

Original Article

Knowledge, Attitude and Practices of Nursing staff regarding Breastfeeding in a tertiary care teaching hospital in Andhra Pradesh-A descriptive study

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Abstract

Introduction : Active promotion of breast feeding is the need of the hour. Health care providers occupy a key role in the dissemination of breast feeding knowledge to pregnant and postnatal women. Among health care providers, nurses play a critical role in promoting breast feeding knowledge but a lot depends on their accurate knowledge and attitude. A number of studies have found lacunae in breast feeding knowledge of nurses. **Aims & objectives** : To assess the breast feeding knowledge and attitudes of nursing personnel employed in a tertiary level teaching hospital. **Methodology**: Type of study: Descriptive cross sectional study. Place of study: MIMS Nellimarla. Study period: Jan to Feb 2016. Sample size: 75 nursing staff. Sampling technique: purposive sampling. Inclusion criteria: All the Nursing personnel who were present on the day of sampling. Exclusion criteria: 1. Nurses who did not wish to participate. 2. Nurses who were on leave, on the day of sampling. Data collection : Pre tested semi structured profoma with questionnaire was administered to the nursing staff. **RESULTS**: In this study, more than 85% of the nurses had adequate knowledge regarding the benefits of breast feeding and it's early initiation but had significant knowledge gap in the management of common day to day problems in breast feeding, which could seriously hamper the continuation of breast feeding. **Conclusion**: Nurses play a strategic role in the active promotion, protection and support of breast feeding. Seminars and C.M.E's should be organized on a regular basis to ensure up to date knowledge regarding latest breast feeding guidelines among nurses.

Key words : Breast feeding, knowledge, nursing personnel

Introduction

Breast feeding is veritably known as the elixir of life. The nutritional benefits of breast milk are unparalleled. Apart from that, breast feeding provides crucial immunological properties that protect the child against acquiring infections. The prevalence of allergic disorders, obesity and Diabetes Mellitus is found to be less in breast fed infants¹. Breast feeding also confers numerous benefits to the mother's health status. Promoting breast feeding is the single most cost effective strategy in reducing the under 5 morbidity and mortality in India. But unfortunately, India is lagging behind in various breast feeding practices. The rate of early initiation of breast feeding stands abysmally low at 24.5 %². Further the rate of exclusive breast feeding drops progressively from 51% at 2-3 months of age to 28% at 4-5 months of age. In a recent Annual Health Survey conducted in India from 2010 to 2013 covering all the 284 districts (as per 2011 census) of 8 Empowered Action Group (EAG) States (Bihar, Uttar Pradesh, Uttarakhand, Jharkhand, Madhya Pradesh, Chhattisgarh,

Orissa and Rajasthan) and Assam, the percentage of children breastfed within one hour of birth was observed to vary from 30% in Bihar and Uttar Pradesh to around 70% in Assam and Orissa³. Children exclusively breastfed for at least 6 months ranged from 17.7% in UP to 47.5% in Chhattisgarh.

Active promotion of breast feeding is the need of the hour. Health care providers occupy a key role in the dissemination of breast feeding knowledge to pregnant and postnatal women. Among health care providers, nurses play a critical role in promoting breast feeding knowledge but a lot depends on their accurate knowledge and attitude. A number of studies have found lacunae in breast feeding knowledge of nurses^{4,6,7,8,9}.

This study has been undertaken in a tertiary care teaching hospital, to assess the breast feeding knowledge of nursing staff working in various clinical wards.

Aim & Objectives: To assess the breast feeding knowledge and attitudes of nursing personnel employed in a tertiary level teaching hospital.

Methodology:

Type of study: Descriptive cross sectional study

Place of study: MIMS Nellimarla

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Study period: January 2016 to February 2016.

Sample size: 75 nursing staff .

Sampling technique: Purposive sampling.

Inclusion criteria: All the Nursing personnel who were present on the day of sampling.

Exclusion criteria:

1. Nurses who did not wish to participate.
2. Nurses who were on leave, on the day of sampling.

Data collection: Pre tested semi structured profoma with questionnaire was administered to the nursing staff. Informed consent was obtained from all the participants. Data was collected and analysed using Microsoft excel and SPSS v.20.

The questionnaire comprised of two sections. The first section included the demographic data comprising name, age, sex, qualification, duration of service and if they have attended any conference or seminar on breast feeding.

The second section comprised of multiple choice questions testing their knowledge in various aspects of breast feeding.

Results:

The study included 75 participants all of whom were females.

Fig.no 1:Age distribution:

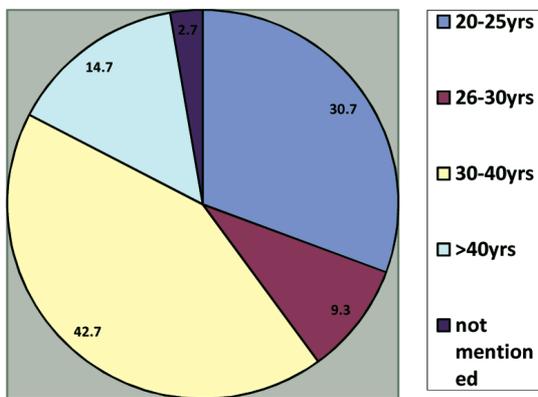


Fig.no 2:Duration of service:

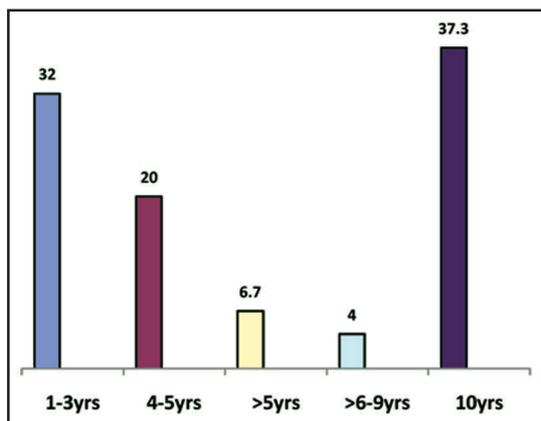


Fig.no:3 Can honey be given to a newborn baby soon after birth

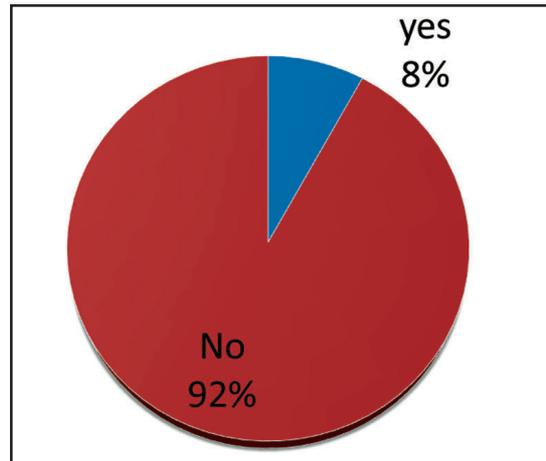


Fig.no 4:Are costly imported, sophisticated milk powders(formula milk) superior to breast milk

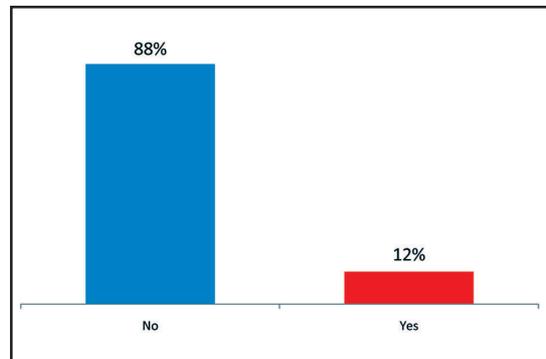
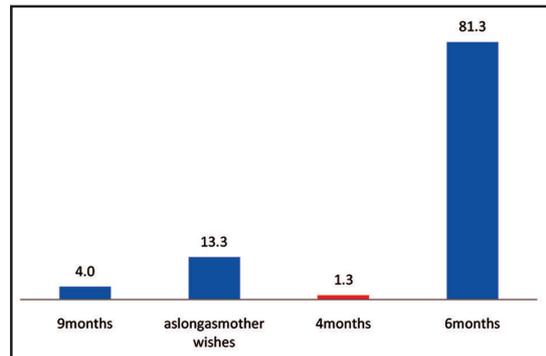


Fig.no 5: Exclusive breast feeding can be continued upto



Only 4 (5.3%) of the participants attended a conference or seminar on breast feeding while the rest 69 (92%) had no such experience. In terms of correct responses, 86.7% respondents knew that breast feeding should be initiated at the earliest after normal delivery and within 4hrs after caesarean section. The majority, (96%) of the nurses, knew the importance of colostrum and 92% of them correctly discouraged the use of prelacteal feeds. 92% of nurses knew the advantages of breast feeding and 88% felt that breast feeding was superior to bottle feeding. Most of the

nurses (92%) felt that breast feeding should be ideally continued for 1 year whereas only 1.3% answered correctly that breast feeding should be ideally continued for 2 years.

Table no 1: Responses of the study participants regarding various aspects of breastfeeding

S. No	Question	Correct Answer	Frequency	%
1.	Good latching is a) mouth wide open b) chin touches breast c) lower lip curled outward d) lower part of areola not visible e) all the above	E	18	24%
2.	To assess breast feeding adequacy what parameters are useful a) urine frequency b) weight gain c) baby sleeping well in between feeds d) all the above	D	15	20%
3.	Pacifiers should be given to breast feeding infant a) true b) false	B	19	25.3%
4.	Factors that hinder milk ejection a) worry b) stress c) pain d) doubt e) all the above	E	16	21.3%
5.	Breast of mother should be washed before each feed to prevent infection a) yes b) no	B	8	10.7%
6.	What time the breast feeding should be initiated after normal delivery a) within 4hrs b) within 12hrs c) within 24hrs d) earliest possible	D	65	86.7%
7.	What time breast feeding should be initiated after caesarean delivery a) within 4hrs b) within 24hrs c) within 48hrs d) after wound healing	A	65	86.7%
8.	Witch's milk (colostrums) which is secreted in the first few days after delivery should be discarded a) true b) false	B	72	96%
9.	Breast feeding should ideally be continued up to a) 2yrs b) 1yr c) 6months d) 3months	A	1	1.3%

In this study only 24% nurses correctly identified all the steps in good latching and 20% got all the parameters for assessment of adequacy of breast feeding, right. 21.3% nurses correctly identified all the factors that interfere with milk ejection reflex. 41.3% respondents erroneously believed that sore nipple was the result of frequent use of soap and water and 89.3% felt that mother should wash her breast before each feed which is not a requirement. 54.7% advocated the use of pacifiers in an infant, whereas

only 25.3% nurses rightly knew that pacifiers were not to be encouraged.

One of the most common problems encountered in clinical practice is the mother's perception of inadequate milk supply. 78.7% of the nurses rightly answered that they would counsel the mother and ask her to increase the frequency of feeding. Nowadays, the number of working women has increased considerably and many join in their jobs at the completion of maternity leave, usually at the end of 3 months. 74.7% of the nurses responded that they would ask the mother to bottle feed in the working hours and breast feed at night. Only 10.7% of the nurses advocated the use of EBM in the mother's absence. Regarding storage of breastmilk, 50.7% of the nurses felt that it was not possible in the absence of refrigerator. Only 18.7% of the nurses knew that breastmilk, could be stored without refrigeration for 6 to 8 hours.

84% of nurses felt that breast feeding was harmful in the presence of maternal fever. Only 38.7% advocated continuation of breast feeding in a HBS ag positive mother. Regarding supplementation of water to an "exclusively breast fed" 3 month old infant, only 6.7% rightly answered that it wasn't necessary, whereas 82.7% advocated its use in summers indicating a knowledge gap in conceptual understanding of exclusive breast feeding.

DISCUSSION:

Breast feeding is best for the baby and the mother. It is an essential public health strategy to improve infant and child morbidity rates, improve maternal morbidity and assist in controlling the cost of health care. It needs to be promoted and supported, the responsibility of which lies with health personnel, especially nurses. Past research indicates that, nurses ability to motivate the mother depends a lot on their knowledge and attitude⁵. A number of studies done in in the recent past, suggest that nursing and non-nursing health care providers lack appropriate knowledge, training and skills to effectively promote breast feeding^{6,7,8,9}.

In a study, undertaken to assess breast feeding practices amongst PNC mothers in urban slum areas, in Solapur city, it was reported that only 14% mothers received ANC advice and 53% received PNC advice. There were 33% mothers who neither received advice during ANC nor during PNC period¹. Inconsistent or inaccurate information and lack of support by healthcare professionals are reported factors affecting breastfeeding failure^{11,12}.

Karipis and Spicer et al¹³, conducted a study on pediatric nurses and found that breast feeding knowledge overall was good with 92% of participants recognising that infants gain all the nutrients they require from breast milk until the age of 6 months and the benefits of breast feeding cannot be reproduced by infant formulas (97%). Hellings and Howe⁷ reported similar findings from their study. In the present study, 92% of nurses knew the advantages of breast feeding and 88% felt that breast feeding was superior to bottle feeding, similar to the above mentioned studies. They had a sound concept, regarding the advantages of breast feeding and early initiation and continuation of breast feeding. Similar knowledge scores were reported from a study conducted in Saudi Arabia¹⁴.

Most of the nurses (92%), felt that breast feeding should be continued for one year, contrary to the recommendation of upto 2 years. In a study conducted by Marie Mclaughlin et al¹⁵, 25% nurses knew that breast feeding should be continued till 2 years, as per WHO guidelines.

Correct attachment at breast is important for successful breast feeding. In the present study, only 24% nurses correctly identified all the steps in good latching. Marie Mclaughlin et al¹⁵, provided diagrammatic representation of correct attachment at breast to the participants ,which many were unable to recognise. She further reported that,only 48% identified audible swallowing as an important sign of feeding while 76% felt baby should have as much of the mother's areola in their mouth as possible for correct attachment .

Evidence suggests that nurses and midwives are aware of the importance of positioning and attachment^{13,16}, but have knowledge deficits regarding audible swallowing ,slow deep and rhythmic jaw action and a relaxed infant whilst feeding¹³.

In the present study, only 20% got all the parameters for assessment of adequacy of breast feeding right. There were significant knowledge gaps in the areas of attachment at breast and consequences of faulty attachment, assessment of adequacy of breast feeding and identifying the factors that hinder milk ejection , all basic prerequisites to ensure successful continuation of breast feeding.

In this study, 25.3% nurses rightly mentioned that pacifier use was not recommended. In Marie Mc Laughlin et al study¹⁵, over half did not know that pacifiers can cause nipple confusion and interfere with successful breast feeding. In another study done by Azza Ahmed et al in nursing students, 54% responded correctly that pacifier

use is not recommended in first one month and 35% nursing students rightly mentioned that sore nipple was the result of incorrect latching¹⁷. Pacifier and artificial teat use have been associated with unsuccessful breastfeeding initiation, nipple confusion and decreased breast feeding duration^{18,19}. In the present study 12% rightly identified the cause of sore nipple as faulty latching.

In response to continuation of breast feeding during febrile illness in the mother, 84.7% of the nurses felt breast feeding should be stopped in viral fevers. In a study done by Hellings and Howe⁷, in nurses and mid-wives, they reported that 91.4% advocated continuation of breast feeding in the presence of mastitis.

More than 70% of the nurses had no clear concept regarding storage of breast milk. In a study done on breast milk storage over 50% of the mothers, identified the need for additional information about breast feeding upon returning home from hospital, particularly in regard to pumping and storage techniques. In another descriptive study, done in North Carolina to assess nurse's knowledge and attitude about storage of breast milk, only 46% of respondents reported having breast feeding education in their training programs.

The nurses surveyed were involved in breast feeding support, yet many had incorrect information and negative attitude to breast feeding and storage of breast milk⁵.

Conclusion:

Nursing personnel play a key role in the promotion of breast feeding by virtue of their close proximity to antenatal and postnatal mothers. In the present study, on a positive note, almost all the nurses knew the benefits of breast feeding and strongly recommended the early initiation of breast feeding. But on the other hand , in the sections that dealt with common problems like assessment of latching, adequacy of breast feeding, management of common problems like maternal fever and storage of breast milk, less than 25% of the nurses knew the correct responses. This indicates that majority of the nurses were not equipped with adequate knowledge to deal with the management of common day to day problems in breast feeding which could jeopardize the successful continuation of breast feeding. A number of studies indicated that nursing curriculum was not sufficient to ensure adequate breast feeding knowledge. There is a need to improvise the curriculum .More emphasis should be laid on ongoing education through seminars and C.M.E's to ensure up-to date knowledge among nurses in accordance with the latest guidelines.

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