

(RESEARCH ARTICLE)



Influence of demographic variables on attitude of nursing mothers towards exclusive breast feeding In Akoko South West Local Government Area of Ondo State, Nigeria

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Abstract

The research centered on the influence of demographic variables on attitude of nursing mothers towards exclusive breastfeeding in Akoko South West Local Government area of Ondo State Nigeria. The investigation embraced a cross sectional survey design, the instrument for data collection was a self-structured questionnaire, it was validated by three experts in Health Education and it has a reliability coefficient of 0.775 after test –retest method. A sample of 180 nursing mothers was selected from health institutions located in six communities in the local government area using convenient sampling techniques. Data collected were analyzed using Pearson Product Moment Correlation Coefficient (PPMCC). Findings revealed that the nursing mothers had positive attitude towards exclusive breastfeeding; level of education and religion had no significant relationships with attitude of nursing mothers towards exclusive breastfeeding, but age and family type had. With these findings, it was recommended that sound health education on exclusive breastfeeding should be given to the nursing mothers and it should be properly introduced to all levels of education.

Keywords: Breastfeeding; Attitude; Education; Religion; Nursing Mothers

1 Introduction

Infant and young children feeding are the cornerstones of care for childhood growth and cognitive development. The period of infancy is the most important stage in the developmental process of human life. During this period, growth is very rapid and demands of the body for nutrients are comparatively higher than any other period of life. The growing child therefore needs all the essential nutrients for growth and cognitive development. Nutrition encompasses processes leading to and involved with the utilization of nutrients for growth, development, maintenance and activity. Therefore, good nutrition is the cornerstone for survival, health and development of current and succeeding generations. Well-nourished women face fewer risks during pregnancy and childbirth, and their children set off on firmer developmental paths, both physically and mentally. Studies have shown that one of the means of making these essential nutrients available for the growing child during the first six months of life is through exclusive breastfeeding (EBF) practices [1]. Exclusive breast feeding is important for an infant's health. Breast milk is nutritious, provide the child vigor, protection from diseases, and promote steady growth and intellectual development [2][3].

In developing countries, several studies have reported that the real income of a household is indeed an important determinant of its access to food which, in turn, is a major determinant of child and maternal nutritional wellbeing [4]. Epidemiological studies have reported on the relationship between diet and poverty; and the report established that

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the purchasing power of a family dictates the level of household food security and types of diets that are ultimately consumed by household members [5].

Exclusive breastfeeding is when an infant receives no other food or drink, or even water, besides breast milk (whether expressed or through breastfeeding) for the first six months of life [6]. The quantity of nutrients present in the volume of milk produced by healthy lactating mothers has been found to be adequate in meeting the baby's nutrient and energy requirement up to the age of six months. Breastfeeding is an unequalled way of providing ideal food for the healthy growth and cognitive development of infants [7], and it offers many advantages for children that cannot be duplicated by any other form of feeding. The benefits of breastfeeding begin from the first moments after childbirth and last for many years after breastfeeding ends. Extensive researches, especially in few years back have reported on various advantages of breastfeeding practices to infants, mothers, families, and society [8]. These include health, nutritional, immunologic, developmental, psychological, social, economic, and environmental benefits. Studies have shown that breastfeeding provides ideal nutrition despite any social or economic disadvantages that may exist for the child; and that breastfed children are healthier, have fewer symptoms and shorter illnesses when they do get sick and well developed brain compared with formula-fed children [9]. For the mothers, it is evident that breastfeeding hasten recovery from pregnancy and childbirth episode; and it also provides lifelong health advantages, such as prevention of breast cancer, returning to pre-pregnancy weight [10].

Human milk is the ideal nourishment for infants' survival, growth, and development particularly in unhygienic conditions; however, breast milk substitutes carry a high risk of infection and can be fatal in infants [11]. Breast milk contains all the nutrients an infant needs in the first six months of life. Exclusive breast feeding (EBF) means that the infant receives only breast milk [12].

Despite strong evidences in support of EBF for the first six months of life, its prevalence has remained low worldwide [13] [14]. [15] Reported that 31% of their respondents were on EBF. Lower rates were discovered by other researchers [16] [17] [18] [19].

Exclusive breast feeding in the first six months of life stimulates babies' immune system and protects them from diarrhea and acute respiratory infections [11]. In Africa, more than 95% of infants are currently breastfed, but feeding practices are often inadequate, feeding water and other liquids to breastfed infants is a widespread practice [20].

Many stories and myths are passed around regarding EBF. Most of these information are passed by family and friends. Most of them are out of date or inaccurate. The perceived inconvenience of EBF was also an issue as 45% of the respondents indicated that they have to give up habits and change their lifestyle. [21] Discovered that 24% of their study participants had negative attitude towards exclusive breastfeeding while 76% had positive attitude. Many women perceived that the quality of mothers' breast milk is low for a child's growth. They perceived that the child is thirsty and the need to introduce herbal medicine for cultural purposes was among the important factors for early mixed feeding [22][23][24].

A study conducted by [25] on perception about EBF practices in Bangalore province in India, revealed that more than half of mothers (57%) started breastfeeding within an hour of birth. 55.9% gave EBF for six months, 18.2% of the mothers' bottle fed their babies and 15.6% had problems during breast feeding in first six months. Early initiation of breastfeeding within one hour of birth promoted EBF. The study found out that they have a positive perception about EBF as more than half of the respondents practiced EBF. The issue of lack of time, finance and environmental conditions also contributed to the situation [26].

On the role of demographic variables, [27] reported that frequent service attendance is associated with increased odds of breastfeeding initiation. The study revealed a weaker association between attendance and breastfeeding duration. [15] Opined that maternal education is related to knowledge of good child care practice and to household wealth. Female education has severally been described as one of the strongest determinants of the practice of EBF. In the study however, education of the respondents had no influence on the practice of EBF as there was no statistically significant difference between those with formal education and informal education with regards to the practice of EBF ($p=0.986$).

Variations in the level of practice of EBF have been related to prominent socio-economic and cultural factors which influence breastfeeding practices. Social factors like maternal education, occupation, family background and utilization of basic health services may affect breast feeding practices. Educational attainment had been adjusted to be a factor enhancing the practice of EBF, this is attributed to access to information about EBF while breastfeeding practices did not differ significantly with respect to maternal age and occupation [26].

Malnutrition in children resulting from inadequate feeding and child care and disease is a major public health problem throughout the developing world including Nigeria [27]. Malnutrition is one of the principal underlying causes of death for many of the world's children contributing to more than a third of under-five deaths globally. About 178 million children globally are stunted and Africa has the highest rates [28]. Generally, the risk of malnutrition in the first 2 years of life has been directly linked with poor breastfeeding and complementary feeding practices of mothers together with high rate of infectious diseases [29]. The world Health Assembly has set a global target in order to increase the rate of EBF for infants aged 0-6months up to at least 50% in 2012-2025 [28]. In other to be able to achieve this global target in Nigeria, there is a need to find out the attitude of nursing mother towards EBF and the influence of demographic variables on the attitude of nursing mothers. The need for this vital information is the problem of this study.

2 Research Questions

The following question was raised to guide this study

- What is the attitude of nursing mother towards exclusive breastfeeding?

2.1 Research Hypotheses

- There is no significant relationship between age and attitude of nursing mother towards exclusive breastfeeding in Akoko South Local Government Area of Ondo State.
- There is no significant relationship between level of education and attitude of nursing mother towards exclusive breastfeeding in Akoko South Local Government Area of Ondo State.
- There is no significant relationship between religion and attitude of nursing mothers towards EBF in Akoko south local government area of Ondo State.
- There is no significant relationship between family type and attitude of nursing mothers towards EBF in Akoko south local government area of Ondo State.

3 Method

Cross sectional descriptive survey design was adopted for this study. The population of the study comprises of all Nursing mothers in Akoko South Local Government Area of Ondo State. A sample of 180 nursing mothers was selected from health institutions located in six communities in the local government area using convenient sampling techniques. The instrument used for this study is a self-designed questionnaire. The instrument has two sections. Section A sought information about the demographic characteristics of the respondent while section B sought information about the attitude of nursing mother towards exclusive breastfeeding in Akoko South Local Government Area. The instrument was validated by three experts in health education. The test-re-test method of reliability was used and a reliability of 0.77 was obtained using Pearson Product Moment Correlation Coefficient. The instrument was administered to the respondents by the researcher in the various health institutions during their regular meetings and was retrieved immediately.

Data was analyzed using the statistical package for social science (SPSS) version 20. The data was presented in tables using mean of scores and correlation analysis at 0.05 level of significance.

4 Results

4.1 Research Question 1

What is the attitude of nursing mothers towards exclusive breastfeeding?

Table 1 Mean score of nursing mothers on attitude towards exclusive breast feeding

Table 1	N	Minimum	Maximum	Mean	Std. Deviation
Attitude	180	19.00	46.00	36.1833	6.52892

Table 1 revealed the result of the attitude of nursing mothers towards exclusive breastfeeding in Akoko South Local Government, Ondo State. 19.00 was the minimum score, while 46.00 was maximum score, the mean of the instrument is 30 and the mean score of the respondents is 36.1833 which is above the normal mean [30] and it showed that the nursing mothers in Akoko South Local Government, Ondo State have positive attitude towards exclusive breastfeeding.

4.2 Hypothesis one

Age will not have any significant relationship with attitude of nursing mothers towards exclusive breast feeding.

Table 2 Correlation table showing the relationship between age and attitude of nursing mothers toward exclusive breast feeding

Correlations			
		AGE	Pre-test Attitude
Age	Pearson Correlation	1	-0.282*
	Sig. (2-tailed)	-	0.029
	N	180	180
Attitude	Pearson Correlation	-0.282*	1
	Sig. (2-tailed)	0.029	-
	N	180	180

The correlation of age with the attitude of nursing mothers towards exclusive breast feeding in Akoko South Local Government, Ondo State showed 0.029 which is significant at (0.05) level of significance. Therefore the null hypothesis which states that age will not have any significant relationship with attitude of nursing mothers towards exclusive breast feeding in Akoko South Local Government, Ondo State was rejected.

4.3 Hypothesis 2

Level of education will not have any significant relationship with attitude of nursing mothers towards exclusive breast feeding.

Table 3 Correlation table showing the relationship between level of education and attitude of nursing mothers toward exclusive breast feeding

Correlations		Level of Education	Pre-test Attitude
Level of education	Pearson Correlation	1	0.130
	Sig. (2-tailed)	-	0.323
	N	180	180
Pre-test attitude	Pearson Correlation	0.130	1
	Sig. (2-tailed)	0.323	-
	N	180	180

The correlation of level of education with the attitude of nursing mothers towards exclusive breast feeding in Akoko south local government area of Ondo State showed 0.323 which is not significant at (0.05) level of significance. Therefore the hypothesis which states that level of education will not have any significant relationship with attitude of nursing mothers towards exclusive breast feeding in Akoko South Local Government, Ondo State was accepted.

4.4 Hypothesis three

Religion will not have any significant relationship with attitude of nursing mothers towards exclusive breast feeding.

Table 4 Correlation table showing the relationship between religion and attitude of nursing mothers toward exclusive breast feeding

Correlations		RELIGION	Pre-test attitude
Religion	Pearson Correlation	1	-0.164
	Sig. (2-tailed)	-	0.210
	N	180	180
Pre-test attitude	Pearson Correlation	-0.164	1
	Sig. (2-tailed)	0.210	
	N	180	180

The correlation of religion with the attitude of nursing mothers towards exclusive breast feeding in Akoko South Local Government, Ondo State showed 0.210 which is not significant at (0.05) level of significance. Therefore the null hypothesis which states that religion will not have any significant relationship with attitude of nursing mothers towards exclusive breast feeding in Akoko South Local Government, Ondo State was accepted.

4.5 Hypothesis four

Family type will not have any significant relationship with attitude of nursing mothers towards exclusive breast feeding.

Table 5 Correlation table showing the relationship between family type and attitude of nursing mothers toward exclusive breast feeding

Correlations		Family Type	Pre-test Attitude
Family type	Pearson Correlation	1	0.264*
	Sig. (2-tailed)		0.041
	N	180	180
Pre-test attitude	Pearson Correlation	0.264*	1
	Sig. (2-tailed)	0.041	
	N	180	180

*. Correlation is significant at the 0.05 level (2-tailed)

The correlation of family type with the attitude of nursing mothers towards exclusive breast feeding in Akure South Local Government, Ondo State showed 0.041 which is significant at (0.05) level of significance. Therefore the null hypothesis which states that family type will not have any significant relationship with attitude of nursing mothers towards exclusive breast feeding in Akure South Local Government, Ondo State was rejected.

5 Discussion

Table one revealed that nursing mothers have positive attitude towards EBF. This agrees with the findings of [21] who reported that 24% of the study participants had negative attitude towards EBF while 76% had positive attitude. However in some other studies, it was reported that many women perceived that the child is thirsty and the need to introduce herbal medicine for cultural purposes was among the important factors for early mixed feeding [22][23][24]. The variations in the different findings can be explained by cross cultural differences and demographic variations of the study populations.

Age and family type were found to have significant influence on attitude of nursing mothers towards EBF. This disagrees with [26] that educational attainment had been adjusted to be a factor enhancing the practice of EBF, this is attributed to access to information about EBF while breastfeeding practices did not differ significantly with respect to maternal age and occupation.

Levels of Education and religion have no significant relationship with the attitude of nursing mothers towards EBF. This agrees with the findings of [15] who reported that education of the respondents had no influence on the practice of EBF as there was no statistically significant difference between those with formal education and informal education with regards to the practice of EBF ($p=0.986$). However, it was reported that Educational attainment had been adjusted to be a factor enhancing the practice of EBF, this is attributed to access to information about EBF while breastfeeding practices did not differ significantly with respect to maternal age and occupation [26].

6 Conclusion

Based on the findings of this study, it was concluded that:

- Nursing mothers in the study population have positive attitude towards Exclusive breast feeding.
- Age and family type had significant influence on attitude of nursing mothers towards EBF.
- Levels of Education and religion have no significant influence on the attitude of nursing mothers towards EBF.

Recommendations

Based on the findings of this study, the following recommendations were made:

- Further investigation into the mechanism linking religious involvement and breastfeeding behaviours would be valuable to public health researchers and practitioners.
- Health education and other health agencies should organize seminars on exclusive breastfeeding and practices for nursing mothers.
- Provision of community based health education program to support exclusive breast feeding, including the implementation of health communication campaigns tailored to the local context.
- Visitation to the nearby hospitals and maternity centers during ante natal care to disseminate fact on exclusive breastfeeding to the pregnant women attending ante natal care service should be done by Health educators.
- Pregnant women should be encouraged to make sure they feed their children for first 6 month of their age, because it is essential.

Compliance with ethical standards

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Disclosure of conflict of interest

The author hereby declares that there is no conflict of interest

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