

Exclusive Breast Feeding and it's Determinants among the Rural Mother in a Selected Area of Bangladesh

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Abstract

Background: Breastfeeding is considered as the pivotal factor between life and death for the vast majority of children in developing countries, but pattern of breast feeding and exclusive breast feeding is more important, which is ignored often by most mothers.

Objective: This study was conducted with a view to find out the importance and prevalence of exclusive breast feeding and its determinants / associated factors among the rural mother in a selected area of Bangladesh.

Methodology: This was a descriptive type of cross-sectional study carried out in different villages of Manikganj during the period of October, 2020 to March, 2021 by the Department of Community Medicine, Monno Medical College, Manikganj.

Results: The study revealed that out of 248 respondents majority 120(48%) belonged to the age group (15-20) years, most of the respondents 82(66.0%) completed below SSC level and monthly family income of most of the respondents 48(38%) was taka (5000-10000). Majority of the mothers 204(82.3%) says that breast milk is cost-effective and creates a bondage 208(83.9%) between mother and child. The prevalence of knowledge and practices on EBF were 203 (81.9%) and 80 (32.3%) respectively. More than half 140 (56.5%) of the respondents initiated breast milk within one hour of delivery and two-thirds 160 (64.5%) of the respondents gave colostrums to their baby. Only one-third of the respondents 83 (33.4%) blamed inadequate milk production but majority 165 (66.5%) was working mother as reason for non-exclusive breast feeding and majority 187 (75.45) get family support in exclusive breast feeding.

Conclusion: Rural people still have a lack of proper knowledge about exclusive breast feeding practice and its importance.

Keywords: Exclusive breast feeding, Rural mother, Prevalence, Determinants.

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Introduction

The World Health Organization (WHO) defines exclusive breastfeeding (EBF) as when 'an 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. The WHO and UNICEF recommend exclusive breastfeeding (EBF) for the first six months of life¹. Breastfeeding (BF) is the single most cost effective intervention in reducing morbidity and mortality in children.² The global recommendations for breast feeding includes initiation of BF during the first hour after birth, practicing of exclusive BF (EBF) up to six months, continuing breast feeding for at least 2 years and practicing on demand feeding.³ Approximately 7.7% and 19.1% of all neonatal deaths may be avoided by universal initiation of BF within the first day or first hour of life, respectively.⁴ Good practice of EBF can prevent 13.8% of all deaths among infants aged less 2 years and 11.6% of under 5-years children deaths^{5,7} but unfortunately a report estimated in 2012 that, only 35% of infants were exclusively breastfed globally.⁸ It is suggested by World Health Organization that an able mother should practice and maintain exclusive breastfeeding for first six months of her infant's life.⁹ But still, it remains a big challenge to establish EBF not only in Bangladesh but also in any developing countries. In this context this study was conducted to find out the importance and prevalence of

exclusive breast feeding and its determinants / associated factors among the rural mother in a selected area of Manikganj District, Bangladesh.

Materials and Methods

This was a descriptive type of cross-sectional study which was conducted among 248 rural mothers aged 15-45 years in four different villages named as Nabagram, Noyakandi, Baruil, Dholai under Nabagram union of Manikganj Sadar Upazilla, Manikganj. It was conducted by the dept. of Community Medicine, Monno Medical College during the period of 1st October, 2020 to 31st March, 2021. The ethical clearance was approved by ethics review committee of Monno Medical College. Sampling technique was convenient in nature. The participants were included in the study on the basis of some inclusion & exclusion criteria. The data were collected by face to face interview with a semi-structured questionnaire duly pre-tested. Data thus collected were checked and verified for any omission or inconsistency. Finally data were analyzed by SPSS version 23 and presented in the form of tables & graphs / diagrams.

Results

Table 1: Socio-demographic characteristics of the respondents (n=248)

Socio-demographic characteristics	Frequency	Percent
Age (years)		
15 to 25	120	48.3
25 to 35	100	40.3
35 to 45	28	11.2
Mean±SD= 31.40±7.626		
Education of mother		
Below SSC	164	66.1
SSC	56	22.5
HSC & above	28	11.2
Occupation		
Housewife	160	64.5
Service	40	16.1
Day laborer	24	09.6
Others	14	05.6
Monthly Family Income (Taka)		
<5000	96	38.7
5000 to 10000	136	54.8
> 10000	16	06.4
Mean±SD= 5141.13±2538.773		
Parity of mother		
Unipara	142	57.3
Multi-para	106	42.7

Table 1 shows that 120 (48.3%) respondents belonged to the age group (15 to 25) years, 160 (64.5%) respondents were housewives, 40 (16.1%) respondents were service holders and 136 (54.8%) respondents had monthly family income (5000 to 10000) taka.

Table 2: Knowledge of mother on importance of breast milk (n=248*)

Parameters considered for knowledge on importance of breast milk	Frequency	Percent
Anti-infective	64	25.8
Cost effective	204	82.3
Bondage	208	83.9
Delays Pregnancy	106	42.7
Prevents diarrhea	175	70.6
Prevents breast cancer	77	31.1
* Multiple response		

Table 2 shows that 208(83.9%) mother says that breast milk intake increases bondage between mother and child, 204(82.3%) cost-effective and, 175(70.6%) prevents diarrhea.

Table 3: Knowledge attitude and practice of exclusive breast feeding (n=248*)

Parameter	Frequency	Percent
Knowledge	203	81.9
Attitude	198	79.8
Practice	45	18.1
* Multiple response		

Table 3 shows that 203(81.9%) and 198(79.8%) of respondents had proper knowledge and attitude towards exclusive breast feeding but only 45 (18.1%) practiced it.

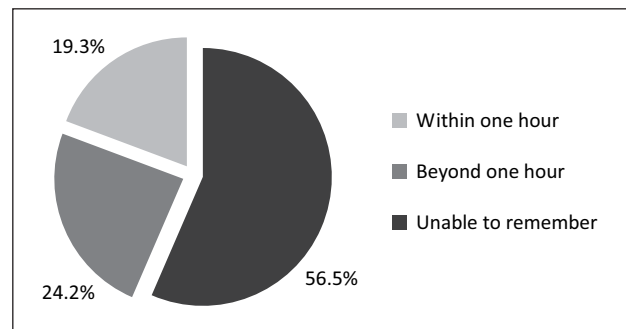


Figure 1: Initiation of breast feeding after delivery (n=248)

Figure 1 revealed that initiation of breast feeding within one hour of delivery occurred in 140 (56.5%) respondents followed by 60 (24.2%) respondents that occurred beyond

one hour of delivery and 48 (19.3%) respondents were unable to memories the time of initiation.

Table 4: Intake of colostrums by the baby just after delivery (n=248)

Status	Frequency	Percent
Intake of colostrums	160	64.5
Not intake	40	16.1
Unable to remember	48	19.3
Total	248	100.0

Table 4 shows that colostrums was given to the baby in 160 (66.5%) respondents followed by non-intake of colostrums and inability to remember whether it was given or not were 40(16.1%) respondents and 48(19.3%) respondents respectively.

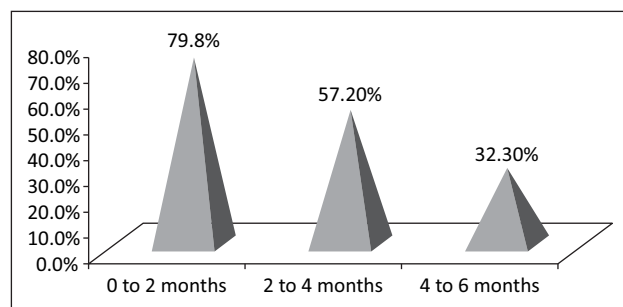


Figure 2: Duration of exclusive breast feeding by the baby (n=248)

Figure 2 shows that majority 198 (79.8%) had exclusive breast feeding for two months, 142 (57.2%) respondents for two to four months and only 80 (32.3%) mother fed their baby exclusively for 6 months.

Table 5: Constraints for Exclusive Breast Feeding (n=248*)

Constraints for EBF	Frequency	Percent
Inadequate nutrition	83	33.4
Working mother	165	66.5
Pressure from In laws	76	30.6
Sore nipple	52	21.0
Addiction	59	23.7
Marketing of Breast milk substitute	93	37.5
*Multiple response		

Table-5 shows that the constraints to exclusive breast feeding were working mother 165 (66.5%) followed by inadequate milk production were 83 (33.4%) respondents and pressure from mother in laws were 76 (30.6%) respondents.

Table 6: Support for Exclusive Breast Feeding (n=248*)

Support for EBF	Frequency	Percent
Family support	187	75.4
Husband support	192	77.4
Colleague support	95	38.3
Government support	45	18.1
Others	66	26.1
*Multiple response		

Table 6 reflected that in majority of mothers got support from husbands 192 (77.4%) followed by family 187 (75.4%) for exclusive breastfeeding

Discussion

In this study majority (83.9%) of the respondents have said that breast milk intake increases bondage between mother and child, 82.3% respondents consider cost-effective and 70.6% respondents think prevents diarrhea. A similar study that has been conducted in Srilanka shows that 99.7% respondents admit that breastfeeding helps to build up a good bond between mother and baby which is almost consistent with this study.¹⁰

The study also revealed that 81.9% and 79.8% of respondents had proper knowledge and attitude towards exclusive breast feeding but only 18.1% practiced it. A similar study that has been conducted in Nigeria shows that about 84% had good knowledge of EBF which is consistent with the result of this study.¹¹ Another study which has been conducted in Bangladesh reflects that around 61.0% women in Bangladesh practice EBF with significant variation across several individual, household, and community level factors EBF which is inconsistent with this study.¹²

In this study, 56.5% breast feeding occurs within one hour of delivery. A similar study that has been conducted in India shows that only 41% children breast feed within one hour which is consistent with this study.¹³ Another study which has been conducted by Junaid M et al reveals that 78.2% show initiation of breast feeding within 6 hours of delivery which is inconsistent with this study.¹⁴

The study reveals that colostrums was given in 64.5% of new born. A study that has been conducted in Nigeria shows that 47.5% colostrums intake by new born. This finding is slightly higher than the result of this study.¹⁵

The study shows that majority 79.8% have exclusive breast feeding for 2 months but only 32.3% mothers feed their baby exclusively for 6 months. A study which has been conducted by Mogre V et al shows that mothers whose babies are younger than 3 months are more likely to exclusive breast feeding than those having babies aged ≥3 months.¹⁶

The study reflected that main constraints to exclusive breast feeding are working mother 66.5% followed by inadequate

milk production are 33.4% respondents and pressure from mother in laws are 30.6% respondents. A similar study which has been conducted by Agunbiade OM et al shows that one of the barriers of EBF is pressure from mother-in-law (25%) which is almost consistent with this study.¹⁷

In this study, majority of respondents (77.4%) get support from husbands followed by family are 75.4% respondents for exclusive breastfeeding. Another study conducted in Sri Lanka reveals that majority of the mothers (81.1%) had good family support which is almost consistent with the result of this study.¹⁰

This was a small study conducted in a selected area conveniently. The sample size was also small for which it may not reflect the rural picture of Bangladesh.

Conclusion

The study reveals that majority belongs to the younger age group and most of the respondents have completed below SSC level. More than half of the respondents initiate breast milk within one hour of delivery and two-thirds of the respondents give colostrums to their baby. About one third of the respondents have the history of exclusive breast feeding. Majority of the respondents blame inadequate milk production and working mother as reason for non-exclusive breast feeding. Rural people still have a lack of proper knowledge about breast feeding practice. There is need to develop and implement community based EBF program to improve the situation. Moreover the supportive individual counseling or group education for mothers and their families about breastfeeding, including the reassurance on importance of breast feeding.

Conflict of interest: There is no conflict of interest.

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