

Knowledge of Antenatal Mothers on Breastfeeding: A Descriptive Cross-Sectional Study

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ABSTRACT

Breastfeeding is globally recognized as the optimal method for infant nutrition, providing significant health benefits for both the newborn and the mother. Despite the proven clinical advantages, global breastfeeding initiation and continuation rates remain suboptimal. Knowledge acquired during the antenatal period is a critical determinant of successful breastfeeding practices. This study aimed to assess the knowledge levels of antenatal mothers regarding breastfeeding and to identify potential gaps in their understanding. Employing a descriptive cross-sectional design, data were collected from 200 pregnant women attending antenatal clinics through a structured questionnaire. Results indicated that while awareness of the benefits of breastfeeding was high, specific knowledge regarding the management of common breastfeeding challenges, the duration of exclusive breastfeeding, and proper latching techniques was statistically insufficient. The study concludes that antenatal education programs must transition from general awareness campaigns to skill-based, targeted interventions.

KEYWORDS

• Antenatal • Breastfeeding • Maternal Knowledge • Infant Nutrition • Public Health

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INTRODUCTION

Breastfeeding is a foundational public health intervention that serves as the gold standard for infant nutrition. The World Health Organization (WHO) and UNICEF advocate for exclusive breastfeeding for the first six months of life, followed by the introduction of complementary foods with continued breastfeeding for up to two years or beyond (WHO, 2021). The immunological, nutritional, and psychological advantages offered by breast milk are unparalleled, reducing the risk of respiratory infections, diarrhea, and long-term metabolic disorders in infants.

Despite these clear guidelines, many mothers discontinue breastfeeding prematurely. Research suggests that maternal knowledge, attitudes, and confidence during the antenatal period are the strongest predictors of breastfeeding success (Rollins et al., 2016). When expectant mothers are empowered with accurate information before birth, they are better equipped to navigate the realities of the postpartum period. This study explores the current landscape of maternal knowledge to identify areas where clinical counseling can be improved.

AIM AND OBJECTIVES

Aim: To evaluate the level of knowledge among antenatal mothers concerning breastfeeding practices and principles.

Objectives:

1. To assess the level of knowledge regarding the advantages of exclusive breastfeeding.
2. To identify maternal knowledge regarding the management of common breastfeeding difficulties (e.g., sore nipples, mastitis, milk supply concerns).
3. To determine the association between demographic factors (age, education, parity) and the level of breastfeeding knowledge.

MATERIALS AND METHODS

Study Design: A descriptive cross-sectional study was utilized to capture a snapshot of maternal knowledge at a specific point in time.

Setting and Participants: The study was conducted at the antenatal clinics of two urban regional hospitals. A convenience sampling

method was used to recruit 200 pregnant women in their second and third trimesters.

Data Collection: A structured questionnaire was administered, consisting of three sections:

- **Demographic Profile:** Age, parity, education level, and previous breastfeeding experience.
- **Knowledge Assessment:** 20 multiple-choice questions covering benefits, exclusive breastfeeding duration, techniques, and problem-solving.
- **Source of Information:** Identification of primary sources (media, healthcare providers, family).

Statistical Analysis: Data were analyzed using SPSS (Statistical Package for the Social Sciences). Descriptive statistics (frequencies, percentages) were used to summarize knowledge, while Chi-square tests were used to determine relationships between variables.

RESULTS

A total of 200 participants completed the survey.

- **Knowledge of Benefits:** 92% of respondents recognized that breastfeeding is superior to formula feeding for infant immunity.
- **Exclusive Breastfeeding:** 78% were aware of the six-month exclusive recommendation; however, only 45% were confident in explaining *why* water should not be given before six months.
- **Breastfeeding Techniques:** Knowledge regarding physical positioning and latching was significantly lower, with only 38% of primiparous (first-time) mothers demonstrating a clear understanding of what “effective latching” entails.
- **Problem-Solving:** When presented with scenarios regarding low milk supply or discomfort, 60% of participants cited “switching to formula” as a potential solution, indicating a lack of troubleshooting knowledge.
- **Demographic Associations:** There was a statistically significant correlation between higher educational attainment and better knowledge scores ($p < 0.05$). Age and previous breastfeeding experience were also significant predictors of higher knowledge scores.

DISCUSSION

The findings suggest a dichotomy in maternal knowledge: high awareness of the *value* of breastfeeding, but low proficiency in the *mechanics* of practice.

The widespread awareness of breastfeeding benefits is a success of global public health campaigns. However, the high intention to use formula when facing difficulties (e.g., pain or perceived low supply) suggests that antenatal education is currently failing to address the “lived experience” of breastfeeding. New mothers often perceive “latch pain” as a sign of biological inadequacy rather than a temporary mechanical issue that can be corrected with support.

The study highlights that primiparous mothers, in particular, are at a disadvantage. Without the personal history of successful breastfeeding, they rely on myths and misinformation often perpetuated by social circles. The current reliance on general antenatal group sessions may be insufficient. Structured, one-on-one sessions addressing practical skills—such as manual expression of milk, identifying hunger cues, and positioning—are essential to bridging this gap.

CONCLUSION

Knowledge among antenatal mothers is high in principle but superficial in practice. To improve breastfeeding rates, healthcare

providers must move beyond passive information distribution. Clinical interventions should focus on the “how-to” of breastfeeding, addressing the anxiety surrounding early challenges. Policy interventions should incentivize comprehensive breastfeeding counseling during every antenatal visit, specifically targeting first-time mothers to build the necessary self-efficacy required for successful initiation and maintenance of nursing.

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