



St. Paul Hospital Millennium Medical College
Graduate Study Program

Knowledge Attitude and Practice of optimal breast feeding practices among
mothers visiting two public health centres in Addis Ababa

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Addis Ababa, Ethiopia

March , 2023(GC)



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Knowledge attitude and practice of optimal breast feeding practices among
mothers visiting selected public health center in Addis Ababa

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Addis Ababa, Ethiopia

March , 2023(GC)

DECLARATION

I hereby declare that; this thesis report is my original work and has not presented for a degree by another person in this or any other university and all source material used for this thesis have been acknowledged.

Name: _____

Signature_____

Date_____

Name of Advisor: _____

Signature_____

Date_____

ABSTRACT

INTRODUCTION: Human breast milk is the best and cost-effective infant nutrition available. Optimal breast feeding ensures a health benefit to both mother and infant. Assessing the knowledge, attitude and practice of optimal breast feeding helps to identify gaps and suggest possible interventions for policy makers

OBJECTIVE: The aim of this study is to assess the knowledge, attitude and practice of optimal breast feeding of mothers attending public health enters in Adiss Ababa

METHODOLOGY: Institution based cross sectional study was conducted among mothers visiting selected health centres from May 2023 to October 2023. The data obtained was cleaned and entered in to a computer and statistical analysis was performed using SPSS version 26.0 for windows. Descriptive analysis was used to describe the percentages and number distributions of the variables in the study.

RESULT ; Total of 344 mothers were interviewed ,100% know that breast milk is the first food of newborns .Breast feeding should be initiated immediately according to 92% of mothers.70% of mothers know about breast milk expression and storage. All agree infants have to be exclusively breastfed for 6 month and 92% disagree that colostrum should be discarded .Regarding practice; EBF was practiced by 59.5% of mothers and 86% continued breast feeding after the age of 6 month.

CONCLUSION; The results of this research showed that knowledge ,Attitude and optimal breast feeding practices have shown improvement compared to previous researchs done in this area. Despite this, gap still exist as optimal breast feeding practices helps achieve SDG goals set by WHO. Additional emphasis should be given in regard to teaching mothers on optimal breast feeding practice at different health facilities

Keywords: Breast feeding, Knowledge, Attitude, Practice and infant mortality

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ACRONYMS AND ABBRIVATIONS

KAP-Knowledge, Attitude, Practice

ANC-Antenatal Care

WHO-World Health Organization

UNICEF-United Nations Children's International children's Emergency Fund

C/S- Caesarean Section

EDHS- Ethiopian Demographic Health Survey

EBF- Exclusive Breast feeding

CHAPTER ONE

INTRODUCTION

1.1. BACK GROUND OF THE STUDY

Appropriate feeding practices initiated at neonatal age and continued through infancy and childhoods are crucial for growth and development of every child. World Health Organization (WHO) and United Nation International Children's Emergency Fund (UNICEF) have emphasized the first 1000 days of life when the maximal brain growth occurs, as the critical window of the period for nutritional interventions(1)

Breast feeding and administration of breast milk are the normative practice for infant feeding and nutrition. According to the WHO, UNICEF and Ethiopian Federal Ministry of Health recommendations, optimal breastfeeding includes early initiation (within 1 hour of birth), feeding on demand at least 8 to 12 times every 24 hr, exclusivity (only breastmilk) until 6 months of age, and continuation with introduction of appropriate and sufficient complementary foods until 2 years(1,2)

Breast feeding has several importances for both mother and infant. Breast fed infants are at lower risk of diarrhea, and upper respiratory tract infection as the breast milk contains immunoglobulin (IG A). Maternal risk of breast and ovarian cancer are also reduced with additional contraceptive benefit as well.(3)

Globally, less than half of all newborns (47 per cent) are breastfed within an hour of birth, varying widely among regions. The prevalence of early initiation of breastfeeding in Eastern Europe and Central Asia (72 per cent) is nearly twice as high compared to South Asia (39 per cent) and East Asia and the Pacific (41 per cent)(1)

Yet despite all the potential benefits, less than 1 in 2 (48 per cent) infants 0–5 months of age worldwide are exclusively breastfed. South Asia has the highest prevalence of exclusive breastfeeding with over 60 per cent of infants being exclusively breastfed. In contrast only 26 per cent of infants 0–5 months in Northern America are exclusively breastfed.(4)

Therefore understanding, knowledge and attitude towards breastfeeding guides the development of specific interventions aimed at increasing the rates of optimal breastfeeding practices. The knowledge and attitude of women towards breastfeeding are modifiable factors

associated with breast feeding outcomes and should be targeted for behavioral change and better practice.

1.2. STATEMENT OF THE PROBLEM

In Ethiopia, existing studies have attempted to recognize the critical role played by maternal knowledge and attitude as predictors of optimal breastfeeding practices. Maternal knowledge is identified as a predictor in a few of related literatures and studies. In addition, the attitude towards breastfeeding has been assessed, but a significant association was not found. Surprisingly, the effect of maternal knowledge and attitude remain unclear, as the literatures and studies in the country vary greatly in their depth, in terms of the quantity and content of the questions used. The knowledge questions are superficial and lack some important domains, such as breast milk expression, management of breast problems and practical aspects of breastfeeding. There is a shortage of data on a range of factors known to influence maternal knowledge and attitude towards breastfeeding practice, rendering the generalizability of previous studies on this issue problematic.

1.3. SIGNIFICANCE OF THE STUDY

The aim of this paper is to assess knowledge, Attitude and Practice of optimal breast feeding among mothers visiting Kolfe and Philipos health center. Assessing these variables will help to identify important interventions that can be done at different level of the community.

The data obtained in this study can be used by concerned bodies for planning and implementation of different interventions in the country to increase optimal breast feeding practices.

This study will also provide as recent baseline information on knowledge, attitude and practice of optimal breast feeding practice in Ethiopia, Addis Ababa and can be used by other researches to expand knowledge.

CHAPTER TWO

LITERATURE REVIEW

Optimal breast feeding practices have shown to be determined by to different factors among which maternal knowledge and attitude towards breast feeding account for the modifiable factors .Based on a cross sectional study done in public health centers of Addis Ababa the prevalence of exclusive breastfeeding since birth was 29.3 %, predominant breastfeeding 44.3 %, partial breastfeeding 24.9 % and no breastfeeding 1.5 %. (5)

Another facility based study in Addis Ababa showed two hundred twenty six (67.3%) of the respondents knew about timely initiation of breastfeeding. It was significantly associated with getting education on breastfeeding. Most of the mother have positive attitude on breastfeeding and not accept formula feeding. The rate of initiation of breastfeeding after birth was 87.2%. Out of the 375 mothers surveyed, 260 (70%) reported that they feed their baby other than breast milk and 48 (12.8%) reported that they never began breastfeeding. Only one hundred fourteen (30.5%) of mothers had ever exclusively breastfed. (6)

Community based study done in Worabe Silte zone showed from 347 mothers 172 (53.58%) had good knowledge about breast feeding while 149 (46.42%) had poor knowledge. 135 (42.1%) mother's practiced optimal breast feeding (7)

As study done in Bedelle town in southwestern Ethiopia regarding women's knowledge, all mothers 220 (100%) knew the importance of breast feeding/EBF and 202 (91.8%) reported breast milk alone is important for new born infant. 200 (90.9%) mothers reported frequent breast feeding needed for less than 6 months of infant and 100 (45.5%) mothers reported between 6-8 times breast fed per day. Majority of mothers 192 (87.3%) had good attitude and strongly agree that the EBF is advantageous for infants aged less than 6 months. 142 (64.6%) mothers were started breast feeding immediately after delivery, but 78 (35.5%) were started breast feeding after few hours of delivery. The study have shown that 160 (72.7%) practiced optimal breast feeding. Of this only 96 (43.6%) mothers were exclusively breast fed their child. (8)

A cross-sectional study was undertaken in the rural field practice area in Uttarakhand.

98.0% mothers had knowledge that mother milk is best for the baby. 88% mothers did not have knowledge about the benefit of breastfeeding to herself. 88.8% mothers believed that colostrum is good for the baby and 74.8% were of the opinion that pre-lacteal feed should not

be given. 62.8% believed that breast feeding should be given on demand and 26.8% thought that should be given at fixed time. Only 37.2% mothers aware of the fact that breastfeeding Should be initiated within one hour. Only 38% of the mothers knew that exclusive breastfeeding should be given for 6 months (9)

In Mandya ,India a cross sectional study done found that 69.5% were like to give exclusive feeding till 6 months of age ,and that 72.5% did not know about colostrums. In this study also it was found that there was no association between knowledge, attitude and practice regarding breast feeding.42.58% of mothers fed baby within 2 hours and in case of vaginal deliver only 23 (41.07%) breast fed within half an hour, this shows delayed practice of breast feeding in Mandya. (10)

Exclusive breastfeeding was reported by 32.8%, mixed feeding was reported by 14.5% and infant formula feeding was reported by 52.7% of the respondents in a government clinic based study done in Malaysia. Chinese women were more likely not to practice exclusive breastfeeding compared to Malay women (odds ratio 18.27, 95% CI: 3.95 , 84.54) while working women were more likely not to practice exclusive breastfeeding compared to non working women (odds ratio 3.75, 95% CI: 1.64 , 8.55). Positive association with not exclusive breastfeeding included women with high household income and women with male infants. Malaysian women had a positive attitude but work place and short maternity leave had a negative impact on breastfeeding. (11)

A cross sectional study done in Fiji showed the overall mean scores for breastfeeding knowledge of mothers were 12.9, the attitude was 33.7, and practice 7.20. Results showed that mothers were generally found to have good levels of knowledge and practice but a fair attitude. Knowledge was associated with the number of children that mothers had and ethnicity. Attitude had a positive correlation with household income. The practice was positively correlated with the mother's status of employment, the number of children, ethnicity, marital status, and household income. (12)

CHAPTER THREE

OBJECTIVES

3.1. General Objectives

The general objective of the study is to assess knowledge, Attitude and Practice of optimal breast feeding among mothers visiting Kolfe and Philipos health centres in Addis Ababa

3.2. Specific Objectives

- To asses knowledge of mothers about optimal breast feeding
- To asses attitude of mothers about optimal breast feeding
- To asses optimal breast feeding practice

CHAPTER FOUR

METHODS AND MATERIALS

4.1. Study Area and Period

This study was conducted at two health centers found in Addis Ketema sub city. Kolfe HC and Philipos health centers were selected from the 14 health centers found in this sub city by convenience sampling

The study was conducted from May to August 2023.

4.2. Study design

Facility based cross sectional study was conducted to assess the KAP of mothers on optimal breast feeding practices in these selected public health centres of Addis Ababa.

4.3. Source Population

The source population was all mothers with children eligible for vaccination in Addis Ababa from May to August 2023

4.4. Study Population

Study population included all mothers who attended the above public health centers for their children's measles vaccination at nine and fifteen months of age

4.5. Inclusion and Exclusion criteria

The inclusion criteria were mothers who attended these public health centers for their children's Measles vaccination during the data collection period.

4.6. Sample size determination and sampling procedure

$$n = \frac{(Z \alpha/2)^2 P (1-P)}{d^2}$$

Where n=Sample size

Z=z value corresponding to a 95% level of significance=1.96

p=prevalence of KAP from previous study done at public health centres =50%=0.5

q= (1-p) = (1-0.232) =0.768

d=absolute precision (5%)

Therefore, based on the above single proportion formula the sample size n=384

The corrected sample size, using the following correction formula was 316 mothers.

$$n_f = \frac{n_o}{1 + \frac{n_o - 1}{N}}$$

For non respondents with a contingency of ten percent, the total sample number was 344 mothers.

4.7 Methods of Data Collection for record reviews

Data was collected using interviewer administered structured questionnaire. The questionnaire was adapted from the child health module of the Ethiopian DHS 2005, FAO guidelines and other large-scale National Community Based Nutrition surveys. The questionnaire was prepared in English and translated to Amharic by a panel of public health experts to check its consistency and conceptual equivalence. GPs were recruited as data collectors and were trained for three days by the principal investigator on the objective of the study tool and data collection procedures. The interviews were conducted in the compound of a health facility after the mother received the service from immunization room.

4.8. Variables

4.8.1. Dependent variable (outcome)

Knowledge, Attitude and Practice of optimal breast feeding

4.8.2. Independent variables

- ✓ Age
- ✓ Marital status
- ✓ Educational level
- ✓ Occupation
- ✓ ANC visit
- ✓ Parity
- ✓ Mode of delivery
- ✓ Age of child

4.9. Data Quality Control

To assure the quality of data, structured data collection was used. Training was given for the data collectors and the PI did regular supervision to ensure data completeness and consistency.

4.10. Methods Data Analysis and interpretation

Data was entered, cleared and analysed using SPSS version 26 software package. The generated data was compiled by frequency tables, graphs and pie charts.

4.11. Ethical considerations

Participants were informed about the study and confidentiality was maintained. Participation in the study was completely voluntary and informed verbal consent before the interview was taken. The proposal was submitted and clearance will be sought from the ethical committee of SPHMMC.

4.12. Operational Definition

- Knowledge was defined after allocating one point for each correct response. The score divided into High Knowledge > 70% , Low Knowledge < 70%
- Attitude was defined after allocating one point for each correct response. High was used for >70% and low for < 70%

4.13. Dissemination of results

The results of the research will be presented to SPHMMC's department of paediatrics and child health. The findings will be sent for publication on relevant scientific journals and disseminated online so that they can be of use for other academic researchers and clinical practitioners. The data can also serve as a base line for future studies.

CHAPTER FIVE

RESULT

5.1 Socio-demographic characteristic

A total of 344 mothers were enrolled in the study. All the mothers were in the age group of 18-45 years. Majority (97.1%) of the mothers were married. All of the mothers had 4 or more ANC visits. Majority(84.6%) delivered at a government health institution.74% of the mothers were multiparous, with 1-2 years pregnancy interval(49%).Regarding occupation 61% of the mothers were housewives.

Table 1; Sociodemographic characteristics of mothers

Variable		Frequency	Percent
Age	18-45 years	344	100%
Marital status	Married	335	97.3%
	Divorced	5	1.5%
	Separated	4	1.2%
Ethnicity	Silte	148	43%
	Gurage	110	32%
	Oromo	36	10.5%
	Tigray	33	9.6%
	Amhara	17	4.9%
Educational status	Can't read and write	46	13.4%
	Primary school	157	45.6%
	Secondary school	93	27%
	University/College	48	14%
Occupational status	Housewife	213	61.9%
	Government employee	74	21.5%
	Private	24	7%
	Daily labourer	33	9.6%
Parity	Multiparous	256	74.4%
	Nulliparous	88	25.6%
Pregnancy interval	1-2 year	169	49.1%
	3 year	72	20.9%

	4 year	15	4.7%
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Place of delivery	Goverment	292	84.9%
	Private	46	13.4%
	Home	6	1.7%
Mode of delivery	SVD	294	85.5%
	C/S	50	14.5%
Age of child	7-12 month	224	65.1%
	13-24 month	120	34.9%

5.2 Knowledge of respondent on Optimal breast feeding

All of the mothers know that breast milk is the first food for a newborn. Majority of them (93.3%) know that it should be started immediately within the first hour of life. 317 of the mothers (92.2%) reported that infants should be exclusively breast fed till 6month of age and 79% said it should be continued with complementary feeding till 24 month. Of the study subjects 319 know infants should be breastfed upon demand (6-8 times a day). Knowledge of breast feeding advantage for both mother and infant was low, 56% reporting it helps infant grow healthy. Breast milk expression and storage was known by 70.9% of mothers.

Table 2 Knowledge of respondent about optimal breast feeding

Variable		Frequency	Percent
What is the first food newborn should receive?	Breast milk	344	100%
When should breast feeding be initiated?	Immediately	321	93.3%
	2-24hr	23	6.7%
For how long should infants be EBF?	6 month	317	92.2%
	4 month	27	7.8%
For how long should breast milk be continued with complementary feeding?	6-11 month	22	6.4%
	11-23 month	274	79.7%
	24 month and above	48	14%

How frequently should infants be breastfed?	Upon demand (6-8 times)	319	92.7%
	Randomly	25	7.3%
What are benefits of breast milk for infant?	He/she grows healthy	193	56.1%
	Protects against diarrheal disease	126	36.6%
	Protects against other chronic diseases	23	6.6%
	I don't know	32	9.3%
What are benefits of breast feeding for mother?	Delay fertility	134	38.9%
	Helps to lose weight	127	36.9%
	Lowers postpartum bleeding	68	19.7%
	Lowers breast and ovarian cancer	42	12.2%
	Improves mother and baby bonds	137	39.8%
	Don't know	9	2.6%
Can breast milk be expressed and stored?	Yes	244	70.9%
	No	100	29.1%
Is bottle feeding harmful?	Yes	239	69.1%
	No	105	30.3%
Should breastfeeding be continued during infant sickness?	Yes	319	92.2%
	No	25	7.2%

5.3 Attitude of mothers on optimal breast feeding

All mothers had good attitude and 100% agree infants should be exclusively breast fed for 6 month. 90% of the mothers agree that infant should be breast fed upon demand and that breast feeding should be continued beyond six month. Large majority of the mothers (94.8%) agree breastfed babies are healthier than formula fed and colostrums should be given (92.4%). The study showed that 85% of mother agreed that breast milk is enough till 6 month of age.

Table 3; Attitude of mothers on optimal breast feeding

Variable		Frequency	Percent
Infant should be exclusively breastfed for 6 month	Agree	344	100%
Infants should be breastfed upon demand	Agree	312	90.7%
	Neutral	21	6.1%
	Disagree	11	3.2%
Breast milk can be expressed and stored	Agree	278	80.3%
	Neutral	51	14.8%
	Disagree	15	4.4%
Breast feeding should be continued beyond 6 month	Agree	310	90.1%
	Neutral	33	9.6%
	Disagree	1	3%
Formula feeding is more convenient than breastfeeding	Agree	7	2%
	Neutral	39	11.3%
	Disagree	298	86.6%
Breastfed babies are healthier than formula fed babies	Agree	328	94.8%
	Neutral	13	3.8%
	Disagree	3	3%
Colostrum has to be discarded	Agree	7	2%
	Neutral	19	5.5%
	Disagree	318	92.4%

Breast milk is enough till 6 month of age	Agree	294	85.5%
	Neutral	36	10.5%
	Disagree	14	4.1%

5.4 Practice of optimal breast feeding

All mothers have breast fed their child .76% of the respondents started breast feeding within first hour and feeding upon demand 6-8 times per day. Majority of the mother (94%) gave colostrums to their baby and breast milk was the first food given in 85% of respondents. Exclusive breast feeding till 6 month was practiced by 59.5% of mothers and 86% of mothers continued breast feeding along complementary feeding above 6 month.

Table 4; optimal breast feeding practice of mothers

Variable		Frequency	Percent
Have you breast fed your child	Yes	344	100%
When did you start breast feeding?	Immediately	262	76.2%
	2-24 hr	63	18.3%
	After 24 hour	19	5.5%
How frequently did you breast feed?	Upon demand (6-8x)	262	76.2%
	Randomly	82	23.8%
What was your child first fed?	Breast milk	295	85.8%
	Formula milk	49	14.2%
Did you give colostrums ?	Yes	324	94.1%
	No	20	5.9%
Did you breast feed exclusively?	Yes	286	83.1%
	6 month	205	59.5%
	4 month	81	23.6%
	No	58	16.9%
Are you breast feeding after 6 month?	Yes	296	86%
	No	48	14%

CHAPTER SIX

DISCUSSION

This study investigated knowledge, attitude and practice of optimal breast feeding among mothers visiting vaccination center. Optimal breast feeding practice entails immediate initiation of breast feeding, EBF for first 6 month and continued breastfeeding up to 2 years and more along with complementary feeding. Breast feeding practices have become a public health issue since they are basics of nutritional status measures for young children.

All mothers know breast milk is the first food newborns should receive. Majority of them (93%,92%,92%) know when it should be initiated, for how long it should be exclusive and how frequently they should be breast fed respectively. These results are comparable to studies done in Bedelle where 91 % of mothers had good knowledge about breast feeding. However the mothers in this study have poor knowledge (56%) in regard to specific maternal and child benefits.

Mothers in this study also have positive attitude to optimal breast feeding. All agree that EBF should be continued till 6 month and majority agree that they should be fed on demand, continued after 6 month and are healthier than formula fed babies. This findings are in line with studies done in Bedele (87.3%) and Bahirdar((97.5%)

According to EDHS 2019 EBF has reached 59% (showed increment from 49% in 2005).This research has shown 59.5% of mothers have practiced EBF till 6 month and 23% have practiced untill 4 month . Majority of mothers (86%) have continued breast feeding beyond 6 month comparable to EDHS report of 85% of mothers still breast feeding at 12 month. colostrum was given to the baby in 80%, which was comparable to study in Bedle(76%) and Gondar(77%).

CHAPTER SEVEN

Limitation of the study

Limitations of this study are the small sample size and convenient sampling method. Additionally, since it is an institution-based study, it cannot be generalized to the general population. Therefore, larger randomized studies may be required to improve these shortcomings.

CHAPTER EIGHT

CONCLUSION AND RECOMMENDATION

8.1 CONCLUSION

The present study shows that even though mothers generally have good knowledge about breast feeding, further education is still needed. Almost all mothers have positive attitude regarding optimal breast feeding .Yet, EBF practice and continued breast feeding after 6 month are still low and need further interventions.

8.2 RECOMMENDATION

Information on optimal breast feeding practice should be improved during routine maternal and child health services. Additionally, public education and promotion of breast feeding should be undertaken through education system and media.

Furthermore part-time work arrangement, facilities for expressing and storing breast milk should be arranged for employed mother

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ANNEX

Annex 1. Information sheet

The purpose of this data collection tool is to assess knowledge, attitude and practice of optimal breast feeding practice among mothers visiting health centre. This structured data collection tool will use primary data from the participants of this study and it will take 15- 20minutes to complete the data collection process and it will be collected by the trained data collectors. The tool has 4 sections socio-demographic, knowledge, attitude and practice assessment. The information gathered from the mothers will be very important in the realization of this study and the name of the patient will not be recorded. Honest reports from the mothers are valuable and it is very important to ensure the quality of data collection since it will be used for appropriate measures that will be taken.

Data collector name

Name of supervisor

Signature

Annex 2 Questionnaire on KAP of optimal breast feeding

Socio demographic status of mother and infant		
Age	<18 years	
	18-45 years	
	>45 years	
Marital status	Married	
	Divorced	
	Separated	
	Widowed	
Ethnicity	Oromo	
	Tigray	
	Amhara	
Religion	Orthodox	
	Protestant	
	Muslim	
	Others	
Educational status	Can't read and write	
	Primary education	
	High school education	
	College or university	
Occupational status	Housewife	
	Government employee	
	Daily labourer	
	Merchant	
	Student	
Age of the child	0-6 month	
	7- 12 mnth	
	13-24 mnth	
Maternal obstetric history		
Parity	Multiparous	
	Nulliparous	
Interval between this pregnancy and the one before	1-2 years	
	3 years	
	4 years	
	Not applicable	
ANC visit	< 4 visit	
	>4 visit	
Place of delivery	Home	
	Health center	

	Private health institution	
Mode of delivery	SVD	
	CS	
	Instrumental delivery	

Knowledge questions

1. **What is the first food a newborn baby should receive?**
 - A. Breast milk
 - B. Water
 - C. Others
2. **When should breast feeding be started after delivery**
 - A. Immediately after birth
 - B. 2-24 hr
 - C. After 24 hours
3. **How long should a baby receive nothing more than breastmilk?(Exclusive breast feeding)**
 - A. Up to 4 month
 - B. Up to 6 month
 - C. Others
4. **For how long should breast milk be continued with complementary feeding**
 - A. 6 month or less
 - B. 6–11 months
 - C. 12–23 months
 - D. 24 months and more (correct response)
5. **How often should a baby younger than six months be breastfed or fed with breastmilk?**
 - A. On demand (6-8 times per day)
 - B. Others
6. **What are the benefits for a baby if he or she receives only breast milk during the first six months of life?**
 - A. He/she grows healthily
 - B. Protection from diarrhea and other infections
 - C. Protection against obesity and chronic diseases in adulthood
 - D. Protection against other diseases.

E. Don't know

7. What are the physical or health benefits for a mother if she exclusively breastfeeds her baby?

- A. Delays fertility
- B. Helps her lose the weight she gained during pregnancy
- C. Lowers risk of cancer (breast and ovarian)
- D. Lowers risk of losing blood after giving birth (less risk of post-partum hemorrhage)
- E. Improves the relationship between the mother and baby
- F. Don't know

8. Do you know breast milk can be expressed and fed ?

- A. Yes
- B. No

9. Do you think bottle feeding is harmful for the child?

- A. Yes
- B. No

10. Should breast feeding be continued during infant sickness

- A. Yes
- B. No

Attitude Questions

1. Infants should be exclusively breast fed till 6 month

- Agree
- Neutral
- Disagree

2. Infants should be breast fed on demand

- Agree
- Neutral
- Disagree

3. Breast milk can be expressed and stored so someone else can feed the baby

- Agree
- Neutral

Disagree

4. Breast feeding along with complementary feeding should be continued beyond 6 month

Agree

Neutral

Disagree

5. Formula feeding is more convenient than breast feeding

Agree

Neutral

Disagree

6. Breast fed babies are healthier than formula fed babies

Agree

Neutral

Disagree

7. First milk (colostrums) has to be discarded

Agree

Neutral

Disagree

8. Do you agree that breast milk is enough for infants till age of 6 month

Agree

Neutral

Disagree

Practice questions

1. Have you breast fed your last child?

A, Yes

B, No

2. When did you start breast feeding after delivery?

A, Immediately

B, 2-24 hr

C, After 24 hr

3. How frequently did you breast feed your last child?

A, Upon demand

B, Regularly

C , Randomly

4.What was given to your baby after delivery ?

A. Breast milk

B. Water

C .Cows milk

D. Formula milk

5. Did you give colostrums to you baby ?

A, yes

B, No

6. If no ,reason

A, It had no white milk

B, First milk is dirty

D. People advise to discard it

7. Did you breast feed your last child exclusively

A. Yes

B. No

8. For how long did you breast feed?

A. <3 month

B. Till 4 month

c. Till 6 month

9. Are you breast feeding after the age of 6 month?

A, Yes

B, No