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A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge and Practice Regarding Techniques of Breastfeeding Among Primigravida Mothers in Selected Hospitals

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Abstract

A Study to Assess the Effectiveness of Structured Teaching Programme on Knowledge and Practice Regarding Techniques of Breastfeeding Among Primigravida Mothers in Selected Hospitals.

Objective of the Study

1. To assess the existing knowledge and practice regarding techniques of breastfeeding among primigravida mothers in selected hospitals.
2. To evaluate the effectiveness of structured teaching programme regarding techniques of breastfeeding among primigravida mothers in selected hospitals.
3. To find out association between pre – test level of knowledge and practice scores techniques of breastfeeding among primigravida mothers with their selected demographic variables.

Methodology:

The research design selected for study was Pre experimental, one group pre - test and post - test research design. The independent variable in present study structured teaching programme regarding techniques of breastfeeding. The dependent variable was knowledge of primigravida mothers regarding techniques of breastfeeding. The study was conducted at selected hospital. Sample size was 50 primigravida mothers at selected hospital that fulfils the inclusion criteria were selected by non-probability purposive sampling technique.

Result:

Pretest knowledge score mean 9.24 and SD was 2.37, and in the post test knowledge, the mean 21.02 and SD was 1.37. The comparison of pretest and post-test knowledge score revealed a “t” value was $t = 1.60$ and calculated

value was 3.63 which showed a high statistical significance at 0.05 level. Pretest practice score mean 2.22 and SD was 0.87, and in the post test practice, the mean 8.74 and SD was 0.72. The comparison of pretest and post-test practice score revealed a “t” value was $t = 7.61$ and calculated value was 3.63 which showed a high statistical significance at 0.05 level.

Conclusion:

The analysis of the findings indicates that, structured teaching programme was effective in improving the level of knowledge and practice at $p < 0.05$. From the findings of study, the investigator concluded that structured teaching programme has an important role in improving the knowledge and practice regarding techniques of breastfeeding among primigravida mothers in selected hospitals. Overall, carrying out the present study was really an enriching experience for the investigator. The direction from the guide, various experts & cooperation of the participants played a major role in successful completion of the study.

At the time of pre-test, none of mothers of infant had good knowledge regarding aspiration pneumonia, 65% of mothers of infant had poor knowledge and 35% had average knowledge. Average knowledge score at the time of conducting a study was 10.18 with standard deviation of 3.29. At the time of post test, none of mothers had poor knowledge regarding aspiration pneumonia, 80% mothers had average knowledge and 20% had good knowledge. Average knowledge score at the time of post test was 18.28 with standard deviation of 2.83. Thus, it was concluded that effectiveness of structured teaching programme on knowledge regarding aspiration pneumonia was found effective as a teaching strategy.

Keywords: Working Capital, Profitability, Liquidity, Leverage, Equity, Debt Capital

Introduction /Background:

“Breast feeding is a mother’s gift to herself, her baby and the earth”

Pamela. k. Wiggins

Breastfeeding is one of the oldest practice, recommended in the ancient Hindu scriptures Holy Quran and Biblical records breastfeeding confers short-term and long- term benefits on both child and mother, including helping to protect children against a variety of acute and chronic disorders. The review of studies from developing countries shows that infants who are not breastfed are 6-10 times more likely to die in the first few months of life than infants who are breastfed. Diarrhoea and pneumonia are more common and more severe in children who are artificially fed, and are responsible for many of the deaths.

Other acute infections including otitis media, haemophiles influenzae, meningitis and urinary tract infection are less common and less severe in breastfed infants.¹ There has been an increasing concern in the recent years about the changing pattern of breastfeeding, particularly in societies in rapid transition. An earlier study in Benghazi in 1981 showed that only 54.8% of mothers breastfed for more than 6 months.¹

Breastfeeding is nationally promoted as the ideal method of infant nutrition due to its numerous benefits to mothers, children, and communities. According to the United Nation Fund for Children, optimal infant breastfeeding should be initiated within the first hour of birth.²

All major health organizations recommend breastfeeding as the optimal source of infant nutrition, with exclusive breastfeeding recommended for the first six months, of life. Breastfeeding for all infants starting at birth and continuing until at least 6 months of age has been recommended by the world health organization and the American academy of paediatrics.³

Breast feeding technique is the composite of positioning attachment and suckling positioning refers to the technique in which the infant is held in relation to the mother's body and attachment refers to whether the infant has enough areola and breast tissue in the mouth. Proper positioning of the mother, good attachment of the baby to the breast and effective suckling is a function of effective breastfeeding technique. Performing effective breastfeeding technique has been shown to be important to establish breastfeeding, to ensure milk transfer and to prevent breastfeeding problems.³

Although breastfeeding technique is a natural act or phenomenon. It is not an instinctual behavior and requires a learned skill. Once the mother knows the steps of effective breastfeeding technique, she can better prevent and cope with most difficulties can be avoided together if good attachment and positioning are achieved at the first and early feeds.³

Background of the Study

Ineffective breastfeeding technique result in inadequate intake of breast milk, which leads to poor weight gain, stunting and declines immunity. Besides, Ineffective breastfeeding technique increases the risk of postpartum breast problems.⁴

Human milk is the only recommended and complete food for the new-born. It is an unequalled way of providing ideal food for the healthy growth and development of infants, Breastmilk provides all the energy and nutrients that the infant needs for the first months of life, and it continues to provide up to half or more of a child's nutritional needs during the second half of the first year, and up to one third during the second year of life.⁵

Review of Literature

Review of literature is arranged according to the following:

1. Reviews related to knowledge regarding techniques of breast feeding among primigravida mothers.
2. Reviews related to practice regarding techniques of

breast feeding among primigravida mothers.

1. Reviews related to knowledge regarding techniques of breast feeding among primigravida mothers

A descriptive study was conducted on assess the breastfeeding techniques among the primi mothers at tertiary care hospital of North Karnataka. 75 primiparous women after 24 hours of delivery were the samples. Data was collected by using Bristol breast feeding assessment tool. The result showed that the present study revealed that 53% of women were following incorrect position, 61% were not following good attachment. While 67% of babies were sucking correctly and 60% of babies were swallowing correctly. The total score was 59% of mothers follow incorrect technique of breast feeding. The study concluded that there is a need of support system which helps the mother to feed.¹⁰

2. Reviews related practice regarding techniques of breast feeding among primigravida mothers.

A cross sectional study was conducted on assess the knowledge, attitude and practices of primipara at Vani Vilas Hospital attached to Bangalore Medical College and Research Institute, Bangalore. This study conducted on 400 mothers. The knowledge was assessed by a questionnaire; attitude and practice were assessed by interview and observations. The result showed that out of the 400 primiparous women who participated in this knowledge, attitude, practice study majority was in the age group of 21-25 years (187 women), 71% were Hindus and 77% were married for 1-5 years. were formally educated about breast feeding, 95% gave Colostrum feeds and 3% had given pre lacteal feeds. The study was concluded that knowledge about breastfeeding among primipara is inadequate. Without knowledge, practice can never be met.²⁵

Result: The findings of the study were grouped and analyzed under the following sessions.

Section A: Deals with analysis of demographic data of the primigravida mothers in selected hospitals in terms of frequency and percentage.

Section B: Deals with analysis of data related to assessment of the knowledge and practice regarding techniques of breastfeeding among primigravida mothers in selected hospitals in term of frequency and percentage.

Section C: Deals with analysis of data related to the effectiveness of structured teaching programme on knowledge and practice regarding techniques of breastfeeding among primigravida mothers in selected hospitals in term of average pre and post test.

Section D: Deals with analysis of data related to association of knowledge and practice regarding techniques of breastfeeding with selected demographic characteristics of primigravida mothers in selected hospitals.

Section A

Deals with analysis of demographic data of the primigravida mothers in selected hospitals in terms of frequency and percentage.

Table 2: Frequency & percentage distribution of primigravida mothers in selected hospitals in terms of frequency and percentage

S. No	Variables	Groups	Frequency	Percentage
1.	Age (in years)	18-30	47	94%
		31-45	03	6%
2.	Education	Primary	0	0%
		Secondary	13	26%
		Higher secondary	30	60%
		Illiterate	0	0%
		Degree	7	14%
3.	Religion	Hindu	23	46%
		Muslim	7	14%
		Christian	3	6%
		Others	17	34%
4.	Residence	Urban	6	12%
		Rural	44	88%
5.	Occupation	Working woman	8	16%
		House wife	33	66%
		Own business	9	18%
6.	Diet	Vegetarian	3	6%
		Non- vegetarian	1	2%
7.	Type of family	Mixed	46	92%
		Nuclear	31	62%
8.	Family Income (per month)	Joint	19	38%
		< 5000	0	0%
		5000 to 10,000	12	24%
		10,000 to 15,000	13	26%
9.	Marital status	>15,000	25	50%
		Married	50	100%
		Unmarried	0	0%

Table 3: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Age

S. No	Variables	Groups	Frequency	Percentage
1.	Age (in years)	18-30	47	94%
		31-45	03	6%

Above table and following figure depicts that, according to age of primigravida mothers from selected hospitals, in the study 94% were from age group 18-30 years, 6% mothers from the 31-45 years of age.

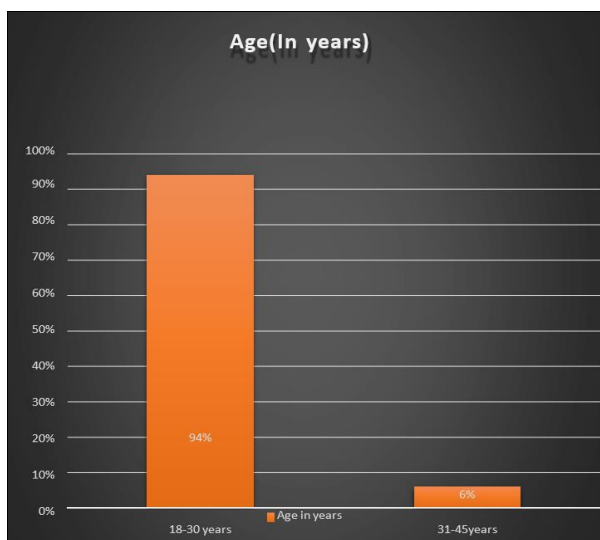


Fig 1: Distribution of primigravida mothers in selected hospitals according to Age (In years)

Table 4: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Education

S. No	Variables	Groups	Frequency	Percentage
2.	Education	Primary	0	0%
		Secondary	13	26%
		Higher secondary	30	60%
		Illiterate	0	0%
		Degree	7	14%

Above table and following figure depicts that, according to education of primigravida mothers from selected hospitals, in the study 26% mother educated up to secondary, 60% mothers educated up to higher secondary, 14% of the mothers were Degree, and 0% primary and illiterate mothers.

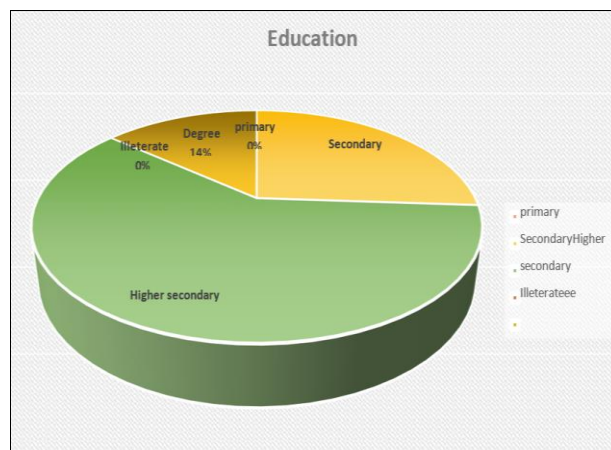


Fig 2: Distribution of primigravida mothers in selected hospitals according to Education

Table 5: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Religion

3.	Religion	Hindu	23	46%
		Muslim	7	14%
		Christian	3	6%
		Others	17	34%

Above table and following figure depicts that, according to religion of primigravida mothers from selected hospitals, in the study 46% mothers were from the Hindu, 14% mothers were from the Muslim, 6% mothers were from the Christian and 34% mothers were from the others religion.

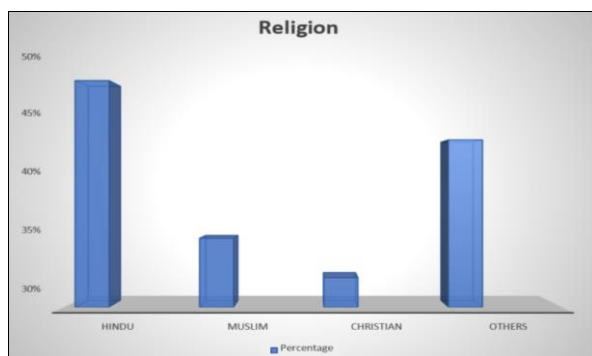


Fig 3: Distribution of primigravida mothers in selected hospitals according to Religion

Table 6: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Residence

4.	Residence	Urban	6	12%
		Rural	44	88%

Above table and following figure depicts that, according to residence of primigravida mothers from selected hospitals, in the study 12% mothers were from the Urban area, 88% mothers were from the rural area

Table 7: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Occupation

5.	Occupation	Working woman	8	16%
		House wife	33	66%
		Own business	9	18%

Above table and following figure depicts that, according to Occupation of primigravida mothers from selected hospitals, in the study 16% mothers were working woman, 66% of them were, house wife. and 18% of the primigravida mothers were own business.

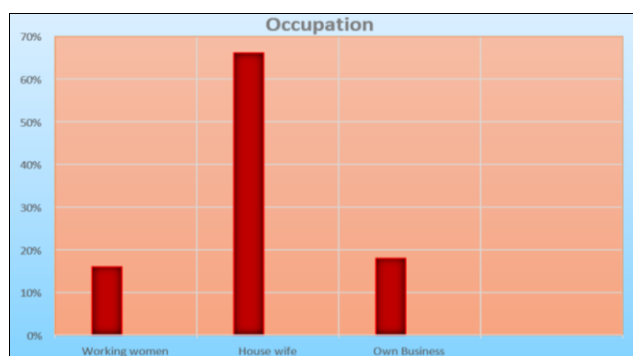


Fig 5: Distribution of primigravida mothers in selected hospitals according to Occupation

Table 8: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Diet

6.	Diet	Vegetarian	3	6%
		Non- vegetarian	1	2%
		Mixed	46	92%

Above table and following figure depicts that, according to Diet of primigravida mothers from selected hospitals, in the study 6% mothers were from the Vegetarian, 2% from the Non- Vegetarian and 92% mothers from the Mixed diet.

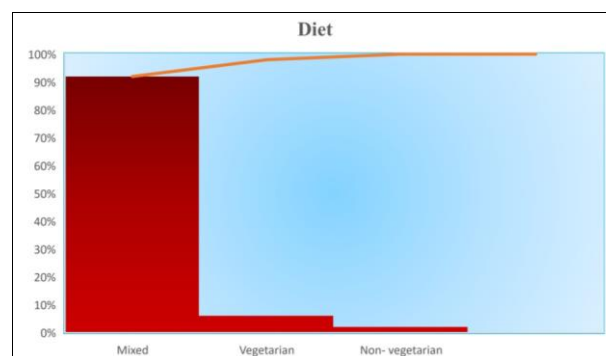


Fig 6: Distribution of primigravida mothers in selected hospitals according to Diet

Table 9: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Type of Family

7.	Type of family	Nuclear	31	62%
		Joint	19	38%

Above table and following figure depicts that, according to type of family of primigravida mothers from selected hospitals, in the study 62% mothers were from the nuclear families, 38% from the joint families.

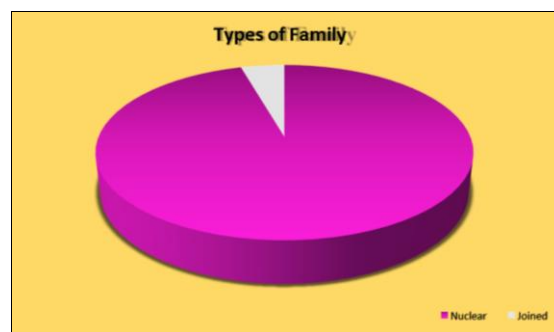


Fig 7: Distribution of primigravida mothers in selected hospitals according to Types of family

Table 10: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Family Income

8.	Family Income (per month)	Less than 5000	0	0%
		5000 to 10,000	12	24%
		10,000 to 15,000	13	26%
		More than 15,000	25	50%

Above table and following figure depicts that, according to family monthly income of primigravida mothers from selected hospitals, in the study 0% mothers had family monthly income less than 5000 Rs, 24% of them had family monthly income in 5000 to 10,000 Rs and 26% of them had family monthly income 10000 to 15,000 Rs and 50% mothers had family monthly income More than 15,000

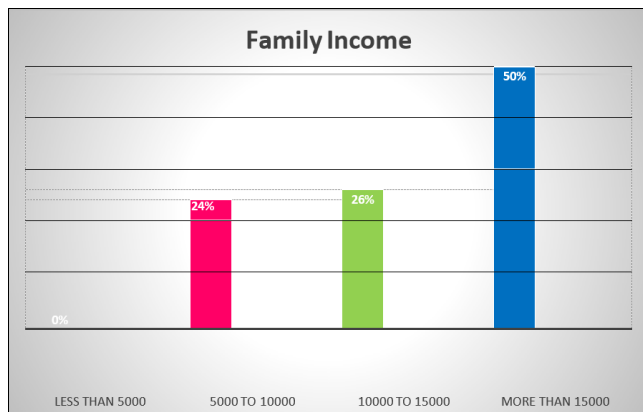


Fig 8: Distribution of primigravida mothers in selected hospitals according to Family Income

Table 11: Frequency & percentages distribution of primigravida mothers in selected hospitals according to Marital status

9.	Marital status	Married	50	100%
		Unmarried	0	0%

Above table and following figure depicts that, according to marital status of primigravida mothers from selected hospitals, in the study 100% mothers were Married. 0% Mothers were Unmarried.

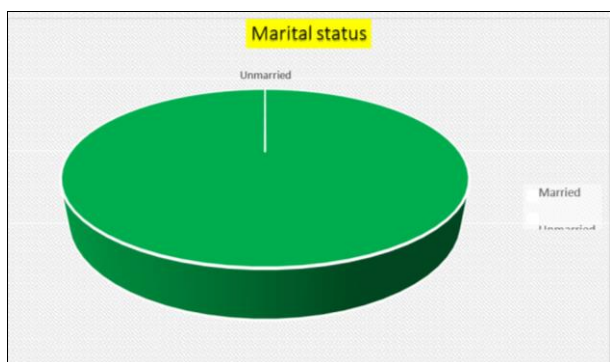


Fig 9: Distribution of primigravida mothers in selected hospitals according to Marital status

Section B

Deals with analysis of data related to assessment of the knowledge and practice regarding techniques of breastfeeding among primigravida mothers in selected hospitals in term of frequency and percentage.

Table 12: Analysis of data related assessment of the pretest knowledge score of primigravida mothers. n =50

Pretest	Group	Frequency	Percentage
	Poor	4	8%
	Average	39	78%
	Good	7	14%
Knowledge	Minimum	5	
	Maximum	16	
	Average (SD)	9.24 (2.37)	

Table 12 depicts the pretest scores, 8% of primigravida mothers in selected hospital had poor knowledge regarding techniques of breastfeeding, 78% mothers had average knowledge and 14% mothers had good knowledge. Average knowledge score at the time of pretest was 9.24 with standard deviation of 2.37.

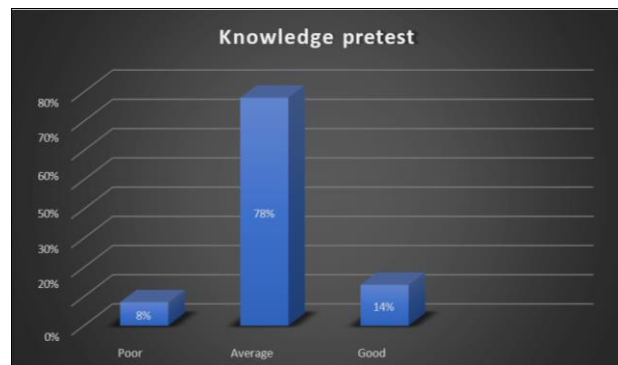


Fig 10: Distribution of pretest knowledge scores of primigravida mothers regarding techniques of breastfeeding

Table 13: Analysis of data related assessment of the posttest knowledge score of primigravida mothers

Post test	Group	Frequency	Percentage
	Poor	0	0%
	Average	0	0%
	Good	50	100%
Knowledge	Minimum	18	
	Maximum	24	
	Average (SD)	21.02 (1.37)	

Table 13 reveals the post-test knowledge scores, no one had poor knowledge regarding techniques of breastfeeding, no one had average knowledge and 100% of primigravida mothers in selected hospitals had good knowledge. Average knowledge score at the time of post-test was 21.02 with standard deviation of 1.37.

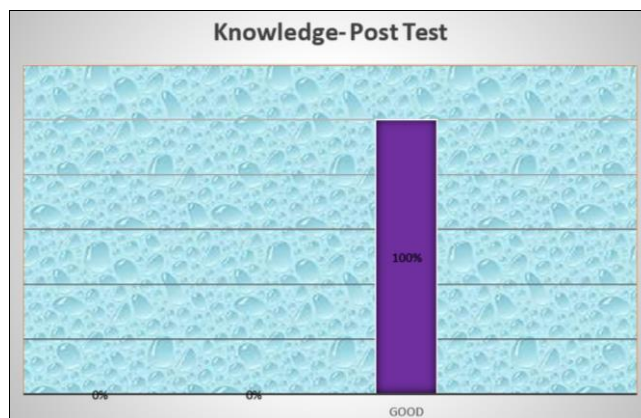


Fig 11: Distribution of Post-test knowledge scores of primigravida mothers regarding techniques of breastfeeding

Deals with analysis of data related to assessment of the knowledge regarding techniques of breastfeeding among primigravida mothers in selected hospitals in term of frequency and percentage.

Table 14: General assessment of knowledge – Pre Vs Post-test

Pretest	Group	Pre-test		Post-test		
		Frequency	Percentage	Frequency	Percentage	
	Poor	< 7	4	8%	0	0%
	Average	7-11	39	78%	0	0%
Good	12-25	7	14%	50	100%	
Knowledge	Minimum	5		18		
	Maximum	16		24		
	Average (SD)	9.24 (2.37)		21.02(1.37)		

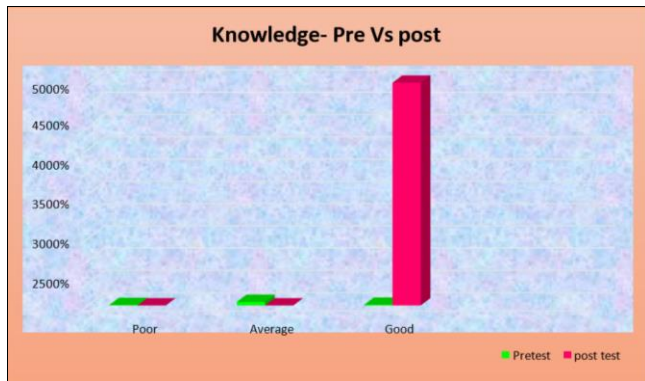


Fig 12: Percentage of the general assessments of pre and post-test knowledge scores of primigravida mothers regarding techniques of breastfeeding

Table 14 reveals that for the assessment purpose the total score of knowledge was divided in to three group like poor (less than 7 score), average (7-11score) and good (12-25 score).

Pre-Test:

At the time of pretest,8% of primigravida mothers in selected hospital had poor knowledge regarding techniques of breastfeeding, 78% mothers had average knowledge and 14% mothers had good knowledge. Average knowledge score at the time of pretest was 9.24 with standard deviation of 2.37. The minimum score of knowledge was 5 with maximum score of 16.

Post Test:

At the time of post-test, no one had poor knowledge, no one had average knowledge and 100% of primigravida mothers in selected hospital had good knowledge. Average knowledge score at the time of posttest was 21.02 with standard deviation of 2.37. The minimum score of knowledge was 18 with maximum score of 24.

Table 15: Analysis of data related assessment of the pretest practice score of primigravida mothers

n=50			
Pretest	Group	Frequency	Percentage
	Ineffective	47	94%
Effective	3	6%	
Practice	Minimum	1	
	Maximum	6	
	Average (SD)	2.22(0.87)	

Table 15 depicts the pretest scores, 94% of primigravida mothers in selected hospital had Ineffective practice regarding techniques of breastfeeding, 6% mothers had effective practice. Average practice score at the time of pretest was 2.22 with standard deviation of 0.87.

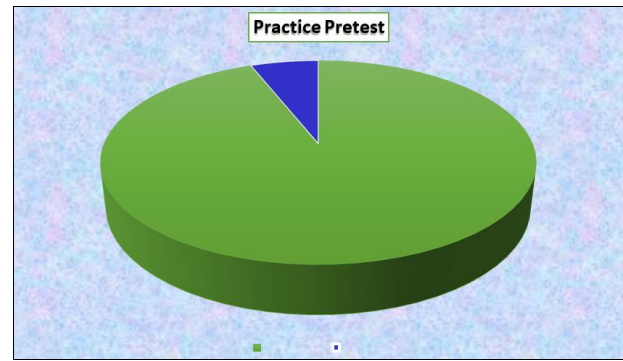


Fig 13: Distribution of pretest practice scores of primigravida mothers regarding techniques of breastfeeding

Table 16: Analysis of data related assessment of the posttest practice score of primigravida mothers

n=50			
Post-test	Group	Frequency	Percentage
	Ineffective	0	0%
Effective	50	100%	
Practice	Minimum	7	
	Maximum	10	
	Average (SD)	8.74 (0.72)	

Table 16 reveals the post-test practice scores, no one had Ineffective practice regarding techniques of breastfeeding, and 100% of primigravida mothers in selected hospitals had Effective practice. Average practice score at the time of post-test was 8.74 with standard deviation of 0.72.



Fig 14: Distribution of post-test practice scores of primigravida mothers regarding techniques of breastfeeding

Deals with analysis of data related to assessment of the practice regarding techniques of breastfeeding among primigravida mothers in selected hospitals in term of frequency and percentage.

Table 17: General assessment of Practice– Pre Vs Post-test

n=50					
Pretest	Group	Pre-test		Post-test	
		Frequency	Percentage	Frequency	Percentage
Ineffective	< 5	47	94%	0	0%
	5-6	3	6%	50	100%
Knowledge	Minimum	1		7	
	Maximum	6		10	
	Average (SD)	2.22(0.87)		8.74(0.72)	

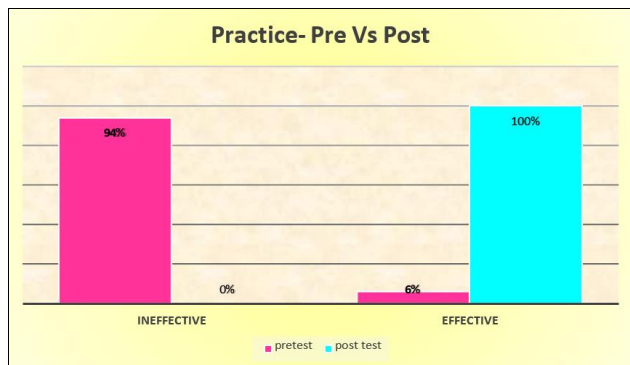


Fig 15: Percentage of the general assessments of pre and post-test practice scores of primigravida mothers regarding techniques of breastfeeding

Table 17 reveals that for the assessment purpose the total score of practice was divided into two group like Ineffective (less than 5 score), Effective(5-10score).

Pre-Test:

At the time of pretest, 94% of primigravida mothers in selected hospital had Ineffective practice regarding techniques of breastfeeding, 6% mothers had effective practice.

Average practice score at the time of pretest was 2.22 with standard deviation of 0.87. The minimum score of practice was 1 with maximum score of 6.

Post Test:

At the time of post-test, no one had Ineffective practice, and 100% of primigravida mothers in selected hospital had Effective practice. Average practice score at the time of post-test was 8.74 with standard deviation of 0.72. The minimum score of knowledge was 7 with maximum score of 10.

Section C:

Deals with analysis of data related to the effectiveness of structured teaching programme on knowledge and practice regarding techniques of breastfeeding among primigravida mothers in selected hospitals in term of average pre and post test

Table 18: Comparison of the pre and post-test Knowledge scores of primigravida mothers in selected hospital

Test	n	Mean	S.D.	Mean %	Paired 't' test
Pre-Test	50	2.22	0.87	36.96%	t=1.60
Post-Test	50	8.74	0.72	84.08%	p<0.0001 significant

Table 18 depicts the comparison of the pretest and post-test means of the knowledge were done by the paired t test. The pretest average score was 2.22 with standard deviation of

2.37. the post-test average score was 21.02 with standard deviation of 1.37. The test statistics value of the paired t test was 1.60 with p value 0.0001The p value less than 0.05, hence reject the null hypothesis and accept the alternative hypothesis. Shows that, structured teaching programme on knowledge regarding techniques of breastfeeding among primigravida mothers at selected hospital was effective.

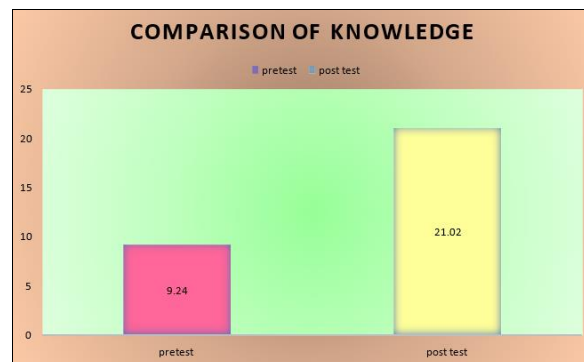


Fig 16: Percentage wise comparison of the mean pre and post test knowledge scores of primigravida mothers

Table 19: Comparison of the pre and post-test practice scores of primigravida mothers in selected hospital

Test	n	Mean	S.D.	Mean %	Paired 't' test
Pre-Test	50	2.22	0.87	8.88%	t=7.61
Post-Test	50	8.74	0.72	34.96%	p 0.0001 significant

Table 19 depicts the comparison of the pretest and post-test means of the practice were done by the paired t test. The pretest average score was 2.22 with standard deviation of 0.87. the post-test average score was 8.74 with standard deviation of 0.72. The test statistics value of the paired t test was 7.61 with p value 0.0001. The p value less than 0.05, hence reject the null hypothesis and accept the alternative hypothesis.

Shows that, structured teaching programme on practice regarding techniques of breastfeeding among primigravida mothers at selected hospital was effective.

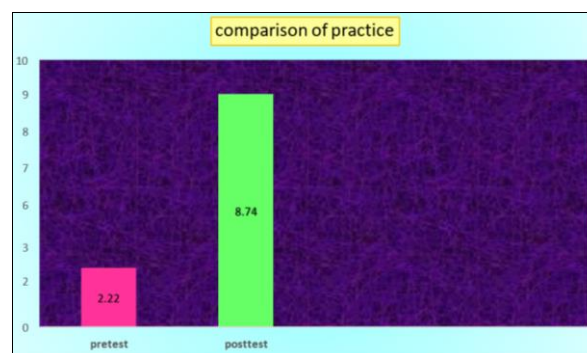


Fig 17: Percentage wise comparison of the mean pre and post-test practice scores of primigravida mothers

Table 20: Association of Knowledge Score in Relation to Demographic Variables

Variable	Groups	Pre-Test - Knowledge			Chi-Square	d.f.	p value	Significance
		Poor	Average	Good				
Age (in years)	18-30	0	29	18	4.40	1	0.035	Significant
	31-45	0	0	3				
Education	Primary	0	0	0	2.31	1	0.12	Not significant
	Secondary	0	7	6				
	Higher secondary	0	20	10				
	Illiterate	0	0	0				
	Degree	0	2	5				
Residence	Urban	0	2	4	1.70	1	0.19	Not significant
	Rural	0	27	17				
Type of family	Nuclear	0	18	13	0.0013	1	0.99	Not significant

Section D:

Deals with analysis of data related to association of knowledge and practice regarding techniques of breastfeeding with selected demographic characteristics of primigravida mothers in selected hospitals.

Chi square values were calculated to find out association between pre-test knowledge score with their selected demographic data. Finding revealed that there was no

significant association between pretest knowledge score and demographic variable like age, education, residence, type of family. However, the significant association was found between pretest level of knowledge score and variable like age. Hence, the stated null hypothesis (H₀) was rejected as there was significant association was found between the level of knowledge and their demographic variables

Table 21: Association of Practice Score In Relation To Demographic Variables

Variable	Groups	Pre-Test - Knowledge		Chi-Square	d.f.	p value	Significance
		Ineffective	Effective				
Age (in years)	18-30	33	14	1.24	1	0.26	Not significant
	31-45	3	0				
Education	Primary	0	0	0.06	1	0.79	Not significant
	Secondary	9	4				
	Higher Secondary	22	8				
	Illiterate	0	0				
	Degree	5	2				
Residence	Urban	4	2	0.96	1	0.75	Not significant
	Rural	32	12				
Type of family	Nuclear	24	7	2.13	1	0.14	Not significant
	Joint	11	8				

Table 21 reveals that there is no significant association between the pretest practice scores and demographic variables.

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