

## Impact of Breastfeeding Training Programme on Knowledge Among Primipara Mothers

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### ABSTRACT

To nourish your body, nothing beats breast milk. If they have access to reliable information and trained assistance, all moms can breastfeed their babies successfully. Primipara moms' expertise was tested in this study to see how well a breastfeeding instruction program worked. Using a pre-experimental one-group pre- and post-test design, the study employed a quantitative research technique. The researchers used a non-probability convenience sampling method to choose 265 primipara moms. Information was gathered by means of an interview schedule and a standardised questionnaire. After the intervention, the average knowledge score rose from 10.18 on the pretest to 21.64 on the posttest, with a t-value of 27.61 indicating a statistically significant improvement. These results provide strong evidence that the breastfeeding education program significantly increased primipara moms' understanding of proper breastfeeding practices. Therefore, breastfeeding education programs may greatly benefit both mother and child health by encouraging healthy habits among new moms.

**Keywords:** *Primipara mothers, Knowledge, Education, Techniques, Breastfeeding.*

### I. Introduction

The ancient proverb "breast milk is the best milk" continues to have relevance in modern times. Breast milk is special because it gives babies the nutrients they need to grow and develop, shields them from harmful germs, and increases their chances of survival. There is a lot of evidence that shows how beneficial breastfeeding is, particularly when done exclusively. Environmental, social, economic, and immunologic benefits abound.

In addition to reducing the incidence of numerous acute and chronic disorders, including infections like diarrhoea and respiratory tract infections in infants, breast-milk has a substantial beneficial effect on brain development and growth. Additionally, it has positive effects on the mother, including less postpartum haemorrhage, earlier uterine involution, and a lower chance of breast and ovarian malignancies as well as hip fractures in the future.<sup>6</sup> Breastfeeding has different positive effects depending on when it starts, how long it lasts, and what age supplemental feeding is introduced.

It is recommended by the World Health Organization (WHO) to breastfeed exclusively for the first six months, then gradually introduce semisolid and solid meals to supplement breast milk. Breastfeeding should be continued for at least two years or longer beyond this. The exclusive breastfeeding rate in India is 46.3%, which is below the optimum threshold, even though breastfeeding is ubiquitous in India and has several advantages for children, mothers, and society as a whole.

In addition to being a learnt activity, breastfeeding is an innate process. Infants and their mothers do not always get the support they need to start breastfeeding immediately and continue doing so exclusively for the first six months. The health care system, families, and communities may all play a role in ensuring that women have access to correct information, expert practical assistance, and support while they

breastfeed. Sore nipples and mastitis are common issues with the breasts that may be prevented with the use of practical guidance that can boost mothers' confidence, improve their feeding technique, and help them avoid or overcome breastfeeding problems.

Breastfeeding rates are low for many reasons, including mothers' lack of self-confidence, difficulties with their infants' latching or suckling, breast engorgement or soreness, the belief that there is not enough milk to go around, and a lack of individualised counselling during pregnancy and the first few weeks after giving birth. By providing the lady with the right information throughout her prenatal time, some of these issues can be mitigated.

## II. Review of Literature

Crasta, Sangeetha et al., (2022) Infants' optimal nutrition for growth and development can be best provided by breastfeeding, which is both essential and unparalleled. There is no better way to ensure a child's health than to breastfeed exclusively for the first six months of life. Nipple pain or injury can result from improper latching technique. In the first two weeks after giving birth, 33% of mothers reported difficulties with nursing, according to the World Health Organization. The purpose of this research was to find out whether primipara moms might avoid nipple pain by participating in an awareness program that taught them proper nursing methods. Using a purposive sample strategy, 60 primipara moms were chosen to participate in a study with a non-equivalent control group that only received tests after the first one. The participants in the intervention group were educated on proper breastfeeding practices. The data was collected using a demographic pro forma and the Nipple Soreness Rating Scale. The mean score for nipple pain after the test was 0.2 in the intervention group and 2.2 in the control group; this difference was statistically significant. There was a statistically significant difference in the mean ratings of nipple discomfort between the intervention and control groups, as shown by the computed Mann-Whitney U -test  $P = 0.001$ . In neither the intervention nor the control group were there any statistically significant correlations between demographic characteristics and the mean post-test nipple pain score. Preventing nipple pain among primipara women was a successful outcome of the nursing method awareness campaign.

Saberi, Maryam et al., (2022) To make sure this practice stays around, breastfeeding education for moms is essential. Training plays a beneficial role in the breastfeeding process, which helps both children and mothers. Studies have highlighted the significance of training, support, and follow-up in this regard. So, the purpose of this study was to find out how much information pregnant women had and how they planned to breastfeed in 2018 after receiving effective breastfeeding instruction. At 32 weeks gestation, 30 pregnant women participated in this quasi-experimental study that used a pre- and post-test methodology. The next step was to use cluster sampling to choose two comprehensive health facilities. Awareness and preparation for breastfeeding served as independent factors, with successful breastfeeding serving as the dependent variable. The course material was delivered over the course of three 45-minute sessions. There was no pre-existing standard questionnaire, therefore the researcher drew from the appropriate sources to create their own. Finally, the data were input into SPSS 22 and examined with paired t-test and ANOVA. These differences were statistically significant ( $P < 0.001$ ), as was the rise in the mothers' knowledge of effective nursing from  $49.97 \pm 3.53$  to  $63.27 \pm 3.72$ , and in their planning for successful breastfeeding from  $42.78 \pm 2.99$  to  $53.77 \pm 3.74$ . Statistical analysis of the correlations between the moms' demographics and survey responses came up empty. A more informed and prepared mother is more likely to continue and even encourage breastfeeding after receiving effective instruction.

Aylyyewa, Gulsoltan & Topatan, Serap. (2022) There may be a lack of local breastfeeding options for new moms, who frequently require assistance in starting and continuing to breastfeed. As a result, primipara women received counselling and instruction on postpartum breastfeeding during their regular checkups at the family

health center. This study aimed to explore the impact of including lactation instruction and individual counselling into the routine follow-up visits of primipara women at family health centers on their rates of exclusive breastfeeding and their behaviours during the first six months after giving birth. The study was designed as a two-part, pre- and post-test controlled, semi-experimental, prospective design. A city on Turkey's northern shore was the site of the study's three family health facilities. A total of six months after giving birth, as well as twenty-four and seventy-two hours after giving birth, were targeted for interviews with primipara moms. There was a statistically significant difference between the groups in terms of breastfeeding frequency ( $p = .001$ ). In the first six months, 68% of mothers in the study group and 38% of mothers in the control group gave their children only breast milk. Results showed that within the first six months after giving birth, primipara moms' EBF rates and breastfeeding behaviours were significantly increased by the counselling and education that was part of the current health system.

Uğurlu, Meltem & Yavan, Tülay. (2016). Breastfeeding education's efficacy is the focus of this integrative evaluation. Using the search terms "breastfeeding education, prenatal, and postnatal," this comprehensive review compiles data from the years 2000–2015. These results informed the selection of 33 full-length English and Turkish randomised controlled cohort semi-experimental studies that examined the effects of breastfeeding instruction throughout pregnancy and the postpartum period. Findings: The research found that breastfeeding education programs have been implemented during pregnancy and after delivery to encourage breastfeeding. There are a variety of breastfeeding techniques covered in this study, which is based on a large number of studies pertaining to breastfeeding instruction. Phone calls, slideshows, home visits, pamphlets, written papers, books, individual education, and peer counselling and support were the most common approaches found in the studies. The variations that were focused on in the trials were the following: duration of breastfeeding, rate of breastfeeding, exclusive breastfeeding, rate of initiation of breastfeeding, and knowledge level. In the trials, the most positively influenced variations by education and assistance were the length of breastfeeding, the rate of exclusive breastfeeding, and the levels of breastfeeding rate. Some studies also found that breastfeeding attitudes, contentment, and self-efficacy were positively impacted by certain treatments. Nurses and midwives have a critical role to play in assisting women with breastfeeding by providing information and guidance on how to start, maintain, and end exclusive breastfeeding. In addition to education, other variables influencing breastfeeding should be identified and addressed accordingly.

### **III. Research Methodology**

#### **Research Approach**

This study used a quantitative research strategy to evaluate the impact of a breastfeeding education program on first-time moms' understanding and utilisation of the process.

#### **Research Design**

The study employed a pre-experimental research approach, which entailed administering pre- and post-tests to a single group. In this design, the knowledge of primipara mothers regarding breastfeeding techniques was assessed before the intervention through a pre-test. A post-test was given to assess the degree to which knowledge levels had improved after the breastfeeding training session had been conducted.

#### **Sources of Data**

This research made use of data collected from a variety of primary and secondary resources. Primary data were gathered from first-time moms by administering a standardised questionnaire to gauge their level of awareness about breastfeeding procedures during scheduled interviews. To back up the study's background and review of related literature, the secondary data were culled from published journals, research papers, books, and reputable internet sources.

**Sample Size**

A total of 265 primipara mothers were included in the study.

**Sampling Technique**

The samples were selected using a non-probability convenience sampling technique.

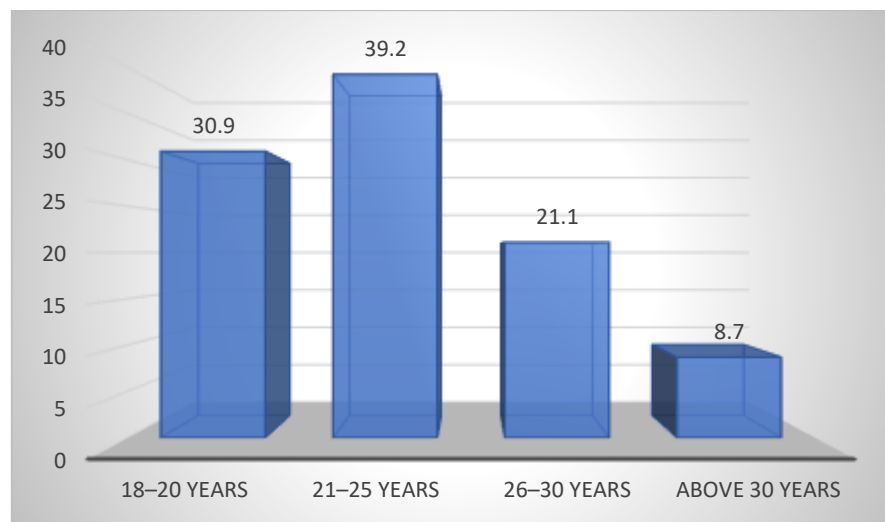
**Statistical Analysis**

Descriptive and inferential statistics were used to organize, summarize, and analyze the acquired data. The sample's demographics and respondents' levels of expertise were described using descriptive statistics including percentages, means, and standard deviations. The intervention's efficacy and the correlation between demographic characteristics and knowledge levels were assessed using t-tests.

**IV. Data Analysis and Interpretation**

**Table 1: Distribution of Respondents by Age Group**

Particulars	Frequency	Percentage
18–20 years	82	30.9
21–25 years	104	39.2
26–30 years	56	21.1
Above 30 years	23	8.7
Total	265	100

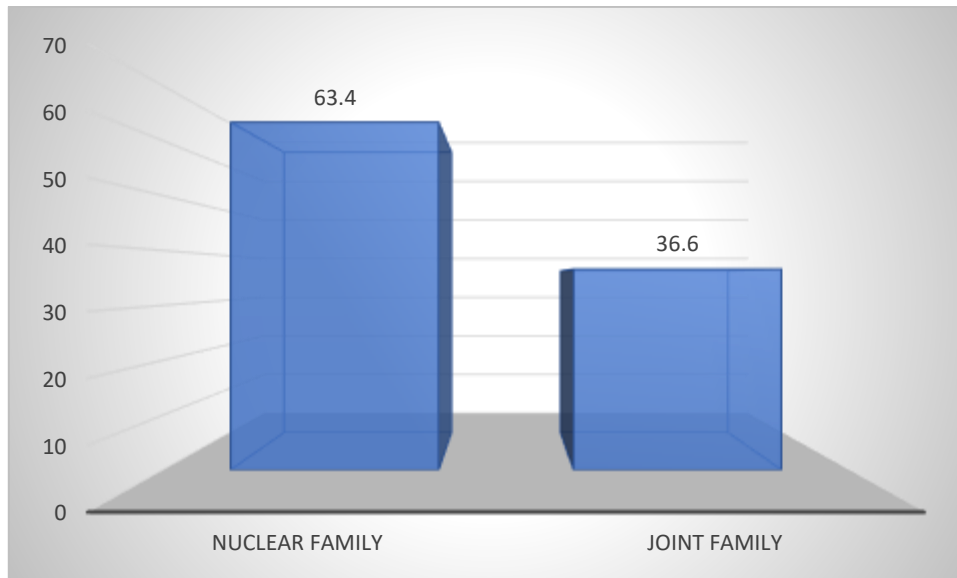


**Figure 1: Distribution of Respondents by Age Group**

The distribution of primipara moms by age group is seen in Table 1. Among the 265 moms who filled out the survey, 104 (or 39.2%) were between the ages of 21 and 25. Mothers in the 18–20 age bracket accounted for around 82 cases (30.9%). In addition, just 23 moms (8.7% of the total) were older than 30 years old, while 56 responses (21.1%) were between the ages of 26 and 30.

**Table 2: Distribution of Respondents by Family Type**

Particulars	Frequency	Percentage
Nuclear family	168	63.4
Joint family	97	36.6
Total	265	100

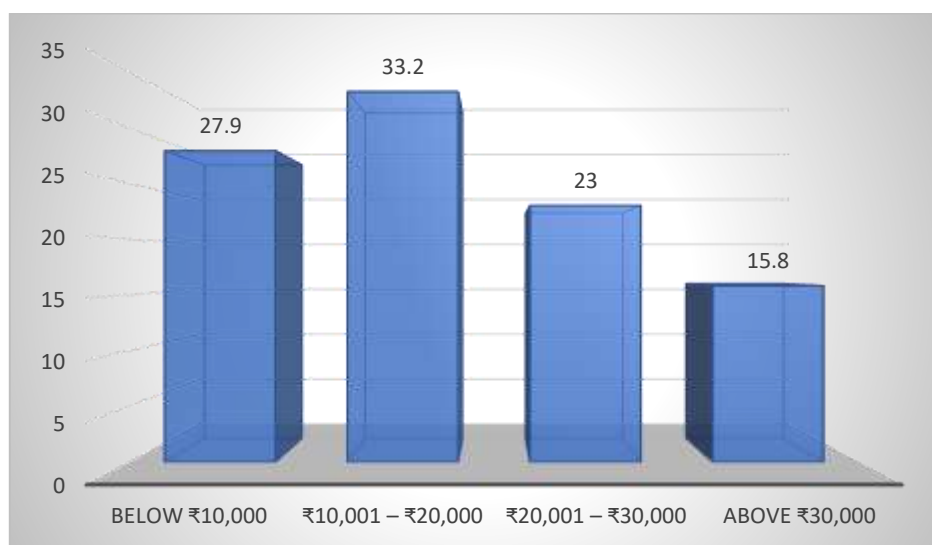


**Figure 2: Distribution of Respondents by Family Type**

The breakdown of respondents by family type is shown in Table 2. There were 265 primipara moms; 97(36.6%) were part of joint families, while 168(63.4%) were part of nuclear households.

**Table 3: Distribution of Respondents by Monthly Family Income**

Particulars	Frequency	Percentage
Below ₹10,000	74	27.9
₹10,001 – ₹20,000	88	33.2
₹20,001 – ₹30,000	61	23.0
Above ₹30,000	42	15.8
Total	265	100



**Figure 3: Distribution of Respondents by Monthly Family Income**

Based on their monthly household income, Table 3 shows how the respondents were distributed. The biggest group, consisting of 88 people or 33.2% of the total, had a monthly family income ranging from ₹10,001 to ₹20,000. There were around 74 responders, or 27.9%, whose monthly income was less than ₹10,000. Furthermore, out of the total number of respondents, 61 (or 23.0%) stated that their monthly income was between ₹20,000 and ₹30,000, and 42 (15.8%) stated that their monthly income was more than ₹30,000.

**Table 4: Effect of Breastfeeding Education on Knowledge Levels of Primipara Mothers**

Knowledge Criteria	Pre-test			Post-test			't' value
	(%)	Mean	SD	(%)	Mean	SD	
Inadequate knowledge	64%	10.18	2.46	0%	21.64	1.63	27.61
Moderate knowledge	36%			12%			
Adequate knowledge	0%			88%			
Total	100%			100%			

The breastfeeding intervention program had a positive impact on primipara moms' knowledge level, as seen in Table 4. Prior to the intervention, no responder had sufficient information about breastfeeding practices, whereas 64% had insufficient knowledge, 36% had intermediate knowledge, and 0% had no knowledge at all. A significant increase in understanding occurred following the session. Twelve percent of the moms had intermediate knowledge, eighty-eight percent had appropriate knowledge, and not a single mother remained in the inadequate knowledge category. The post-test mean knowledge score was 21.64, up from 10.18 on the pre-test, and the standard deviation was 1.63, down from 2.46. A statistically significant difference was seen between the pre- and post-test scores, as shown by the estimated t-value of 27.61.

**V. Conclusion**

Breastfeeding rates and the use of colostrum have both increased as a result of the educational intervention. It has increased the age of introduction of supplemental feeds, which has led to a little improvement in the practice of exclusive breastfeeding. Pregnant women lack access to accurate information and understanding on nursing, yet despite this, they had a favourable attitude toward breastfeeding before the intervention. This suggests that most women desire to nurse their infants. Hence, pregnant women should have breastfeeding information on a regular basis during their prenatal care.

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