Acta Scientific NUTRITIONAL HEALTH (ISSN:2582-1423)

Volume 5 Issue 6 June 2021

Research Article

Knowledge, Attitude and Practice of Nursing Mothers towards Exclusive Breastfeeding in Oda Community, Akure South, Ondo State

Michael Olabode Tomori*

STO/Strategic Information Lead, APIN Public Health Initiatives Ondo Region, Akure, Ondo State, Nigeria

***Corresponding Author:** Michael Olabode Tomori, STO/Strategic Information Lead, APIN Public Health Initiatives Ondo Region, Akure, Ondo State, Nigeria.

Received: April 20, 2021

Published: May 24, 2021

Abstract

Background*:* Breast milk is the natural first food for babies, it provides all the energy and nutrient that the infant needs for primary month of life and it continues to supply up to half or more of a child's nutritional needs during the second half of the year and up to one-third during the second year of life. Hence, exclusive breastfeeding is therefore important in protecting infants from infectious diseases, assist in improving their immune system and also very vital for their general health, growth and developments.

Aim*:* The aim of the study is to investigate into the knowledge, attitude and practice of nursing mothers towards exclusive breastfeeding in Oda, Ondo State.

Methodology*:* A descriptive study was conducted on nursing mothers in Oda Community. Simple random technique was used in selecting the 260 respondents whose consent was sought before administering the questionnaires. The data collected was analyzed using descriptive statistics of frequencies and percentages.

Results*:* The study showed that majority 93.5% of the respondents has heard about exclusive breastfeeding, 89% of them practiced exclusive breastfeeding while 11% practiced mixed feeding. 68% of the respondents says that exclusive breastfeeding protect infants against infection, 27.4% of them believed that it is nutritious to infants and of benefits to both the mother and infants.

Conclusion*:* The study showed high level of knowledge on exclusive breastfeeding among respondents and majority of them practiced exclusive breastfeeding.

Recommendation*:* Exclusive breastfeeding counseling during clinic visit, health education program should be implemented.

Keywords*:* Knowledge; Practice; Nursing Mothers; Exclusive Breastfeeding

Abbreviations

AAP: American Academy of Pediatrics; BFHI: Baby Friendly Hospital Initiative; EBF: Exclusive Breast Feeding; TBA: Traditional Birth Attendant; UN: United Nation; UNICEF: United Nations International Children's Emergency Fund; WHO: World Health Organization

Introduction

Breast milk is the natural first food for babies, it provides all the energy and nutrient that the infant needs for primary month of life and it continues to supply up to half or more of a child's nutritional needs during the second half of the year and up to one-third during the second year of life.

Breastfeeding contribute to the health and well-being of mother, it helps to space children, reduces the danger of ovarian cancer and carcinoma, increase family and national resources, could also be a secure way of feeding and is safe [1].

While breastfeeding could also be a natural act, it's also a learned behavior. A thorough study has demonstrated that mother and caregivers require support for establishing and sustaining appropriate breastfeeding practice. WHO and UNICEF handed the baby friendly hospital initiative (BFHI) in 1992 to strengthen maternity practice to support breastfeeding to guard, promote and support breastfeeding.

One out of each three children is exclusively breastfed for the primary six month of life within the developing world. WHO suggest that each child required exclusive breastfeeding for the first six months and a minimum of primary four month of life.

In Nigeria, there was late commencement of exclusive breastfeeding among nursing mother, most mothers 99% in southern Nigeria give water to their neonate from early hour of birth and 75.2% of them give their neonate glucose water (Nwanko and Brieger 109-12).

Moreover, most of the mothers who are involved with the study didn't have the knowledge of exclusive breastfeeding; only 45% of the mothers had ever heard of exclusive breastfeeding. Their sources of EBF knowledge were mostly from primary health care workers, their mother, friends, radio and television campaigns. Primary health care workers are the first recommenders of EBF and about 94.5% of mothers heard about the practice from them; the media is less effective way of informing the mother about exclusive breastfeeding.

In 2006 to 2010, only 37% of mothers globally practiced exclusive breastfeeding, WHO target is that, there should be increase in the speed of mothers practicing EBF up to one-half of general population [2].

Additionally, the mothers who knew of other nursing mother practicing EBF were only 7.5 percent of the entire population of nursing mothers (Nwanko and Brieger 109-12).

The aim of the study is to investigate into the knowledge, attitude and practice of nursing mothers towards exclusive breastfeeding in Oda Community, Ondo State.

Objective of the Study

The objectives are:

- To assess the knowledge of nursing mother regarding exclusive breastfeeding
- To know if nursing mother practice exclusive breastfeeding
- To identify the factors affecting the success of exclusive breastfeeding
- To verify their attitude toward exclusive breastfeeding.

Methods

Research design

The nature of the study design used for this research was descriptive. This is because it will help to interpret all the conditions which exist in the study, with the use of data that carries psychometric tools and procedures to investigate the knowledge, attitude and practice of nursing mothers towards exclusive breastfeeding in Oda, Ondo State of Nigeria.

Study area

Oda town in Akure South Local Government Area of Ondo State was picked for this study. It has only one ward and some catchment area with population of 10,276 according to 2006 census. The catchment area in Oda are Emiloro, Ajipowo, Bord, Okuta Ekan, Aba Iku, Akala and Oke Iya. Oda community lies on longitude 5° 14' 9" E and latitude 7° 10' 31" N of the equator (Mindat.org). Oda has just one market which takes place every Five day's it's located at the Entrance to the town. The inhabitants practice three religion Christianity, Islam and traditional way of religion. The major Occupation of the inhabitants are farming, trading while some are Civil Servants. The Ethnic group found in Oda are Ijaws, Garas, Urohobos, Yorubas, Igbos, Efiks and Fulanis with different dialect from the dwellers. The main source of Transportation is through Motorcycle, Cars (Public Transport) and Tricycles.

Study population

The research population is the nursing mothers who are living in Oda community which has the population of about 10,276 according to Population Census (2006).

Sample size determination

The sample size was obtained using the Fisher's formula.

The fisher's formula is $N= Z^2pq/d^2$

Where:

N = sample size

Z = standard normal deviate at 95% confidence level = 1.96 from the normal distribution table

d = desired precision = 5% = 0.05

p = prevalence of EBF = 17% (National Demographic Health Survey, 2008) = 0.17

q = 1-p = 1 - 0.17 = 0.83

N = (1.96 x 1.96) x 0.17 x 0.83 divided by 0.05 x 0.05

= 3.84 x 0.14 divided by 0.0025

= 0.5376/0.0025

= 215.4 (215 Approximately).

The minimum sample size was 215. Additional 19% for absenteeism, refusal to participate and incomplete data in the study was considered. Thus, 215 + 45 = 260. Therefore 260 nursing mother was questioned.

Sample technique

The sampling technique used in this study was simple random sampling technique. The respondents were randomly picked and selected. This sampling technique was used because it gives everyone equal chance of been selected.

Study instrument

The study instrument used for this study is interviews, observation and survey research.

Reliability and validity of measurements or data

The questionnaire was properly designed by the researcher, the validity and reliability of the questionnaire was tested by the research supervisor to assure quality of the data. The questionnaire was checked and reviewed for completeness before the data collected was analyzed.

Data collection

Data was collected using printed questionnaire and it was distributed to the nursing mothers. After some follow up I discovered some of the nursing mothers did not fill their questionnaire, so I had to use oral interview to ask those nursing mothers who did not fill the questionnaire.

Data analysis

The technique for analyzing the data collected for this research was descriptive statistics using frequency and percentage method. The Statistical Package for Social Sciences (SPSS) was used to analyze data and the interpretation presented into simple percentage and frequency tables.

Ethical consideration

Informed consent was obtained from each of the respondents and utmost care was taken to take care of privacy and confidentiality.

Results

A total number of two hundred and fifty (260) questionnaires were administered out of which two hundred and fifteen (215) were retrieved. The results represent the answers from the respondents to the questionnaire.

Socio-demographic variables of the respondents

Age group (years)	Frequency	Percentages	Cumulative Percent
15-20	22	10.0	10.0
21-30	95	44.0	54.0
31-40	83	39.0	93.0
41-50	15	7.0	100.0
Total	215	100	

Table 1: Distribution of respondents by age.

215 respondents were questioned in the study within the age group of 15 to 50 years. The mean age of the respondents was 27.3 years and standard deviation of 5.02 years. Most of the respondents (44.0%) were in the age group of 21-30 as shown in the table 1 above.

Religion	Frequency	Percentage	Cumulative percent
Christianity	176	82.0	82.0
Islamic	37	17.0	99.0
Traditional	2	1.0	100
Total	215	100	

Table 2: Distribution of respondents by religion.

Majority (82%) of the respondents were Christians, (17%) were Muslim while the remaining (1%) was traditional as shown in the table and figure above.

Ethnicity	Frequency	Percentage	Cumulative percent
Yoruba	160	74.0	74.0
Hausa	15	7.0	81.0
Ibo	27	13.0	94.0
Others	13	6.0	100.0
Total	215	100	

Table 3: Distribution of the respondent by tribe (Ethnicity).

74% of the respondents were Yoruba tribe, 13% from Igbo, (7%) from Hausa and (6%) from other tribes (Igala, Edo, Igbira) as shown in the table 3 above.

Marital Status	Frequency	Percentage	Cumulative percent
Single	0	0	0
Married	211	98.0	98.0
Divorced	4	2	100.0
Total	215	100	

Table 4: Marital status of the respondents.

Majority (98%) of the respondents were married and the remaining (2%) of the respondent were divorced as shown in the table 4 above.

Occupation	Frequency	Percentage	Cumulative Percent
House wife	42	20.0	20.0
Civil Servant	73	34.0	54.0
Trader	68	32.0	86.0
Others	32	14.0	100.0
Total	215	100	

Table 5: Occupational Background of the Respondents.

The above table shows (20%) of the respondent were Housewife, (34%) were civil servants, (32%) were Trader and the remaining (14%) represent other occupation (Student, Farmer).

Majority (54%) of the respondents had tertiary education while (34%) had only secondary school education, (4%) had only primary education while (8%) had informal (religious) education. None of the respondents had any form of education; this is shown in table 6 above.

Level of Education	Frequency	Percentage	Cumulative percent
Informal	18	8.0	8.0
Primary	9	4.0	12.0
Secondary	74	34.0	46.0
Tertiary	114	54.0	100.0
None	0	0	
Total	215	100	

Table 6: Educational background of the respondents.

Respondents knowledge and attitude towards exclusive breastfeeding

Awareness of EBF	Frequency	Percentage	Cumulative Percent
Yes	201	93.5	93.5
No	14	6.5	100.0
Total	215	100	

Table 7: Respondent awareness of exclusive breastfeeding.

The table 7 above shows that Majority (93.5%) of the respondent are aware of exclusive breastfeeding while (6.5%) of the respondent doesn't have any knowledge on exclusive breastfeeding.

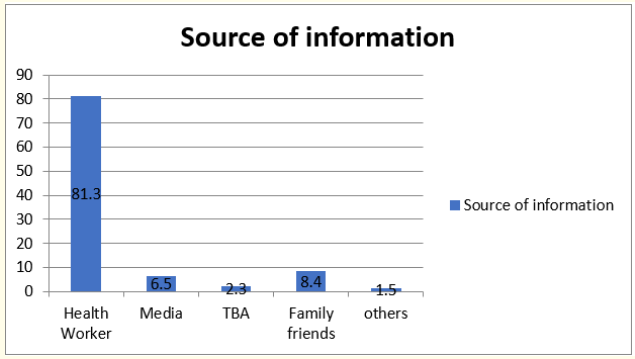

Figure 1: Respondents source of information on EBF.

Majority (81.3%) of the respondents obtained their information from a Health care worker while (6.5%) from the Media, (2.3%) from a Traditional Birth Attendant, (8.4%) from Family friends and (1.5%) of respondent who don't know their source of information as shown in figure 1 above.

Importance	Frequency	Percentage	Cumulative percent
It protect against infection	146	68.0	68.0
It is nutritious	59	27.4	95.4
It prevent pregnancy	3	1.4	96.8
I don't know	7	3.2	100.0
Total	215	100	

Table 8: Importance of exclusive breastfeeding.

From the above table, according to the respondent importance of EBF, (68%) said it protect against infection, (27.4%) said it is nutritious, 1.4% choose it prevent pregnancy and 3.2% of the respondent don't know the importance of exclusive breastfeeding.

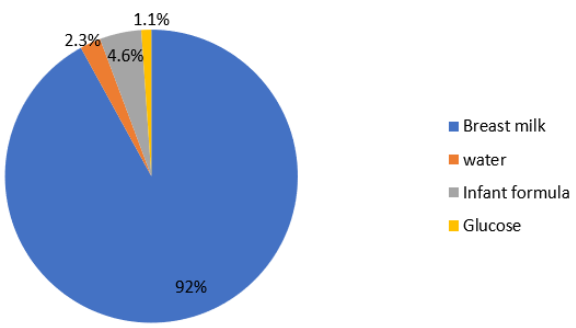

Figure 2: Respondent attitude toward the impact of EBF knowledge.

Majority 198 (92%) of the Respondent knows that breast milk should be given after delivery, 5(2.3%) of the respondents said water, 10 (4.6%) said infant formula should be administered to a baby after delivery while 2 (1.1%) remaining respondent said glucose is better administered. This is shown in the figure 2 above.

Majority 96.2% of the respondent knows that breast milk digest faster than infant formula while 3.8% of the respondent said infant formula digest faster than breast milk as shown in the above table.

Options	Frequency	Percentage	Cumulative Percent
Yes	207	96.2	96.2
No	8	3.8	100.0
Total	215	100	

Table 9: Respondent knowledge on the digestion of breast milk than infant formula.

Essentiality	Frequency	Percentage	Cumulative percent
It is essential	213	99.1	99.1
It is not essential	2	0.9	100.0
Total	215	100	

Table 10: Essentiality of EBF for infant growth and development.

Majority 99.1% of the respondent said that exclusive breastfeeding is essential for the growth and development of an infant while the remaining 0.9% of the respondents said that EBF is not essential for the growth and development of an infant. This is shown in the table 10 above.

Items (options)	Frequency	Percentage	Cumulative percent
Yes, it is enough	203	94.4	94.4
No, it is not enough	12	5.6	100.0
Total	215	100	

Table 11: Respondent attitude on breast milk enough for infant growth and development.

Majority (94.4%) of the respondent agreed that breast milk is enough for infant growth and development while the remaining (5.6%) of the respondent said is not enough as shown in the table 11 above.

Items	Frequency	Percentage	Cumulative percent
Yes, it is necessary	13	6.0	6.0
No, it is not necessary	202	94.0	100.0
Total	215	100	

Table 12: Respondent attitude toward the necessity of giving other feed before breast milk.

Majority (94.0%) of the respondent said it is not necessary to give other feed before breast milk while the remaining (6.0%) of the respondent feels it is necessary to give other feed before breast milk.

Items	Frequency	Percentage	Cumulative percent
Yes, I do give	43	20.0	20.0
No, I don't	172	80.0	100.0
Total	215	100	

Table 13: Respondent attitude toward giving feed after breast milk.

The above table shows that (80.0%) of the respondent do give other feed after breastfeeding their infants while (20.0%) of the respondent don't give their infant other feed (infant formula) after breast milk.

Items	Frequency	Percentage	Cumulative percent
Yes, it is good	213	99.1	99.1
No, it is not good	2	0.9	100.0
Total	215	100	

Table 14: Respondent attitude toward the first yellowish milk (Colostrums).

Majority (99.1%) of the respondent said that the first yellowish milk (colostrums) is good and nutritious for an infant while the remaining (0.9%) of the respondent believe it is not good for the infant. This is shown in table 14 above.

Respondent attitude towards the impact of EBF knowledge

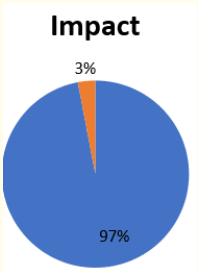

Figure 3: Respondent attitude toward the impact of EBF knowledge.

Majority (97.0%) of the respondent said that the EBF knowledge they know have an impact in both their lives and that of their infant, the remaining (3%) said that the EBF knowledge they have does not have impact as shown in the figure 3 above.

Items	Frequency	Percentage	Cumulative Percent
Yes	198	92.1	92.1
No	17	7.9	100.0
Total	215	100	

Table 15: Respondent attitude toward the satisfaction of the baby after breastfeeding.

The above table, (92.1%) of the respondent feels that there does not feel hungry or thirsty after breastfeeding while the remaining (7.9%) of the respondent said that their infants still hungry after been breastfeed.

Respondents practice on exclusive breastfeeding

Initiation of exclusive breastfeeding

Figure 4: Respondent practice on the initiation of exclusive breastfeeding.

Majority 192 (89%) of the respondent said EBF should start immediately after giving birth, 8 (4%) of the respondent said after one hour while the remaining 15 (7%) of the respondent said within one hour of delivery as shown in the figure 4 above.

Majority (94.9%) of the respondent does not feeding formula before breastfeeding their infant and (5.1%) do give infant formula before breastfeeding their infant as shown in the table 16 above.

Items	Frequency	Percentage	Cumulative percent
Yes	11	5.1	5.1
No	204	94.9	94.9
Total	215	100	

Table 16: Respondent practice on feeding formulas before breastfeeding.

Items	Frequency	Percentage	Cumulative Percent
Yes, I did	192	89.0	89.0
No, I did not	23	11.0	100.0
Total	215	100	

Table 17: Respondent practice of exclusive breastfeeding.

The above table 17 show that only (89%) of the respondent practiced exclusive breastfeeding while the remaining (11%) of the respondent did not practice exclusive breastfeeding.

Mixed feeding

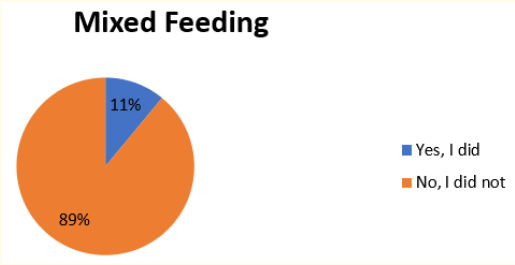

Figure 5: Respondent practice of mixed feeding.

From the figure above, (11%) of the respondent practice mixed feeding (pap, water, infant formulas) in addition to breast milk while (89%) of the respondent did not practice mixed feeding.

Items	Frequency	Percentage	Cumulative Percent
Gives Colostrums	209	97.2	97.2
Do not gives Colostrums	6	2.8	100.0
Total	215	100	

Table 18: Feeding the baby with colostrums.

Majority (97.2%) of the respondent gives colostrums to their babies and it is only (2.8%) of them that do not gives colostrums. This is shown in the table 18 above.

Pattern or frequency of breastfeeding

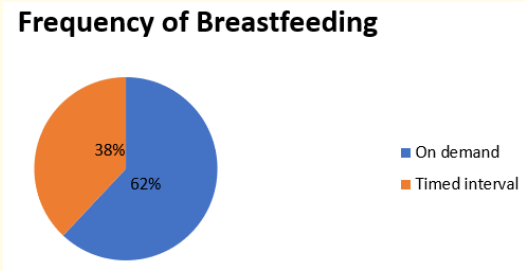

Figure 6: Frequency of breastfeeding of the respondents.

Majority (62%) of the respondents breastfeed their infants on demand while only (38%) breastfeed their babies on timed interval as shown in the figure 6 above.

Hypothesis one

There is no important difference between highly educated and educated respondents in their knowledge toward exclusive breastfeeding.

Education	Excellent knowledge	Good knowledge	Poor knowledge	X^2	df	p
Informal	5(21.7%)	10(60.9%)	3(17.4%)	5.597	6	0.470
Primary	3(30.5%)	5(55.5%)	1(14%)			
Secondary	14(19.2%)	51(67.4%)	9(13.4%)			0.470
Tertiary	34(32.1%)	68(50.2%)	12(17.7%)			

Table 19: Education and knowledge toward exclusive breastfeeding.

From the table 19 above, the result revealed that value = 5.597, df = 6, P = 0.470 level of significant, the null hypothesis is accepted. Therefore, there is no important difference between highly educated and low educated respondents.

Hypothesis two

There is no relationship among religion attitude of nursing mothers and attitude toward exclusive breastfeeding.

Religion	Good Attitude	Poor Attitude	X22	DF	P
Christianity	135(82%)	41(18%)	4.628	2	0.99
Islamic	21(52.8%)	16(47.2%)			
Traditional	1(50%)	1(50%)			

Table 20: Religion and attitude toward exclusive breastfeeding.

The table 20 reveals that 82%, 52.8% and 50% of Christians, Muslim and Traditional worshiper has good Knowledge toward exclusive breastfeeding respectively. Therefore, there is no significant difference between religion attitudes of nursing mothers toward exclusive breastfeeding.

Hypothesis three

There is no difference between employed nursing mother and unemployed nursing mother in their practice of exclusive breastfeeding.

Occupation	Practice	Non- practice	X^2	df	p
Housewife	40 (98.5%)	2 (1.5%)	0.14	3	0.017
Civil Servant	61 (85.6%)	12 (14.4%)			
Trader	63 (96.7%)	5 (3.3%)			
Other	28 (94.3%)	4 (5.7%)			

Table 21: Occupation and practice of exclusive breastfeeding

The result on table 21 shows that 98.5%, 96.6%, 94.3% and 85.6% of housewife, trader, other and civil servant practice exclusive breastfeeding respectively. The chi-square value is 0.14, the degree of freedom df is 3 and p is 0.017 < 0.05, it shows that the calculated value is less than the table value at 0.05 level of significant. Therefore, no difference between occupation of nursing mother and practice of exclusive breastfeeding.

Discussion

The purpose of this study is to know the knowledge, attitude and practice of nursing mothers toward exclusive breastfeeding in Oda community. For any research to be useful, the data analysis must be carefully analyzed and interpreted. The result was translated into finding and it was also interpreted in relation with existing literatures.

The study revealed the age distribution of the respondents was between 15-50 years. The finding shows that majority of the respondent were aware of exclusive breastfeeding, 93.5% knew the correct definition and duration of exclusive breastfeeding. This is similar to a previous study in Ghana which showed that 70.4% of the mothers had heard of EBFU but it is in contrast to the findings in Yobe that revealed 7.4% mothers practiced EBF [3]. However, another study reported that almost all the nursing mothers could define and explain exclusive breastfeeding as the process of feeding infants with breast milk alone with supplementing and complimenting for the first six (6) months, though many confessed not to find it easy [4].

Majority (81.3%) of the respondent got their information on exclusive breastfeeding from health workers, 6.5% from the media, 8.4% of the respondent obtained their information from family friends and 1.4% don't know their source of information. This is similar to a study which revealed that 80.6% of the nursing mothers heard about exclusive breastfeeding from health workers, 10.4% heard it from the media and 9.0% obtained their information on EBF from family and friends [5] but it disagreed with the findings of Ekambaram., *et al*. [6] in which 17% of the respondents received their information from health workers on exclusive breastfeeding.

In this study, 68% of the respondents said exclusive breastfeeding is important and it protect their infant against infections, 27.4% 0f the nursing mothers said breast milk is nutritious for their babies and 3.2% of the nursing don't know the importance of exclusive breastfeeding.

This study shows that, majority 92% of the respondent said that breast milk is the appropriate food to be given to an infant delivery, 2.3% said water, 4.6% infant while 1.1% of the respondent said glucose.

Majority (94.4%) of the respondent agreed that breast milk is necessary and sufficient enough for the growth and development to the baby for six months and the remaining 5.6% said it is not enough. This is related with the findings of another previous study [7]. In this study, majority 89% of the respondents said breast milk should be initiated immediately after birth, this is almost in accord with another previous study that reported that 78.8% of nursing mothers initiated breastfeeding within one hour of delivery [3].

All of the respondent breastfeed their infants, in which majority 89% of the respondents practiced exclusive breastfeeding and

the remaining 11% did not practice exclusive breastfeeding. This is similar to the findings of in another previous study [5].

This study reveals that, majority 97.2% of the respondents gives colostrums to their infants because they believe it protects and nutritious to their infants while 2.8% of the respondents did not give colostrums. This is similar to the findings in which 57% of the nursing mothers gave colostrums to their infants [3].

This study also revealed that, 62% of the respondent breastfeed their babies on demand and 38% of the respondents breastfeed their babies on timed interval [8].

Conclusion

Based on the findings of the study, it was concluded that nursing mothers in Oda community of Ondo State were exposed to the knowledge, attitude and practice of exclusive breastfeeding. This study also concluded that irrespective of the level of education, family income, occupation and religion most nursing mothers practiced exclusive breastfeeding. The practice of exclusive breastfeeding is still low among working class nursing mothers; hence there is an urgent need of policies aimed at improving exclusive breastfeeding uptake. The government also needs to empower and train health workers to improve EBF practice among nursing mothers.

Acknowledgements

I wish to acknowledge the contributions of my students who work with me on this project as research assistants but are not included in this paper.

Conflict of Interest

I declare that there is no financial interest or any conflict of interest existing.

Bibliography

1. Baby Friendly Hospital Initiatives (BHFI). www.who.int (2021).

2. United Nations Children's Fund: Current status and progress in infant and young child feeding. www.childinfo.org (2021).

3. Bolanle AJ. "Approval of Nursing Mothers Knowledge and Practice of Exclusive Breastfeeding in Yobe State, Nigeria". *Journal of Biology, Agriculture and Healthcare* 3.20 (2013).

4. Amosun A M., *et al*. "Growth Faltering among Exclusively Breastfed Infants in Ogun State, Nigeria". *Biomedical Research* 21.3 (2010): 311-313.

5. Peterside O., *et al*. "Knowledge and Practice of Exclusive Breastfeeding among Mothers in Gbarantoru Community". *Journal of Dental and Medical Sciences* 12.6 (2013): 34-40.

6. Ekambaram, M., *et al*. "Knowledge, Attitude and Practice of Breastfeeding among Post Natal Mothers". *Current Pediatric Research* 14.2 (2010): 119-124.

7. Essien NC., *et al*. "Mother's Knowledge, Attitudes, Beliefs and Practices Concerning Exclusive Breastfeeding in Calabar, Nigeria". *Africa Journal of Nursing and Midwifery* 11.1 (2009): 65-75.

8. Nukpezah RN., *et al*. "Knowledge and Practice of Exclusive Breastfeeding among Mothers in the Tamale Metropolis of Ghana". *Reproductive Health* 15 (2018): 140.

Volume 5 Issue 6 June 2021