

Knowledge, Attitude and Practices of women about Early Initiation of Breast Feeding



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1.ABSTRACT

Background: Breastfeeding is essential for a baby's nourishment and development. It is the most effective way to reduce infant mortality around the world. **Aim:** This study aimed to assess knowledge, attitude and practices of women about early initiation of breastfeeding. **Study design:** A descriptive cross sectional research design. **Setting:** Study was conducted at Antenatal clinic in Obstetrics and Gynecology Center and labour and delivery unit at Mansoura University Hospitals. **Subjects:** A purposive sample of 114 women who are attending for previous predetermined setting. **Tools:** Two tools were used; structured interview questionnaire and Likert rating scale to assess women's attitude about early initiation of breastfeeding. **Results:** However 100% of women know that breastfeeding is important and the most of them know the colostrum, only less than half had fair level about early initiation of breastfeeding and (31.6%) had poor level and only (21.9%) had good level of information. Less than half of mothers practice exclusive breastfeeding until six months. Approximately two thirds of the studied women had adequate level of early breastfeeding practices, the majority of the studied women had satisfactory level related overall attitude about early initiation of breastfeeding. **Conclusion:** The finding showed that a statistically significant positive relationship between knowledge, attitudes and practices of the studied women and early initiation of breastfeeding. Also there was a statistically significant difference between mode of delivery of the studied women and total levels of early breastfeeding practices. **Recommendation:** Improving the knowledge and practice of initiation of breastfeeding and colostrum is recommended by counseling women regarding breastfeeding during ANC visit.

Keywords: Attitude, Breast Feeding, Early Initiation, Knowledge, Practices.

2.Introduction:

Giving breast milk within the first hour of life is known as early initiation of breastfeeding (EIBF), and it is advocated as a simple method to improve the health of babies. The World Health Organization recommends starting nursing within one hour of birth and breastfeeding exclusively for the first six months. In addition **American Academy of Pediatrics** endorses that babies start breastfeeding within the first hour after birth, and continue breastfeeding according to the needs of the baby. The duration of each breastfeeding is usually 10 to 15 minutes (**American Academy of Pediatrics (AAP), 2018** , (**WHO, 2018**).

Breastfeeding at an early age has a variety of health benefits for both the mother and the infant. It includes lowering the number of children under the age of five who die; breastfeeding can also reduce the risk of respiratory infections and diarrhea (**Victora et al., 2016**). Other benefits include reducing the risk of asthma, food allergies, and type 1 diabetes, Breastfeeding can also help with cognitive development and lower the risk of adult obesity. (**Lawrence & Lawrence, 2018**).

Colostrum is the first milk produced by the mammary glands of mammals in the later stages of pregnancy and continuing into the early stages of breastfeeding. There are many obstacles that prevent colostrum from being fed to babies. The mother's obstacles include the mother's ignorance of the importance of starting breastfeeding as early as possible and the benefits of colostrum feeding. Some mothers dislike the color of colostrum and believe it is a harmful substance that should be avoided (**Behzadifar et al., 2019**).

Despite the many benefits of breastfeeding, breastfeeding is contraindicated in many cases. It is very important to understand these conditions. Contraindications to breastfeeding are those that may endanger the health of the baby and are harmful to the baby, if their mother's breast milk is consumed for galactosemia, the mother has human immunodeficiency virus (**HIV**) or antiviral therapy, untreated Active tuberculosis, human T-lymphophilic virus 1 or II, use of illegal drugs, and mothers receiving chemotherapy or radiotherapy (**Pimentel, Pissarra, Rocha & Guimarães, 2021**).

Breastfeeding during pregnancy can cause maternal malnutrition, reduced fetal growth, premature delivery, spontaneous abortion (Stanescu et al., 2019).

Significance of the study

Breastfeeding should be started as soon as possible after birth. This is a high-impact strategy that gives neonates a better chance of survival. Though the breast feeding practices are well known to mothers but the necessity of early initiation of breastfeeding is still poorly understood, they did not have enough knowledge about the appropriate timing for breastfeeding and colostrum feeding (Sen, Mallick & Bari, 2020). Despite world health organization recommendations on early initiation of breastfeeding, worldwide only 45% of women initiate breastfeeding within the first hour after birth, only globally about 38% of infants are exclusively breastfeeding during their first six months of life and 32% continue to be breastfed for the first two years of life (WHO, 2018).

Aim of the study:

Assess knowledge, attitude and practices of women about early initiation of breast feeding.

Research questions: What are knowledge, attitude and practices of women about early initiation of breast feeding?

3. Methodology:

A descriptive research design was used to achieve the aim of the study.

Setting:

The study was conducted at antenatal clinic in the Obstetrics and Gynecology Center to assess only knowledge and attitude of pregnant women regarding breastfeeding and labour and Delivery Unit of Mansoura University Hospital to assess practice of early post-partum women regarding breastfeeding.

Study Sample:

A purposive sample of 114 women in previously mentioned setting and fulfilling the following criteria.

Inclusion criteria: pregnant women at any age, early post-partum women not yet discharged from hospital. Healthy newborn babies (free from congenital anomalies in the mouth and willing to participate in the study

Tools of data collection

Tool I: Structured Interview Questionnaire: three parts

Part 1. Socio demographic data as age and level of education.

Part2. Knowledge about early initiation of breast feeding as sources of information about early initiation of breast feeding (Health worker, family/relatives/friends, media), and time of reception of information (In antenatal follow up, at the time of current delivery, during previous delivery). The total knowledge is categorized as poor knowledge (<50%), fair knowledge (50-65%) or good knowledge (>65%) (Getnet, 2021).

Part 3. Practices of early initiation of breast feeding as time of breast feeding initiation after delivery and giving colostrum, pre-lacteal feeds, post-lacteal feeds, skin-to-skin contact, and rooming-in. The total practice score is dichotomized into adequate (>65% of the total score) or inadequate (<65% of the total score) (Getnet, 2021).

Tool II: Likert rating scale:

To assess women's attitude about early initiation of breastfeeding. This covered views on the use of pre- and post-lacteals, breastfeeding initiation, and colostrum feeding. The total attitude level is dichotomized into Positive attitude (>65% of the total score) or negative attitude (<65% of the total score).

Validity of tools: revised by a panel of five experts in the field of maternity nursing to evaluate the clarity and applicability of the tools that were used in the study for data collection

Reliability: was tested by using cronbach's alpha test in statistical package for Social Science (SPSS) version 20, the cronbach's alpha value for knowledge about early initiation of breastfeeding was 0.927, breastfeeding technique was 0.863, for breastfeeding practices was 0.907, for early initiation of breastfeeding attitude was 0.903 this means good reliability of the tool

Ethical considerations

An ethical approval was obtained from the Research Ethics Committee of the Faculty of Nursing, Mansoura University to carry out the study. Participants will be informed that participation in the study is voluntary and they have the right to withdraw at any time freely without any responsibilities.

Pilot study: was conducted on 10% (12 women) of the total sample to evaluate the clarity

and applicability of the tools that were used in the study for data collection

Fieldwork:

A written approval to conduct the study was obtained from director of Mansoura University Hospitals, Obstetrics and Gynecology Center–Mansoura University; head of woman's health and midwifery nursing department and from the Research Ethics Committee of the Faculty of Nursing, Mansoura University to conduct the study.

The researcher attended to labor and delivery unit from 9 A.m. to 5 P.m. three days a week to assess women's knowledge, attitude and practices regarding early initiation of breastfeeding during early postpartum period, and also attended the antenatal clinic at Obstetrics and Gynecology Center–Mansoura University from 9 am to 2 pm two days a week to assess knowledge and attitude of pregnant women at third trimester.

The researcher interviewed each pregnant woman individually in private setting to collect Socio-demographic data and filled knowledge questionnaire about early initiation of breastfeeding by asking questions and recording the answers. After that, the researcher assessed attitude of pregnant women toward early initiation of breastfeeding. The duration of interview last about 15 to 30 minutes. The researcher attended to labor and delivery unit until the sample number completed.

Statistical analysis of data:

SPSS for Windows version 20.0 was used for all statistical analyses (SPSS, Chicago, IL). Prior to any calculations, the data were checked for normality of distribution. All variables with continuous data showed normal distribution and were expressed in mean \pm standard deviation (SD). Categorical data were expressed in number and percentage. The comparisons were determined using Student's t test for variables with continuous data. Chi-square test was used for comparison of variables with categorical data. Correlation coefficient test was used to test the correlation between two variables with continuous data. Statistical significance was set at $p < 0.05$.

4. Results:

Table (1) shows that the mean age of the studied women was (27.0 \pm 6.3) years; the highest percentage of them (45.6%) was aged from 20 to 30 years. About two fifths (39.5%) had middle education. More than three quarters (78.1%) were unemployed, more than half (56.1% &55.3) of them had not enough family income and lived in urban areas respectively.

Figure (1) shows that slightly less than half of the studied women (46.5%) had fair level of knowledge about early initiation of breastfeeding, whereas poor and good levels of knowledge about early initiation of breastfeeding were 31.6% and 21.9 % respectively.

Table (2) shows that approximately three fifths of the studied women (59.6%) had adequate level of early breastfeeding practices, whereas 40.4 % of them had inadequate level. Baby not feed anything before initiating breastfeeding was the highest early breastfeeding practice that was done correctly by the studied women (93.9%), followed by giving colostrum (78.1%), and not using bottle feeding (74.6%). But the most was not skin-to-skin contact with the baby (94.7%), approximately three quarters of mothers (73.7%) give a pacifier to their babies.

Figure (2) shows that the majority of the studied women (81.6%) had positive attitude about early initiation of breastfeeding, and only (18.4%) had negative attitude.

Table (3) shows that levels of breast feeding practices had statistically significant relationship with the studied women's' attitude levels about early initiation of breastfeeding.

Figure (3) shows that there was statistically significant positive relationship between knowledge of the studied women about early initiation of breastfeeding and their early breastfeeding practices ($r=0.196/ p=0.037$).

Figure (4) shows that there was statistically significant positive relationship between knowledge and attitude of the studied women about early initiation of breastfeeding ($r=0.270/ p=0.004$).

Table (1) The socio-demographic characteristics of the studied women

Items	n (114)	%
Age (years)		
<20	23	20.2
20-30	52	45.6
>30	39	34.2
Mean ±SD	27.0 ±6.3	
Level of education		
Illiterate	9	7.9
Read and write	22	19.3
Middle education	45	39.5
University	38	33.3
Employment status		
Employed	25	21.9
Unemployed	89	78.1
Family Income		
Not enough	64	56.1
Enough	38	33.3
Enough and save	12	10.5
Residency		
Rural	51	44.7
Urban	63	55.3

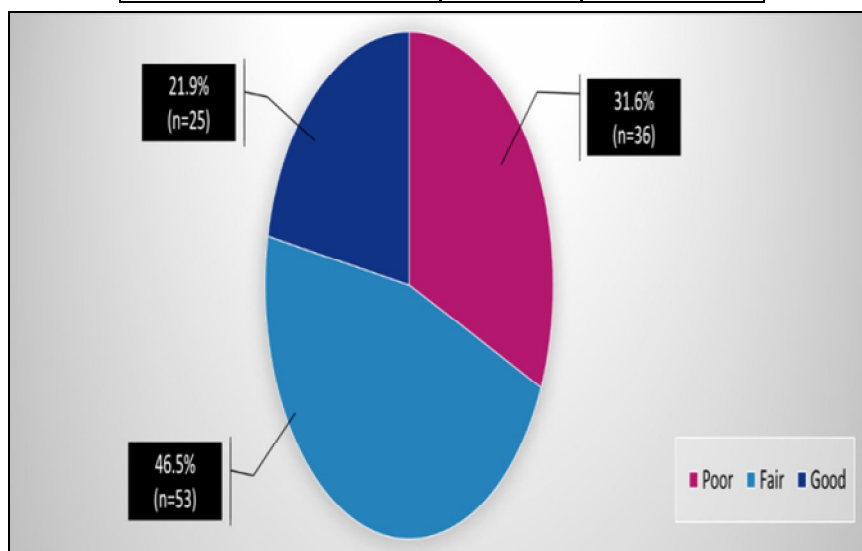


Figure (1) Number and percentage of total knowledge about early initiation of breastfeeding among the studied women.

Table (2) Number and percentage of women regarding breastfeeding practices

Items	Yes		No	
	N	%	N	%
Starting breastfeeding immediately after birth.	75	65.8	39	34.2
Breastfeeding initiated easily.	73	64.0	41	36.0
Colostrum given.	89	78.1	25	21.9
Baby not feed anything before initiating Breastfeeding	107	93.9	7	6.1
Skin-to-skin contact with the baby	6	5.3	108	94.7
Baby staying in the room/bed/near mother's bed after birth (rooming in).	80	70.2	34	29.8
The baby usually feed from both breasts at each feeding.	66	57.9	48	42.1
No bottle feeding to feed the baby	85	74.6	29	25.4
No pacifier given.	30	26.3	84	73.7
Total practice score				
Adequate (≥ 75.0)	68	59.6		
Inadequate ($< 75.0\%$)	46	40.4		
Mean \pmSD	5.4 \pm1.7			

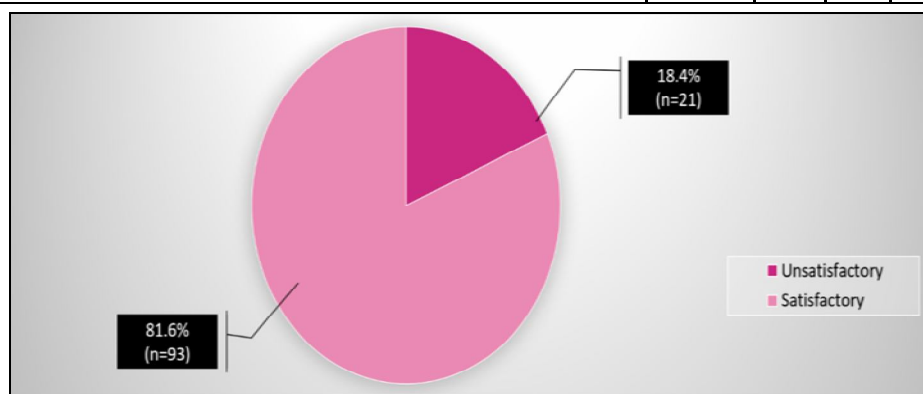
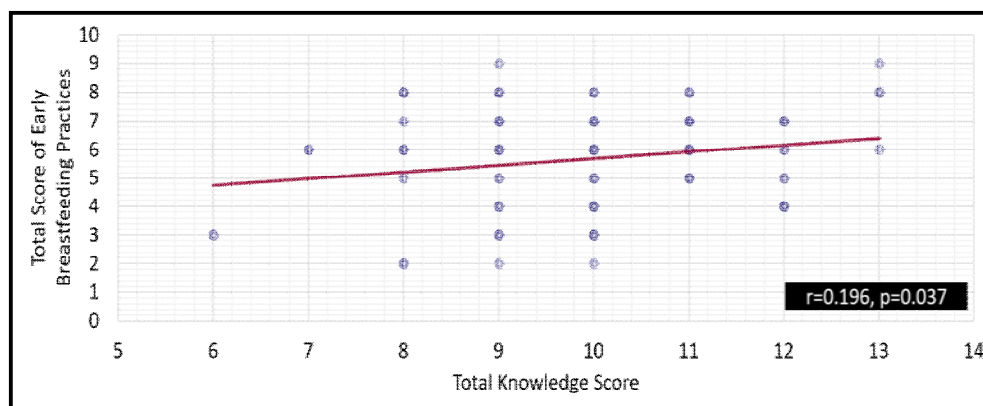


Figure (2) Number and percentage of women's attitude about early initiation of breastfeeding

Table (3) Relation of the total early breastfeeding practices score with attitude about early initiation of breastfeeding score among the studied women

Total score of attitude about early initiation of breastfeeding	Total score of early breastfeeding practices				Chi square test	
	Adequate (n=75)		Inadequate (n=39)			
	N	%	N	%	X ²	P
Negative	25	33.3	21	53.8		
Positive	50	67.7	18	46.2	4.486	0.034



Figure(3)Correlation between the total knowledge about early initiation of breastfeeding score and the total score of early breastfeeding practices among the studied women.



Figure (4) Correlation between the total knowledge about early initiation of breastfeeding score and the total score of attitude about early initiation of breastfeeding among the studied women

5. Discussion:

Regarding to the socio-demographic characteristics of the studied women, the study showed that half of studied women ranges from 20-30 years old, with mean \pm SD of age (27.0 \pm 6.3), the highest percentage of them had middle education. Slightly more than three quarters were unemployed. This finding is in agreement with (Kassa, 2021).

The results of the present study reflected that less than half percent of studied women had a fair level of knowledge about early initiation of breastfeeding, this result was in the same line with (Tongun et al., 2018), who showed that approximately about half percent of participants had fair knowledge about early initiation of breastfeeding.

Regarding breastfeeding attitude, the current study showed that the majority of the studied women had satisfactory level related overall attitude about early initiation of breastfeeding. This results was in disagreement with (Feleke et al., 2020), who reported that the attitude of breastfeeding mothers toward early initiation of breastfeeding was unsatisfactory and lower when compared with knowledge and practice of mother for that study, the mothers discard first milk due to faulty thoughts about colostrum.

The study revealed that slightly more than two thirds of the mothers complied with the WHO recommendations of starting breastfeeding immediately after birth, this figure was lower than that reported in in Moshi municipal, northern Tanzania, by (Lyellu et al., 2020), which reported that majority of sample starting breastfeeding immediately after birth.

Regarding correlation finding between knowledge and attitude of the studied women about early initiation of breastfeeding, the current study showed that there was statistically significant positive relationship between knowledge and

attitude. This result was in agreement with the findings of Boor, (2017), who reported that there was a relationship between knowledge and attitude which are statistical significant ($p < .05$).

Regarding correlation finding between attitude and early breastfeeding practices of the studied women about early initiation of breastfeeding, the current study showed that there was statistically significant positive relationship between attitude and early breastfeeding practices. Also the findings of Boor, (2017), was in agreement with the finding of the current study, which revealed that there was a significant difference between how women fed the baby in hospital and how they are fed at home, this will affect their attitudes and practices towards early breastfeeding. Since all the mothers had delivered in the hospital, there was a relationship between their attitudes and practices, also found that delivery settings had an influence on early initiation of breastfeeding.

6. Conclusion:

There were statistically significant positive relationship between knowledge, attitudes and practices of the studied women regarding early initiation of breastfeeding. Also there was a statistically significant difference between mode of delivery of the studied women and total levels of early breastfeeding practices.

7. Recommendation: Improving the knowledge and practice of breastfeeding initiation and colostrum is recommended by counseling women regarding breastfeeding during ANC visit.

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9. Conflict of interest

The authors have no conflict to declare

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