

Perceived Hindering Factors of Exclusive Breastfeeding among Lactating Mothers of Itahari

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ABSTRACT

Introduction

World Health Organization recommends first 6 months of exclusive breastfeeding after birth. It helps in proper growth and development of child. At the same time, it reduces infant mortality by preventing common childhood illnesses and helps for a quicker recovery during illness. So, the study aimed to identify the perceived hindering factors of exclusive breastfeeding among lactating mothers.

Methods

A community-based, cross-sectional analytical study was conducted in Itahari Sub-Metropolitan City. Convenience sampling technique was used to select a total of 123 lactating mothers having infants 0-6 months. A pretested questionnaire was used to interview mothers. Collected data were analyzed using descriptive and inferential statistics.

Results

Although nearly all mothers (97.6%) had knowledge about exclusive breastfeeding and 93.5% of them had correct knowledge of recommended duration of EBF, the prevalence of exclusive breastfeeding was only 17.6%. Breastfeeding was initiated within 1 hour by 68.3% of mothers. Half of the mothers perceived that only mother's milk is not sufficient to their child and about 22% of the mother's perceived that their child is thirsty and should give water to the infant. Ethnicity and EBF duration to first child in multiparous mother was significantly associated with exclusive breastfeeding practice.

Conclusions

Majority of the mothers do not practice EBF although they had known the recommended duration. The major hindering factor of EBF was the perception of the mother that the mother's breastmilk only is not sufficient to the infant.

Keywords: breastfeeding; exclusive breastfeeding; hindering factors; lactating Mothers; perception.

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INTRODUCTION

Human milk is the best option for infant nutrition up to 1 year of age.¹ Breastfeeding is an unequalled way of providing ideal food for the healthy growth and development of infants. As a global public health recommendation, infants should be exclusively breastfed for the first six months of life.² Exclusive breastfeeding means that the infant receives only breast milk. No other liquids or solids are given – not even water – with the exception of oral rehydration solution, or drops/syrups of vitamins, minerals or medicines.³ Currently, the global rate of exclusive breastfeeding to infants for the first six months of life is 36 percent.⁴ The Baby-friendly Hospital Initiative has measurable and proven impact, increasing the likelihood of babies being exclusively breastfed for the first six months.⁵ This study aims to identify the hindering factors of exclusive breastfeeding as perceived by lactating mothers and to find the association of exclusive breastfeeding with selected variables.

METHODS

Community-based analytical cross-sectional research design was conducted in Itahari sub-metropolitan city. Study population was lactating mothers of infants aged (0-6) months. Sample size was calculated using Cochran's formula, $n = z^2pq/d^2$, where the value of $P = 45.0\%$, $q = (100-45) = 55\%$, $z = 1.96$, $d = 20\%$ of $45 = 9$ and taking 5% non-response rate total sample size is 123. Convenience sampling technique was adopted. Participants were interviewed by using pre-tested self-prepared interview questionnaire. Ethical clearance was obtained from Institutional Review Committee of BPKIHS, Dharan (IRC/1045/017). Permission was obtained from the Itahari sub-metropolitan city. After entry in MS Excel, data was rechecked and transferred to SPSS version 20 and analyzed. Data were analyzed by using descriptive statistics to describe the socio-demographic and other related variables. Chi square was used to find out association among selected variables and status of exclusive breastfeeding.

RESULTS

Characteristics	Category	Frequency (%)
Age of mother	<20 years	9(7.3)
	20-30 years	102(82.9)
	>30 years	12(9.8)
Mean age of mother ± S.D.		25.28 ± 4.633
Mean age of infant (in months)		3.66 ± 1.87
Gender of infant	Female	65(52.8)
	Male	58(47.2)
Ethnicity	Pahadi Janajati	50(40.7)
	Bramhin/Chhetri	39(31.7)
	Terai Janajati	19(15.4)
	Others (Dalit, Madhesi, Muslim)	15(12.2)
Religion	Hindu	102(82.9)
	Buddhist	10(8.1)
	Muslim	4(3.3)
	Kirat	4(3.3)
	Christian	3(2.4)
Type of Family	Joint	78(63.4)
	Nuclear	45(36.6)
Education level of mother	Illiterate	9(7.3)
	Basic	13(10.6)
	Secondary	82(66.7)
	Higher education	18(14.6)
Occupation of mother	Home-maker	120(97.6)
	Business	3(7.3)
Occupation of father	Foreign	55(44.7)
	Labor	28(22.8)
	Service	20(16.3)
	Business	9(7.3)
	Unemployed	9(7.3)

Result shows that 82.9% of the mothers were within the age group 20-30 years with mean age 25 years. About 24% of the infants were of 6 month and about 52% of infants were female. About 40% of the respondents belong to the Pahadi Janajati and majority i.e., 82.9% was

Hindu. Almost 63% of the respondents were from joint family and 7.3% of the mothers were still illiterate. Majority i.e., 97.6% of the mothers were homemakers while 44.7% of the fathers were employed in foreign countries.

Table 2. Breastfeeding Information n =123.

Characteristics	Category	Frequency (%)
Got advice regarding breastfeeding	Yes	60(48.8)
	No	63(51.2)
Initiation of breastfeeding within	(0 - 1) hour	84(68.3)
	(2 - 4) hours	28(22.8)
	>4 hours	11(9.0)
Pre-lacteal feeding	Yes	18(14.6)
	No	105(85.4)
Types of pre-lacteal feeding (n=18)	Honey/Butter	2(11.1)
	Lactogen	16(88.9)

Table 2 depicts that less than half i.e., 48.8% of the respondents had got advice regarding breastfeeding and almost 68% had initiated breastfeeding within one hour of birth of baby. Nearly 15% had practiced pre-lacteal feeding and most of them i.e., 88.9% had fed lactogen as pre-lacteal feed.

Table 4 depicts that most i.e., 97.6% of the mothers had knowledge about exclusive breastfeeding. About 40% of mothers got information of exclusive breastfeeding from health personnel but 6.5% of mothers got information through ANC card and immunization card too. Majority of the

Table 3. Information regarding Knowledge of Breastfeeding.

Characteristics	Frequency (%)
Knowledge regarding benefit of breastfeeding to infant	76 (61)
Knowledge regarding benefit of breastfeeding to mother	20 (16.3)

Table 3 depicts most of the mothers i.e., 61.8% had knowledge regarding benefit of breastfeeding to infant while only 16.3% had knowledge regarding benefit of breastfeeding to mother.

mothers i.e., 93.5% who knows about EBF had correct knowledge of recommended duration of EBF. Among the mothers who had not exclusively breastfed their baby, 30.1% of the mothers had exclusively breastfed their infant upto 1 month. Only 35.8% of the multiparous

mothers had exclusively fed their first child for 6 months duration.

Table 4. Descriptions of Information regarding Exclusive Breastfeeding.		
Characteristics	Category	Frequency {Percentage (%)}
Information on exclusive breastfeeding (n=123)	Yes	120(97.6)
	No	3(2.4)
Source of information regarding EBF (n=120)	Media (Radio, TV, etc.)	24(19.5)
	Newspaper/Book	15(12.2)
	Health personnel	49(39.80)
	Friends/Relatives	24(19.5)
	ANC/Immunization card/Pamphlet	8(6.5)
Knowledge of recommended duration of EBF (n=120)	5 months	4(3.3)
	6 months	115(93.5)
	8 months	1(0.8)
Current exclusive breastfeeding status	Yes	21(17.0)
	No	102(82.9)
Duration of EBF to current infant (n=102)	0 month	17(13.8)
	1 month	37(30.1)
	2 months	13(10.6)
	3 months	16(13.0)
	4 months	12(9.8)
	5 months	7(5.7)
Mean duration of EBF to current infant \pm S.D.		1.90\pm1.512
Duration of EBF to first child (n=67)	(0-5) months	39(58.2)
	6 months	24(35.8)
	(7-8) months	4(6.0)

Table 5. Descriptions of Perceived Hindering Factors of Exclusive Breastfeeding n =102.		
Characteristics	Categories	Frequency {Percentage (%)}
Perceived hindering factors of EBF*	Only mother's milk is not sufficient	51(50.0)
	Thought that infant is thirsty	22(21.6)
	Mother has physical problem to feed	13(12.7)
	Family pressure to feed other things	10(9.8)
	Other reasons (had to go to work, cultural practice, etc)	11(10.8)
*Multiple Responses		

Table 5 depicts that half of the mothers who do not exclusively breastfed their child had perceived that mother's milk is not sufficient to their child. About 22% of the mother's perceived that their child is thirsty and should give water to the infant.

exclusive breastfeeding is associated (P-value = 0.00) which shows Terai Janajati breastfed their child exclusively than other ethnic groups. Sex of infant, desired sex of infant, age of mother, type of family, religion, education of mother and employment status of mother

Table 6. Association between Selected Variables and Current Exclusive Breastfeeding Status n = 123.

Variable	Category	Exclusive Breastfeeding		χ^2	p-value*
		Yes	No		
Sex of infant	Female	12 (18.5%)	53 (81.5%)	.188	0.665
	Male	9 (15.5%)	49 (84.5%)		
Age of mother	<20 years	1 (11.1%)	8 (88.9%)	0.244	0.524**
	>20 years	20 (17.5%)	94 (82.5%)		
Desired sex of infant	Yes	15 (15.5%)	82 (84.5%)	0.839	0.260**
	No	6 (23.1%)	20 (76.9%)		
Type of family	Single	9 (20.0%)	36 (80.0%)	0.429	0.512
	Joint	12 (15.4%)	66 (84.6%)		
Religion	Hindu	18 (17.6%)	84 (82.4%)	0.139	0.498**
	Others	3 (14.3%)	18 (85.7%)		
Ethnicity	Terai Janajati	9 (47.4%)	10 (52.6%)	17.064	0.00
	Other ethnic groups	12 (11.5%)	92 (88.5%)		
Education of mother	Illiterate	3 (23.1%)	10 (76.9%)	0.370	0.388**
	Literate	18 (16.4%)	92 (83.6%)		
Employment status of mother	Yes	0 (0.0%)	4 (100.0%)	0.851	0.468**
	No	21 (17.6%)	98 (82.9%)		

*Pearson Chi Square Test
 **Fisher's Exact Test
 p-value \leq 0.05 at 95% confidence interval

Table 6 depicts that ethnicity and status of

are not associated with status of exclusive breastfeeding.

Table 7. Association of Other Factors Related to Breastfeeding and Exclusive Breastfeeding n = 123.					
Variable	Category	Exclusive Breastfeeding		χ^2	p-value*
		Yes	No		
Breastfeeding advice	Yes	8 (13.3%)	52 (86.7%)	1.157	0.282
	No	13 (20.6%)	50 (79.4%)		
Knowledge on benefit of breastfeeding to infant	Yes	9 (11.8%)	67 (88.2%)	3.844	0.050
	No	12 (25.5%)	35 (74.5%)		
Information on EBF	Yes	21 (17.5%)	99 (82.5%)	0.633	0.567**
	No	0 (0.0%)	3 (100.0%)		
Presence of breast problem	Yes	6 (13.6%)	38 (86.4%)	.572	0.450
	No	15 (19.0%)	64 (81.0%)		
Initiation of breastfeeding	Within 1 hour	18 (21.4%)	66 (78.6%)	3.549	0.06
	>1 hour	3 (7.7%)	36 (92.3%)		
EBF duration to first child (n=67)	(0-5) month	5 (12.8%)	34 (87.2%)	4.916	0.027
	(6-8) month	10 (35.7%)	18 (64.3%)		
*Pearson Chi Square Test					
**Fisher's Exact Test					
p-value \leq 0.05 at 95% confidence interval					

Table 7 shows association between the knowledge on benefit of breastfeeding to infant (P-value=0.050) and EBF duration to first child (P-value=0.027) with status of EBF. Variables like breastfeeding advice, pre-lactal feeding, and presence of breast problem and initiation of breastfeeding are not associated with status of breastfeeding.

DISCUSSION

In this study, it was found that only 17% of the lactating mothers had breastfed their infants exclusively. The study done by Paudel and Giri at Bhaktapur district revealed 55.0% of mothers had practiced exclusive breastfeeding upto 6 months.⁶ The prevalence is 23.2% in a research done in Mid-western and

Eastern regions of Nepal.⁸ The prevalence of exclusive breastfeeding varies within country although NDHS report⁹ had shown higher prevalence in Nepal.

This study reveals breastfeeding was initiated within 1 hour by 68.3% of mothers. Only 41.5% mothers initiated breast feeding within $\frac{1}{2}$ hour of birth on the study done by Chaudhary et al.⁷ About 37.1% respondents initiated breast feeding in less than an hour (\leq 1 hour) in research done in Satar community done by Ban and Rajbansi.¹⁰ Breastfeeding was initiated within an hour of birth in 67.2% of infants in the study done by Dharel et al which is almost similar to the findings of this study.⁸

The mean duration and standard deviation

of EBF to the infants in this study is about 2 months and ± 1.512 respectively although most of the mothers (93.5%) had information regarding the recommended duration of EBF to the infant.

Half of the mothers who do not feed breastmilk exclusively perceived that only breastmilk is not sufficient to the infants. The perception that mothers' breast milk is insufficient for child's growth, child being thirsty and the needs to introduce herbal medicine for cultural purposes were among the important factors for early mixed feeding was revealed on the study done in Tanzania by Aubrey et al which is almost similar to the findings of this study.¹¹

The study done in Kenya by Wanyoni shows that the major hindrance to exclusive breastfeeding was mothers' perception of insufficient breast milk production.¹² According to the study done by Thomas Jessy V. the major maternal problems identified for not continuing exclusive breastfeeding were (a) insufficient breast milk, (b) sore or painful nipples, (c) return to work or school, and (d) poor latching.¹³

The factors which influenced the mothers' decision on exclusive breast-feeding were: friends' breast-feeding preferences, type of delivery and baby's first feed in the study done by Chandrasekhar et al.¹⁴

Breastfeeding problem was significantly associated with exclusive breastfeeding cessation on the study done by Rajendra et al in central Nepal.¹⁵ In this study, 35.8% of the mothers had breast problem while breastfeeding but the presence of breast problem is not significantly associated (P -value=0.450) with the exclusive breastfeeding practice.

CONCLUSIONS

The study concluded that the majority of the mothers do not breastfeed their child exclusively although they had known the recommended duration of EBF. The major hindering factor of EBF was the perception of the mother that the mother's breastmilk only is not sufficient to the infant. This study shows the association between the ethnicity and EBF duration to the first child with the EBF practice to the current child. Although mothers had knowledge on benefits of breastfeeding to infants they are not breastfeeding exclusively upto recommended duration in practice. This gap can be fulfilled by addressing the perceived hindering factors regarding EBF.

Recommendations

A comparative study can be conducted in different ethnic groups to compare the practice of EBF as infant feeding practice may differ from one culture to another culture. An interventional study can be conducted to study the efficacy of breastfeeding interventional programs in community level which may help to change the perception of infant's mothers regarding need of exclusive breastfeeding upto 6 months.

Limitation

The findings of this research are based on verbal response of mother rather than observation of their actual practice.

Conflicts of interest

The authors declare no conflict of interest.

FINANCIAL DISCLOSURE

None

ACKNOWLEDGEMENTS

Researchers would like to express sincere thanks to B. P. Koirala Institute of Health Sciences for providing an opportunity to

conduct this study. Researchers would express our indebtedness to all the mothers

for their kind co-operation and willingness to participate in the study.

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Citation: Pradhan R, Karn B, Chaudhary R, Yadav U, Shah S. Perceived Hindering Factors of Exclusive Breastfeeding among Lactating Mothers of Itahari. *JCMS Nepal*. 2022; 18(3); 235-43.