

A Study on Knowledge of Breastfeeding Practices Among Lactating Women in Bargarh District, Odisha

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Publication Date: 2026/10/09

Abstract: Breastfeeding is essential for the healthy growth, development, immunity, and survival of infants, while adequate maternal knowledge and appropriate breastfeeding practices are important for maternal and child health. The present study aimed to assess the socio-demographic characteristics, knowledge, attitudes and practices regarding breastfeeding, and health status of lactating women in selected areas of Bargarh district, Odisha. The study adopted an exploratory-cum-descriptive research design and was conducted among 110 lactating women from Gambharipali, Lahanda, Bahalpali, and Katapali villages of Bargarh district. Respondents were selected using purposive random sampling, and data were collected through a questionnaire-cum-interview schedule covering socio-demographic characteristics, breastfeeding knowledge, attitudes and practices, and health status. The data were analysed using frequency and percentage.

➤ Result:

The findings showed that 75.45% of respondents were aged 20–30 years, 38.18% had graduate-level education or above, 93.63% were housewives, 59.09% belonged to joint families, and 97.27% had hospital deliveries. Breastfeeding was practised by 84.54% of respondents. Regarding knowledge, 87.27% were aware of the benefits of breastfeeding, 92.72% knew its benefits for maternal health, 96.36% were aware of the importance of colostrum, and 96.36% knew that lactating mothers require an additional nutritious diet and adequate fluid intake; however, only 55.45% reported feeding the first milk to their child. Regarding health status, 56.36% reported illness after delivery, 40% experienced back or body pain, 16.36% reported stress or anxiety, while 90.9% reported no chronic disease and 89.09% reported no breastfeeding problems.

Keywords: Breastfeeding, Lactating Women, Breastfeeding Practices, Maternal Knowledge, Infant Feeding, Colostrum, Maternal Health.

How to Cite: Pralipta Pradhan; Subakesi Kheti; Sangeeta Singh (2026) A Study on Knowledge of Breastfeeding Practices Among Lactating Women in Bargarh District, Odisha. *International Journal of Innovative Science and Research Technology*, 11(9), 3294-3300. <https://doi.org/10.38124/ijisrt/26sep1459>

I. INTRODUCTION

Breastfeeding is essential for the healthy growth, development, and survival of infants. Breast milk provides all the essential nutrients, antibodies, and protective factors required for the newborn during the first six months of life, strengthening immunity and reducing the risk of infections, malnutrition, and infant mortality (Victora et al., 2016). The World Health Organization (WHO) and UNICEF recommend initiating breastfeeding within the first hour after birth, exclusive breastfeeding for the first six months, and continued breastfeeding along with complementary feeding up to two years or beyond (WHO, 2003).

Breastfeeding also offers several benefits to mothers, including reduced risks of breast and ovarian cancer and improved maternal health. Breastfeeding contributes to immune protection, cognitive and neurobehavioural development and may reduce the risk of several chronic conditions later in life. Suboptimal breastfeeding and inadequate complementary feeding may increase the risk of nutritional deficiencies and impaired growth during early childhood (Binns et al., 2020; Lis-Kuberka et al., 2021; Shrimpton, 2001).

However, inadequate knowledge, sociocultural beliefs, family influences, and improper feeding practices may affect breastfeeding initiation and continuation. Breastfeeding practices are influenced by various maternal, familial, cultural, and healthcare-related factors. Maternal education, awareness of breastfeeding benefits, family support, and guidance from healthcare professionals play an important role in determining the initiation and continuation of breastfeeding. Inadequate knowledge regarding exclusive breastfeeding, colostrum feeding, and appropriate breastfeeding techniques may lead to improper infant-feeding practices, affecting the nutritional status and growth of infants. Breastfeeding is recognized as an essential component of infant nutrition and provides important nutritional, developmental and protective benefits. Human milk supports growth and development and contributes to the development of the infant's immune system, reducing the risk of several infections and illnesses (USDHHS, 2000; Koletzko et al., 2020). The World Health Organization recommends exclusive breastfeeding for the first six months of life, followed by the introduction of appropriate complementary foods from six months, with continued breastfeeding up to two years or beyond. Appropriate breastfeeding practices are therefore an important component of infant and young-child feeding (WHO, 2003; WHO, 2015). Breastfeeding also provides health benefits to mothers, including reduced risks of postpartum haemorrhage and certain cancers, while supporting recovery after pregnancy. However, mothers may experience difficulties such as sore nipples, breast engorgement, inflammation, psychological difficulties and problems with initiating or maintaining lactation (Cato et al., 2017; Bartick et al.,

2017). Although breastfeeding is a natural process, appropriate breastfeeding behaviour requires knowledge, skills and adequate support. Professional counselling, family support and health education can help mothers overcome breastfeeding difficulties and improve the initiation, continuation and exclusivity of breastfeeding.

➤ Objectives of the Study:

- To study the socio- demographic characteristics of the respondents .
- To assess the level of knowledge regarding breastfeeding among the respondents.
- To study the health status of the lactating mothers

II. METHODOLOGY

The present study adopted an exploratory-cum-descriptive research design to assess the knowledge of breastfeeding practices among lactating women. The study was conducted in selected villages of Bargarh district, Odisha, namely Gambharipali, Lahanda, Bahalpali, and Katapali. A total of 110 lactating mothers were selected as respondents using a purposive random sampling technique. The primary data were collected through a questionnaire-cum-interview schedule covering the socio-demographic characteristics, knowledge, attitudes, and practices regarding breastfeeding, and the health status of lactating mothers. The collected data were analysed using frequency and percentage to interpret the findings in accordance with the objectives of the study.

III. RESULTS AND DISCUSSION

Table 1 Socio-Demographic Characteristics

SL.NO	Socio-demographic variables	Categories	Frequency(n)	Percentage
1.	Age(Years) of Respondents	20-30	83	75.45
		30-40	26	23.63
		40-50	1	0.90
2.	Educational Qualification	Illiterate	2	1.81
		Up to 10 th	34	30.90
		10th–12th	32	29.09
		Graduate and above	42	38.18
3.	Religion	Hindu	110	100.00
4.	Occupation	Housewives	103	93.63
		Householders	4	3.63
		Business	4	3.63
5.	Family type	Joint family	65	59.09
		Nuclear Family	45	40.90
6.	Place of Delivery	Hospital	107	97.27
		Home	3	2.727

The socio-demographic characteristics of the respondents were studied to understand the social, economic, and personal background of the 110 lactating mothers selected for the study on knowledge of breastfeeding practices in Bargarh district, Odisha. The characteristics included age, educational status, religion, occupation, type of family, place of delivery, caste, family size, and monthly income. Regarding age, 75.45% of the respondents were

aged 20–30 years, 23.63% were aged 30–40 years, and 0.90% were aged 40–50 years. In terms of education, 38.18% had graduate-level education or above, 30.90% had studied up to Class 10, 29.09% had completed Classes 10–12, and 1.81% were illiterate.

All respondents belonged to the Hindu religion. Occupationally, 93.63% were housewives, while 3.63%

each were householders and engaged in business activities. With respect to family structure, 59.09% belonged to joint families and 40.90% to nuclear families. Furthermore, 97.27% of the respondents delivered their babies in hospitals, whereas 2.72% delivered at home.

➤ *The Level of Knowledge Regarding Breastfeeding Among the Respondents*

Table 2 Distribution of Infants According to Age (n=110)

Age of Infant	Frequency	Percentage (%)
Below 6 Month	24	21.81
6 month to 2 Year	25	22.72
1-2 Year	29	26.36
Above 2 Years	32	29.09

The table presents the age-wise distribution of infants among the 110 respondents. The findings reveal that 29.09% of the infants were above 2 years of age, representing the

highest proportion, followed by 26.36% in the 1–2 years age group. Approximately 22.72% of the infants were aged 6 months to 1 year, while 21.81% were below 6 months of age.

Table 3 Distribution of Respondents According to their Feeding Practices (n=110)

Feeding Practices	Frequency	Percentage (%)
Breast Feeding	93	84.54
Bottle Feeding	17	15.45

The table presents the distribution of respondents according to their feeding practices among 110 respondents. The findings reveal that the majority (84.54%) of the respondents practised breastfeeding, while 15.45% reported

bottle feeding. Specifically, 93 respondents were breastfeeding their infants, whereas 17 respondents practised bottle feeding. The findings indicate that breastfeeding was the predominant feeding practice among the respondents.

Table 4 Distribution of Respondents According to their Level of Knowledge Regarding Breastfeeding (n=110)

Level of knowledge regarding breastfeeding	Yes	Percentage(%)	No	Percentage(%)
Aware of benefits of breastfeeding	96	87.27	14	12.72
Aware that breastfeeding is good for mothers health	102	92.72	8	7.27
Aware that colostrum is important for newborn	106	96.36	4	3.63
Feed first milk to child	61	55.45	49	44.54
Aware that breast feeding mother needs extra nutritious diet and adequate fluid	106	96.36	4	3.63

Table 3 presents the distribution of 110 respondents according to their level of knowledge regarding breastfeeding. The findings reveal that the majority of respondents possessed knowledge about the benefits of breastfeeding, maternal health, the importance of colostrum, and the nutritional requirements of breastfeeding mothers. However, variations were observed in their awareness of specific breastfeeding practices and the support required from family members. Regarding awareness of the benefits of breastfeeding, 96 respondents (87.27%) reported that they were aware, whereas 14 respondents (12.72%) reported that they were not aware. This indicates that a considerable proportion of respondents had knowledge about the benefits of breastfeeding. With respect to maternal health, 102 respondents (92.72%) were aware that breastfeeding is beneficial for mothers' health, whereas only 8 respondents (7.27%) lacked such awareness. Furthermore, 106 respondents (96.36%) were aware of the importance of

colostrum for newborns, while 4 respondents (3.63%) were unaware. These findings demonstrate a high level of awareness regarding the health benefits of breastfeeding and the significance of colostrum among the respondents. However, knowledge regarding the practice of feeding the first milk to the child was comparatively lower. Only 61 respondents (55.45%) reported awareness of this practice, whereas 49 respondents (44.54%) did not. This represents the largest knowledge gap among the breastfeeding-related indicators presented in the table. In addition, 106 respondents (96.36%) were aware that breastfeeding mothers require an extra nutritious diet and adequate fluid intake, while 4 respondents (3.63%) were unaware of this requirement. Overall, the findings indicate that the respondents demonstrated a high level of awareness regarding the general benefits of breastfeeding, maternal health, colostrum, and maternal nutritional requirements.

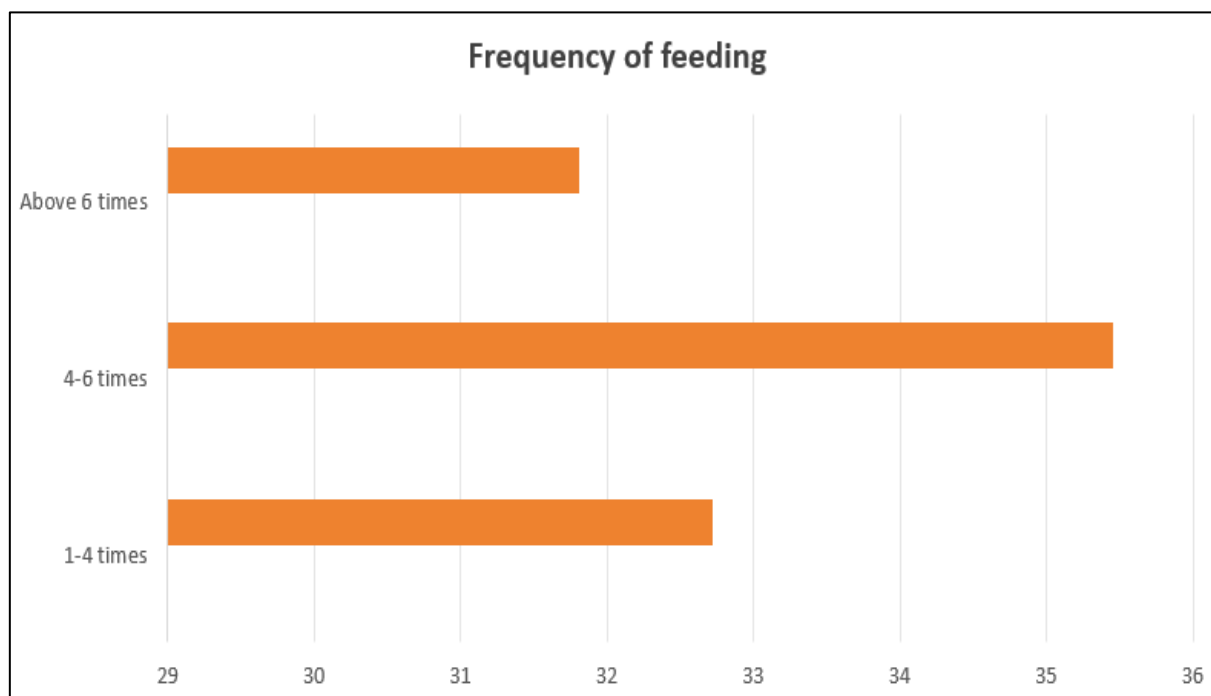


Fig 1 Distribution of Respondents According to Feeding Time Per Day(n=110)

The above graph illustrates the distribution of breastfeeding mothers according to the frequency of feeding their infants per day. The findings reveal that the highest proportion of respondents (approximately 35.5%) breastfed their infants 4–6 times per day. Around 32.7% of the respondents reported breastfeeding 1–4 times per day, while

approximately 32% breastfed their infants more than six times per day. Overall, the findings indicate that the majority of respondents practised breastfeeding 4–6 times per day.

➤ Health Status of the Respondents

Table 5 Distribution of Respondents According to their Experience of Back Pain(n=110)

Experience of back pain	Frequency	Percentage (%)
Agree	44	40
Disagree	66	60

The table presents the distribution of respondents according to their experience of back pain or body pain. Out of 110 breastfeeding mothers, 44 respondents (40%) reported experiencing back pain or body pain, whereas 66 respondents (60%) reported that they did not experience such discomfort. The findings indicate that the majority of

respondents (60%) did not suffer from back pain or body pain, while 40% experienced these health problems. It is showing that a considerable proportion of breastfeeding mothers experienced physical discomfort during the breastfeeding period.

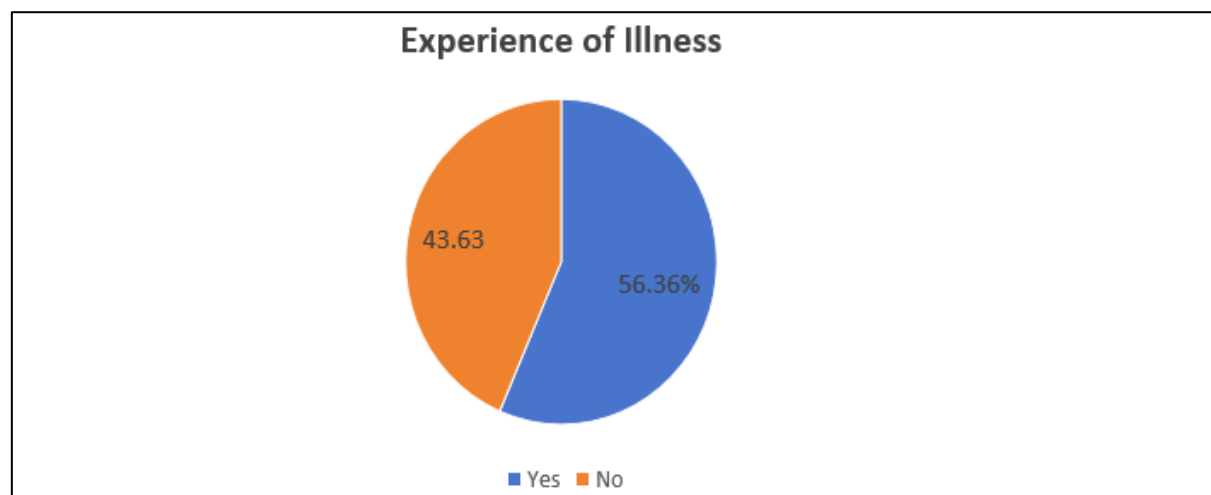


Fig 2 Distribution of Respondents According to their Experience of Illness after Delivery(n=110)

The pi-chart presents the distribution of respondents according to their experience of illness after delivery. Out of 110 breastfeeding mothers, 62 respondents (56.36%)

reported experiencing illness after delivery, whereas 48 respondents (43.63%) reported that they had not experienced any illness during the postnatal period.

Table 6 Distribution of Respondents According to the Experience of Stress or Anxiety(n=110)

Experience any stress or Anxiety	Frequency	Percentage(%)
Agree	18	16.36
Disagree	92	83.64

The table presents the distribution of respondents according to their experience of stress or anxiety. Out of 110 breastfeeding mothers, 18 respondents (16.36%) reported experiencing stress or anxiety, whereas 92 respondents (83.64%) reported that they did not experience these conditions.

The findings reveal that the majority of respondents (83.64%) did not experience stress or anxiety, while 16.36% reported experiencing psychological discomfort during the breastfeeding period. This indicates that although most respondents did not report stress or anxiety, a proportion of breastfeeding mothers experienced psychological distress.

Table 7 Distribution of Respondents According to the Presence of Chronic Diseases (n=110)

Presence of chronic diseases	Frequency	Percentage9%)
Yes	10	9.09
No	100	90.9

The graph illustrates the distribution of respondents according to the presence of chronic diseases. The findings reveal that 9.1% of the respondents reported having a chronic disease, whereas the majority (90.9%) reported that they did not suffer from any chronic disease. The results indicate that most breastfeeding mothers in the study

population did not report any chronic health conditions. However, a small proportion of respondents (9.1%) reported having chronic diseases, highlighting the importance of regular health check-ups and appropriate medical care to ensure the health and well-being of breastfeeding mothers.

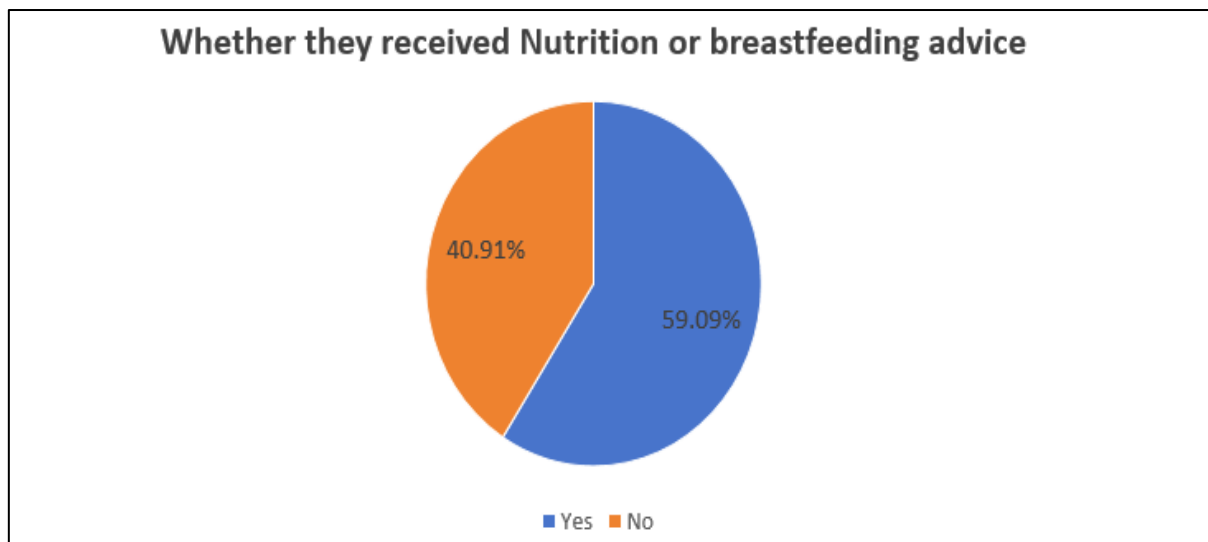


Fig 3 Distribution of Respondents According to Whether they Received Nutrition or Breastfeeding Advice (n=110)

The pi-chart presents the distribution of respondents according to whether they received nutrition or breastfeeding advice. Out of 110 breastfeeding mothers, 65 respondents (59.09%) reported receiving nutrition or breastfeeding advice, whereas 45 respondents (40.91%) stated that they had not received such advice. Overall, the

findings highlight the importance of strengthening maternal nutrition education and breastfeeding counselling services to ensure that all breastfeeding mothers receive adequate information and support for maintaining maternal and infant health.

Table 8 Distribution of Respondents According to Whether they Face any Breastfeeding Problem.(n=110)

Whether they face any breastfeeding problem	Frequency	Percentage9%)
Agree	12	10.90
Disagree	98	89.09

The table presents the distribution of respondents according to whether they experience any breastfeeding difficulties. The findings reveals that an overwhelming majority of the participants, accounting for 89.09%(n=98), did not experience any breastfeeding problems. conversely, only a minor segment of the sample population, representing 10.90%(n=12), reported facing challenges during breastfeeding. This indicates that while the practice is highly manageable or successful for most mothers in this cohort, a small percentage still requires clinical support, education or targeted interventions to address specific nursing difficulties.

IV. CONCLUSION

The present study among 110 lactating women in selected areas of Bargarh district revealed that the respondents were predominantly young mothers, with 75.45% belonging to the 20–30 years age group. Regarding educational status, 38.18% were graduates or above, while only 1.81% were illiterate; 93.63% were housewives, all respondents belonged to the Hindu religion, 97.27% had delivered in hospitals, and 59.09% belonged to joint families. The findings indicated a generally favourable level of breastfeeding knowledge, particularly regarding the benefits of breastfeeding, maternal health benefits, the importance of colostrum, provision of first milk, and the need for additional nutrition during lactation; however, gaps were observed in specific areas, particularly knowledge regarding colostrum and its importance. Breastfeeding was widely practiced, with 84.54% reporting breastfeeding as the preferred feeding method. Regarding health status, 56.36% of respondents reported experiencing an illness after delivery, while 40% reported back or body pain; however, 83.63% did not report stress or anxiety and 90.9% reported no chronic disease. Overall, the findings highlight that although the respondents demonstrated substantial awareness and favourable breastfeeding practices, persisting knowledge gaps and postpartum health concerns indicate the need for continued nutrition education, breastfeeding counselling, family support, and appropriate maternal healthcare interventions to promote the health and well-being of lactating women and their children.

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