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Knowledge, Attitude and Practice Regarding Breast Feeding among Married Women of Private Universities of Lahore, Pakistan

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Abstract:

Breastfeeding is that activity which is considers as basic human need and activity. It is very important for mother and infant health. Exclusive breastfeeding is defined as mother providing breast milk to her baby with no formula diet. Breast milk is containing all essential nutrients which make the immunity system of babies strong.

Objective: The aim of my study was to assess the knowledge, attitude and practice regarding breastfeeding among married women of Private Universities of Lahore.

Material and methods: A descriptive cross-sectional study was conducted in university of Lahore and superior university of Lahore. Sample size is 307. Child bearing age "25 years to 45 years" of mothers have interviewed with the help of adopted questionnaire

Results: Result of this survey that 60% have women have a great knowledge regarding breast feeding benefits, 70% have a good attitude regarding breast feeding and 34% women in practice. By this survey we say that women of Universities have a great knowledge and attitude, their practice is limited it depend on the facilities available in Universities. There was significant association between qualification and knowledge of married women regarding breast-feeding p=0.05

Conclusion It was concluded from the study that knowledge of breastfeeding among women was high.108 mothers have high knowledge and 127 have low knowledge. So, it was also concluded that overall knowledge of mothers was good. Attitude and practices of mothers was also positive. It was also found that there is significant association between knowledge and qualification.

Keywords: Knowledge, attitude, practice, universities, married women and breastfeeding (BF)

1. Background of the Study

"Breastfeeding is that activity which is considers as basic human need and activity. It is very important for mother and infant health. Exclusive breastfeeding is defined as mother providing breast milk to her baby with no formula diet. Only vitamins, minerals and medication can be given to baby until 6 months of age. The supplements such as juice, water non-human milk cannot be given to baby until weaning start. (Organization, 2010).

Breast feeding is transfer from mother breast to her baby is a skill and act that is necessary for mother and infant life. Breast feeding creates a relation of affection between mother and children. It is first way of communication between child and his mother. Breast feeding has many benefits because of qualities against diseases. Breast milk contains all the nutrients which prevent from pollutants, drugs, allergens and viruses. Human milk composition varies from the other mammals. Breast milk composition is not remaining same, it differs according to lactation stage (Mbada et al., 2013).

The breast milk has divided into three types, exclusive breast feeding which is provided for 6 months, mixed breast feeding when infant take both breast milk and formula diet (also called weaning diet) and formula feeding. (Getnet, 2015)

The risk of mortality due to diarrhoea and gastroentritis can increase the chancesof death among infants who are not completely breastfed, these infants die due to infectious diseases. (Babakazo, Donnen, Akilimali, Ali, & Okitolonda, 2015)

Breast milk is containing all essential nutrients which make the immunity system of babies strong .(Agbo et al., 2013). Malnutrition has the caused the 60% to 10.9 million deaths among children under five years and two-third associated with inappropriately feeding practice during first year of life.(Al-Binali, 2012a)

The feeding practices which affect the nutritional status of infants and children under 2 years of age are very important to be noticed among married women. Because it affects child survival. It has been noticed across the world that more than nine million Childs under 5 years of age die each year.(Infant, 2010).One in every 17 Ethiopian children die before 1st birthday, one in 11 die before 5th birthday.(Demographic, 2012)

More than 66% of these deaths are related with poor breast-feeding practices and happen in the 1styear of life. Ideal breastfeeding (early and exclusive breastfeeding) has power to prevent from diseases and also 800,000 deaths (13 % of all deaths) in youngsters under 5years of age. (Infant, 2010).Poor practices and attitude toward breastfeeding have been accounted for to be among the major reasons behind dangerous disease and malnutrition.

Due to migration to urban areas and maternal employment, breast feeding is declined all over the world in recent years. The studies conducted in India also showed that the breastfeeding has declined due to maternal employment. (National, 2005). On the other hand, the negative attitudes of women toward breast feeding are considered a major challenge to maintain the child health. Because if mothers will show no interest in their behavior, their children will suffer. (Dungy, McInnes, Tappin, Wallis, & Oprescu, 2008)

Those women who were highly educated and have well income, they were not breastfed their babies properly. Similarly, it was also found in those mothers who were employed and delivered their babies through caesarian section were less likely breastfed. Lack of knowledge, the behavior which is not supporting of women and minimal prenatal encouragement among women are those factors which are the barriers of poor health of babies under 5 years of age. (Dungy et al., 2008)

Breast feeding also reduce the risk of diabetic type II and less the risk of breast and ovarian cancer in mothers. The researchers found that for every 12 months of breastfeeding minimize the risk of breast cancer 4.3% and 7% for each birth. Particularly these studies ended that the women had 21% less chances of ovarian cancer who breastfeed than the mothers who never breastfed.(Al-Binali, 2012a)

The women, who work outside from home, minimize the rate of breast feeding. Early breast feeding within one hour after delivery less the 22% death rate and inhibit the neonatal mortality rate all over the world (Al-Binali, 2012b).

1.1. Significance of the Study

This study is important for working women in universities who have problems to feed their babies in their institution because knowledge of breast feeding makes healthier mother and babies. In addition, this study describes the knowledge, attitudes, and practice regarding breastfeeding. This study is vital because it support the mothers to decide breastfeeding as suitable feeding methods for their infants. The study conducted about knowledge and practice regarding breastfeeding in universities because teachers are dependent on the facilities available in their institutions. Employers or manager can solve the problem of lactating teachers and student who feed their children.

1.2. Research Question

What is the level of knowledge, attitude and practice regarding breastfeeding among married women of private universities?

1.3. Purpose

To assess the knowledge, attitude and practice regarding breast feeding among the married women of private Universities (University of Lahore and Superior University).

2. Material and Method

The study design was cross sectional that permit the researcher to conclude tendency regarding breastfeeding and other trial characters. Cross-sectional study base on the primary data collection procedure. The target population was married women of university of Lahore and Superior University. Sample size was 307 married women of two Universities University of Lahore and Superior University were included in the study. Simple random Sampling was used to collect the data from participants. The questioner was consisting of 40 questions. The questioner was on five type Likert scale ranging from "strongly agree, agree, neutral, disagree, strongly disagree" related knowledge attitude and practice regarding breast feeding. Nine questions about knowledge, sixteen questions about attitude and fourteen about practice. The data was analyzed on SPSS 20 version. The question of knowledge and attitude has adopted. (Velpuri, 2004)

The married women in child bearing age "25 years to 45 years" of private universities, whose are show willingness and give consent were included and all those participants excluded who were unmarried, not in child bearing age and those who haven't show willingness and not give consent.

The study was conducted in the university of Lahore and superior university Lahore. After taking a permission letter from institutional review board committee of both universities. The rules and regulations of universities were not being violated. Each member who was participant in this study was deal in respective way. All information was being kept confidential.

3. Results

3.1. Demographic Analysis

The data was collected from 307 participants by using the simple random sampling. The demographic data of participants was summarized in Table 5 (N=307). Result showed that 34.20% (n=105) participants have the age of 25 to 30 years. 36.4% (n=112) participants have the age of 31 to 35 years and 26.1% (n=80) participants were in age of 36 to 40 years. About 3.3% (n=10) have age

of 41 to 45 years. There were 47 respondents 15% who have Bachelor degree. 221 respondents have 70.6% Masters and 5.9% (n=18) have qualification of M. Phil and remaining 27 respondents 8.6% have PHD degree. There were 47.6% (n=149) respondents who have 1-2 children, 39.3% (n=123) respondents have 3 - 4 children, 10.5% (n=33) respondents have 5 - 6 children and 2.6% (n=8) respondents have more than 6 children.

| | N | % |
|---------------|-----|------|
| Age | 307 | 100 |
| 25-30 | 105 | 34.2 |
| 31-35 | 112 | 36.5 |
| 36-40 | 80 | 26.1 |
| 41-45 | 10 | 3.3 |
| Qualification | 307 | 100 |
| B.A/BSc | 46 | 15.0 |
| M.A/MSc | 217 | 70.7 |
| M.PHILL | 18 | 5.9 |
| PHD | 26 | 8.5 |
| Children | 307 | 100 |
| 1-2 | 145 | 47.2 |
| 3-4 | 122 | 39.7 |
| 5-6 | 32 | 10.4 |
| More than 6 | 8 | 2.6 |

Table 1: Demographic Characteristics of Respondents

3.2. Description of Knowledge

Results showed that 43% (n=132) participants said that time duration for breast feeding is less than twelve months but 49% (n=15) participants said that it is not. Remaining participants have not knowledge about it. The mostly participant have lack knowledge about it. Shows that 26% (n=81) participants replied that major businesses support to breast feeding but 58% (n=177) participants said that it is not supported to breast feeding. 13% (n=40) participants were unaware about it. The mostly people said that their business does not support them for breast feeding. It showed that mostly participant 61% of this research have knowledge about infant formula contain all ingredients which are found in humans' milk. 30% participants said that it is equal to human milk but some participants did not knowledge about it. Shows that 34% (n=104) participants were strongly disagree that women should not work outside the home, 30% (n=94) participants were disagree and 10% (n=31) were neutral. 50% (n=50) were agree and 9% (n=28) were strongly agree women should not work outside the home who want to breast feed. Mostly participant was agreed that women should not work outside the home who breast feed their children. Shows that 13% (n=40) participants are strongly disagree, 20% (n=62) were disagree to provide additional brake for breast feeding their children. 16% (n=49) were neutral. 30% (n=92) were agree and 20% (n=64) participants were agree to provide additional brake for breast feeding to their children. Results showed that 23% (n=69) participants strongly disagree that their babies were born premature, 39% (n=121) were disagree and 20% (n=62) were neutral. 5% (n=15) were agree and 13% (n=40) participants were strongly agree that their babies were premature. It showed that 34% (n=106) mostly participants come back to their work after 4 months of breast feeding it is least for infant according to who 12% (n=38) participants are strongly disagree, 24% (n=73) participants were disagree and 22% (n=68) participants were neutral to return for work before their babies were 4 monthsold. 34% (n=106) were agree and 7% (n=22) participants were strongly agree to return for work before their babies were 4month-old.

| Variable | True | False | Don't | SD | Mean |
|---|-------|-------|-------|------|-------|
| | % | % | Know | | |
| | | | % | | |
| According to World Health Organization, the optimal duration for breastfeeding an infant is a | 23.6% | 51.8% | 4.6% | .75% | 1.61% |
| minimum of twelve months. | | | | | |
| Major businesses in the country actively support breastfeeding or expression of breast milk in the | 27.4 | 60.6 | 12.1 | .610 | 1.85 |
| workplace. | | | | | |
| Infant formula contains all ingredients found in human breast milk. | 31.3 | 60.6 | 8.1 | .585 | 1.77 |
| A petite (small and thin) mother cannot produce an adequate quantity of breast milk for her infant. | 49.5 | 46.9 | 3.6 | .567 | 1.54 |
| Infants consuming breast milk have less ear infections than infants consuming formula. | 49.8 | 35 | 14.3 | .719 | 1.64 |
| Infants should consume either human breast milk or formula but not both concurrently. | 45.6 | 45.6 | 8.8 | .640 | 1.65 |
| Immune systems of breast-fed infants are more developed than immune systems of formula-fed | 72.6 | 16.6 | 10.7 | .673 | 1.38 |
| infants. | | | | | |
| Employers who have had female employees who breast-fed in the workplace are most supportive | 42.7 | 41.0 | 16.3 | .722 | 1.74 |
| of breastfeeding at work. | | | | | |
| On-site childcare is necessary at a mother's place of employment if the mother desires to | 55.7 | 26.7 | 17.6 | .768 | 1.62 |
| breastfeed while working. | | | | | |

Table 2: Items related knowledge of breast feeding

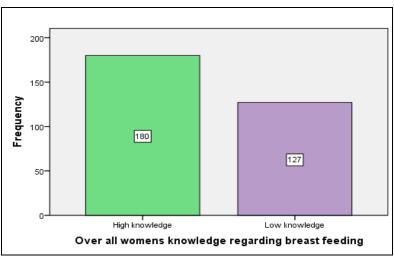


Figure 1

Key Related Likert scale:

| Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree | Mean +SD |
|--------------------------|----------|---------|-------|----------------|----------|
| 1 | 2 | 3 | 4 | 5 | |

| Variable | | D | N | A | S A | SD | Mean |
|--|------|--------|-------|------|------|-------|------|
| | 1 | 2 | 3 | 4 | 5 | | |
| Women who want to breastfeed their infants should not work outside the home. | 33.9 | 30.6 | 10.11 | 16.3 | 9.1 | 1.337 | 2.36 |
| Female bosses are more supportive of breastfeeding or expressing breast milk | 11.1 | 36.5 | 12.7 | 34.4 | 5.2 | 1.161 | 2.86 |
| in the workplace than are male bosses. | | | | | | | |
| Women who breastfeed their infant should be allowed longer maternity leaves | 9.4 | 38.1 | 15 | 34.9 | 2.6 | 1.089 | 2.83 |
| than women who do not breastfeed their infants. | | | | | | | |
| It is acceptable for women to breastfeed their infants or express their breast | 10.7 | 41.7 | 15.6 | 24.4 | 7.5 | 1.157 | 2.76 |
| milk during working hours. | | | | | | | |
| Breastfeeding or expressing breast milk in the workplace will interfere with | 10.7 | 26.1 | 24.4 | 36.2 | 2.6 | 1.075 | 2.95 |
| work productivity. | | | | | | | |
| The public image of a business will be negative if women employees are | 13.4 | 23.5 | 16.9 | 39.7 | 6.5 | 1.196 | 3.03 |
| allowed to breastfeed or express breast milk at work. | | | | | | | |
| Women who breastfeed or express breast milk at work should be provided with | 15 | 29.6 | 16.9 | 36.6 | 36.5 | 1.225 | 2.87 |
| additional break to do so. | | | | | | | |
| Employers should provide private areas at work in which women can | 6.2 | 26\5.1 | 18.6 | 34.5 | 15.6 | 1.341 | 3.25 |
| breastfeed their babies or express their breast milk. | | | | | | | |
| Women will return to work sooner after giving birth if they are allowed to | 16.3 | 24.4 | 21.2 | 31.6 | 6.5 | 1.209 | 2.88 |
| breastfeed their babies or express breast milk at work. | | | | | | | |
| Women should not breastfeed or express breast milk at work because it would | 17.6 | 23.1 | 10.1 | 37.1 | 12.1 | 1.339 | 3.03 |
| be embarrassing to coworkers. | | | | | | | |
| Women should not breastfeed or express breast milk at work because it is | 14.7 | 22.5 | 27.7 | 21.8 | 13.4 | 1.252 | 2.97 |
| unattractive. | | | | | | | |
| A woman who breastfeeds or expresses breast milk at work should not be paid | 19.9 | 22.1 | 22.8 | 19.2 | 16.0 | 1.357 | 2.89 |
| for the time spent breastfeeding or expressing breast milk. | | | | | | | |
| Employers should support women who want to breastfeed or express breast | 6.2 | 25.1 | 18.6 | 34.5 | 15.6 | 1.180 | 3.28 |
| milk at work. | | | | | | | |
| Absenteeism will decrease in women allowed to breastfeed or express breast | 12.1 | 14.3 | 21.8 | 45.3 | 6.5 | 1.153 | 3.23 |
| milk at work. | | | | | | | |
| Allowing women to breastfeed or express breast milk in the workplace will | 12.1 | 14.3 | 21.8 | 45.3 | 6.5 | 1.142 | 3.20 |
| increase the incidence of other women doing so at work. | | | | | | | |
| Female employees will be more loyal to a company that allows breastfeeding | 15.3 | 16.9 | 20.8 | 36.5 | 10.4 | 1.249 | 3.10 |
| or expressing breast milk in the workplace. | | | | | | | |

Table 3: Questions related attitude of breast feeding

| Variable | SD | D | N | A | SA | SD | Mean |
|---|------|------|------|------|------|-------|------|
| Go to antenatal clinic less than 3 times during period of pregnancy. | 26.7 | 22.1 | 16.9 | 26.7 | 7.5 | 1.322 | 2.66 |
| The weight of baby at birth less than 2500 grams. | 16.0 | 29.3 | 16.3 | 30.6 | 7.8 | 1.238 | 2.85 |
| The baby was born prematurely | 22.5 | 29.4 | 20.2 | 4.9 | 13 | 1.258 | 2.47 |
| The husband did not help wife for looking after the baby. | 30 | 26.1 | 34.2 | 4.2 | 5.5 | 1.108 | 2.29 |
| Not sufficient breast milk for the baby in first 6 months. | 27.7 | 30.6 | 12.4 | 21.8 | 8.1 | 1.317 | 2.53 |
| Have to return for work before your baby was 4 months old after birth. | 12.4 | 23.8 | 22.1 | 34.5 | 7.2 | 1.170 | 3.00 |
| The baby was not usually satisfied after breastfeeding. | 17.9 | 25.4 | 22.5 | 31.6 | 2.6 | 1.156 | 2.76 |
| Have ever seen advertisement on television about formula milk. | 14.3 | 27.6 | 17.3 | 30.3 | 10.4 | 1.254 | 2.95 |
| Got free formula milk sample at hospital during antenatal or delivered. | 15 | 33.6 | 6.5 | 38.4 | 6.5 | 1.253 | 2.88 |
| Not get any information from doctors, nurses or midwives about the benefits and | 19.9 | 46.9 | 13.4 | 19.9 | 0 | 1.010 | 2.33 |
| management of breastfeeding | | | | | | | |
| The health staffs (doctors, nurses or midwifes) did not help you initiate BF within | 31.6 | 30.9 | 15.0 | 17.3 | 5.2 | 1,232 | 2.34 |
| half-hour after delivered. | | | | | | | |
| Never been trained how to breastfeed and how to maintain lactation by health | 23.5 | 44.6 | 10.1 | 18.9 | 2.9 | 1.117 | 2.33 |
| staff (doctors, nurses or midwives | | | | | | | |
| Never see any poster or get any flyer, notebook, mother's card regarding BF in | 17.6 | 49.8 | 22.5 | 4.9 | 5.2 | .988 | 2.30 |
| health center or your community | | | | | | | |
| Never joined any BF support group in your community or hospital or clinic. | 10.1 | 38.8 | 25.4 | 16.3 | 9.4 | 1.131 | 2.76 |

Table 4: Questions of practices related breast feeding.

3.3. Reliability Analysis

When the reliability of items was checked on SPSS the value of Cronbach's alpha was .719 of 42 items. It should be above .60. So, the items which were used in the study were reliable for taking information related breast feeding. (See in Table 5.4).

| Cronbach's Alpha | N of Items |
|------------------|------------|
| .719 | 42 |

Table 5: Reliability Statistics

3.4. Chi- Square Application

The chi-square test was applied to assess the association in the knowledge of married women and their qualification with p=<.05. There is a significant association in qualification and knowledge. Significant association was found in women's qualification and knowledge regarding minimum duration for breast feeding to an infant p=.000 and chi square value was 58.612a. Significant association was also found in qualification and knowledge regarding major businesses support breast feeding at workplace p=.036 and X2=13.464a. The women who have higher education they were also know about On-site child care is necessary at a mother's place of employment if the mother desires to breastfeed while working p=.015 and chi square value was 15.813a. All remaining items of knowledge were significant associate with women's education with p=.000. The women who have higher education they were also have more knowledge about the breast feeding.

| Variable | X2 | Sig |
|--|---------|------|
| According to World Health Organization, the optimal duration for breastfeeding an infant is a minimum of twelve | 58.612a | .000 |
| months. | | |
| Major businesses in the country actively support breastfeeding or expression of breast milk in the workplace. | 13.464a | .036 |
| Infant formula contains all ingredients found in human breast milk. | 46.547a | .000 |
| A petite (small and thin) mother cannot produce an adequate quantity of breast milk for her infant. | 36.507a | .000 |
| Infants consuming breast milk have less ear infections than infants consuming formula. | 61.959a | .000 |
| Infants should consume either human breast milk or formula but not both concurrently. | 52.353a | .000 |
| Immune systems of breast-fed infants are more developed than immune systems of formula-fed infants. | 60.323a | .000 |
| Employers who have had female employees who breast-fed in the workplace are most supportive of breastfeeding at | 66.409a | .000 |
| work. | | |
| On-site child care is necessary at a mother's place of employment if the mother desires to breastfeed while working. | 15.813a | .015 |

Table 6: Association between Qualification and Knowledge.

4. Discussion

The present study indicates that 58.6% (n=180) married women have high knowledge and 41.3% (n=127) have low knowledge regarding breast feeding. 26.6% mothers were said that the duration of breast feeding should be minimum 12 months but 51.8% participants were disagreeing about the statement. The 72.6% participants respond correct answer regarding the statement; children who breast-fed developed more immunity than the formula-fed child. 16.6% were unaware that there is different in immune system of both children.

In the other study which was conducted in Nigeria, results showed that only 19.5% mothers had good knowledge, 33.6% had poor knowledge and 46.8% participants had faire knowledge regarding breast feeding. The 88.2% respondents were aware that colostrums should be fed to the child and only 12.3% mothers were knowing that breast feeding should be continue up to 2 years or more. It showed poor knowledge related duration of breast feeding. 41.4% women said that breast feeding promotes the child-mother bonding.(Akinyinka, Olatona, & Oluwole, 2016)

It is acceptable that women breast-fed and expressed milk during working hours 52.4% replied that it doesn't acceptable and 31.9% were responded that it is acceptable. If the mothers were allowed for breast feeding at workplace then public image of business will be negative 36.9% married women said image will not negative and 47.1% said the image will be negative if women were allowed for breast-feeding at working areas.

In the other research 51% mothers knew about the expressed breast milk. The 38% knew duration of expressed breast milk. There were only 34% who have knowledge regarding techniques of expressed breast milk and 100% women were aware about the ideal position of breast feeding. (Padiyath, Bhat, & Ekambaram, 2010)

In the current study 29.9% mothers concerned that their milk is insufficient for their children for first 6 months that's why they prefer the formula milk with breastfeeding. But 58.3% that is more than half mothers who practiced and concerned that breast feeding is sufficient for first 6months. There were 66.8% married women who get information from health care workers regarding benefits and management of breast feeding. Only 19.9% were who did not get information from midwifes and other health care providers.

A study was conducted in Jordanian where 77% married women replied that breast feeding causes the better child health. The 33% participants reported that their breast milk is insufficient for their children so they practiced formula milk for their babies. In this country, the 77% doctors and nurses encouraged and counseled the mothers for breast feeding. Only 5% women were illiterate and feel shy to breast feeding at public place.(Khassawneh, Khader, Amarin, & Alkafajei, 2006)

There is significant association in qualification and all items of knowledge regarding breastfed women. According to WHO the minimum duration of breastfeeding should at least 12 months. The qualified mother has high knowledge regarding duration of breastfeeding with p=.000 and X2=58.612a. in country, all businesses allowed the mothers for breastfeeding at their duty hours. It was also significant associate with qualification of married women with p=.036 and X2=13.464a.

In a study, the overall significant association was found among knowledge and attitude. The values was p=0.353 and X2=0.864.(Mbada et al., 2013)

The participants 56% (n=172) were knew that On-site childcare (day care) is necessary at a mother's place of employment if the mother desires to breastfeed while working. But 24% (n=75) women were unaware that on-site care of children is necessary for ladies at their working side if they need for breast feeding. Accordance to study among Nigerian mothers in a Semi-Urban community mothers did net convince for three monthly leaves of deliverance because there was a lack of environment for breast feeding in work place. (Mbada,2013).

4.1. Conclusion

It was concluded from the study that knowledge of breastfeeding among women was high. 108 mothers have high knowledge and 127 have low knowledge. So, it was also concluded that overall knowledge of mothers was good. Attitude and practices of mothers was also positive. It was also found that there is significant association between knowledge and qualification.

4.2. Limitations

The limitations of the study time were short for research study. The study was limited to mothers in Universities, because this research was conducted only in Superior University and University of Lahore and not conducted in other Universities. The time duration was short

4.3. Recommendations

The findings of this study, the researchers suggest the following recommendations:

There should be educational and practice section to improve knowledge, attitude and practice. It will be helpful to expand this study and include non-breastfeeding mothers to calculate the rate of breastfeeding in the area and to find the factors that encourage breastfeeding practice.

Arrangement of lectures and seminars in colleges and universities on this issue can also be helpful and can surely bring about a positive change.

Awareness programs should be arranged for guiding our women in child bearing age, family members and health providers to further enhance their knowledge, attitude and practice about optimum breastfeeding practices which in turn can lead to reduce infant mortality in Pakistan. Arrange a child care centre and give additional brake to working women in Universities.

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