

Assessment of Knowledge and Practice Regarding Breast Feeding Amongst the Lactating Mother

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Abstract: The useful impact of breastfeeding for both mother and infant are outstanding. In spite of its known points of interest, breastfeeding rates are low world over. Substantial number of components influences breastfeeding. Inaccurate procedures, situating, not visit breastfeeding, breastfeeding timing, pacifiers and sustenance providers are vital variables that can incline to lactation issues. To enhance rates of full breastfeeding, particular data about the convictions and practices that impact this result is required. The motivation behind the investigation is to assess learning, expertise and disposition of breastfeeding of lactating mother. A medical center based cross-sectional investigation. Test was chosen from the populace by purposive inspecting system. Study populace was taken from the lactating moms conceded in Department of Obstetrics and Gynecology, Bangabandhu Sheik Mujib Medical University, Dhaka. Add up to 100 cases were incorporated in light of consideration and prohibition criteria. Subsequent to taking educated composed assent information was gathered by a poll and important examinations were finished. In the present investigation, larger part (92.0%) of the moms were bosom encouraging their newborn children. While, 87.0% of the moms knew about EBF, only 34.0% were select bosom feeders. Most of the moms began supplementary feed at 4– 6 months of age and the reasons given by them were; inadequate drain, to quiet down the child and trusted that bosom drain alone is deficient for a developing infant. However, lion's share of the moms conveyed regularly and in the healing facility, just 29.0% of the moms expressed that they had started breastfeeding inside 60 minutes. Most regular purposes behind postponement in commencement of breastfeeding as refered to by the moms were; delay in moving the moms from work room, babies were in neonatal ICU, Cesarean segment and family limitation. In accordance with past research, moms from urban foundation had higher score and show more inspirational mentalities toward breastfeeding. However, the vast majority of the respondents have great state of mind and information; yet ability in regards to bosom encouraging was poor aptitude (68%). On evaluation of position of their children amid bosom nourishing shows, straight head and body was seen in 34% mother, body near mother in 39% mother. The entire body completely upheld in 30% cases and confronting bosom, nose inverse the areola saw in 43 % mother. In a large portion of the mother's connection with the child was not right, as jaw contacting bosom 38%; mouth totally open 33.0%; bring down lip turned outward 30.0% and more areola above than beneath the mouth 36.0%. The present examination reasons that the moms have a decent learning and unbiased states of mind toward bosom bolstering. Our discoveries likewise demonstrate that the level of restrictive bosom nourishing was low among moms. In this manner, it is essential to give pre-birth instruction to moms and fathers on bosom nourishing. We additionally prescribe fortifying the general wellbeing instruction crusades to advance bosom nourishing.

Keywords: Breast feeding, Exclusive breast feeding, Knowledge and Practice of Breast Feeding.

INTRODUCTION

Breastfeeding is an essential human action, imperative to baby and maternal wellbeing and of gigantic financial incentive to families and social orders. Elite breastfeeding (EBF) is the best sustenance for kids amid the initial a half year of life [1]. As a worldwide objective for ideal kid wellbeing and sustenance, all ladies ought to be empowered to rehearse restrictive breastfeeding (EBF), and all newborn children ought to be sustained solely on bosom drain from birth to a half year of age. The variables that impact commencement, support and length of breastfeeding are social and social conventions, baby development during childbirth, level of duty, and education of the mother and level of innovation [2]. The WHO prescribes that for the initial a half year of life, babies ought to be only breastfed to accomplish ideal development, advancement, and wellbeing. From that point, newborn children ought to get healthfully sufficient and safe reciprocal nourishments, while proceeding to breastfeed for up to two years or more [3]. Restrictive Breast Feeding (EBF) is characterized as newborn child nourishing with human drain without the expansion of some other fluids or solids [4]. EBF for a half year is essential for both newborn child and maternal wellbeing. Newborn children who are not only breastfeeding will probably create gastrointestinal diseases, in creating as well as in industrialized nations. The danger of mortality because of looseness of the bowels and different contaminations can increment many-crease in babies who are either halfway breastfed or not breastfed by any means [5]. Amid the initial two months of life, newborn children who are not breastfed are almost six times more inclined to kick the bucket from irresistible illnesses than babies who are breastfed; somewhere in the range of 2 and 3 months, non-breastfed newborn children are 4 times more prone to bite the dust contrasted with breastfed newborn infants [6, 7]. Regardless of solid confirmations in help of EBF for the initial a half year of life, its predominance has stayed low till now and it is evaluated that all in all around 33% of newborn children were solely breastfed for the initial a half year of life [8]. Breastfeeding has all the earmarks of being impacted by social, social, and monetary variables. Poor practices and dispositions toward restrictive breastfeeding have been accounted for to be among the significant purposes behind weakness results among kids, especially in creating nations [9]. Rates of EBF are imperfect in numerous nations. In Saudi Arabia as a rule by 8.3 % (n = 32) of the 384 members EBF for 6 months. In an examination in Congo, 87.5 % of babies were EBF amid the maternity remain, however by a half year, just 2.8 % (n = 12) of newborn children were solely breastfed [10]. In an examination done in Nigeria, the dominant part (88.0 %) of the respondents had found out about EBF and healing center was the wellspring of data, and in excess of 50 % of the ladies had an uplifting mentality towards breastfeeding [11]. In any case, the advancement and acknowledgment of

practices, for example, selective breastfeeding, are particularly critical in creating nations with elevated amounts of destitution, and that are portrayed by a high weight of illness and low access to clean water and satisfactory sanitation [12]. Breastfeeding has declined worldwide in recent years, as a result of urbanization and maternal employment outside the home. Studies in India have also shown a decline in breastfeeding trends, especially in urban areas [13]. Early commencement of breastfeeding isn't seen in more than 75% of the country's youngsters and more than half of kids are not solely breastfed [14]. Subsequently, the low figures for early commencement of breastfeeding in India involve critical concern. Despite the fact that, the act of bosom nourishing is affected by different social, social and religious convictions, maternal baby sustaining state of mind has been appeared to be a more grounded free indicator of breastfeeding commencement [15]. Likewise, maternal uplifting mentalities toward breastfeeding are related with proceeding to breastfeed longer and have a more noteworthy possibility of accomplishment [16]. On opposite, negative states of mind of ladies toward breastfeeding are thought to be a noteworthy obstruction to start and keep on breastfeeding [17]. Bosom sustaining has a few advantages for both the newborn children and moms. Be that as it may, in spite of solid confirmations in help of bosom sustaining its commonness has stayed low around the world [18]. The goal of the present investigation was to look at the learning and demeanor towards bosom sustaining rehearses among Bangladeshi postnatal moms.

MATERIALS & METHODS

This was a cross sectional investigation completed among lactating moms conceded in Department of Obstetrics and Gynecology as well as moms who went to inoculation corner and the Pediatric Department with their kids for immunization and for the treatment of other minor diseases at a tertiary care clinic. The individuals who met the consideration criteria were met. The examination criteria were; a) moms of solid newborn children matured a half year, b) conceived somewhere in the range of 37 and 42 incubation weeks, c) and without significant birth deformities, for example, intrinsic coronary illness, congenital fissure/congenital fissure and Down disorder and d) who volunteered to take an interest. Moms of preterm babies, and different incubations were rejected. One hundred moms were selected in to the present examination. The statistic shape inspired data on members' experience: age, conjugal status, religion, place of home, work, training, family's month to month pay, sort of conveyance, number of conveyances, current bosom nourishing practices, restrictive bosom bolstering and commencement of bosom sustaining inside 60 minutes. An organized questioner directed survey received and other writing was utilized to gather information. The gathered information were checked for fulfillment, coded and entered in to a PC. Factual

examination was completed utilizing SPSS for Windows adaptation 21.0. The information were abridged by engaging insights utilizing the recurrence, rate and tables for clear cut factors.

RESULTS

The example of the present investigation included baby blues moms (N=100) of whom 71.0% had a place with 20– 25ys age gathering. The mean age of the members was 22.07±5.50 (M±SD) and hailing from rustic foundation (58.0%). (Table-I) More than

three fourth of the members were housewife or homemakers (79.0%) and had ordinary conveyance. About portion of the members were ignorant and essential taught (42.0%) and same extent of moms had bring down financial status. The majority of the spouses (52%) were untalented workers. There were 58% young men and 42% young ladies. Albeit the majority of the moms (92.0%) were breastfeeding their babies, just 34.0% of the moms were restrictive bosom feeders and 29.0% started breastfeeding inside a hour of conveyance.

Table-1: Sociodemographic characteristics of study participants (n = 100)

Characteristics	Variable	F	%
Maternal age (years)	<20	14	14.0
	21–25	71	71.0
	26–30	12	12.0
	>31	3	3.0
Maternal religion	Muslim	83	83.0
	Hindu	11	11.0
	Christiana	3	3.0
	Other	3	3.0
Maternal Housing	Rural	58	58.0
	Urban	42	42.0
Socioeconomic status	Lower	45	45.0
	Lower middle	18	18.0
	Upper middle	17	17.0
	Upper	20	20.0
Type of delivery	Normal	72	72.0
	Caesarian	28	28.0
Current Breast feeding practices	Yes	92	92.0
	No	8	8.0
Exclusive breast feeding	Yes	34	34.0
	No	66	66.0
Breast feeding initiation within an hour	Yes	29	29.0
	No	71	71.0

Moms learning towards breastfeeding demonstrates that larger part of the moms concurred that colostrums is first bosom drain (87.0%) and is essential to keep up the resistance of the child (94.0%). While, 87.0% felt that elite bosom drain to be given amid initial a half year, just 38.0% expressed that breastfeeding ought to be proceeded up to 2 years. (Table-II) Similarly the majority of the moms knew about the significance of burping after each feed (91.0%), significance of taking sound nourishment (98.4%) and bosom bolstering helps in mother and kid holding (100%). The vast majority of the respondents took in their insight on bosom sustaining from their mom (67%). Every one of the moms expressed that moms ought to sit serenely amid breastfeeding. In any case, 23.0% of the moms opined that bosom feed can influence the excellence of the bolstering moms and 72.0% expressed that breastfeeding ought to be halted when they begin weaning the child. In any case, the normal scores (12.05±1.74, M±SD) demonstrate that moms have great information about breastfeeding.

Concerning states of mind of the moms towards bosom nourishing, most of the members concurred that breastfeeding is more helpful than recipe sustaining (86.0%) and expands mother baby holding (67.0%). While 33.0% of the moms dissented, (half) of them were unbiased to the announcement "bosom drain is inadequate in press". Anyway 37.0% of the members opined that "recipe sustaining is the better decision if the mother intends to return to work". Of the moms, 57.0% concurred that equation feed miss one of the immense delights of parenthood and fathers doesn't learn about left if a mother breastfeeds (81.0%). About one fourths of the members concurred that the ladies can breastfeed out in the open places, for example, office, commercial center, eateries (24.0%). The greater part expressed that bosom drain is perfect for the children (78.0%), effortlessly processed (88.0%) and sound for a newborn child than recipe (100.0%). The greater part of the individual things had a mean score more than 3 and just three things had a mean score under 3, showing that the vast majority of the moms

had nonpartisan to uplifting mentality towards breastfeeding (Table-III).

On appraisal of position of their children amid bosom encouraging shows, straight head and body was seen in 34% mother, body near mother in 39% mother. The entire body completely bolstered in 30% cases and confronting bosom, nose inverse the areola saw in 43 % mother. In a large portion of the moms connection with the child was not right, as button contacting bosom 38%; mouth totally open 33.0%; bring down lip turned outward 30.0% and more areola above than beneath the mouth 36.0%. On assessment of individual things of aptitude, demonstrating that the vast majority of the moms had poor ability towards breastfeeding.

Moms from urban foundation (60.23±4.11, p < .012) and higher financial status had higher scores, showing more ideal demeanors towards breastfeeding. There was likewise critical distinction as to current bosom bolstering rehearses (p< .000). Moms the individuals who were presently breastfeeding (58.83 ± 4.74) had more uplifting mentalities than non-breastfeeding moms (45.21±5.22) did. In spite of the fact that there were no critical contrasts found, more established matured moms (60.00±5.40) and homemakers (59.13 ± 4.72) had more inspirational states of mind towards breastfeeding than alternate members.

Table-2: Moms' learning with respect to breastfeeding

Variables	True		False		Mean ± SD
	F	%	F	%	
Colostrum is first breast milk	87	87.0	13	13.0	0.96 ± 0.17
Colostrum is important for the baby to maintain immunity	94	94.0	6	6.0	0.99 ± 0.09
Breast feeding should be continued Up to 2 years	38	38.0	62	62.0	0.68 ± 0.46
Exclusive breast milk can be given during first 6 months	87	87.0	13	13.0	0.96 ± 0.17
Lactating mother should take healthy food to improve secretion of milk	98	98.0	2	2.0	0.98 ± 0.12
During breastfeeding the mother should sit comfortably	100	100	0	0	1.00 ± 0.00
During breastfeeding the mother should maintain eye to eye contact and talk with the baby	92	92.0	8	8.0	0.92 ± 0.26
Awakening the baby while breastfeeding	74	74	26	26.0	0.60 ±0.49
Breast feeding helps in mother and child bonding	100	100	0	0	1.00 ± 0.00
Breast feeding can prevent diseases affecting breast	95	95.0	5	5.0	0.95 ±0.21
Breastfeed affect the beauty of feeding mothers	23	23.0	77	77.0	0.40 ±0.49
Stop breastfeeding when you start weaning	72	72.0	28	28.0	0.56 ±0.49

Table-3: Moms' states of mind towards breastfeeding

Variables	Disagree		Neutral		Agree		Mean (SD)
	F	%	F	%	F	%	
Formula feeding is more convenient than breastfeeding	86	86.0	10	10.0	4	4.0	3.90 ± 0.78
Breastfeeding increases mother infant bonding	13	13.0	20	20.0	67	67.0	3.58 ± 0.89
Breast milk is lacking in iron	33	33.0	50	50.0	17	17.0	3.12 ± 1.04
Formula feeding is the better choice if the mother plans to go back to work	56	56.0	7	7.0	37	37.0	3.40 ± 1.19
Mothers who formula feed miss one of the great joys of motherhood	29	29.0	14	14.0	57	57.0	3.25 ± 1.07
Women should not breastfeed in public places such as restaurants	71	71.0	5	5.0	24	24.0	3.77 ± 1.05
Breastfed babies are healthier than formula fed babies	2	2.0	20	20.0	78	78.0	3.93 ± 0.89
Fathers feel left out if a mother breast feeds	81	81.0	11	11.0	8	8.0	3.84 ± 0.72
Breast milk is the ideal food for babies	2	2.0	20	20.0	78	78.0	3.93 ± 0.89
Breast milk is more easily digested than formula	9	9.0	3	3.0	88	88.0	3.77 ± 0.91
Formula is as healthy for an infant as breast milk	100	100.0	0	0	0	0	1.00 ± 0.00

In the present examination, lion's share (92.0%) of the moms was bosom bolstering their babies. While, 87.0% of the moms knew about EBF, just 34.0% were select bosom feeders. These

discoveries are bolstered by past examinations from various parts of the world [18, 19]. Be that as it may, the low commonness of EBF at a half year of age in our investigation (34%) was considerably lower than past

studies[20] yet higher than late examinations from others (7.8% and 17.0%) in India [21, 8]. New Guinea (17%) [22], and Nigeria [23]. Further, considers demonstrate the commonness of elite breastfeeding at a half year is for the most part low in low asset nations and changes from 9% [24] to 40% [25]. Most of the moms began supplementary feed at 4– 6 months of age and the reasons given by them were; inadequate drain, to quiet down the child and trusted that bosom drain alone is lacking for a developing infant. Distributed reports show that inadequate drain supply was the most widely recognized reason referred to by the ladies for weaning. This finding was like those found in other studies [16, 26]. In an ongoing assessment of the Sustained Development Goals (SDGs), select breastfeeding (EBF) for a half year was considered as a standout amongst the best mediations to accomplish Millennium Development Goals (MDG-4). Be that as it may, breastfeeding advancement intercessions in creating nations have been appeared to result in a six crease increment in selective breastfeeding rates at six months [27]. However, lion's share of the moms conveyed regularly and in the healing center, just 29.0% of the moms expressed that they had started breastfeeding inside 60 minutes. Most basic purposes behind postponement in inception of breastfeeding as referred to by the moms were; delay in moving the moms from work room; babies were in neonatal ICU, Cesarean area and family confinement. This is higher than the examinations led from various parts of the world extending from 6.3% to 31% [20, 28, 29, 30]. Despite what might be expected, few examinations exhibited higher rate of breastfeeding inception 38% [31] 53% [32] and 72.2% [20]. Be that as it may, the information in different investigations in others demonstrates that inception rates change from 16 to 54.5% [33]. These discoveries demonstrate wellbeing experts to be made mindful about the significance of starting early breastfeeding are a critical concern. In the present investigation, 87.0% of the moms knew about EBF. This finding is predictable with past outcomes that lactating moms from creating nations have great learning of EBF [20]. Thus, 38% moms in the present investigation felt that they should keep breastfeeding till the age of 2 years. This finding is very contrast with an ongoing report that discovered 75% moms knew that they should keep breastfeeding till the age of 2 years [30]. Moms who breastfed at a half year had a higher normal score (58.83 ± 4.74) than their non-breastfeeding partners (45.21 ± 5.22) and critical contrast was watched ($p < .000$). Past examinations additionally have demonstrated that moms who don't breastfeed have negative dispositions towards breastfeeding [34]. Most moms had low state of mind scores towards "Bosom drain is deficient in press", "Recipe encouraged children will probably be overloaded than breastfed babies" and "A mother who sometimes drinks liquor ought not breastfeed her infant" and demonstrated future advancement program ought to enhance these information and demeanors. Then again, consonance

with past reports about breastfeeding, the greater part of the moms in this examination concurs that breastfeeding advances mother-infant bonding [35].

Various investigations likewise edified that there are mental advantages for both mother and newborn child as the demonstration of breastfeeding is a period of physical contact and closeness which sustains the bond between the two [36, 37]. In accordance with past research, moms from urban foundation had higher score and show more uplifting demeanors toward breastfeeding [18]. Maternal training has been depicted as one of the most grounded determinants of the act of EBF. However, no distinction was found among training and dispositions score, shockingly, in our investigation unskilled moms (59.50 ± 4.94) than educated moms (58.08 ± 4.47) hold better inspirational states of mind toward bosom nourishing. This finding is like outcomes from Jordan where less taught ladies will probably breastfeed than ladies of advanced education level³⁸. Studies show that moms with higher family salary would be wise to demeanors towards breastfeeding and comparable finding was seen in the investigation sample [39, 40].

However, the greater part of the respondents has great disposition and information; yet ability with respect to bosom encouraging was poor aptitude (68%). On appraisal of position of their children amid bosom nourishing shows, straight head and body was seen in 34% mother, body near mother in 39% mother. The entire body completely upheld in 30% cases and confronting bosom, nose inverse the areola saw in 43 % mother. In the vast majority of the mother's connection with the child was not right, as button contacting bosom 38%; mouth completely open 33.0%; bring down lip turned outward 30.0% and more areola above than beneath the mouth 36.0%. By and large discoveries proposed that moms had great learning and state of mind on breastfeeding, however poor aptitude. These discoveries were bolstered by an ongoing report that discovered most moms had nonpartisan information and state of mind on breastfeeding [40].

CONCLUSIONS

The present investigation infers that the moms have a decent learning and unbiased dispositions toward bosom sustaining, yet poor ability with respect to positioning, confronting, and connection. The breastfeeding information and positive practices are problematic among the rustic moms. Breastfeeding directing can enhance the EBFs. Centered breastfeeding guiding and counsel by the wellbeing specialists with accentuation on rectify method can enhance the positive breastfeeding rehearses. It is critical to give pre-birth instruction to moms and fathers on bosom bolstering. We additionally prescribe fortifying the general wellbeing instruction battles to advance bosom bolstering.

REFERENCES

1. Tadele N, Habta F, Akmel D and Deges E. Knowledge, attitude and practice towards exclusive breastfeeding among lactating mothers in MizanAman town, Southwestern Ethiopia: descriptive cross-sectional study. *International Breastfeeding Journal*. 2016; 11(3): 1-7.
2. Kishore S, Kumar P, Aggarwal A. Breastfeeding Knowledge and Practices amongst Mothers in a Rural Population of North India: A Community-based Study. *Journal of Tropical Pediatrics*. 2009; 55(3): 183–188.
3. WHO. Exclusive breastfeeding for six months best for babies everywhere?. World Health Organization; 2011. (Cited 2017 July 21). Available from: <http://www.who.int>.
4. WHO. The WHO Global Data Bank on Infant and Young Child Feeding. WHO Nutrition for Health and Development. 2009. (Cited 2017 July 21). Available from: <http://www.who.int>.
5. WHO. Indicators for assessing infant and young child feeding practice part 3. WHO, Geneva. 2010.
6. WHO. Early Initiation of Breastfeeding: WHO, Geneva. 2010.
7. WHO. http://www.who.int/nutrition/topics/exclusive_breastfeeding/en/. 2014. [Accessed on January 2018]
8. Vijayalakshmi P, Susheela T, Mythili D. Knowledge, attitudes, and breast feeding practices of postnatal mothers: A cross sectional survey. *Int J Health Sci (Qassim)*. 2015 Oct; 9(4): 364–374.
9. Al-Binali AM. Breastfeeding knowledge, attitude and practice among school teachers in Abha female educational district, southwestern Saudi Arabia. *Int Breastfeed J*. 2012;7:10.
10. Babakazo P, Donnen P, Akilimali P, Mala-Ali NM, Okitolonda E. Predictors of discontinuing exclusive breastfeeding before six months among mothers in Kinshasa: a prospective study. *Int Breastfeed J*. 2015;10:19.
11. Mbada CE, Olowookere AE, Faronbi JO, Oyinlola-Aromolaran FC, Faremi FA, Ogundele AO, Awotidebe TO, Ojo AA, Augustine OA. Knowledge, attitude and techniques of breastfeeding among Nigerian mothers from a semi-urban community. *BMC research notes*. 2013 Dec;6(1):552.
12. Magawa R. Knowledge, attitudes and practices regarding exclusive breastfeeding in Southern Africa-Part 2. 2012. (Cited 2017 August 19). Available from: <http://www.consultancyafrica.com>.
13. Rasia SK, Singh SK, Pathi S, Bhalla S, Sachdev TR. Breast-Feeding Practices In A Maternal And Child Health Centre In Delhi. *Health PopulPerspect Issues*. 2003;26:110–5.
14. NFHS. National Family Health Survey-III. 2005–06. (Cited 2017 July 21). Available from: <http://www.nfhsindia.org>.
15. Scott JA, Shaker I, Reid M. Parental attitudes toward breastfeeding: their association with feeding outcome at hospital discharge. *Birth*. 2004;31:125–31.
16. Chen CH, Chi CS. Maternal intention and actual behavior in infant feeding at one month postpartum. *Acta Paediatr Taiwan*. 2003;44:140–4.
17. Dungy CI, McInnes RJ, Tappin DM, Wallis AB, Oprea F. Infant feeding attitudes and knowledge among socioeconomically disadvantaged women in Glasgow. *Matern Child Health J*. 2008;12:313–22.
18. Abdul Ameer AJ, Al-Hadi A-HM, Abdulla MM. Knowledge, attitudes and practices of Iraqi mothers and family child-caring women regarding breastfeeding. *East Mediterr Health J*. 2008;14:1003–14.
19. Simard I, O'Brien HT, Beaudoin A, Turcotte D, Damant D, Ferland S. Factors influencing the initiation and duration of breastfeeding among low-income women followed by the Canada prenatal nutrition program in 4 regions of quebec. *J Hum Lact*. 2005;21:327–37.
20. Oche MO, Umar AS, Ahmed H. Knowledge and practice of exclusive breastfeeding in Kware, Nigeria. *Afr Health Sci*. 2011;11:518–23.
21. Tiwari R, Mahajan PC, Lahariya C. The determinants of exclusive breastfeeding in urban slums: a community based study. *J Trop Pediatr*. 2009;55:49–54.
22. Kuzma J. Knowledge, attitude and practice related to infant feeding among women in rural Papua New Guinea: a descriptive, mixed method study. *Int Breastfeed J*. 2013;8:16. (Cited 2014 July 17) Available from: <http://www.internationalbreastfeedingjournal.com/content/8/1/16>.
23. NDHS. Nigerian Demographic and Health Survey. National Population Commission; Federal Republic of Nigeria: 2008. (Cited 2017 August 23). Available from: www.unicef.org/nigeria/ng_publications_Nigeria_DHS_2008.
24. Ulak M, Chandyo RK, Mellander L, Shrestha PS, Strand TA. Infant feeding practices in Bhaktapur, Nepal: a cross-sectional, health facility based survey. *Int Breastfeed J*. 2012;10:1.
25. Madhu K, Sriram C, Ramesh M. Breast Feeding Practices and Newborn Care in Rural Areas: A Descriptive Cross-Sectional Study. *Indian J Community Med*. 2009;34:243–6.
26. Otsuka K, Dennis CL, Tatsuoka H, Jimba M. The relationship between breastfeeding self-efficacy and perceived insufficient milk among Japanese mothers. *J ObstetGynecol Neonatal Nurs*. 2008;37:546–55.
27. Imdad A, Yakoob MY, Bhutta ZA. Effect of breastfeeding promotion interventions on breastfeeding rates, with special focus on developing countries. *BMC Public Health*. 2011;13:3.
28. Dongre AR, Deshmukh PR, Rawool AP, Garg BS. Where and How Breastfeeding Promotion

- Initiatives Should Focus Its Attention? A Study from Rural Wardha. *Indian J Community Med.* 2010;35:226–9.
29. Oche MO, Umar AS. Breastfeeding Practices of Mothers in a Rural Community of Sokoto, Nigeria. *Niger Postgrad Med J.* 2008;15:101–4.
 30. Chaudhary RN, Shah T, Raja S. Knowledge and practice of mothers regarding breast feeding: a hospital based study. *Health Renaissance.* 2011;9:194–200.
 31. Raval D, Jankar DV, Singh MP. A study of breast feeding practices among infants living in slums of Bhavnagar city, Gujarat. *India Health line.* 2011;2:78–83.
 32. Chandrashekhar TS, Joshi HS, Binu V, Shankar PR, Rana MS, Ramachandran U. Breastfeeding initiation and determinants of exclusive breastfeeding-a questionnaire survey in an urban population of western Nepal. *Public Health Nutr.* 2007;10:192–7.
 33. Agarwal S, Srivastava K, Sethi V. Maternal and New-born Care Practices Among the Urban Poor in Indore, India: Gaps, Reasons and Possible Program Options. *Urban Health Resource Center; New Delhi: 2007.*
 34. Holbrook EK, Mary CW, Melvin BH, Janet MW. Maternal sociodemographic characteristics and the use of the Iowa Infant Attitude Feeding Scale to describe breastfeeding initiation and duration in a population of urban, Latina mothers: a prospective cohort study. *Int Breastfeed J.* 2013;8:7. (Cited 2017 July 20) Available from: <http://www.internationalbreastfeedingjournal.com/content/8/1/7>.
 35. Mbada EC AE, Joel OF, Folasade CO-A, Funmilola AF, Abiola OO, et al. Knowledge, attitude and techniques of breastfeeding among Nigerian mothers from a semi-urban community. *BMC Research Notes.* 2013;6:552.
 36. Hale R. Infant nutrition and the benefits of breastfeeding. *Br J Midwifery.* 2007;15:368–71.
 37. James DC, Lessen R. Position of the American Dietetic Association: Promoting and supporting breastfeeding. *J Am Diet Assoc.* 2009;109:1926–42.
 38. Khassawneh MYK, Zouhair A, Ahmad A. Knowledge, attitude and practice of breastfeeding in the north of Jordan: a cross-sectional study. *Int Breastfeed J.* 2006;1:17. (Cited 2014 June 17) Available from: <http://www.internationalbreastfeedingjournal.com/content/1/1/17>.
 39. Shi LZJ, Wang Y, Guyer B. Breastfeeding in rural China: association between knowledge, attitudes, and practices. *J Hum Lact.* 2008;24:377–85.
 40. Weiqi C. Breastfeeding knowledge, attitude, practice and related determinants among mothers in Guangzhou, China.