



Original Research Article

Skills of Nursing Students Regarding Breastfeeding Practices

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ABSTRACT

Background: The goal for optimal maternal child health and nutrition is that all mothers should exclusively breastfeed their infant for the initial six months of life. Breastfeeding is considered as the most economical and easily accessible complete nutrition for every newborn child although exclusive breastfeeding is the best way to feed infants but it is not commonly practices.

Objective: To assess and compare the skills of nursing students before and after implementation of planned teaching programme on breastfeeding practices. To determine association of level of skills of nursing students regarding breastfeeding practices with selected demographic variables.

Results: Majority of the samples (95%) was in the age group of 20-23 years and majority of the study subjects (98%) had previous knowledge regarding assessment of breastfeeding. The mean post test - I (11.5) as well as mean post test - II (12.2) skills scores of nursing students was higher than mean pre test (8.9) skill scores. The "t" value (11.63) calculated for pre-test and 2nd post test was also found out to be highly significant (0.000) at 0.05 level of significance. The chi-square calculated for age (years), previous knowledge regarding breastfeeding and the source of information was not found to be statistically significant at the 0.05 level of significance.

Conclusion: Nursing students had gained previous knowledge about breastfeeding practice through books. The planned teaching programme regarding breastfeeding practices effectively improved the skills of nursing students.

Key words: Breastfeeding Practices, Nursing Students, skills.

INTRODUCTION

Breastfeeding is the healthiest way to feed an infant; however, many childbearing women never breastfeed. The Healthy People 2010 goal is for 75% of all U.S women to breastfeed their infants in the early postpartum period. Data from several studies suggest that women of lower socioeconomic status (SES) are less likely to breastfeed their infants, both in the United

States and elsewhere. [1] However, few studies of breastfeeding and SES have used more than one dimension of socioeconomic status to examine more closely the factors most predictive of breastfeeding; some that have used both income and education have sampled primarily or only low-income women. The majority of all neonatal deaths (75%) occur during the first week of life. Of those deaths, between 25% and 45% occur

within the first 24 hours. Further, the neonatal period-which comprises of the first 28 days of life-accounts for 37% of all deaths among children under five. [2]

Infant mortality rate (IMR) is considered as one of the most sensitive indicators of health status of a community. Infant mortality figures in India are very high and the two important causes which contributes maximum to the IMR is inadequate breastfeeding and immunization. The major cause of death among under five children in India is neonatal sepsis, diarrhoea and pneumonia and breastfeeding is protective against all the three disease. [3]

The benefits of exclusive breastfeeding for the first six months-where a baby is only given breast milk, no formula or solid food or fruit juice or even water-have been known for a while. In this study, the benefits of breastfeeding come from what's in the breast milk (which can be fed to the baby by nursing or pumping the milk and then bottle-feeding the infant). [4] Breast milk not only provides all the nutrients a baby needs but mothers are also passing along antibodies, which help protect their little ones from infections that cause diarrhoea and pneumonia, the two leading causes of child mortality worldwide according to the World Health Organization. More than 1 million child deaths could be avoided each year if more babies were exclusively breastfed during the first six months of life. [5]

Need of the Study

A newborn has only three demands. They are warmth in the arms of its mother, food from her breasts and security in the knowledge of her presence. Breastfeeding satisfies all three. While breastfeeding may not see the right choice for every parent, it is the choice for every baby because it fulfills the physical needs as well as psychotic complimentary of the child. It not only provides a natural opportunity for bonding

but also supports the growth and development of newborn. [6] Many newborn lives are saved because breast milk provides important nutrients and protection against illness and infection from time immemorial, it has been customary for Indian mothers to feed their young ones almost exclusively on breast milk, well up to two to three years. science later corroborated that mother's milk contains all the essential nutrients in correct proportion and at right temperature that a baby requires for its proper growth and development. It is indeed nature prescription assimilated by the newborn. There are no bottles to sterilize and no formula to buy, measure and mix. [7]

Human breast milk enhances brain development and improves cognitive development in ways that formula cannot. One study has found that the average I.Q. of 7 and 8 year old children who had been breastfed as babies was 10 points higher than their bottle fed peers. All of the children involved had been born prematurely and tube fed the human milk, indicating that the milk itself, not the act of breastfeeding, caused this difference in I.Q. level. [8] Another study to support this statement was done in New Zealand. Here an 18 year longitudinal study of over 1,000 children found that those who were breastfed as infants had both higher intelligence and greater academic achievement than children who were infant-formula fed. [9]

Aims and objectives:

1. To assess and compare the skills of nursing students before and after implementation of planned teaching programme on breastfeeding practices.
2. To determine association of level of skills of nursing students regarding breastfeeding practices with selected demographic variables.

MATERIALS AND METHODS

60 female nursing students studying in B.Sc. (N) 3rd year of selected nursing college were included by non- probability purposive sampling technique. Breast feeding checklist was used to assess the skills of nursing students regarding breastfeeding practices with paper pencil and observational technique to collect data.

Data collection procedure: On day 1st , Pre- test evaluation of skills of the nursing students was done on the mothers who were breastfeeding their babies in the postnatal wards and feeding room of M.M.I.M.S & R Hospital, Mullana, Ambala using breastfeeding practice checklist . After pre- test the group was provided with the planned teaching programme regarding breastfeeding practices including teaching cum demonstration on the breastfeeding mother. 1st Post-test evaluation of skills of the nursing students was done on same day using breastfeeding practice checklist. 2nd Post test was conducted on 15th day for each group. The data collected was analysed by SPSS Frequency and Percentage Distribution of Nursing students according to their selected demographic variables. Range, mean, median and standard deviation of pre-test and pos-test of skills will be calculated. T-test to determine the significance in pre-test and post-test skills score will be calculated. Computing chi square between selected variables and skills score will be calculated.

RESULTS

Majority of the samples (95%) were in the age group of 20-23 years. All the study samples were females and were studying in the B.Sc. (N) 3rd Year. Further data revealed that majority of the study subjects (98%) had previous knowledge regarding assessment of breastfeeding and majority of the study subjects (55%) have gained the knowledge from the books.

TABLE -1: Range , Mean, Median , Standard Deviation of skills scores of nursing students regarding breast feeding practices N=60

SKILLS SCORES	RANGE	MEAN	MEDIAN	S.D
PRE TEST	3-13	8.9	9	1.8
POST TEST-1	9-13	11.5	12	1.1
POST TEST - II	9-13	12.2	12	0.9

The data presented in the Table no. 1 reveals that the mean post test –I (11.5) as well as mean post test - II (12.2) skills scores of nursing students was higher than mean pre test (8.9) skill scores.

TABLE -2: Mean, mean difference, standard Deviation of Difference, Standard Error of Mean Difference and ‘t’ value of Pre- test and 2nd Post-test skills score of nursing students regarding breastfeeding practices. N=60

Skills score	Mean	M _D	SD _D	SE _{MD}	‘t’	p value
Pre- test	8.9					
		2.6	2.1	0.27	9.81	0.000*
1 st Post- test	11.5					
Pre- test	8.2					
		3.3	2.1	0.28	11.63	0.000*
2 nd Post-test	12.2					

df= 59 *Significant (p<0.05) NS- Not significant (p<0.05)

Table 2 showed that the computed “t” value (9.81) regarding breastfeeding practices was found to be highly significant at 0.05 level of significance. It can also be seen that the “t” value (11.63) calculated for pre-test and 2nd post test was also found out to be highly significant (0.000) at 0,05 level of significance. Thus, data presented in this table concludes that planned teaching programme was effective in enhancing the skills of the nursing students regarding the breastfeeding practice.

Table no-3 reveals that the chi-square calculated for age in years with the p-value of 0.91 was not found to be statistically significant with the 0.05 level of significance. Further the data reveals that the computed chi square for the previous knowledge regarding the breastfeeding practices and the source of information regarding the breastfeeding practices was found to be 0.33 and 0.75 which was not statistically significant at the 0.05 level of significance.

TABLE -3: Chi-square showing association between the level of skills of the nursing students regarding breastfeeding practices with selected demographic variables N=60

S.NO	SAMPLE CHARACTERISTICS	LEVEL OF SKILLS		Chi-square	df	P value
		Good	average			
1.	Age (Years)					
1.1	20-23	30	3	0.167	2	0.91 ^{NS}
1.2	24-27	19	8			
2.	Previous knowledge regarding the breastfeeding practices					
2.1	Yes	38	11	0.92	1	0.33 ^{NS}
2.2	No	7	4			
3.	If yes, source of information					
3.1	Demonstration	28	5	0.55	2	0.75 ^{NS}
3.2	Book	15	4			
3.3	Internet and other sources	6	2			

Significant at 0.05 level of significance ($p \leq 0.05$) NS- Not significant

DISCUSSION

Present study showed that the computed “t” value (11.6) regarding breastfeeding practices was found to be highly significant (0.000). This finding is consistent with the study conducted by Kumari Shantha K et al (2014) [10] reported that the t value (12.2) calculated was found to be significant at 0.000. In the present study it is reported that the mean post implementation score (12.2) after the administration of planned teaching programme was higher than the pre-test this is found to be consistent with the study conducted by Kotian Shashidhar et al (2011) [11] also reported that post implementation score was found to be higher than the pre implementation scores (32.01). Thus, demonstrating the effectiveness of the planned teaching programme increased the practices of the nursing students regarding breastfeeding practices.

CONCLUSION

Nursing students had gained previous knowledge about breastfeeding practice through books. The planned teaching programme regarding breastfeeding practices effectively improved the skills of nursing students.

Limitations and Recommendations

- As the sample size is small so generalization of finding was not done
- Sampling was limited to only one school

- Study was limited to only female students

On the basis of the study, the following recommendations were made:

- The study can be replicated on a large sample to validate the findings and generalizations
- The study can be conducted to assess the knowledge of mothers regarding breastfeeding practices
- A comparative study can be conducted to assess the knowledge of mothers regarding breastfeeding practices residing in urban and rural areas.
- The study can be conducted to assess the knowledge of staff nurses regarding breastfeeding practices.

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