

Research Article

Assessment of Knowledge of Postnatal Mothers Regarding Management of Breast Feedings Problems at Lalla Ded Hospital, Srinagar with A View to Develop an Information Booklet

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A B S T R A C T

Background: The pregnancy and postpartum period marks a significant transition in a woman's life. Understanding the relationship between breastfeeding, postpartum care, and infant well-being is complex. Infants who are not breastfed have higher risks of infectious morbidity, childhood obesity, diabetes, leukemia, and sudden infant death syndrome. Mothers who fail to breastfeed face increased risks of premenopausal breast cancer, ovarian cancer, type 2 diabetes, myocardial infarction, metabolic syndrome, and retained gestational weight gain. However, breastfeeding can present challenges such as breast engorgement, plugged milk ducts, mastitis, and sore nipples, leading to discomfort or pain and causing many women to stop breastfeeding soon after delivery.

Methodology: A descriptive study was conducted among 80 postnatal mothers selected through non-probability purposive sampling at Lalla Ded Hospital, Srinagar. Data was collected using a self-structured interview schedule.

Results: Among participants, 38.8% had inadequate knowledge, 32.5% had moderate knowledge, and 28.8% had adequate knowledge about managing breastfeeding problems. The mean knowledge score was 16.86 ± 6.65 at a 0.05 significance level.

Conclusion: The study revealed inadequate knowledge among postnatal mothers regarding breastfeeding problem management. Health education programs are essential to improve awareness about breastfeeding techniques, breast care, and problem management among postnatal and antenatal mothers, reducing breastfeeding-related challenges.

Keywords: Knowledge, Breastfeeding Problems, Management, Postnatal Mothers, Health Education

Introduction

Breastfeeding is the first fundamental right of the child. It helps in the biological and emotional development of the children. It provides complete nutrition, early protection against illness for infants and young children and promotes growth and development of the baby. The risk of postpartum haemorrhage and anaemia is lowered by the early initiation of breastfeeding.

According to World Health Organizations recommendation breast milk alone is sufficient to meet the infant's nutritional requirements for the first 6 months of life. WHO recommends that breastfeeding should be initiated within 1 hour of birth Both mother and the baby are benefited by early initiation of breastfeeding.^{4,5}

During the breast feeding period, several such as breast engorgement, plugged milk duct, breast infection and insufficient milk supply, originate from conditions that lead the mother to inadequately empty the breasts. Some important risk factors that can predispose to lactation problems are incorrect techniques infrequent breast feeding and breastfeeding on scheduled times, pacifiers and food suppliers. The adequate management of those conditions is fundamental, as if not treated they frequently lead to early weaning. If the mother empties her breast effectively, then these problems can be prevented and if they occur, they should be carefully and adequately approached, thus painful and stressing situations the mother may face.⁶

The serious and painful complication of the puerperium is breast infection. The organism causing breast infections are often passed between baby and mother.⁷

The first bonding experiences between mother and baby is breastfeeding. According to British medical journal of breast feeding "Breast is the best". Breast feeding empowers women. Breast feeding brings joy to the mother which cannot be expressed by words. The feeling the mother gets when she continues to nourish her baby at her breast and see the baby grow and thrive on breast milk is awesome.⁸

Need

According to WHO, 33% of all women experienced breast problem in the first 2 weeks of postpartum and 20% in the weeks thereafter.⁹

A survey carried out at the mother and baby's convalescent home on the outskirts of Jerusalem, Israel determined the prevalence of sore and cracked nipples at the onset of lactation in 127 women. More than 30% of mothers were found to suffer from sore or cracked nipples after delivery even though they had been instructed how to hold the sucking infant correctly.¹⁰

Infection of breasts is a serious and painful complication of the puerperium. Preventive education is vital, because the organism causing breast infections are often passed between baby and mother.¹⁹

As per the findings of the research studies and the researchers own experiences during clinical posting it was found that there is inadequate knowledge of mothers regarding management of breastfeeding problems. There is a need of giving information regarding breast feeding during antenatal visits to inform the mothers regarding proven facts of advantages of exclusive breastfeeding, as undesirable cultural practices such as giving pre-lacteals, late initiation of breast feeding are still prevalent among the community and these should be discouraged. For successful feeding, mothers need active support, care and privacy during pregnancy and following birth, not only of their families and communities but also of the entire health system. Though the significance of breast feeding is insisted for the antenatal mothers during each antenatal visit, it is not practiced effectively. The mother of today has adopted to the recent trends of life style replacing traditional ones. Thus by assessing the knowledge of postnatal mothers regarding breast feeding problems and its management, an overview can be obtained about the areas which need modifications and specific intervention strategies can be made to correct the same. Hence the investigator undertakes the present study. This study will also act as a data base for further researchers to conduct research in this field.

Methodology

A quantitative research approach with descriptive design was selected to carry out this study. Permission was obtained from the principal, of Government medical college (GMC) Srinagar to conduct the research study. Permission was also obtained from the concerned authorities i.e., Medical superintendent of Lalla Ded Hospital, Srinagar, Kashmir and HOD Obstetrics and Gynaecology Lalla Ded Hospital, Srinagar to conduct the final study. Ethical clearance was obtained from Institutional Review Board (IRB), to conduct the study on purposively selected 80 postnatal mothers admitted in postnatal wards at Lalla Ded Hospital Srinagar. Permission was also obtained by taking informed consent individually from each postnatal mother, prior to their inclusion as sample in the study. Privacy, confidentiality, and anonymity were being guarded.

Data was collected through self-structured interview schedule from 80 postnatal mothers admitted in postnatal wards at Lalla Ded Hospital Srinagar from 1st May to 1st June 2024.

Assessment of knowledge score was categorized into various levels based on the criteria developed by ROSE

(2019)⁽¹²⁾ in her study. If the score was > 75%, it was considered adequate knowledge; if the score was 50-75%, it was considered moderate knowledge, and if the score was < 50%, it was considered inadequate knowledge.

Results And Discussion

Finding related to demographic variables of study subjects

The present study showed that maximum of the study subjects (71%) were in the age group of 20- 30 years, whereas few (29%) of study subjects were in the age group of 30-40 years, and none of the study subjects were in the age group > 40 years. More than 50% of study subjects (60%) belonged to rural areas whereas 40 % belonged to urban areas. Almost equal number of multipara (43.75%) and primipara (42.5%), followed by very few (13.75%) second Para and none Grand multipara. Majority (42.5%) of study subjects were having primary /middle educational status followed by 28.75% were graduate and above, 15% of study subjects were illiterate and 13.75% having high/higher secondary education. Majority (70%) of study subjects were non-working, whereas only (30%) of study subjects were working in any other professions, none of study subjects were teacher and none from health profession. More than 50% of the study subjects (51%) belonged to joint families, whereas only 30% belonged to nuclear families and 19 % of the study subjects belonged to extended families.

More than 50% of the study subjects (56%) had monthly family income of Rs 20000-30000, whereas only 28% of study subjects had Rs 31000-40000 monthly family income and 16% study subjects had > Rs 40000 monthly family income.

The findings of present study are supported by a descriptive study conducted by Bayaskar (2019)¹³ on 50 antenatal mothers through non-probability convenience sampling at a selected hospital at Maharashtra, India to assess the knowledge regarding prevention and management of selected breast complications. The findings of the study revealed that, about 14.5% of study subjects belonged to 21 to 25 years of age group, 24.7% of study subjects belonged to 26 to 30 years of age group, 43.5% of study subjects belonged to 31 to 35 years of age group whereas 17.3% of study subjects belonged to >35 years of age group. 55.4% of study subjects were from rural areas whereas 45.5% of study subjects belonged urban areas. About 66.6% of study subjects were multipara whereas 43.4% were primipara. 43.9% were illiterate, 26.1% had higher secondary education, 22% had primary education, and only few study subjects (8%) had graduate or above education.

The finding of present study are also endorsed by a descriptive study conducted by Suniliga, Kumar and Vanitha

(2019)¹⁴ on 30 postnatal mothers through convenient sampling technique in a Selected Tertiary Care Hospital at Kelambamkkam, Kanchipuram District, Tamil Nadu(India), to assess the Knowledge of Breast feeding problems and its management among Postnatal Mothers. The study showed that majority of study subjects (79%) were house wife (non-working) whereas 21% of study subjects were working. 85% of study subjects belonged to extended family and only 15% belonged to nuclear family. 65% of study subjects had monthly family income Rs20,000-30,000, 31.6% had < Rs 20,000 income per month and only few study subjects (3.4%) had >Rs30,000 monthly family income.

Findings related to the assessment of Knowledge level of study subjects regarding management of breast feeding problems

The findings of the present study showed the knowledge level of study subjects. Almost equal number of study subjects had inadequate knowledge (38.8%), moderate knowledge (32.5%) and adequate knowledge (28.8%) regarding management of breast feeding problems.

The findings of present study are supported by descriptive study conducted by Shiba (2022)¹⁵ on 30 postnatal mothers selected through simple random sampling technique in primary health center at Pallavaram, Chennai to assess the knowledge regarding breast engorgement and its management. The study results showed that majority of 60% of postnatal mothers had inadequate knowledge and 30% of postnatal mothers had moderate knowledge and 10% had adequate knowledge regarding breast engorgement and its management.

Findings related to association of knowledge level of study subjects with their selected demographic variables

The findings of the present study showed that there was significant association of knowledge level of study subjects with selected demographic variables like age, residence, parity, educational status, occupation, type of family and monthly family income at 0.05 level of significance.

The findings of the present study are supported by a quantitative descriptive study conducted by Suniliga, Kumar and Vanitha (2019)¹⁴ on 30 postnatal mothers through convenient sampling technique in a Selected Tertiary Care Hospital at Kelambamkkam, Kanchipuram District, Tamil Nadu (India), to assess the Knowledge of Breast feeding problems and its management among Postnatal Mothers. The study showed that significant association was found between the level of knowledge on management of breast feeding problems and type of family and residence of study subjects p<0.05 level of significance.

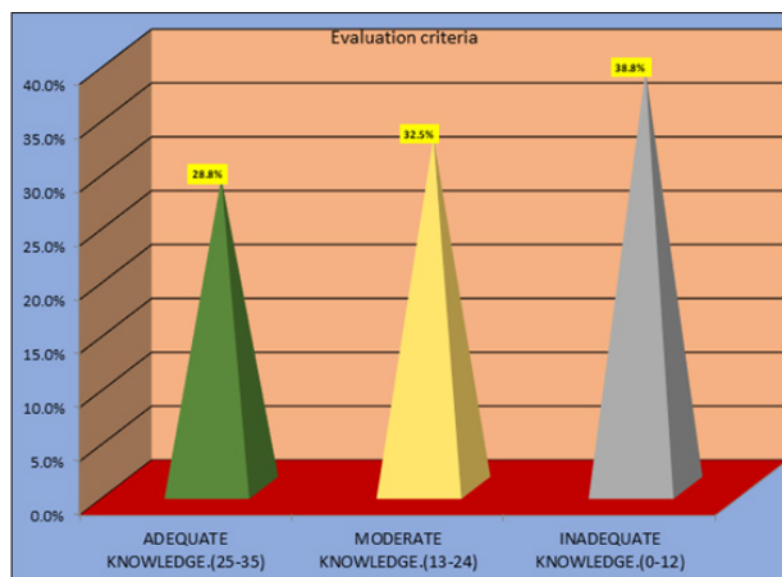


Figure 1. Pyramidal diagram showing the percentage distribution level of knowledge

Table 1. Frequency and percentage distribution of study subjects according to Demographic Variables

n=80

Variables	Opts	Percentage(%)	Frequency(f)
Age in years	20-30 years	71%	57
	30-40 years	29%	23
	>40 years	0%	0
Residence	Rural	60%	48
	Urban	40%	32
Parity	Primipara	42.5%	34
	Second Para	13.75%	11
	Multipara	43.75%	35
	Grand multipara	0%	0
Educational Status	Illiterate	15%	12
	Primary/Middle school	42.5%	34
	High/Higher secondary school	13.75%	11
	Graduate and above	28.75%	23
Occupation	Teacher	0%	0
	Health profession	0%	0
	Non working	70%	56
	Any other	30%	24
Type of family	Nuclear	30%	24
	Joint	51%	41
	Extended	19%	15
Monthly family income in rupees	20000-30000	56%	45
	31000-40000	28%	22
	>40000	16%	13

Maximum =35 Minimum=0

Table 2. Frequency and percentage distribution of knowledge level of study subjects regarding management of breast feeding problems

N= 80

Level Of Scores	Percentage	Frequency
Adequate Knowledge.(25-35)	28.8%	23
Moderate Knowledge.(13-24)	32.5%	26
Inadequate Knowledge.(0-12)	38.8%	31

Table 3. Association of knowledge level of study subjects with their selected demographic variables

N= 80

Demographic Data		Levels Of Knowledge						
Variables	Categories	Adequate Knowledge	Moderate Knowledge	Inadequate Knowledge	Chi Test	P Value	Df	Result
Age in years	20-30 years	1	25	31	70.636	0.000*	2	Significant
	30-40 years	22	1	0				
	>40 years	0	0	0				
Residence	Rural	1	16	31	50.373	0.000*	2	Significant
	Urban	22	10	0				
Parity	Primipara	1	13	20	39.821	0.000*	4	Significant
	Second Para	11	0	0				
	Multipara	11	13	11				
	Grand multipara	0	0	0				
Educational Status	Illiterate	0	3	9	63.340	0.000*	6	Significant
	Primary/ Middle school	1	11	22				
	High/Higher secondary school	11	0	0				
	Graduate and above	11	12	0				
Occupation	Teacher	0	0	0	21.718	0.000*	2	Significant
	Health profession	0	0	0				
	Non-working	12	13	31				
	Any other	11	13	0				
Type of family	Nuclear	1	13	10	23.400	0.000*	4	Significant
	Joint	19	12	10				
	Extended	3	1	11				
Monthly family income in rupees	20000-30000	11	4	30	47.218	0.000*	4	Significant
	31000-40000	11	11	0				
	>40000	1	11	1				

* Significant at level 0.05 ** Non significant at level 0.05

Discussion

The present study was undertaken to assess the knowledge of postnatal mothers regarding management of breast feeding problems with a view to develop an information booklet at Lalla Ded Hospital Srinagar. Data was collected by using self-structured interview schedule from 80 study subjects. The findings of the study are discussed in reference to objectives and hypothesis stated.

Conclusion

The following conclusions were drawn on the basis of findings of the study.

The study subjects had inadequate knowledge regarding management of breast feeding problems. It may be due to lack of previous exposure and education about selected breast feeding problems and their management. Thus health education programme required to enhance the knowledge regarding breast feeding problems, proper breastfeeding techniques and breast care to create awareness among postnatal mother's as well as antenatal mothers which may further help to reduce breast feeding problems in postnatal period. There was significant association of knowledge level of study subjects with age, residence, parity, educational status, occupation, type of family and monthly family income ($p < 0.05$). Probably elderly mothers had more knowledge about management of breast feeding problems. Similar way the mothers residing in rural areas had easy access to elderly women's of village which acts as knowledge bank for the younger generations and the mothers residing in urban area had easy availability of other sources of knowledge like mass media, antenatal classes. Multipara mothers had previous experience of breastfeeding techniques and combating with breast feeding problems. Literacy rate is directly related to knowledge of mothers. As per occupation is concerned, the working mothers had enormous sources of gaining knowledge as well as had more exposure to learning by interacting with their colleagues, sharing and gaining the knowledge and experience. Similar ways mothers living in joint families clear their doubts and gain knowledge on various aspects of motherhood from the elders of family as well as from other experienced members of family.

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Conflict of Interest: None

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