

Knowledge Regarding Infant and Young Child Feeding Among Health Care Providers

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ABSTRACT

Background: Infant and young child feeding (IYCF) has both short-term and long-term benefits in terms of morbidity and mortality. Healthcare providers play an important educative and support role to mothers regarding lactation and infant feeding. Health workers in Primary health centre (PHCs) are closer to the majority of the community population and are highly regarded by people within these communities, especially antenatal clinic attendees who look up to them for IYCF counseling, among others.

Aims and Objectives: To assess knowledge among healthcare providers regarding IYCF.

Methodology: Medical officers and staff nurses posted at health centre where services for care of infants and children are available were taken for the study. Thirty three health care workers from all districts of valley were selected during a training session conducted in an associated hospital of SMHS to assess their baseline knowledge about IYCF. A semi-structured self administered questionnaire was distributed among participants after explaining them the purpose of the study. The questionnaire included questions related to all indicators of IYCF.

Results: Thirty three healthcare providers including medical officers and staff nurses of almost equal in number participated in the survey. Total percentage of correct response regarding all indicators collectively was 55.89%. Participants had good knowledge related to Optimal IYCF practices (68.18%) and production and intake of breast milk (69.09%). Poor knowledge was seen with respect to feeding of low birth weight newborns (25.75%) and breast feeding counseling (6.06%).

Conclusion: Efforts should be made to incorporate continuing education workshops to better prepare health professionals for their role in providing tangible breastfeeding and infant feeding support at the primary care level.

Keywords: Healthcare providers, Knowledge, Infant and young child.

INTRODUCTION

The current global Infant and Young Child Feeding (IYCF) recommendation ^[1] is that infants be exclusively breastfed for the first six months of life and thereafter receive safe and nutritionally adequate complementary foods while breastfeeding continues up to two years of age or beyond. There is abundance of evidence that optimal IYCF has both short-term and long-term benefits, particularly protecting children from morbidity and mortality ^[2] and also

ensures a child is protected from both under- and over-nutrition and their consequences later in life. ^[2] According to National Family Health Survey -3 (NFHS-3) data, 20 million are not able to receive exclusive breastfeeding for the first six months and about 13 million do not get good timely and appropriate complementary feeding after six months along with continued breastfeeding. ^[4]

Healthcare providers play an important educative and support role to

mothers regarding lactation and infant feeding. [5,6] They are well positioned to provide adequate health information and counselling on infant feeding as a component of the services given to pregnant women during antenatal visits and may influence mothers' attitudes and infant feeding practices. Health workers in PHCs are closer to the majority of the community population and are highly regarded by people within these communities, especially antenatal clinic attendees who look up to them for IYCF counselling, among others. It is essential for health workers to have thorough and updated knowledge of IYCF recommendations to adequately provide correct information to mothers and promote optimal IYCF. [6]

Aims and Objectives

To assess knowledge among healthcare providers regarding IYCF.

METHODOLOGY

A cross sectional study was designed to obtain information about the IYCF knowledge among medical officers and staff nurses posted at health centres where services for care of infants and children were available. A total of thirty three health care workers from all districts of valley were selected during a training session conducted in an associated hospital of SMHS to assess their baseline knowledge about IYCF. A semi-structured self administered questionnaire was distributed among participants after explaining them the purpose of the study. The questionnaire included questions related to all indicators of IYCF. The questions were regarding

optimal IYCF practices, production and intake of breast milk, breastfeeding assessment, breast conditions, enough breast milk, nutrition of lactating mothers, expressed breast milk, infant milk substitute act, complementary feeding, feeding low birth weight babies, infant feeding and HIV, breast feeding counseling and growth monitoring.

There were 27 questions. Response of each correct item was given a score of 1. If response was partially correct, the score given was 0.5. For each indicator there was one or more than one question. If the indicator had more than one question, correct responses were combined and pooled total correct responses of that indicator were calculated. Responses of each participant were entered in Excel sheet. The results were presented as percent correct responses out of total pooled questions.

RESULTS

Thirty three healthcare providers including medical officers and staff nurses of almost equal number participated in the study. There were twenty seven questions in the questionnaire. Total percentage of correct responses was 55.89%. The percent correct responses for all indicators are summarized in Table 1. Participants had good knowledge related to Optimal IYCF practices (68.18%) and production and intake of breast milk (69.09%). Poor knowledge was seen with respect to feeding of low birth weight newborns (25.75%) and breast feeding counseling (6.06%).

Table 1: Percent correct responses of IYCF Indicators.

Indicators	Pooled number of questions	Pooled correct responses	% correct responses
1. Optimal IYCF practices	198	135	68.18
2. Production and intake of breast milk	165	114	69.09
3. Breastfeeding assessment	33	12	36.36
4. Breast conditions	66	39.5	59.84
5. Enough breast milk	33	9.5	28.78
6. Nutrition of lactating mothers	66	30	45.45
7. Expressed breast milk	33	12	36.36
8. Infant Milk Substitute Act	99	37	37.37
9. Complementary feeding	66	33	50.00
10. Feeding Low Birth Weight newborn	33	8.5	25.75
11. Infant feeding and HIV	66	23.5	35.60
12. Counseling for breastfeeding	33	02	6.06
13. Growth monitoring	66	42	63.63
Total	891	498	55.89

DISCUSSION

This study gave us insight into the existing knowledge and perspectives of healthcare providers about Infant and young child feeding practices.

We observed in our study that knowledge about infant and young child feeding was very little among healthcare workers. This finding is in agreement with that of Utoo and others [7] who found in their study among selected health workers in South Nigeria that a majority of the respondents could not mention three advantages of breastfeeding. The reason for this is that less stress is being laid on this very important aspect of health. Further no continuing medical education is being provided. A poor knowledge of health workers reflects in poor practices of mothers about breastfeeding.

Knowledge regarding feeding of low birth weight newborns was also little which was consistent with study done by Kaur R. [8] The reason could be that these healthcare providers were mostly from primary health centre where they don't have to deal with low birth weight newborns.

Health care workers had limited knowledge regarding IYCF act. This act was not stressed during their undergraduate curriculum.

It was not known to these professionals how to carry out breast feeding counseling. It is important that policies are framed to teach how to conduct counseling to peripheral health workers who are the first contacts of patients particularly in rural settings. It will go a long way in improving indicators of child health.

CONCLUSION

Existing opportunities and resources for retraining exercises or refresher courses

for health workers in PHCs are few and far in between. Deliberate efforts should be made to incorporate continuing education workshops to better prepare health professionals for their role in providing tangible breastfeeding and infant feeding support at the primary care level.

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