

# A COMPARATIVE STUDY ON MOTHERS IN RELATION TO ANTENATAL COUNSELING AND OTHER FACTORS AFFECTING THEIR BREASTFEEDING PRACTICES

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## ABSTRACT

**OBJECTIVES:** To determine the effect of various factors on breastfeeding practices of mothers between counseled and not counseled group

**STUDY DESIGN:** Descriptive cross-sectional study

**PLACE AND DURATION OF STUDY:** Maternity ward Fauji Foundation Hospital Rawalpindi, from May to November 2009

**METHODOLOGY:** 100 mothers practicing breastfeeding were included in the study and were divided into two groups of 50 mothers each on the basis of their antenatal counseling status. Data regarding breastfeeding was collected by using a pre-tested structured questionnaire after taking informed consent from all the participants

**RESULTS:** Most of the counseled mothers were antenatally booked (98%) ( as compare to the not counseled mothers ( 44%) and the difference was found significant  $P < 0.001$ . The mothers in the counseled group who complained of insufficient milk (16%) was less than the not counseled group (40%), and a significant difference was found between two groups  $P < 0.008$ . Most mothers of the counseled group observed the advice of no extra water during lactation as compared to the not counseled mothers with a significant difference of  $P < 0.001$  between the two groups.

**CONCLUSION:** It is concluded from this study that antenatal counseling helps in motivating the mothers for breastfeeding. But it needs to be addressed further and clinicians need to emphasize the importance of breastfeeding during antenatal check ups.

**KEY WORDS:** Breastfeeding, Antenatal counseling, Breastfeeding difficulties

## INTRODUCTION

The promotion of breastfeeding during antenatal visits and support and education regarding breastfeeding immediately after child's birth helps the mother to make positive decisions about breastfeeding her child.<sup>1</sup> There are many factors for early breastfeeding discontinuation, like they think that they do not have the ability to breastfeed their infants<sup>2,3</sup>, infants suckling problems, cracked nipples, breast tenderness and engorgement<sup>4</sup>, and their perceptions of not having adequate milk supply encourages them to stop feeding and switch over to formula milk. Evidence shows that early initiation of feeding generally is a pre-requisite for prolonged feeding. It also protects the new born from harmful feeding practices like introducing mixed foods to child before weaning.<sup>5-7</sup> The huge amount of \$3.6 billion can be saved every year if current rates of breastfeeding that is 64% initiation rate is increased to 75% and 29% exclusive breastfeeding rate increased to 50%.<sup>8</sup> Infants who were very low birth weight (<1500g birth weight) and were breastfed showed better health outcomes. Breastfeeding counseling during antenatal visits educates, informs and

motivates mothers to practice breastfeeding. They also get to know the exact technique of breastfeeding.

If mother doesn't know the exact maneuver of feeding she will develop cracked nipples, soreness, mastitis and other difficulties. It has been estimated 1.3 million children can be saved annually if 90% of them are exclusively breastfed.<sup>9</sup> Article 24 of the convention on the Rights of the Child, ensures that all sectors of society know about the benefits of breastfeeding.

This study will help to understand the effects of focused counseling and support in the prenatal period on breastfeeding practices. Also it will highlight different factors like complaints of insufficient milk supply, breast pain and soreness, cracked nipples, infant refusal to breast and their affects on breastfeeding rates.

## METHODOLOGY

This was an observational cross-sectional study that was conducted in the maternity ward of Fauji Foundation Hospital Rawalpindi. A sample of 100 females patients who were admitted in the ward for delivery were included. These 100 females were then divided into two groups. Group A (n=50) included all those women who practiced breastfeeding in their previous child and were counseled prenatally about breastfeeding by a doctor or a paramedical staff and that's why this group was labeled as counseled group. Group B (n=50) comprised of those mothers who practiced breastfeeding without antenatal counseling in their previous child were recruited in the study and so this group was labeled as not counseled group. All females who had their first pregnancy or had some serious medical problems like eclampsia, or those who had cesarean sections were excluded from the study. It was a six months duration study and sample was collected by

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consecutive non probability sampling technique. Information regarding breastfeeding was collected through a close ended pre-tested structured questionnaire. The mothers were interviewed in Urdu language. Main outcome measures included antenatal booking status of mothers among the two groups and its effect on breastfeeding, complaints of insufficient milk supply, different factors affecting breastfeeding rates like breast pain, soreness, mastitis, infant refusal to breast and addition of extra water to babies within first 6 months of life. Results were entered into SPSS version 15. Descriptive statistics were used to calculate means and standard deviations for numerical data. T-test was applied for comparing the numerical data between two groups at a confidence level of 5%. Frequencies were calculated for categorical data. Chi square test was applied for comparing the results between the two groups and P- value < 0.05 was considered significant. Written consent was taken from all the study participants. The research was approved by the ethical review committee of the Fauji Foundation Hospital Rawalpindi.

**RESULTS**

Table - I gives the antenatal booking status of counseling and not

**TABLE - I: COMPARISON OF THE ANTENATAL BOOKING STATUS OF THE MOTHERS (n=100)**

Group	Booked	Not Booked	%age
A, Counseled Mothers (n=50)	49	01	98
B, Mothers Not Counseled (n=50)	22	28	44
P-Value	0.001		

P value= Significant

**TABLE - II: COMPARISON OF THE COMPLAINT OF INSUFFICIENT MILK BY THE MOTHERS (n=100)**

Group	Booked	Not Booked	%age
A, Counseled Mothers (n=50)	08	42	16
B, Mothers Not Counseled (n=50)	20	30	40
P-Value	0.008		

P value= Significant

**TABLE - III: COMPARISON OF THE COMPLAINTS OF BREAST SORENESS AND CRACKED NIPPLES BY THE MOTHERS (n=100)**

Group	Booked	Not Booked	%age
A, Counseled Mothers (n=50)	10	40	20
B, Mothers Not Counseled (n=50)	20	28	44
P-Value	0.01		

P value= Significant

**TABLE - IV : COMPARISON OF NO EXTRA WATER GIVEN DURING THE FIRST 06 MONTHS OF BREASTFEEDING BY THE MOTHERS (n=100)**

Group	Booked	Not Booked	%age
A, Counseled Mothers (n=50)	29	21	58
B, Mothers Not Counseled (n=50)	07	43	14
P-Value	0.001		

P value= Significant

counseling groups. The number of the counseled mothers booked antenatally were more in our study i.e. 98% (n=50) than the not counseled mothers i.e. 44% (n=50). Statistically significant (P<0.001) difference was observed between the two groups.

Table - II shows the mothers who complained of the insufficient milk in both the groups. The percentage of the counseled mothers who complained of insufficient milk was 16% (n=50) and in other group was 40% (n=50). Difference of (P<0.008) was found between the two groups that is statistically significant.

Table - III shows the mothers who complained of breast soreness and cracked nipples. The percentage of counseled mothers who complained was 20% (n=50) and of not counseled mothers was 44% (n=50). Significant difference of (P<0.01) was found between two groups.

Table - IV shows the mothers in the two groups who gave no extra water during breastfeeding to their babies. 58% (n=50) of the counseled mothers observed the advice of no extra water during lactation for the first six months as compare to the other group in which percentage is quite low that is 14% (n=50) and difference was found significant (P<0.001).

The difference between the mean ages of the two groups was found to be statistically insignificant with a P value of <0.468. Since majority of mothers in both the groups belonged to lower class, however the difference was insignificant. The number of illiterate mothers was more in the not counseled group than in the counseled group i.e. 22 from 50 and 18 out of 50 respectively. But, the difference was statistically non significant (P<0.413). In our study, mothers from the both groups were mostly working. But a difference of (P<0.092) was found that is not significant.

### DISCUSSION

Most of the mothers in our study who were antenatally booked were counseled for breastfeeding than those who were not antenatally booked, with a significant difference of  $P < 0.001$ . This could be because of the fact that antenatal care results in better monitoring, and allows the clinicians to counsel the pregnant mothers about breastfeeding during their antenatal visits. This is in contrast to the findings of Dhandapany et al.<sup>10</sup> who in their study found that most of the antenatally booked mothers (79%) had not received counseling. This difference could be because of the difference in approach of the clinicians in different settings and hospitals.

Majority of the mothers in both the groups in our study were literate, having mostly an education level of high school or more with a difference of  $P < 0.413$  that is insignificant between both the counseled and not counseled group. This is consistent with the study results of Labarere et al<sup>11</sup> who found the education of more than high school approximately similar in the mothers of both Intervention and Control group i.e. 79.3 and 75.6% respectively. Ekstrom and Nissen<sup>12</sup> also found statistically no significant difference between the Intervention and Control group with regard to educational level of the mothers. In a study in India by Patel and Shaikh<sup>13</sup>, The majority (89%) of the mothers start top feeding thinking that they have less feed. On inquiring it was found that, 59% of the mothers found less milk expression when they squeezed their breasts, 33% got this idea because of the baby cry even after feeding and 8% were given information from family. Our results were consistent with this study, as only 08 out of 50 counseled mothers complained of insufficient milk as against 20 out of 50 not counseled mothers, with a statistically significant difference ( $P < 0.008$ ) between the two groups. Mothers of both counseled and not counseled group in our study were generally satisfied with the experience of breastfeeding with statistically no significant difference ( $P < 0.091$ ) between the two groups. This is consistent with the results of Labarere et al<sup>11</sup> who also found insignificant difference ( $P < 0.41$ ) between two groups in their study with reference to the satisfaction with the experience of breastfeeding.

### CONCLUSION

It is concluded from this study that breastfeeding counseling in

the antenatal period did encourage the mothers in their ability to breastfeed and it also helped mothers to overcome many breastfeeding difficulties because they were properly informed and educated about the exact maneuvers of breastfeeding as compare to not counseled mothers.

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