To Assess Average Duration of Exclusive Breastfeeding Among Working Mothers

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ABSTRACT

Introduction: Employed women are less likely than unemployed women to exclusively breastfeed their children. Early return to work has been a primary cause for working women discontinuing exclusive breastfeeding. However, little is known about working moms and the factors that influence EBF from both a workplace and an individual standpoint. As a result, there is a need to measure the duration of exclusive breastfeeding and breastfeeding knowledge among working women. **Objectives:** The purpose of study is to assess the average duration of exclusive breastfeeding among working mothers. **Methodology:** A quantitative approach using descriptive research design was used in study. **Results:** The result of the study shows that the average duration of exclusive breastfeeding among working mothers 16 (32%) was 7-12months, followed by 15(30%) for 1- 3 months, about 8(16%) breastfed for 4-6months and 8(16%) working mothers breastfed above 12months.

Key Words: Average duration, Exclusive Breastfeeding, Working mothers

INTRODUCTION

A baby nursing at mother's breast is an undeniable affirmation of our rootedness in nature.

David Suzuki

Breast milk is the healthiest dietary option for infants. It is widely acknowledged that breast milk is the most efficient method of nourishing a neonate. Antibodies, which are abundant in breast milk, confer protection to infants against microbes and viruses. Breastfeeding fosters a unique connection between the mother and child, aids in the development of the brain, and improves cognitive performance during the formative years. Multiple protective enzymes, including digestive lipase and amylase, are present in breast milk and may shield the infant from diarrhoea and infection. The act of a child receiving breast milk directly from the mother's breast, also known as expressed lactation, constitutes breastfeeding. Exclusive lactation refers to the practice of supplying an infant with breast milk exclusively during the initial half-year of life. This practice is strongly advised by experts due to the demonstrated benefits it offers for both the mother and the child. The World Health Organization (WHO) advised mothers worldwide to exclusively breastfeed their infants for the first six months following delivery in order to facilitate the baby's growth and development. To clarify, during the initial half-year

following delivery, infants exclusively consume breast milk, expressed breast milk, or moist nurseries. No other solids or liquids are permitted, except for oral rehydration solutions, drops, or contain syrups that vitamins, minerals. supplements, or medications. Literature indicates that exclusive lactation yields superior results for the present and future health of the infant in comparison to the provision of complimentary beverages and foods. For instance, there is evidence to suggest that exclusive breastfeeding from six months to two years of age is linked to a decreased likelihood of developing necrotizing entercolitis, exclusive breastfeeding during this period is associated with a reduced risk of infant mortality and morbidity, obesity, type II diabetes, hypertension, and hypercholesterolemia in the future. Additionally, evidence suggests that exclusive breastfeeding can provide protection against gastrointestinal and respiratory infections in developed nations.

The difficulty of balancing paid work and breastfeeding for working mothers increases the risk of early cessation of breastfeeding and exclusive breastfeeding in particular. Among employed women, cessation of exclusive breastfeeding is more prevalent than among housewives. The lack of a comfortable environment for mothers and children at work and the short duration of maternal leave are the most common

reasons cited for stopping exclusive breastfeeding. One significant obstacle that contributes to the premature discontinuation of lactation among mothers who are employed is a rigid work schedule. Furthermore, it has been suggested that various factors, including fatigue, lack of support at work, early return to work, short maternity leave, lack of privacy, feelings of being observed and evaluated, early return to work, and short maternity leave, contribute to the low rate of exclusive breastfeeding among working mothers. The majority of children of employed mothers were more susceptible to childhood illnesses, had weaker bonds with their mothers, and were less resistant to diseases for the aforementioned reasons. Employers ought to furnish a conducive work environment, suitable amenities, periods for lactation, and information regarding pertinent policies to ensure that returning employees feel sufficiently encouraged and supported continue to breastfeeding.

NEED OF THE STUDY

A women's health is her capital.

- Harriet Beecher Stow

Breastfeeding is the best way to make sure that babies get the right food for good growth and development. Additionally, it is an important part of reproduction and has direct effects on the health of moms. Having a job has been shown in many studies to be a barrier to nursing. Many more people have moved to cities and factories, which has led to more women working. In 2002, 51% of US women with children younger than 1 year old had jobs outside the home, according to the Bureau of Labor Statistics. However, a poll by Ross Mother found that only 22% of women who worked full time breastfed their babies, compared to 35.4% of moms who were not working. A study was done on the factors that affect working moms in Karnataka who only breastfeed their babies. 17.5% of working moms were found to have EBF, and 75% of those women knew enough about it and its benefits to use it. About 52% of moms did not get any rewards from their maternity leave. Oneeleventh of mothers were given breaks in between work hours, and none of them were given creches at work. Most people who stopped EBF did so because they went back to work soon after giving birth. Women who work tend to breastfeed their babies less than women who don't work. A big reason why working women stop nursing exclusively is that they have to go back to work early. Still, EBF has some effects that are linked to both the mother and child's health. Also, research from Brazil, Ecuador, Ghana, Kenya, and the Democratic Republic of the Congo found that mothers who work are more likely to stop EBF

after a short period of parental leave than mothers who stay at home. If nursing isn't supported, parents who can't work because of their health or the health of their children may also hurt businesses and the growth of national output. But not much is known about working moms and what affects EBF from both the company and employee points of view. So, it's important to find out how long working women breastfeed their babies exclusively and how much they know about nursing. Researchers from the Vaccination Outpatient Department (OPD) have seen mothers who work stop feeding their babies early. That's why the experts took on this study project.

REVIEW OF LITERATURE

Four years ago, Zitkute. Snieckuviene, Zakareviciene, et al. (2020) used a prospective questionnaire to find out why 449 women in Lithuania stopped nursing and if there was a link between the length of maternity leave and this. They called it a "prospective cohort study." 41% (n = 123) of respondents were weaned off by 6 months after birth, and 57.8% (n = 173) were weaned off between 6 months and 1 year. Going back to work did not affect weaning off in a major way. Finally, starting and continuing breastfeeding in the first few days after birth has a big effect on how committed a person is to nursing for the rest of their life. "A study to investigate the prevalence and factors associated with delayed initiation and cessation of breastfeeding among working mothers with children under the age of two years in Abu Dhabi, the UAE" was done by Zainab T, Ahmed AH, et al. (2017). A cross-sectional multicentre study method was used to find that of the 1610 mother-child pairs with full data that were included in this study, 606 were working mothers, which means that 37.6% of the mothers were working. The average age of the mothers was 30.9 years (5.1 standard deviations), and the average age of the children was 8.6 months (6.1 standard deviations). Of the 606 women, 217 (35.8%) started breastfeeding later than planned, and 359 (59.2%) stopped breastfeeding. The study showed that working mothers' situations need to be improved right away in order to encourage the best breastfeeding practices, such as starting nursing early and continuing to do so for all mothers in the UAE, regardless of their job status. Siti M, Khin TA, et al. (2016) did "a study on factors affecting termination of breastfeeding among working mothers by using a self-administered questionnaire with 152 participants. The chi-square test was used to analyze the data." The data showed that 73% of mothers (114/152) had stopped breastfeeding at the time the data were taken. Out of these 114 moms, 25 (21.9%) had stopped nursing in the three months after giving birth. 43 of them were between three and six months old, which is 37.7%, and 46 were more than six months old, which is 40.4%. The study found that working and parenting at the same time were not easy to do along. Everyone needs to put in a lot of work to make this happen, including working moms, healthcare workers, companies, and people who make policy. "A study on exclusive breastfeeding among city-dwelling professional working mothers in Ghana" was done by DunderyEjand Amos k.L in 2016. As a sample frame, 18,021 working women in the official sector in the town were chosen at random using a structured selection method. The sample size that was found was 387. The moms filled out an organized form that was given to them by a researcher. The results showed that almost all of the people who answered (99%) knew about exclusive nursing. Even though 91% of mothers started breastfeeding within an hour of giving birth, only 10.3% of mothers were still nursing at six months. The study's conclusion was that better rules for parental leave and nursing-friendly workplaces are needed because there are a lot of professional working moms who start breastfeeding but not many who continue. "A study on breastfeeding practice, support, and self-efficacy among working mothers in rural health clinics in Selangor" was done by Rashid AA, Shamsuddin1 NH, et al. (2015). They used a cross-sectional questionnaire method with 84 subjects. An study of the data was done with SPSS 22, and the results showed that 97.6% of working women breastfed their babies. The results of this study show how important assistance and self-efficacy are for parenting at work. Policymakers and other interested parties should create a setting that is friendly and helpful for breastfeeding moms who work. "A study on the differential effects of fulltime and part-time work status on breastfeeding for over 1400 mothers" was done by Mandal B. et al. in 2010. Compared to not expecting to work, expecting to work less than 35 hours a week was not linked to starting to breastfeed, but expecting to work full-time was linked to less nursing. The study's conclusion was that working part-time and taking more time off work to help women start and continue breastfeeding. "A study on managing breastfeeding and work" was done by Payne D. et al. in 2010. Two studies looked at talks with 20 women who continued to breastfeed after going back to work in 2005. The first study used Foucauldian discourse analysis. The results showed that balancing being a good mother and a good worker while breastfeeding and working meant a lot of work. Workers who are breastfeeding could make it harder for others to concentrate at work. The study's conclusion was that workers who are breastfeeding could make the workplace less focused. People who help people who are breastfeeding need to be better recognized and

helped for their work. Mahmah and others. "A cross-sectional study to factors that contribute to discontinuing breastfeeding among employed mothers in Malaysia by using a self-administered structured questionnaire" was done in 2011. 290 working moms were asked to fill out a survey. Five percent of the women who stopped breastfeeding did so because they could not find good breastfeeding facilities at work. Most of these mothers (54% of those who stopped breastfeeding had their babies for less than three months). A study by Tolossa K. et al. in 2015 used an organized questionnaire to look at "exclusive breastfeeding cessation and associated factors among employed mothers in Dukem Town, Central Ethiopia." A simple random method was used to get information from 313 working moms. The study's data showed that 75.7% of women who had stopped nursing exclusively did so. Having a short maternity leave, working full-time for a private organization, not having flexible work hours, not pumping breast milk, not having a lactation break, and working far away from her child are all things that can cause a mother to stop breastfeeding her child exclusively. Using an organized questionnaire given by a researcher, Chhetria s, Eraoa A, et al. (2016) did a study to find out what factors affect working mothers in Udupi, town, Karnataka from exclusively breastfeeding their babies. A simple random method was used to get information from 137 working moms. The study found that 22.4% of babies born in private hospitals were fed only breast milk, while only 10.5% of babies born in government hospitals were fed only breast milk. 53.3% of working moms who had breaks were able to breastfeed their babies only, compared to those who didn't have breaks. Twenty percent of the working mothers in this study know enough about different parts of ebf.An interview-based organized questionnaire was used by Jamil S. in 2014 to do a cross-sectional study on employers' views on encouraging breastfeeding at work in Karachi, Pakistan. A random selection method was used to get information from 297 workplaces. Twelve percent of the places that took part in the study gave working moms breaks to breastfeed.86% of the moms had been given three months off for maternity leave. Information about nursing choices was given to women by 15% to 5% of workplaces when they went back to work. Less than 1% of workplaces had separate lactation rooms, a nursery for child care, a breast milk pump, and a refrigerator for keeping mother's milk.In 2016, Suliman AM used an electronic questionnaire survey to do a cross-sectional study to look at the link between not having breastfeeding support policies in the workplace (like letting employees pump breast milk or breastfeeding their babies while at work) and babies starting formula early and stopping breastfeeding. 340 working women were asked to fill out a survey. The study found that 84.5% of working women breastfed their babies while they were on maternity leave. Of these, 59.5% kept nursing after they went back to work, while 40.5% stopped. Of the working moms who kept nursing while they were away from home, 30% did so for one to three months, 25% for four to six months, 25% for seven to twelve months, and 20% for more than a year. A lot of women started giving their babies formula in the first two months, 18.7% between the ages of 3 and 4 months, 8% between the ages of 5 and 6 months, and 8.6% between the ages of 7 and 12 months. We came to the conclusion that the study results show that not having rules that support breastfeeding workers to breastfeed or pump milk at work is strongly linked to shorter nursing periods and starting formula earlier.

AIM OF THE STUDY

The study's goal was to investigate the variables that influence breastfeeding discontinuation among working women.

OBJECTIVES OF THE STUDY

- To assess the average duration of exclusive breastfeeding among working mothers attending immunization OPD's at Govt. Hospital, Patiala.
- 2) To prepare and distribute pamphlets on knowledge of breastfeeding to antenatal mothers.

OPERATIONAL DEFINITIONS

- Average duration: It refers for how many months an infant consumes only breast milk.
- Exclusive breastfeeding: It refers to for the period of 6 months the infant receives only breast milk without any additional food or drink, not even water.
- Working mothers: It refers to a woman with the ability to combine a career with added responsibility of raising child.

RESEARCH METHODOLOGY

In this study, a quantitative research method was used. The study used a method called "Descriptive research design." The study looked at working moms with kids between the ages of six months and two years who brought their kids to the Govt. Hospital in Patiala. Working mothers are moms who have gone back to work and get paid for it. size includes 50 busy moms Purposive sampling, which is not a random selection method, was used in this work.

Inclusion criteria

 Working mothers who had children ranged from six months to two years and had terminated breastfeeding.

- Working mothers who were willing to participate.
- Working mothers who were available at the time of data collection.
- Working mothers who were attending immunization OPD'S at Govt. Hospital, Patiala.

Exclusion criteria

- Working mothers who will not be willing to participate.
- Working mothers who had terminated breastfeeding before 6 months.

DATA COLLECTION PROCEDURE

First of all, formal written permission was obtained from the Principal of Government College of Nursing, Patiala to collect the data. For this study, data was collected from eligible participants from 8am to 2pm at outpatient department of immunization OPD's.On day one, the purpose of study explained to the study objectives and informed consent taken before the study then Ouestionnaire related to factors leading to termination of breastfeeding consisting knowledge questionnaire. Duration of 30-40 minutes was given to complete the questionnaire by using paper pencil method.All respondents co-operated well with the investigator in the knowledge test. The data collection procedure terminated by thanking the respondents.

Descriptive and Inferential statistics: After coding the data it was transfer to master sheet and then it was tabulated and score sheet was prepared. Mean, median and standard deviation was used to determine knowledge level of working mothers related to breastfeeding.

To assess the average duration of exclusive breastfeeding among working mothers attending immunization OPD's at govt. Hospital, Patiala. Description

It reveals that highest number of working mothers, (42.0%) were in the age group of 21-25 years, (34.0%) working mothers were the age group of 26-30 years and (24.0%) were in the age group above 30 years. In context to gender highest number of working mother's child (54.0%) belongs to male child and (46.0%) belong to female Child.Regarding religion highest number of working mothers (56.0%) belongs to Hindu religion, (38.0%) working mothers belongs to Sikh religion, (4.0%) working mothers belongs to Muslim religion, (2.0%) working mothers belongs to Christian religion and no working mothers belongs to any other religion. According to family type highest number of working mothers (64.0%) were nuclear, (36.0%) working mothers are joint

and no working mothers were extended. According to Education highest number of working mothers (32.0%) were graduate and above, (20.0%) working mothers were illiterate and had education up to 12th, (18%) working mothers had primary education, (10.0%) working mothers had education up to 10th. In context to number of children the highest number of working mothers (42.0%) had one child, (40.0%) working mothers had two children, (14.0%) working mothers had three children and (4.0%) working mothers had four and above children. Regarding occupation highest number of working mothers (34.0%) had their own business,(28.0%) working mothers government employee,(22.0%) working mothers

were private employee and (16.0%) working mothers were skilled Labor. According to family income highest number of working mothers (58.0%) had income below Rs 50,000,(28.0%) working mothers had income Rs 50,000-1 lakh ,(10.0%) working mothers had income 2 lakh and above and (4.0%) working mothers had income Rs 1 lakh-1.5lakh. Regarding residence (50.0%) working mothers living in urban and (50.0%) working mothers living in rural area.

According to child's age highest number of working mothers children (40.0%) in age group 1 year-1.5 years,(32.0%) working mothers child were in age group 1.5 years-2 years,(28.0%) working mothers were in age group 6 months -1 year.

SECTION- I
TABLE 1: Frequency and Percentage distribution of socio-demographic variables

Socio Demographic Proforma		Frequency (f)	Percentage (%)
Age	21-25 Years	21	42.0%
	26-30 Years	17	34.0%
	Above 30 Years	12	24.0%
Religion	Hindu	28	56.0%
	Sikh	19	38.0%
	Muslim	2	4.0%
	Christian	1	2.0%
	Any other	0	0.0%
Family	Nuclear	32	42.0%
	Joint	18	34.0%
	Extended	0	24.0%
Education	Illiterate	10	54.0%
	Primary	9	46.0%
	Upto 10th	5	56.0%
	Upto 12th	10	38.0%
	Graduate and above	16	4.0%
Children	One	21	42.0%
	Two	20	40.0%
	Three	7	14.0%
	Four and above	2	4.0%
Occupation	Skilled labour	8	16.0%
	Government employee	14	28.0%
	Own Business	17	34.0%
	Private Employee	11	22.0%
Family Income	Below Rs 50,000	29	58.0%
	Rs 50,000-1 lakh	14	28.0%
	Rs 1 lakh -1.5 lakh	2	4.0%
	2 lakh and above	5	10.0%

DISCUSSION

To assess average duration of exclusive breastfeeding among working mothers: Out of 50 women, distribution of the working mothers as per their average duration of exclusive breastfeeding. Majority of the working mothers, (32.0%) average duration of exclusive breastfeed for 7-12 months, (30.0%) working mothers' average duration of exclusive breastfeed for 1-3

months, (16.0%) working mothers average breastfeed for 4 -6 months and above 12 months and (6.0%) working mothers does not breastfeed. The results of the research were corroborated by Dundery E.J. and Amos K.L. in 2016. The findings indicated that an almost universal understanding of exclusive lactation was present among the participants (99%). Although the majority of

mothers-initiated breastfeeding within an hour of delivery (91%), there was a relatively low EBF rate of 10.3% at six months. In light of the high rate of breastfeeding initiation but low rate of EBF continuation among professional working mothers, the study concluded that breastfeeding-friendly work environments and revised policies regarding maternity leave are required.

SUMMARY

Out of 50 women, distribution of the working mothers as per their average duration of exclusive breastfeeding. Majority of the working mothers,(32.0%) average duration of exclusive breastfeed for 7-12 months, (30.0%) working mothers' average duration of exclusive breastfeed for 1-3 months, (16.0%) working mothers average breastfeed for 4 -6 months and above 12 months and (6.0%) working mothers does not breastfeed.

CONCLUSION

The study revealed that out of the 50 women, majority of the working mothers, (32.0%) average duration of exclusive breastfeed for 7-12 months, (30.0%) working mothers' average duration of exclusive breastfeed for 1-3 months, (16.0%) working mothers average breastfeed for 4-6 months and above 12 months and (6.0%) working mothers does not breastfeed.

IMPLICATION NURSING EDUCATION

- More in-depth lessons, material, and tasks should be added to the nursing program so that nurses can learn more about breastfeeding and teach women how to do it. While working as a nurse educator, there are many chances to teach women about the things that directly cause them to stop breastfeeding. The nurse educator needs to run health programs and use a variety of informational and training methods to look at the factors that lead working moms to stop nursing. The nurse should teach the mother how to use local health services and get help from volunteer health groups, which helps spread information about nursing.
- Nurse educators need to save things like selfstudy guides, PowerPoint slides, and videos that can be put in the library as SIM.

NURSING PRACTICE

 A care-oriented method that helps encourage breastfeeding and stop the things that cause women to stop breastfeeding. Nurses are the most important people on the health team and

REFERENCES

- will play a big part in promoting and maintaining breastfeeding.
- The results of this study can be used to support the creation of standards for teaching in schools and the community. Teaching and passing on information about health are important jobs of nurses, and they should be held accountable for their actions.
- Nursing interventions programs can be used as a way to teach in schools and in the community. Health education can be given through radio, TV, documentaries, handouts, books, and other forms of public media.

NURSING ADMINISTRATION

• A method focused on care that helps women stay breastfeeding and stops the things that make women stop. As a member of the health team, nurses are the most important person. They will play a big role in encouraging and supporting breastfeeding. The study's findings can help make rules for how teachers should act in schools and the community. It's important for nurses to teach and share health knowledge, and they should be held responsible for what they do. Schools and the community can use nursing interventions programs to teach. Radio, TV, films, handouts, books, and other types of public media can all be used to teach about health.

NURSING RESEARCH

• The researcher found that there wasn't a lot of research done by Indian nurses on the factors that affect stopping breastfeeding. This means that nursing experts can use the study's results in future research. That study will inspire new students to do a large-scale study with lots of different factors. Both public and private organizations should also use their tools and cash to support more study in this area.

RECOMMENDATIONS

- To make the results more general, a similar study can be done with a bigger group of people.
- An experiment can be done with a control group so that the results can be compared accurately.

DELIMITATIONS

- Data collection through structured interview schedule method and check-list.
- Women who are attending the immunization OPD's of Govt. Hospital, Patiala Punjab.
- The sample size is limited to only 50 women.

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