

Knowledge and Practice of Mothers towards Exclusive Breastfeeding and Its Associated Factors in Ambo Woreda West Shoa Zone Oromia Region, Ethiopia

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Abstract

Background: Breastfeeding is an important public health strategy for improving infant and child morbidity and mortality, improving maternal morbidity, and helping to control health care costs. The World Health Organization (WHO) and United Nations Children's Fund (UNICEF) recommend that every infant should be exclusively breastfed for the first six months of life, with breastfeeding continuing for up to two years of age or longer.

Methods: A community based cross-sectional study was employed. Sample size was determined by using single population proportion formula and four hundred three lactating mothers who have breastfed for 6 months and up to two years was selected by Simple random sampling technique. All explanatory variables that were associated with the outcome variable during bivariate analysis were included in the final logistic model. A multivariate logistic regression analysis was made to identify the predictors of maternal knowledge about exclusive breastfeeding practices.

Result: The mean duration of exclusive breast feeding among woman in the study subjects was 5.87 months with standard error of 0.025. The prevalence of exclusive breast feeding is 305(82.2%). Three hundred thirty seven (90.8%) of mothers were Knowledgeable. The actual practice of exclusive breast feeding was 305(82.2%). Among the total variables which were included in the analysis only three variables shows positive association with mothers EBF status. These are knowledge of EBF, ANC follow up and women occupation. House wife women were two times more likely exclusively breast feed their child compared to those employed (OR=2.42 CI=1.36, 4.33 P value=0.022).

Conclusion and Recommendations: The study finding implies there is a gap between the current knowledge and actual practice of exclusive breast feeding in line with the WHO recommendations. Therefore, collaborative efforts have to be exerted at different levels, relevant stake holders, health providers together with the community to improve the situation.

Keywords: Exclusive Breastfeeding; Knowledge; Practice

Introduction

Back ground

Breastfeeding is the process of milk transference from mother to baby that is needed for the survival and health [1,2]. Breastfeeding Creates an inimitable psycho social bond between the mothers enhances modest cognitive development and it is the underpinning of the infant's well-being in the first year of life even into the second year of life with appropriate complementary foods from 6 months [3,4].

Breastfeeding is an important public health strategy for improving infant and child morbidity and mortality, improving maternal morbidity, and helping to control health care costs. Breastfeeding is associated with a reduced risk of otitis media, gastroenteritis, respiratory illness, sudden infant death syndrome, necrotizing enter colitis, obesity, and hypertension [5]. Nutrition deficiencies and infectious diseases are the leading causes of child mortality in

developing countries. Breastfed infants have a reduced risk of malnutrition and common childhood infectious diseases. Maternal health benefits from breastfeeding have also been documented. To maximize the health effect of breastfeeding, optimum breastfeeding is recommended. The World Health Organization (WHO) and United Nations Children's Fund (UNICEF) recommend that every infant should be exclusively breastfed for the first six months of life, with breastfeeding continuing for up to two years of age or longer [6-8]. Exclusive breastfeeding (EBF) is defined as feeding the infant only breast milk, with no supplemental liquids or solids except for liquid medicine and vitamin/mineral supplements [8].

For the first six months of life, infants should be exclusively breast fed to achieve optimal growth, development and health. Thereafter, infants should receive nutritionally adequate and safe complementary foods, while continuing to breast feed for up to two years or more. The single most effective Intervention to reduce child mortality in developed and developing countries is promotion of breast feeding practices. Despite this recommendation of worldwide only 39% of infants 6 months of age are exclusive breast feed. In 2008 more than

