

ORIGINAL ARTICLE

Practice of exclusive breastfeeding and its factors among job holder mothers of Lalitpur metropolitan city

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ABSTRACT

Introduction: According to WHO, first six months of a child should be fed only breast milk which is crucial for an optimal growth. During this period, an infant should not be given any type of solid, semi solid or liquid food except breast milk. It is considered to protect an infant from several chronic diseases and prevents 10% of the child death in further life. Thus, the objective of the study is to assess the practice of exclusive breastfeeding (EBF) and its associating factors among the job holder mothers of Lalitpur metropolitan city.

Methods: The study was done on job holder mother working in Lalitpur metropolitan city. Cross sectional study was done through clustered sampling technique. The total number of the sample was 165. A structured questionnaire was used as the tool. The confidentiality of the respondents were maintained and required ethical consideration was taken. Analysis of data was done by using descriptive statistics and chi-square test was used for association between knowledge and practice about EBF among the job holder mothers.

Results: About 53.3% of the respondent had good knowledge about EBF whereas 52.8% had overall good practice of EBF. Also around 37.6 % expressed milk feeding, only 20% of the respondent succeeded to breastfeeding for at least 6 months which is the major requirement of EBF and there was no association between knowledge and practice about EBF among the job holder mothers.

Conclusions: There was no association of the knowledge and practice. Even though the study found overall good knowledge and practice among the job holder despite of good practice the prevalence of EBF is still poor among the job holder mothers.

Keywords: Exclusive breastfeeding, job holder mothers, practice

INTRODUCTION

According to WHO, first six months of a child is crucial for an optimal growth so a child should be only fed breast milk during this period.¹ Breast milk has been proven as one of the best option for both child and a mother. It is the most cost effective and a vital intervention in reduction of child mortality and morbidity.^{2,3} The act of breastfeeding is not only essential for the children

but also beneficial to the mothers. The prolonged breastfeeding helps the mother to stay at the lower risk of breast cancer and ovarian cancer.⁴

According to the Labor Act 2074 the Maximum number days as maternity leave is 98 days. This includes only 60 days of paid leave.⁵ Even having 98 days of total maternity leave it is not enough to breastfeed the child exclusively. Due to which the mothers have to choose

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alternatives such as expressed milk feeding, Cerelac, litto, Lactogen etc. Even though, expressed milk is also the source of breast milk, it have few adverse effects too.⁶ There may be several factors responsible for discontinuing breastfeeding by the job holder mothers before 6 months.

According to the Nepal Demographic And Health Survey (NDHS) report, the overall status of exclusive breastfeeding of Nepal is 66% which is a decrement from 70%, recorded in 2011 whereas in Chitwan, only 67.1% of the working women exclusively breastfed their children.⁷ Similarly, urban areas are considered well equipped with better option for any action. Despite of that a study done in Kathmandu among the working women of the factories, 34% of the respondents could complete the criteria for the exclusive breastfeeding.⁸ Likewise, in a tertiary hospital based study conducted in 2018, only 11% of the women got their children breastfed for 6 months.⁹ Therefore, it is important to study practice of exclusive breastfeeding and its factors among job holder mothers of Lalitpur metropolitan city.

METHODS

A descriptive cross-sectional study was used. The study population was job holder mothers of under 2 years old age children of different types of organization of Lalitpur metropolitan city. The time frame of the overall study was from Magh 2076 to Chaitra 2077.

The prevalence rate was exclusive breastfeeding rate of Nepal. The sample size for the study was 165.

We know, $n = Z^2pq/d^2$

$= (1.81)^2 * 0.66 * 0.34 / (0.07)^2$

$= 150.03$

~ 150

Also, adding 10% of the sample size i.e. 15 as non-respondents

Total sample size (n) = 150+15

= 165 where, n = sample size, Z = value at 93% confidence level i.e. (1.81), p = estimated prevalence of Exclusive breastfeeding, q = the probability of non-occurrence of p (i.e. 1-p) and d = the estimated error.

The ethical consideration from HOPE international College was taken for conducting the research.

Approval from Lalitpur Metropolitan city was taken to conduct the research. Consent from wards were taken for the study. Individual consent (Both verbal and written) was taken from the respondent along with their confidentiality.

The metropolitan city was selected purposively. Then a Clustered sampling was done. Four different clustered were selected. Four wards which lies under the clustered were covered. The institutions were chosen serially and the available respondents were chosen from the selected institutions. A structured questionnaire was used as tool for the data collection. The tool was self-constructed with the help of extensive literature review. A self-administration of the questionnaire was done on the respondents.

The data editing was done manually whereas the data was managed, analyzed and interpreted through SPSS version 20. Mean and Chi-square were used as the bio statistical tool for bio statistical calculation.

RESULTS

Table 1. Socio demographic information of the respondents

Characteristics	Frequency (n=165)	Percentage
Age of mother (Years)		
22-26	10	6.1
27-31	84	50.9
32-36	56	33.9
37-41	15	9.1
Educational status of respondent		
Uneducated	1	.6
Educated	164	99.4
Educational level of respondent (n=164)		
Can read and write	3	1.8
Primary level (1-5)	1	.6
Basic Level education (6-10)	4	2.4
Higher education (11-12)	32	19.4
Bachelor and above	124	75.2

Religion of respondent					
Hindu	141	85.5	Non-Government Office	19	11.5
Christian	9	5.5	Private	90	54.5
Buddhist	13	7.9	Public	18	10.9
Muslim	1	.6	Post of respondent in the organization		
Others	1	.6	Office assistant	47	28.5
Ethnicity of respondent			NayabSubba	4	2.4
Bhramin	38	23	Officer level	45	27.3
Chettri	46	27.9	Higher post	26	15.8
Janajati (Indigenous)	67	40.6	Teacher	30	18.2
Dalit	3	1.8	Helper	6	3.6
Others	11	6.7	Cashier	7	4.2
Type of family of respondent			Completed years in organization		
Nuclear	76	46.1	1-5	105	63.6
Joint	89	53.9	6-10	48	29.1
Marital status of respondent			11-15	11	6.7
Married	162	98.2	16-20	1	.6
Divorced	1	.6	Maternity leave		
Widow	1	.6	45	13	7.9
Others	1	.6	60	76	46.1
			75	5	3.0
			90	44	26.7
			98	27	16.4

Table 1 shows the characteristics of the respondents. Among 165, the majority of respondent were 27-31 years old. Almost all of them were educated and over 75 % of them were at least graduated. 85 % of them followed Hinduism. The other religion was Muslims. The Brahmins, Chettri and Janajati were the major ethnic groups that participated in the study. Most of the respondents belong to joint family and almost all of them were married.

Table 2. Organizational details of the respondent

Characteristics	Frequency (n=165)	Percentage
Working Organization		
Bank	46	27.9
Co-operative	32	19.4
School	36	21.8
College	4	2.4
Office	36	21.8
Social Organization	8	4.8
Others	3	1.8
Type of Organization		
Government Office	38	23

Table 2 shows the Organizational details of the respondents. The major organization visited for the study were Banks, School, Office and cooperatives. Only few social organization, colleges and others (finance) were visited as. 54 percent of the organization were private, 23 percent were government around 11 percent of the organization were non-governmental and public organization. Majority of the respondent were office assistant, officers and from other higher post. Around 64 percent of the respondent were at least involved for 1-5 years in the organization. 46 percent of the organization provides at least 60 days maternity leave.

Table 3. Knowledge regarding breastfeeding and EBF

Characteristics	Frequency (n=165)	Percentage
Heard about breastfeeding		
Yes	165	100
Importance of breastfeeding*		

Main source of food	164	99.4
Safe and hygienic	132	80
Helps in birth spacing	98	59.4
Prevent breast cancer and other chronic disease	125	75.8
Helps to reduce weight of mother	115	69.7
Good relation between mother and child	152	92.1
Importance of breastmilk*		
Healthy physical and mental growth	165	100
Cognitive development	123	74.5
High immunity power	164	99.4
Gives full nutrition to child	162	98.2
Reduces risk of obesity in child	81	49.1
Reduces risk of communicable diseases	115	69.7
Heard of exclusive breastfeeding		
Yes	87	52.7
No	78	47.3
Knowledge of exclusive breastfeeding		
<6months	6	3.6
6months	154	93.3
>6months	5	3

Multiple response*

As shown in table 3 all the respondent have heard about breastfeeding but only 52.7 percent of the mothers have heard about EBF. All the mentioned importance of the breastfeeding and breastmilk has been stated by majority of the respondents. Out of 165 respondents 154 (93.3 percent) knew to exclusively breastfeed for exact 6 months.

Table 4. Knowledge and practice level of the respondents

Characteristics	Mean	Frequency (n=165)	Percentage
Level of knowledge			
Poor knowledge	14.4	77	46.7
Good knowledge		88	53.3

Level of practice (n=163)			
Poor practice	2.68	77	47.2
Good practice		86	52.8

The above table shows that out of 165 respondents only 53.3% of them pursue good knowledge about the proper EBF. Whereas 52.8% of them have good practice of EBF. Out of 165 respondent 163 responded for practice related queries whereas other 2 did not practice BF.

Table 5. Association between level of knowledge and practice among the respondents n=165

	Level of knowledge (Percentage)		Total	X ²	p-value
	Poor knowledge	Good knowledge			
Level of practice	Poor practice	40	37	77	1.298 0.255*
	Good practice	37	49	86	
Total	77	86			

Chi-square value=1.298 d.f=1

P-value=0.255 (>0.05 so there is no association)

The above table represents that only 49% of the respondent has good knowledge and good practice at the same time. Since the overall p-value is 0.25 i.e.>0.05 the knowledge and practice among the job holder mother about breastfeeding in not associated.

DISCUSSION

In this study, the major age group is 27-31 years. Almost all of the respondents were educated. The respondent who have heard about breastfeeding is universal and only 53% of them have heard about EBF. The study presented a good knowledge among 53.3% and good practice among 52.8% of respondent but only 20% of them could exclusively breastfeed their child. The major factors found was majorly identified as maternity leave, not allowing babies in the workplace, low milk production, support from family, knowledge on EBF and support from workplace. Similarly, a study done in Ghana on professional mothers, the major age group was 20-30 years.¹⁰ The rate of EBF was only 10%. Almost all of the respondent were well educated. Majority of them had heard about exclusive

breastfeeding whereas the practice was very low among them. The major factors related with EBF was insufficient maternity leave.¹⁰ Similarly, A study in Ethiopia also had low EBF rate.¹¹

Similarly, a study done in Kathmandu presented that 34% of the respondent had heard about the EBF and only, 64% of the respondents were educated only 34% of them performed EBF.¹² The study was done in garment factory. The findings from this study varies slightly with the current study. This study has low educated mothers but more EBF rates. Even though both study were done in urban sectors due to choice of respondent and their working are may vary the results. The study done in Bharatpur had respondent aged less than 25 years.¹¹ The study presented 61% of the respondents Practiced EBF. The study in Bharatpur may vary since it was a comparative study among working and non-working mother and the study was done in Terai region of Nepal.

CONCLUSION

The study conducted in job holder mothers of Lalitpur Metropolitan city concludes that the knowledge about breastfeeding among the respondent mothers is universal. However, slightly more than half of the respondent had overall knowledge on exclusive breastfeeding.

Conflict of Interest: None

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REFERENCES

1. facts on breastfeeding [updated August 2017. Available from: <https://www.who.int/features/factfiles/breastfeeding/en/>.
2. Duwadi S, Upadhyay HP. A Comparative Study of Exclusive Breastfeeding Practices Among Working and Non-Working Women in Bharatpur-Tandi, Chitwan, Nepal. Nepalese Journal of Statistics. 2018;2:1-10.
3. K.park. Park's text book of preventive and social medicine. india: BanarsidasBhanot; 2017.
4. Victora CG, Bahl R, Barros AJ, França GV, Horton S, Krasevec J, et al. Breastfeeding in the 21st century: epidemiology, mechanisms, and lifelong effect. The Lancet. 2016;387(10017):475-90.
5. Commision NI. Nepal Labor Act 2074. Nepal: commision L; 2074 2074/5/19. Report No.
6. Kelly M. Boone SRG, Sarah A. Keim. Feeding at the Breast and Expressed Milk Feeding: Associations with Otitis Media and Diarrhea in Infants. The Journal of Pediatrics. 2016;174:Pages 118-25.
7. Nepal Demographic And Health Survey(NDHS). In: Health Mo, editor. kathmandu: Ministry of Health, New ERA, The DHS Program; 2016. p. 636.
8. Sharma I, Khadka A. Assessing the level of knowledge and practice of breastfeeding among factory working mothers in Kathmandu, Nepal. Journal of Health Research. 2019.
9. Bhandari MS, Manandhar P, Tamrakar D. Practice of breastfeeding and its barriers among women working in tertiary level hospitals. J Nepal Med Assoc. 2019;57(215):8-13.
10. Dun-Dery EJ, Laar AK. Exclusive breastfeeding among city-dwelling professional working mothers in Ghana. International breastfeeding journal. 2016;11(1):23.
11. Tadesse F, Alemayehu Y, Shine S, Asresahegn H, Tadesse T. Exclusive breastfeeding and maternal employment among mothers of infants from three to five months old in the Fafan zone, Somali regional state of Ethiopia: a comparative cross-sectional study. BMC public health. 2019;19(1):1015.
12. Singh MM, Pratibha & Tamrakar, Dipesh. Practice of Breastfeeding and its Barriers among Women Working in Tertiary Level Hospitals. Journal of the Nepal Medical Association. 2019.