACTICE OF RURAL MOTHERS REGARDING TECHNIQUES OF BREASTFEEDING IN SELECTED AREAS OF ASSAM

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#### Key words:

Knowledge, practice, breastfeeding techniques, rural mothers

#### ABSTRACT

**Background of the study:** Breast milk is considered as the best milk for a baby. Although breastfeeding is nearly universal in India, 96% of children under age five have ever been breastfed. In spite of many awareness programs, we still see many faulty breastfeeding techniques and hence there is a high necessity to identify the areas that need to be strengthened. **Methodology:** A descriptive survey approach was adopted to accomplish the objectives. A structured interview schedule was prepared in 3 sections. The data was collected from Kamrup (R), Assam using non-probability convenience sampling technique among 100 rural mothers based on the inclusion criteria. Result: Among 100 mothers, majority 64 (64%) had moderate knowledge, 76 (76%) mothers had moderate practice regarding breastfeeding techniques. Significant association was found only between educational qualification of mother with knowledge. No significant association was found between practice of rural mother regarding breastfeeding techniques with selected demographic variables. Significant positive correlation was found between knowledge and practice. Conclusion: From this study, it was concluded that majority of the mothers had moderately adequate knowledge and practice level. Primary caregivers need to implement strategies to educate rural mothers about breastfeeding techniques to enhance good breastfeeding practices thereby reducing infant mortality and morbidity.

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#### **INTRODUCTION**

"Breastfeeding is a mother's gift to herself, her baby and the earth" - Pamela K. Wiggins

Breast milk is considered to be the best milk for a baby as it provides nutritionally superior feed for the baby and is needed for the survival and healthy growth of the baby. It also improves bonding and cognitive development and also protects baby from a wide variety of illnesses, reduces the incidence, and severity of a large number of infections. <sup>[1]</sup>India ranks lowest among South Asian countries, including Afghanistan, Bangladesh and Sri Lanka in breastfeeding practices, with only 44% women being able to breastfeed their babies within one hour of delivery. <sup>[2]</sup>

Although breastfeeding is a natural phenomenon, successful breastfeeding can be a complex task. Breastfeeding technique is the composite of positioning, attachment and suckling and several factors can be used to measure breastfeeding effectiveness, including the mother's correct positioning of her baby, her comfort level, type of nipple, letting down effect, baby feeding techniques, such as rooting, latching, active sucking, and audible swallowing, all of which was found to be objective predictors of successful breastfeeding.<sup>[3]</sup>

\*Corresponding author: Farhin Islam CPMS College of Nursing, Guwahati-26, Assam, India Performing effective breastfeeding technique is important to establish breastfeeding, to ensure milk transfer and to prevent breastfeeding problems. [4]

#### **Objectives**

- 1. To assess the knowledge of rural mothers regarding breastfeeding techniques.
- 2. To assess the practice of rural mothers regarding breastfeeding techniques.
- 3. To associate the knowledge of rural mothers regarding breastfeeding techniques with selected demographic variables.
- 4. To associate the practice of rural mothers regarding breastfeeding techniques with selected demographic variables
- 5. To correlate the knowledge and practice among rural mothers regarding breastfeeding techniques.

#### REVIEW OF LITERATURE

Section A: Literature review related to prevalence of breastfeeding practices

**Gogoi I,** *et al.* (2015) <sup>[5]</sup> conducted a study on prevalence of exclusive breastfeeding in Dibrugarh Town and factors affecting the breastfeeding practice. The result was found that exclusive breastfeeding for 6 months was done only among

41% while 59% practiced mixed feeding or exclusive breastfeeding for various duration of time. Breastfeeding was initiated within 30–60 min of birth only in 71.4%. Prelacteal feed was given in 21%. The study concluded that there is a need to emphasize on breastfeeding practices among the mothers, as there are many wrong practices going on.

### Section B: Literature review related to breastfeeding practices

**Rokade HG, et al. (2012)** <sup>[6]</sup> conducted a study on breast feeding practices amongst Post natal mothers in Solapur city, Maharashtra. The results were out of total, 6% initiated breastfeeding within 1 hour, 37% mothers had given prelacteals, 22% mothers discarded colostrum, 55% babies received demand feeding. Breastfeeding feeding practices were appropriate in 64% of women.

# Section C: Literature review related to knowledge and practices of breastfeeding

Mohan C (2011) [7] conducted a study on assessment of knowledge regarding exclusive breast feeding among primi gravida and primi para mothers admitted in W&C Hospital, Kerala. The result revealed that most of the mothers (62.78%) had poor knowledge, 28.33% had average knowledge and 8.9% had good knowledge regarding exclusive breastfeeding. There was a significant association of knowledge score with religion, education, employment, monthly income and previous information.

# Section D: Literature review related to breastfeeding techniques

Rani U, et al. (2017) [8] conducted a study on knowledge and practice regarding techniques of breast feeding among primipara mothers in selected hospital of Delhi with a view to develop self-instructional module. The study revealed that 95% of the mothers were having average knowledge and 5% were having good knowledge. 55% mothers were having average practice, 40% mothers were having good practice and 5% are doing poor practice regarding breast feeding technique. Knowledge and practice regarding breastfeeding technique were not significantly associated with demographic variables.

#### RESEARCH METHODOLOGY

**Research Approach:** Quantitative Descriptive Research Approach

Research Design: Descriptive Survey Design

**Research Variables:** Knowledge and Practice of rural mothers

**Demographic Variables:** Age of mother, age of baby, education status of mother, religion of mother, occupational status of mother, type of family, economical status of the family, number of children, place of delivery, type of feed

Setting of the Study: Selected areas of Kamrup (R), Assam

**Target Population:** Rural mothers of breastfeeding babies of selected areas of Kamrup (R), Assam

Accessible Population: Rural mothers of breastfeeding babies below 2 years of Sowansah and Baralabari, Kamrup (R), Assam

Sample size: 100 rural mothers

*Sampling technique:* Non-probability Convenience Sampling Technique

*Tools:* Structured knowledge questionnaire and Observational checklist

#### RESULTS

#### Section I: Description of the Sample Characteristics

**Table 1** depicts the frequency and percentage distribution of the 100 rural mothers according to their demographic variables.

**Table 1** Frequency and distribution of rural mothers according to their demographic variables

n = 100

Demography				n=10
Below 18 years.   -		Demography	Frequency (f)	Percentage (%)
(b) 18-30 years. 81 919 19%  (c) Above 30 years. 19 19%  2. Age of the baby- (a) Below 6 months. 19 19%  (b) 6-12 months. 20 20%  (c) Above 12 months. 61 61 61%  3. Number of children she have- (a) 1. 52 52%  (b) 2. 43 43%  (c) More than 2. 5 5 5%  4. Educational qualification of the mother- (a) Illiterate. 3 3 3%  (b) Primary school 3 3 3%  certificate. (c) Middle school certificate. 17 17%  (d) High school certificate. 32 32%  (e) Higher secondary 34 34%  certificate. (f) Graduate and above. 11 11%  5. Occupational status of the mother- (a) Homemaker. 98 98%  (b) Daily wage earner (C) Cultivator (C) Cultivator (C) Cultivator (C) Cultivator	1.	Age of the mother-		
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8. Type of family- (a) Nuclear family. 38 38% (b) Joint family. 62 62% (c) Extended family 9. Place of delivery- (a) Home delivery (b) Institutional delivery. 100 100% 10. Type of feeding given to the baby- (a) Breastfeeding. 20 20% (b) Formula feeding (c) Breastfeeding along with 80 80%				
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(b) Joint family. 62 62% (c) Extended family 9. Place of delivery- (a) Home delivery (b) Institutional delivery. 100 100% 10. Type of feeding given to the baby- (a) Breastfeeding. 20 20% (b) Formula feeding (c) Breastfeeding along with 80 80%			38	38%
(c) Extended family				
9. Place of delivery- (a) Home delivery (b) Institutional delivery. 100 100% 10. Type of feeding given to the baby- (a) Breastfeeding. 20 20% (b) Formula feeding (c) Breastfeeding along with 80 80%			-	-
(a) Home delivery (b) Institutional delivery. 100 100%  10. Type of feeding given to the baby- (a) Breastfeeding. 20 20% (b) Formula feeding (c) Breastfeeding along with 80 80%			-	<del>-</del>
(b) Institutional delivery. 100 100%  10. Type of feeding given to the baby- (a) Breastfeeding. 20 20% (b) Formula feeding			=	_
10. Type of feeding given to the baby-  (a) Breastfeeding. 20 20%  (b) Formula feeding  (c) Breastfeeding along with 80 80%			100	100%
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(a) Breastfeeding. 20 20% (b) Formula feeding (c) Breastfeeding along with 80 80%				
(b) Formula feeding (c) Breastfeeding along with 80 80%	(a)		20	20%
(c) Breastfeeding along with 80 80%				
( )			80	80%
	(-)	2 2	-	

### Section II: Overall Analysis of Knowledge of Rural Mothers on Breastfeeding Technique

**Figure 1** demonstrates the knowledge score of the rural mothers regarding techniques of breastfeeding. Majority of the mothers 64% had moderate knowledge, 19% had inadequate knowledge and only 17% had adequate knowledge respectively.

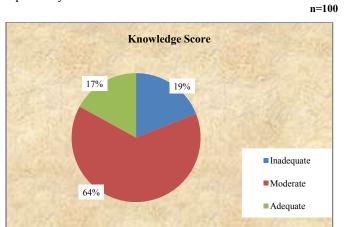


Figure 1 Pie diagram representation of percentage distribution of knowledge score of the rural mothers regarding techniques of breastfeeding

## Section III: Overall Analysis of Practice of Rural Mothers on Breastfeeding Technique

**Figure 2** illustrates the practice score of the rural mothers regarding techniques of breastfeeding. Majority of the mothers 76% had moderate practice, 16% had adequate practice and only 8% had inadequate practice respectively.

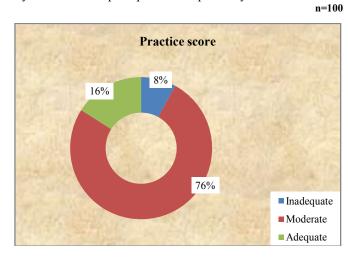


Figure 2 Doughnut diagram representation of percentage distribution of practice score of the rural mothers regarding techniques of breastfeeding

## Section IV- Association between Knowledge Score and Selected Demographic Variables

**Table 2** glimpses the association between knowledge of mothers with selected demographic variables. It reveals that there is no significant association between the demographic variables such as age of the mother, age of the baby, number of children she have, occupational status of the mother, family monthly income, type of delivery and type of feeding given to the baby with knowledge. However, there is significant association between the demographic variable i.e., educational qualification of the mother with knowledge because the

obtained chi-square ( $\chi^2$ ) value is greater than the table value at 0.05 level of significance.

**Table 2** Association between knowledge of mothers with selected demographic variables

n = 100

							111-	=100
D	emographic variables		el of knowle		df	$\chi^2$	P-value	Result
		Inadequat	e Moderate	Adequate		Λ.		
1.	Age of the mother-	17	50	1.4	_	1.25	0.616	NG
(a)	18-30 years.	17	50	14	2	1.25	0.616	NS
(b)	Above 30 years.	2	14	3				
2. (a)	Age of the baby- Below 6 months.	4	12	3				
(a) (b)	6-12 months.	4	13	3	4	0.19	0.999	NS
(c)	Above 12 months.	11	39	11				
3.	No. of children she	11	39	11				
٥.	have-							
(a)	1.	10	34	8	4	1.628	0.894	NS
(b)	2.	8	26	9				- 1
(c)	More than 2.	1	4	0				
4.	Educational							
	qualification of							
	mother-							
(a)	Illiterate.	2	1	0				
(b)	Primary school	2	1	0				
	certificate.				10	18 96	0.038	S
(c)	Middle school	6	9	2	10	10.70	0.050	5
	certificate.							
(d)	High school certificate.	7	20	5				
(e)	Higher secondary	2	25	7				
(0	certificate.	0	0					
(f)	Graduate and above.	0	8	3				
5.	Occupational status of mother-							
(a)	Homemaker.	19	62	17	2	1.148	0.999	NS
(a) (b)	Service.	0	2	0				
6.	Religion of the	U	2	U				
0.	mother-							
(a)	Hindu.	5	9	2	2	1.190	0.449	NS
(b)	Muslim.	14	55	15				
7.	Monthly family							
	income-							
(a)	$\leq$ Rs. 3,907.	0	2	2				
(b)	Rs. 3,908-11,707.	11	25	44				
(c)	Rs. 11,708-19,515.	7	22	33	12	12.87	0.441	NS
(d)	Rs, 19,516-29,199.	0	9	12				
(e)	Rs. 29,200-39,032	0	1	3				
(f)	Rs. 39,033-78,062	1	4	5				
(g)	≥ Rs. 78,063	0	1	1				
8.Ty	pe of family-							
(a)	Nuclear family.	5	27	6	2	1.630	0.478	NS
(b)	Joint family.	14	37	11				
9.Ty	pe of feeding given to							
(-)	baby-	4	12	2	2	0.077	0.000	NC
	Breastfeeding.	4	13	3	2	0.076	0.999	NS
(b)	Breastfeeding along with	15	51	14				
	weaning.							

p<0.05 level of significance

NS- Not significant, S- Significant

### Section V- Association between Practice Score and Selected Demographic Variables

**Table 3** glimpses the association between practice of mothers with selected demographic variables. It reveals that there is no significant association between the selected demographic variables with practice.

**Table 3** Association between practice of mothers with selected demographic variables

		T 10 (*		10	,		n
Demographic variables	Inadequate	Level of practice Moderate	Adequate	df	$\chi^2$	P-value	Result
Age of the mother-	maucquate	Moderate	Aucquate				
(a) 18-30 years.	6	61	14	2	0.653	0.668	NS
(b) Above 30 years.	2	15	2				
2. Age of the baby-	_		=				
(a) Below 6 months.	3	15	1				3.70
(b) 6-12 months.	1	14	5	4	4.337	0.361	NS
c) Above 12 months.	4	47	10				
3. No. of children she have-	•	• •	- 4				
(a) 1.	5	39	8				
b)2.	3	32	8	4	2.020	0.909	NS
c) More than 2.	0	5	Ö				
4. Educational qualification of mother-	v	, ,	Ŭ				
a) Illiterate.	1	1	3				
b) Primary school certificate.	0	3	3				
c) Middle school certificate.	4	10	17	10	15.02	0.106	NS
d) High school certificate.	3	24	32	10	15.02	0.100	110
e) Higher secondary certificate.	0	28	34				
f) Graduate and above.	0	10	11				
5. Occupational status of mother-	O .	10	11				
a) Homemaker.	8	74	16	2	0.644	0.999	NS
b) Service.	0	2	0	2	0.044	0.999	110
6. Religion of the mother-	U	2	U				
a) Hindu.	0	13	3	2	1.683	0.578	NS
b) Muslim.	8	63	13	2	1.003	0.576	110
7. Monthly family income-	o	03	13				
(a) ≤ Rs. 3,907.	0	2	0				
a) ≤ Rs. 3,907. b) Rs. 3,908-11,707.	3	34	7				
c) Rs. 11,708-19,515.		25	7				
(d) Rs, 19,516-29,199.	3	8	1	12	9.592	0.597	NS
(e) Rs. 29,200-39,032	0	3	0				
f) Rs. 39,033-78,062	1	3	1				
	0	3 1	0				
(g) ≥ Rs. 78,063	U	1	U				
3. Type of family-	2	26	0	2	2.726	0.202	NC
a) Nuclear family.	3 5	26 50	9 7	2	2.726	0.283	NS
b) Joint family.	5	50	/				
O.Type of feeding given to baby-	2	17	,	2	2.475	0.155	NG
a) Breastfeeding.	3	16	1	2	3.475	0.155	NS
(b)Breastfeeding along with weaning.	5	60	15				

p<0.05 level of significance NS- Not significant

#### Section VI- Correlation between Knowledge and Practice of the Mothers Regarding Breastfeeding Techniques

**Table 4** gives a quick look at the correlation between the knowledge and practice score among rural mothers regarding breastfeeding techniques. It is found that there was significant positive relationship between knowledge score and practice score of the mothers at p<0.05 level of significance.

**Table 4** Correlation between the knowledge and practice score among rural mothers regarding breastfeeding techniques

n=100

Variable	Mean	SD	Karl Pearson (r)	P-value	
Knowledge Score	19.99	2.82	0.213*	0.034	
Practice Score	13.65	0.99	0.213	0.034	

<sup>\*</sup>Significant at P<0.05

#### **CONCLUSION**

From the findings, it can be concluded that majority of mothers (64%) had moderately adequate knowledge and 17% had adequate knowledge regarding breastfeeding techniques. Majority (76%) had moderately adequate practice and 16% had adequate practice regarding breastfeeding techniques. There is a significant association found between the demographic variable i.e., educational qualification of the mother with knowledge. There is a no significant association found between the demographic variables with practice. There is a significant positive correlation between knowledge and practice scores of the mothers at p<0.05 level of significance.

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