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Breastfeeding Practices among Mothers in Malaybalay City, Bukidnon

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Abstract - The study conducted at the Obstetrical (OB) Ward of Bukidnon Provincial Hospital in Malaybalay City, Bukidnon, aimed to determine the breastfeeding practices among select mothers. It also seeks to determine the profile of the select mothers on breastfeeding practices in terms of knowledge and attitudes; to describe their breastfeeding practices, and to relate knowledge and attitude and breastfeeding practices of select mothers. This descriptive research utilized the coefficient and correlation to test the significant relationship between the two variables. Results show that mothers mostly learn more of breastfeeding from the health workers, especially the nurses. Most mothers know more on the advantages than the disadvantages of breastfeeding. Most first

time mothers breastfeed their babies as scheduled. Regarding cleanliness attitude, most of the mothers usually clean their breast after breastfeeding. Most of the mothers also prefer cleaning alcohol than with water, soap and cotton balls. In terms on their positions while breastfeeding, most mothers prefer side lying. Mothers also let their babies burp after breastfeeding. Most of the select mothers make sure that the baby's chest is directly to theirs. Using the 2-tailed significance, correlation coefficient and probability level shows a moderate relationship between attitude and practice, but knowledge shows a highly significant relationship with the practices among select mothers.

Keywords - Breastfeeding practices, mothers, Malaybalay City, Bukidnon

INTRODUCTION

Breast milk is generally considered to be the ideal nutritional source for infants through their early stages of development. Nurses and other health care providers can take part in this major role by teaching the women about the benefits of breastfeeding to both mother and child. It is the role of the nurse to provide anticipatory guidance and interventions if problem occur before, during and after breastfeeding. World Health Organization (WHO), United Nations and Children's Fund (UNICEF) have launched a Baby-Friendly Hospital Initiative and have recognized breastfeeding is still best nutrition for human infants Pelliteri (1999).

Furthermore, Pilleteri (1999), mentioned and suggested ten steps that, if adapted by all hospitals, would create an atmosphere conducive to breastfeeding success as follows: Establish a written policy supporting breastfeeding that is routinely communicated to add health care personnel; educate all health care staff in skills necessary to implement this policy; inform all pregnant women about the benefits and management of breastfeeding; help women initiate breastfeeding

within half an hour at birth; show mothers how to breastfeed and how to maintain lactation even if they should be separated from their infants; give newborn infants no food or drink other than breast milk unless medically- indicated; practice rooming-in twenty four hours a day; encourage breastfeeding on demand; give no pacifier to breastfeeding infants; foster the establishment of breastfeeding support groups and refer mothers to them on discharge from birthing center or hospital.

In this regard, when the above steps being recommended once prevalently practiced either in public or in private hospitals, mothers will have the idea in strictly following what good breastfeeding would offer them and their babies, too.

The study is conceptualized with the assumption that proper positioning in breastfeeding affects the letdown reflex during breastfeeding. Breastfeeding practice is very effective, if mothers know and sincerely practice breastfeeding right after the birth of a child. Furthermore, breastfeeding as an art and a skill requires maternal confidence and consistent information which is considered as the most appropriate of all available milk for human infant, as it is uniquely adapted to baby's needs.

Abada et.al. (2001) quotes from Caldwell (1979) that, "level of education among women is a factor which plays a role in the adoption of modern ideas, and which usually leads to abandonment of tradition practices regarding child care thus, often results in breastfeeding of the shorter duration.

Statement from Huffman (1984) and Ho (1979) as quoted by Abada, et. al (2001) that, "the amount of time a mother has to breastfeed is determined by her occupation. Women involved in modern work, such as clerical, factory and professional jobs in the urban centers are often required to work away from home, thus reducing a mother's access to her child. On the other hand, women who are involved in traditional or informal work (agricultural activities, cottage industries and small scale marketing (especially in the rural areas), have more flexible schedules and this allows them to nurse their infants more often, thus maintaining longer periods of lactation."

According to Kent (1981) as cited by Abada et,al (2001) that the transition from traditional to modern societies has prompted a move away from breastfeeding of long duration, particularly among

younger generations of women. For older women, a strong attachment to traditional customs and the experience of raising many children usually means a more rigid view of infant feeding patterns. Such women are more likely to reject modern breast milk substitutes and to rely on traditional forms of infant feeding, including prolonged breastfeeding. On the other hand, increasing maternal age and high parity can also lead to breastfeeding of a shorter duration. Higher parity leads to shorter birth intervals and hence shorter times available for breastfeeding. It is also well established that parity is closely related to maternal age.

Lastly, Abada et,al.(2001) cited Smith and Ferry (1984) that increasing maternal age and high parity can also lead to breastfeeding of a shorter duration.

Higher parity leads to shorter birth intervals and hence shorter times available for breastfeeding. Thus, high parity also leads to breastfeeding of a shorter duration among rural women. Marital status influences the decision to breastfeed. The support of the infant's father is important in the breastfeeding decision, and married women are more likely to breastfeed than are single women. Besides partner's support, maternal attitudes are also influential. Women with a positive self-image and women who are health conscious are more likely to breastfeed than are their less positive and health conscious counterparts. Therefore, the mothers' demographic profiles such as knowledge and attitude have influenced the practices on breastfeeding.

FRAMEWORK

The study is anchored on the theory of Faye Abdellah on Patient-Centered Approaches to Nursing Model. She defined nursing as service to individuals and families; therefore to society. Furthermore, she conceptualized nursing as an art and a science that molds the attitudes, intellectual competencies and technical skills of the individual nurse into the desire and ability to help people, sick or well, and cope with their health needs Parker (2006).

It applies in the study that providing education regarding breastfeeding is a patient-centered approach. Nurses use their proper attitudes, intellectual competencies and technical skills in promoting

breastfeeding to all mothers. The nurse plays an important role to a mother in providing information that will help the mother give the best care to the child. Breastfeeding serves as an avenue for a mother to provide the most intimate care and to meet the optimal nutritional needs of the baby.

The nutritional, immunological, emotional and psychological benefits of breastfeeding should be enough to encourage mothers to want to breastfeed their newborns and for all health care providers to strongly encourage breastfeeding.

Another theory being used is the psychosocial theory of Erick Erickson, which states assuming early emotional, psychologic and social attachment of the mother to the infant may determine future aspects of the infant's personality. Feeding is the means by which the newborn establishes a human relationship with the mother. Wrigley (1987) states in her research, that a bond develops between mother and child through breastfeeding. The mother changes her relationship with the world to accommodate the relationship with the child.

Breastfeeding is one way to meet the nourishment needs of infants with out delay, can be done anytime and anywhere with out involving money. It is very affordable that is why mothers of all ages at different socio- economic level who have just given birth are encouraged to breast-feed their newborns to meet the nutritional need of the baby, because it is the only food needed for the first four to six months of life.

The concept formulated by Endres, Rockwell and Mense (2004) supports that, "human milk should no longer be considered merely a food with some antibodies, but rather a collection of biologically-active protective agents that also provides nutritional support."

According to Novak and Broom (2004), "A mother should carefully consider the advantages of breastfeeding when deciding how she will feed her infant. The father or other primary support persons will influence the mother's success."

OBJECTIVES OF THE STUDY

This study pursued the following objectives:

1. to determine the profile of the mothers on breastfeeding in terms of knowledge and attitudes

2. to describe the breastfeeding practices among the respondents
3. to relate the knowledge and attitude among select mothers and their breastfeeding practices

METHODOLOGY

This study used the descriptive method. According to Jacalan, et.al (2003), descriptive method describes the status of events, people, or subjects as they exist. It usually makes some types of comparison, contrast, and carefully planned descriptive researches, cause-effect relationship may be established to some extent. The researchers used coefficient and correlation to test the significant relationship of the two variables.

The study was conducted at Bukidnon Provincial Hospital, Malaybalay City. The hospital has 148 bed capacity and lies within the capitol site. The hospital is a tertiary and a government hospital which caters and offers its service to people throughout the province of Bukidnon and other areas located within Mindanao. The hospital is divided into different wards namely: Medical ward, surgical ward, obstetric ward, orthopedic ward, gynecologic ward, intensive care unit, intermediate care unit, private room and pedia ward.

The medical ward has sixteen (16) rooms with forty-eight (48) bed capacity, the surgical ward has two (2) rooms with sixteen (16) bed capacity, the obstetric ward has three (3) rooms with twenty-four (24) bed capacity, the orthopedic ward has two (2) rooms with sixteen (16) bed capacity, the obstetric gyne ward has one (1) room with eight (8) bed capacity, the intensive care unit has one (1) room with two (2) bed capacity, the intermediate care unit has one (1) room with three (3) bed capacity, the private room has eleven (11) rooms with eleven (11) bed capacity, and the pedia ward has ten (10) rooms with twenty (20) bed capacity. The hospital has an over-all total bed capacity of one hundred forty-eight (148).

There are only thirty five mothers included in this study. The mothers were admitted at Bukidnon Provincial Hospital OB Ward. Purposive sampling method was used considering that only select mothers were chosen. According to Jacalan, et.al (2003), purposive sampling is used when a criteria is set in selection of the respondents or

subject. A researcher-made questionnaire was used as the instrument in the data collection for the study. The questionnaire assessed breastfeeding knowledge and attitudes and also the practices on breastfeeding among select mothers.

Before conducting the study, the researchers made a pilot test among ten select mothers last December 15, 2006 at Obstetrical ward covering OB-SMH, OB-PAY and OB-Private rooms. After statistical analysis, the pilot test resulted with a reliability coefficient of 0.7324 and it was accepted.

The data gathering was conducted by first asking permission to conduct the study from the Dean of College of Nursing, upon approval of the request to conduct the study, permission was secured from Mr. Sulpicio Henry M. Legaspi Jr. MD, MPH, acting Provincial Health Officer, Chief of Hospitals through Mrs. Corazon Y. Jamero, RN, MAN, Chief nurse to conduct the study at the Bukidnon Provincial Hospital, Malaybalay City. The purpose of the study was to stress out the practices of breastfeeding and the questionnaire were thoroughly explained to the respondents to get the accurate and reliable responses. The answered questionnaire were immediately retrieved for data analysis.

The data were analyzed and interpreted through the use of mean among knowledge, attitude and practices of the select mothers. The researchers used the range number 4 (3.26-4.00) as always, 3 (2.51-3.25) as most of the time, 2 (1.76-2.50) as sometimes and 1(1.0-1.75) as never, to determine the mean of each question formulated in the questionnaire. The two-tail test with correlation coefficient and probability levels as the values was used to determine the relationship of the independent and dependent variables, whether to accept or reject the null hypothesis.

RESULTS AND DISCUSSION

The ranges for the four options are as always-4 (3.26-4.00), most of the time-3 (2.51-3.25), sometimes-2 (1.76-2.50) and Never-1 (1.0-1.75). With this ranges, the data reveal that out of the thirty five respondents considered in the study, the select mothers who have learned of the importance of breastfeeding has a mean of 2.6. Mothers,

from Table 1, mostly learned more of breastfeeding from the health workers especially the nurse, having the highest mean of 2.49. The over-all knowledge has a mean of 1.89. In terms of advantages and disadvantages, most mothers know more on the advantages as always breastfeeding is economical with a mean of 3.51, advantages having the overall total mean of 2.78 in contrast to the mean in knowledge on the disadvantages as only 1.69.

The result implies that most of the select mothers are aware of the importance of breastfeeding. They have acquired such information regarding the essential of breastfeeding from the health workers specifically the nurses, the doctors and then the midwives. Most of the select mothers have known the economical advantage of breastfeeding more than the protection of their health against breast cancer and the disadvantage is being uncomfortable doing breastfeeding in public or in the presence or other people.

Most select mothers breastfeed their babies as scheduled having the mean of 3.26 as always compared to those only breastfed per demand with a mean of 2.03. Regarding cleaning attitudes for their breasts, most of the mothers usually clean their breasts after breastfeeding with a mean of 2.03 than before with a mean of 1.77. Most of the mothers also prefer cleaning with alcohol (mean-2.11) followed by soap and water (mean-1.91), then water (mean-1.46) and cotton balls (mean-1.41). In terms of their positions while breastfeeding, most mothers prefer side-lying having the mean of 2.94, secondly, they prefer sitting with a mean of 2.14 and lastly, standing having the mean of 2.11. Mothers who let their babies burp after breastfeeding has an average score of 2.09. The over-all mean total of attitude is 2.02.

This implies that most of the mothers breastfeed their babies as scheduled rather than breastfeed per demand. Regarding cleaning of their nipples, the mothers mostly prefer to clean their nipples after breastfeeding and cleansing their nipples by the use of alcohol which is not advisable as it can basically cause dryness; thus, resulting irritation and damage to the Montgomery glands or the proliferating elastic tissues in the nipple (Uba, 1996). The mothers prefer to breastfeed their babies in side lying position which is more comfortable for them. Lastly, the mothers sometimes let their babies burp after breastfeeding. It implies that burping babies often can control the amount of air and

liquid that takes in in the baby's stomach (http://welcomeaddition.com/baby.aspx).

Furthermore, most of the mothers make sure that the baby's chest is also directly facing to their chest. This has an average score of 2.71. While breastfeeding, mothers who make sure that they tuck their baby's lower arm under their breast has an average score 2.4. Mothers who make sure that the babies grasp their nipples as well as the areola when their babies are breastfed with a mean score of 2.03. Mothers who make sure that they sit upright with good back support has a mean of only 1.91. Mothers who make sure that the baby's hip and shoulder are aligned has a mean of only 1.91. Over-all mean

The result entails that most of the mothers position their babies insuring the baby's chest directly faces the mother's chest rather than other various position. Proper positioning has far-reaching implications. First, it allows the baby to empty the mother's breast efficiently. In turn, efficient milking stimulates the breast to produce exactly the amount of milk the baby needs. Secondly, correct positioning can help prevent or greatly minimize sore nipples (http://www.nursing mothers.org/pamplets/propositioning.htm).

Using the two-tailed significance, correlation coefficient and probability level shows that knowledge has a correlation/coefficient of .7765 with a probability of .000 showed a high relationship with the practices among select mothers. While attitude has a correlation/coefficient of .5465 with a probability level of .001 showed only moderate relationship with the practices among select mothers. With the Table, the hypotheses are rejected.

Therefore the knowledge of the select mothers has greatly affected their breastfeeding practices rather than the attitude itself.

However, these findings should be interpreted with caution because of serious limitations, such as small samples, experimenter biases, analyses not based on intent to treat, high attrition rates and nonrandomized allocation to study groups. The purpose of the randomized-controlled trial was to evaluate the knowledge and attitudes on breastfeeding and practices among the select mothers.

CONCLUSIONS

Based on the findings, it is concluded that there is a significant relationship between the demographic profiles of the respondents and the practices on proper positioning in breastfeeding. Moreover, the practices on positioning of the mothers with their knowledge and attitudes are led to be corrected with equal confidence knowing the implication on the recommendations' outcome. Excellence in the delivery of health care services to new mothers and their infants is a realistic goal that can be achieved in nursing care today. Nurses who are concerned about achieving excellence in Maternal and Child Nursing (MCN) can examine their beliefs and attitudes and act not only as individuals but also as a group to take responsibility for ensuring quality care in Maternal and Child Nursing (MCN)

RECOMMENDATIONS

The researchers would like to strongly recommend the following:

1. That an extensive and profound research be done on what they have started by using more respondents.
2. Health workers, especially the nurses, should educate the mothers especially the first-time mothers on the importance of breastfeeding through seminars and workshops. They should be able to teach and encourage these mothers to practice proper positioning in breastfeeding to benefit both the mother and her baby.
3. With regard to the education of the mothers, information campaign and actual demonstration are strategies that may help the mothers observe proper positioning during breastfeeding. Assistance should be extended to the mothers if deemed necessary.
4. An evaluation tool should be developed for the accurate and objective assessment of practices. There should be more attitude questions to better evaluate mother's attitude on breastfeeding. A continuing health education on breastfeeding focusing more on attitudes and practices should be implemented.
5. Although attitude toward breastfeeding is generally positive

among health workers which include the physician, nurses, midwives and much with nursing students, there are many areas in which knowledge is insufficient resulting to varied advice given to nursing mothers. Thus, the need for training is needed. It is necessary, however, to learn more about what constitutes effective, high quality training, including content and methodology and necessary hours of teaching and of supervised clinical practice, instead of just the effect of "any" versus "no" training.

6. The practices observed in breastfeeding should be stressed out to all health-care providers or to other knowledgeable and experienced health care professionals. There is a need to evaluate a newborn-breastfed infant three to five days old and at two to three weeks old to ensure that the infant is fed and growing well and to find out whether such breastfeeding practices will work with cultural diversities.

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