

## KNOWLEDGE, ATTITUDES, AND PRACTICES REGARDING EXCLUSIVE BREASTFEEDING AMONG MOTHERS OF CHILDBEARING AGE IN MALLAH VILLAGE, HYDERABAD

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### INTRODUCTION

Exclusive breastfeeding (EBF) is accepted globally as one of the most effective measures aimed at supporting the health of infants.<sup>1,2</sup> The WHO and UNICEF introduced the initiative which encourages exclusive breastfeeding of infants for the first six months, followed by breastfeeding, in conjunction with appropriate complementary milk feeding for up to two years or beyond.<sup>3,4</sup> Breast milk acts as a natural food for the infant because it consists of all the contents needed for the growth of the child, including nutrients, antibodies, and growth factors which help in development and cognition as well as strengthen the immune system of the child thus preventing easy falling to diseases such as diarrhea, respiratory illnesses and other preventable diseases.<sup>5</sup> In addition to

the impact on the well-being of the child, breastfeeding provides numerous unique benefits for the mother such as decreasing the probability of getting breast and ovarian cancer, fast recovery, and strengthening the bond between the mother and her child. Presently, globally according to WHO only 40% of children under six months are exclusively breastfed and these figures vary geographically as well as socioeconomically.<sup>6</sup> This is due to factors such as minimal health care access, culture beliefs, and lack of support systems prevalent, especially in rural and low-income settings making it difficult to close the gap between the recommended feeding practices and actual feeding practices in the community.<sup>7</sup> This problem is exacerbated by the growing preference for infant formula feeding by mothers because of perceived convenience over breastfeeding, even though it has

### ABSTRACT

#### OBJECTIVES

To assess the knowledge, attitudes, and practices regarding exclusive breastfeeding among mothers of childbearing age in Mallah Village, Hyderabad.

#### METHODOLOGY

Convenience sampling was used for selecting 75 mothers for this cross-sectional study, which was carried out between July and September 2024. Data was collected using structured questionnaires, and IBM SPSS software version 23 was utilized for analysis. Descriptive statistical techniques were employed to examine the demographic information and the primary research variables.

#### RESULTS

According to the results of the study, most mothers (90.7%) had a good level of knowledge about exclusive breastfeeding, with healthcare facilities being the primary source of information (76%). However, there was a knowledge-practice gap, as many mothers did not exclusively breastfeed for the recommended six months. Although 93.3% reported practicing exclusive breastfeeding, only 42.7% initiated breastfeeding immediately after delivery. Positive attitudes were noted, with 72% of participants finding exclusive breastfeeding easier than formula feeding. However, 70.7% perceived exclusive breastfeeding as more demanding.

#### CONCLUSION

Study concluded that mothers in Mallah Village have adequate knowledge and positive attitude towards exclusive breastfeeding. However, gaps between knowledge and practice still exist because of challenges including delayed initiation of and perceived barriers to exclusive breastfeeding. The analysis emphasizes the necessity of focused educational initiatives and community-based interventions to bridge this gap and advance breastfeeding practices in this region.

**KEYWORDS:** Exclusive Breastfeeding, Knowledge, Attitudes, Practices, Maternal Health, Child Health

been scientifically established that formula feeding does not offer the same protection as breast milk.<sup>8,9</sup> In many rural communities, factors such as lack of education, inadequate prenatal care, and limited access to lactation support can negatively influence the knowledge, attitudes, and practices regarding exclusive breastfeeding.<sup>10</sup> In particular, the role of healthcare workers, such as midwives and pediatricians, in providing accurate and culturally sensitive breastfeeding education is critical.<sup>11</sup> Research has shown that the quality of information that is given to mothers to do with breastfeeding greatly determines whether mothers will be able to start and maintain exclusive breastfeeding.<sup>12</sup> There is a lack of information regarding these barriers unique to mothers in situations such as living in rural communities like Mallah Village, and Hyderabad, where people might follow cultural practices as well as medical advice. This cross-sectional study focuses on Maternal and Child Health, especially breastfeeding practices in a selected rural area called Mallah Village in Hyderabad. Various literacy levels, health care access, and socio-economic realities of the community may also impact breastfeeding in some way. Though there is evidence of numerous barriers to breastfeeding from research investigations that have been conducted in urban environments, little is known about barriers to breastfeeding in rural settings such as Mallah Village. Culture-bound beliefs and Practices, social demographics, and healthcare accessibility should therefore remain key factors that influence knowledge and practices about breastfeeding in this region. The Knowledge, attitude, and practices of Mallah Village toward exclusive breastfeeding are important and relevant in designing educational needs assessment. Research studies demonstrate that maternal education, community support, and healthcare can affect breastfeeding outcomes, but the factors operating in rural areas remain relatively poorly understood due to the existing literature. This study aims to fill this gap by establishing the factors that may affect breastfeeding behaviors in Mallah Village and using the findings to design future interventions. The findings are expected to help strengthen the support for breastfeeding mothers and overall maternal and child health.

## METHODOLOGY

A cross-sectional research study was carried out in

2024 between July and September in Mallah Village, Hyderabad, to assess knowledge, attitudes, and practices regarding exclusive breastfeeding among mothers. The target population consisted of 90 mothers, with a final sample size of 75 determined using Raosoft software with a 5% margin of error and a 95% confidence level. Non-probability convenience sampling was used to select participants who were mothers residing in Mallah Village and willing to participate. Mothers who refused to participate or fell outside the childbearing age range were excluded from the study. Data were collected using a structured questionnaire, adapted from.<sup>13</sup> The questionnaire contained 17 questions, with 11 questions assessing knowledge and attitudes about exclusive breastfeeding (including Yes/No, multiple choice questions) and 6 questions focused on breastfeeding practices (including Yes/No and multiple choice questions). Permission was granted by the Head of the Community of Mallah Village, and prior to data collection, all participants gave their informed consent. Data analysis was performed using IBM SPSS version 23 and descriptive statistics (means, standard deviations, frequencies, and percentages) were used to summarize the data.

## RESULTS

**Table 1: Demographic Analysis (n=75)**

Characteristics	Frequency	age (%)
<b>Age (Years)</b>		
18-23	22	29.3%
24-30	36	48%
Above 30	17	22.7%
<b>Level Of Education</b>		
No Formal Education	45	60%
Primary Education	12	16%
Secondary Education	16	21.3%
Higher Education	02	2.7%
<b>Occupation</b>		
Housewife	72	96%
Business	0	0%
Employed	03	4%

Participants were mostly between the ages of 24 and 30 years (48%), and 60% had no formal education, 21.3% had completed secondary school and 96% were housewives.

**Table 2: Mother’s Knowledge and Attitude on Exclusive Breastfeeding (n=75)**

Statement	Frequency (%)	Mean	St. Devi.
Have you heard of exclusive breastfeeding?	Yes: 90.7%, No: 9.3%	1.09	.292
Where do you get your knowledge about exclusive breastfeeding?	Hospital: 76%, Friends: 13.3%, Other: 10.7%	1.58	1.079
Does exclusive breastfeeding involve feeding your child just breast milk between the ages of 0 and 6 months?	Yes: 73.3%, No: 26.7%	1.26	.445
Have you ever attended an exclusive breastfeeding training session?	Yes: 30.7%, No: 69.3%	1.69	.464
When is the best time to start breastfeeding a baby exclusively?	Immediately after birth: 40%, After some time: 60%	1.60	.493
How do you handle the first colostrum or milk?	Feed immediately: 89.3%, Discard: 10.7%	1.10	.310
Is six months of age the ideal time to begin supplemental feeding?	Yes: 46.7%, No: 53.3%	1.53	.502
Is the formula for infants less demanding than exclusive breastfeeding?	Yes: 70.7%, No: 29.3%	1.29	.458
During exclusive breastfeeding, should babies be given fluids other than breast milk, such as water, honey, etc.?	Yes: 52%, No: 48%	1.48	.502
Is it easier to exclusively breastfeed a child than to use formula?	Yes: 72%, No: 28%	1.28	.452
Is exclusive breastfeeding preferred over formula feeding in your community?	Yes: 41.3%, No: 58.7%	1.58	.495

Most participants (90.7%) were aware of exclusive breastfeeding, with hospitals being the primary source of information (76%). Approximately 73.3% of mothers correctly defined exclusive breastfeeding as providing only breast milk for the first six months, while 30.7% had received formal training. A majority (70.7%) found exclusive breastfeeding to be more demanding than formula feeding, and 89.3% believed that colostrum should be fed to the baby immediately after birth. There was a divide in the responses regarding the appropriate timing for complementary feeding (46.7% affirmed) and community support for exclusive breastfeeding (41.3%).

**Table 3: Mother’s Practices on Exclusive Breastfeeding (n=75)**

Statement	Frequency (%)	Mean	St.D evi.
Do you exclusively breastfeed your child?	Yes:93.3%, No:6.7%	1.06	.251
After delivery, when did you begin feeding your child?	Immediately: 42.7%, After some time: 57.3%	1.57	.497
Does your infant receive pre-lactation feedings?	Yes: 52%, No: 48%	1.48	.502
Does your infant receive colostrum?	Yes: 60%, No: 40%	1.40	.493
How frequently do you breastfeed your baby?	On-demand: 73.3%, Specific interval: 18.7%, Random: 8%	1.34	.625
Did you or your child suffer from any illnesses when you were exclusively breastfeeding?	Yes:37.3%, No:62.7%	1.62	.486

A high proportion of mothers (93.3%) reported exclusively breastfeeding their babies. However, only 42.7% started breastfeeding immediately after delivery. Pre-lactation feeding was practiced by 52% of mothers, and 60% fed colostrum to their infants. Most mothers (73.3%) breastfed on demand, while 62.7% reported no illness during the exclusive breastfeeding period. However, 37.3% indicated that they or their baby experienced illness during this time.

**DISCUSSION**

This descriptive study’s findings showed that most mothers had a strong knowledge of exclusive breastfeeding, with 90.7% of participants reporting knowledge of the practice. This aligns with earlier research findings that have shown high levels of awareness of exclusive breastfeeding, especially in areas where maternal and child health programs have been effective.<sup>14,15</sup> However, gaps in the knowledge and practices of EBF remain. One of the main findings of this study was that while 73.3% of the mothers correctly identified exclusive breastfeeding as feeding only breast milk for the first six months, only 30.7% had received formal training on EBF. This suggests that although information on EBF is widely available, formal education and training on EBF may be limited. These results are consistent with previous research emphasized the need of targeted training and counseling to improve breastfeeding practices.<sup>16,17</sup> The

low percentage of mothers receiving training points to a need for further investment in breastfeeding education programs that can equip mothers with the knowledge and confidence to exclusively breastfeed. The study also revealed that while a significant majority of mothers (60%) recognized the importance of feeding colostrum to the infant immediately after birth, opinions were divided when it came to complementary feeding and the timing for introducing it. More importantly, only 46.7% of the mothers knew the right time to start complementary feeding showing the need for more sensitization on when to wean from exclusive breastfeeding to complementary feeding. The result of this study corroborates prior studies that recommended the timely introduction of complementary foods as an essential component of infant feeding.<sup>18,19</sup> When examining the mothers' practices, the study found that 93.3% of mothers reported breastfeeding their child exclusively. However, 57.3% did not start breastfeeding immediately after delivery, which deviates from the recommended practice of initiating breastfeeding within the first hour of birth. This delay in breastfeeding initiation could have significant implications for infant health, as early initiation is crucial for establishing breastfeeding and benefiting from colostrum.<sup>20,21,22</sup> Additionally, while most mothers breastfed on demand, 37.3% of mothers and their infants experienced illness during the period of exclusive breastfeeding, which might reflect challenges that influence breastfeeding behaviors and practices. The findings also highlighted that many mothers (70.7%) perceived exclusive breastfeeding as more demanding than feeding infants formula. This perception could influence the decision to adopt exclusive breastfeeding practices, as mothers may feel that formula feeding is a less burdensome alternative. These results align with those from other research, where the perceived difficulty of exclusive breastfeeding, especially in the face of societal pressure and lack of support, has been cited as a major barrier to successful breastfeeding.<sup>15,22,23</sup>

## LIMITATIONS

The limitations of the study include a small sample size of 75 mothers, which may not accurately reflect the population as a whole. Moreover, the study used self-reported data, which may introduce bias because individuals may have over-reported knowledge or actions that were positive. The results of the study may not be generalized to other areas because it was only carried out in a single community.

## CONCLUSIONS

This study concluded that mothers in Mallah Village, Hyderabad, demonstrated strong knowledge and positive attitudes towards exclusive breastfeeding (EBF). However, significant gap between knowledge and practice remains, especially in the areas of complementary feeding and formal training. These findings highlight that specific initiatives are required to enhance EBF education and training, particularly regarding complementary feeding, and to strengthen community support systems. Future research should focus on evaluating the effectiveness of these interventions in improving breastfeeding practices in rural areas.

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