



Factors affecting awareness of breast milk and breastfeeding among women living in İnegöl

İnegöl'de yaşayan kadınların anne sütü farkındalığını ve emzirmeyi etkileyen faktörler

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Özet

Amaç: Çalışmamızda, İnegöl'de yaşayan kadınların anne sütü ve emzirme ile ilgili düşüncelerinin öğrenilmesi, bu konudaki tutum ve davranışlarını etkileyen faktörlerin belirlenmesi amaçlanmıştır.

Yöntem: 10 Nisan-10 Haziran 2023 tarihleri arasında İnegöl'de yaşayan 18-60 yaş arası 1624 kadınla yapılmış kesitsel tipte bir çalışmadır. Veriler; tanıtıcı bilgi formu, emzirme/anne sütü tutum formu ile Google anket kullanılarak toplanmıştır. Veriler, sayı ve yüzde olarak sunulmuştur. Kategorik değişkenleri karşılaştırmak için ki-kare testi kullanılmış ve $p<0,05$ düzeyi istatistiksel olarak anlamlı kabul edilmiştir.

Bulgular: 1624 kadından 1153'ünün (%71) çocuk sahibi olduğu ve %92,9'unun anne sütü verdiği belirlenmiştir. Emzirme durumunu etkileyen faktörlere bakıldığında; yaş arttıkça emzirmenin arttığı, eğitim düzeyi arttıkça emzirme oranının düştüğü, çalışmanın emzirme oranını azalttığı, vajinal doğumun emzirme oranını arttırdığı ve eş desteğinin emzirme oranını arttırdığı belirlenmiştir ($p<0,001$). Emzirme ile ilgili gebe okulundan veya emzirme danışmanından eğitim alan kadınların emzirme düzeyleri anlamlı düzeyde yüksek bulunmuştur ($p<0,001$).

Sonuç: Bu çalışma ile İnegöl ilçesinde yaşayan 18-60 yaş arası kadınların demografik verilerinin emzirme-anne sütü tutumlarını etkilediği görülmüştür. Gebe okulu-sağlık personelinin emzirme konusunda eğitim almış olanlarda emzirme oranının yüksek olması nedeniyle ilçedeki gebe okulları ve emzirme danışmanlığı personeline daha fazla önem verilmesi önerilebilir.

Anahtar kelimeler: Emzirme tutumu, anne sütü, demografik veriler

Summary

Objective: In our study, it was aimed to learn the thoughts of women living in İnegöl about breast milk and breastfeeding, and to determine the factors affecting their attitudes and behaviors on this subject.

Methods: A cross-sectional study included 1624 women between the ages of 18-60 and living in İnegöl between April 10 and June 10, 2023. While the data were collected by using the introductory information form, breastfeeding/breastmilk attitude form and the Google survey method, they were presented as numbers and percentages. The chi-square test was used to compare categorical variables and the $p<0.05$ level was accepted as statistically significant.

Results: It was determined that 1153 (71%) of 1624 women also had children and 92.9% of them gave breast milk. Considering the factors affecting breastfeeding status; It was determined that as age increases, breastfeeding increases, as education level increases, breastfeeding rate decreases, working decreases the breastfeeding rate, vaginal birth increases the breastfeeding rate and the support of the spouse increases the breastfeeding rate ($p<0.001$). Breastfeeding levels of women who received training on breastfeeding from a pregnancy school or a breastfeeding consultant were found to be significantly higher ($p<0.001$).

Conclusion: With this study, it was seen that the demographic data of women between the ages of 18-60 living in İnegöl district affected their attitudes towards breastfeeding-breastmilk. It can be suggested that more importance should be given to pregnant schools or a breastfeeding consultant staff in the district due to the high rate of breastfeeding in those who received training from pregnant school-health personnel about breastfeeding.

Keywords: Breastfeeding attitude, breast milk, demographic data

Introduction

Breast milk is the most important food that contains all the necessary nutrients for the physical and mental development of a baby. Additionally, breastfeeding is an economical source of nutrition that promotes emotional bonding between the mother and the baby.^(1,2) Breast milk acts as the baby's first vaccine and aids in easy digestion, making it an irreplaceable source of nutrition.⁽³⁾ In order to raise awareness on breastfeeding and breast milk in all segments of society, educational programs should be organized.⁽⁴⁾

The World Health Organization and UNICEF initiated the "Baby-Friendly Hospital" program in 1992, which aimed to promote the use of breast milk, especially in developing countries. This program has been supported by UNICEF in Turkey since 1991. The implementation of this program has been effective in increasing the rate of breastfeeding in hospitals, as it has been in many other countries.^(5,6) The World Health Organization (WHO) recommends exclusive breastfeeding, including water, for all infants from birth until 6 months of age, followed by complementary feeding along with continued breastfeeding until the age of 2 and beyond.^(7,8)

Our hospital, which was awarded the "Baby-Friendly" title in 2005, has undertaken various initiatives to promote and support breastfeeding. The aim of this study is to assess the knowledge, attitudes, and behaviors of all women living in our district regarding breastfeeding and breast milk, to identify their knowledge deficiencies and to create a new education plan to address these deficiencies.

Materials and Methods

The research was conducted with women living in İnegöl between April 10 and June 10, 2023. The population of the study consisted of 82 women, 113 women aged between 18 and 60 who lived in İnegöl during the specified dates and the sample consisted of 1,624 women who agreed to participate in the study. The sample size was found to be 383 with a 95% confidence interval using the Raosoft program. Data was collected using the Google survey method and a Descriptive Information Form consisting of 14 questions. In addition, a breastfeeding/breast milk attitude form consisting of 8 questions, created by scanning the literature on breastfeeding and breast milk, was used to collect data.⁽⁹⁻¹³⁾

Statistical Package for the Social Sciences (SPSS) 21.0 software was used for data analysis. The normal distribution of the data was evaluated using the Kolmogorov-Smirnov test, and the data for each variable was presented as frequency and percentage. The chi-square test was used to evaluate the relationship between breastfeeding knowledge, attitude questions, and breastfeeding status. A p-value of < 0.05 was considered statistically significant.

The study was conducted in accordance with the principles of the 2008 Helsinki Declaration, and informed consent was obtained from the participants who agreed to participate in the research. The approval for this study was obtained from the Bursa Yüksek İhtisas Education and Research Hospital Ethics Committee with the protocol number (2011-KAEK-25 2023/04-10) (Date: 05.04.2023).

Results

A total of 1624 women between the ages of 18 and 60 participated in the study, of which 1153 had given birth. The demographic characteristics of the women participating in the study are given in **Table 1**. It was found that out of 1624 women, 49.9% were in the age range of 18-29, 89.7% were married, and 71.0% had children.

It was also determined that 54.6% of the women were university graduates, 67.1% were homemakers, and 67.4% had a moderate-income level.

As seen in **Table 2**, 718 (61.5%) women had a vaginal birth. Out of the 1153 women who had children, it was found that 92.9% breastfed their babies. When asked about the duration of breastfeeding, based on the responses of women with multiple children, it

Table 1: Distribution of socio-demographic characteristics of women participating in the study

Demographic Variables		n 1624	% 100
Age	18-29	811	49.9
	30-39	506	31.2
	40 and above	307	18.9
Marital Status	Married	1456	89.7
	Single	168	10.3
Education Level	Primary School	44	15.6
	High School	64	22.7
	University	154	54.6
	Master	20	7.1
Income Level	Low	44	4.7
	Moderate	64	67.4
	High	154	27.9
Employment Status	Employed	535	32.9
	House Wife	1089	67.1
Child Status	Having child	1153	71.0
	No child	355	21.9
	Pregnant	116	7.1

was observed that out of 1608 women, 683 (42.5%) breastfed for 0-6 months. When women who were unable to breastfeed were asked about the reason for not breastfeeding, 53.1% of them mentioned insufficient milk supply.

According to the findings, out of the 1153 women who gave birth, 38% breastfed their babies in the age group of 30-39, while 50% of them in the age group of 18-29 did not breastfeed. When age and breastfeeding status were compared, it was determined that the breastfeeding rate increased as age increased

and there was a significant difference between them ($p < 0.005$). At the time of the research, 96.7% of 1095 married women were breastfeeding their babies. It was determined that being married significantly increased the breastfeeding rate ($p < 0.005$).

When looking at the education level, it was found that the breastfeeding rate was higher in the primary school group with 35.9%, and as the education level increased, the breastfeeding rate decreased. There was a significant difference between education level and breastfeeding ($p < 0.001$). Out of the 1071 women

Table 2: Data of women who have given birth

		n 1153	% 100
Delivery method	Vajinal delivery	718	61.5
	Cesarean	435	38.5
Breastfeeding status	Yes	1071	92.9
	No	82	7.1
*Duration of breastfeeding your baby	0-6 months	683	42.5
	12 months	317	19.7
	24 months	491	30.5
	More than 24 months	117	7.3
*Reasons for stopping breastfeeding (0-6 months)	Insufficient milk supply	153	53.1
	Formula milk is better	59	20.5
	Recommended by doctor	40	13.9
	Physical deformity	7	2.4
	Pregnancy status	29	10.1

*Those with multiple children have provided multiple answers

Table 3: Breastfeeding status of women in the who gave birth based on various characteristics

	Breastfeeding status		p
	Yes / n:1071	No / n:82	
Age			
18-29	n:82	p	
30-39	407 (38%)	26 (31.7%)	<0.001
40 and above	280 (26.1%)	15 (18.3%)	
Marital Status			
Married	1036 (96.7%)	59 (72.0%)	<0.001
Single	35 (33.3%)	23 (28%)	
Education Level			
Primary School	384 (35.9%)	28 (34.2%)	<0.001
High School	357 (33.3%)	28 (34.2%)	
University	203 (19%)	16 (19.4%)	
Master	127 (11.8%)	10 (12.2%)	
Income Status			
Low	48 (4.5%)	14 (17.1%)	0.275
Moderate	723 (67.5%)	42 (51.2%)	
High	300 (28%)	26 (31.7%)	
Employment Status			
Employed	323 (30.2%)	29 (35.4%)	0.001
House Wife	748 (69.8%)	53 (64.6%)	
Education on Breastfeeding			
Yes	482 (45%45)	42 (51.2%)	0.317
No	589 (55%55)	40 (48.8%)	
Source of Education			
Maternity hospital/ Healthcare professionals	417 (73.7%)	22 (52.4%)	0.006
Spouse/friends/relatives/Social media	65 (26.3%)	20 (47.6%)	
Delivery Method			
Natural	672 (62.7%)	46 (56.1%)	<0.001
Cesarean	399 (37.3%)	36 (43.9%)	
Spouse Support			
Yes	954 (89.1%)	43 (52.4%)	<0.001
No	117 (10.9%)	39 (47.6%)	

Table 4: Comparison of the knowledge levels on Breastfeeding/Mother's milk and the breastfeeding status of women who gave birth

Breast Milk/Breastfeeding knowledge level	Breastfeeding status			p	
	Yes / n:1071	No / n:82	Total / n:1153		
How long should breast milk be given?	0-6 months	261 (24.3%)	21 (25.6%)	282 (24.5%)	<0.001
	6-12 months	98 (9.2%)	20 (24.4%)	118 (10.2%)	
	12-24 months	499 (46.6%)	32 (39.0%)	531 (46.1%)	
	Over 24 months	213 (19.9%)	9 (11.0%)	222 (19.2%)	
When should complementary foods be introduced?	Immediately	17 (1.6%)	4 (4.9%)	21 (1.8%)	0.004
	Until 6 months	155 (14.5%)	20 (24.4%)	175 (15.2%)	
	Over 6 months	849 (79.2%)	56 (68.3%)	905 (78.5%)	
	Over 1 year	50 (4.7%)	2 (2.4%)	52 (4.5%)	
Do you know the methods of expressing breast milk?	Yes	804 (75.1%)	59 (72.0%)	863 (74.8%)	<0.001
	No	267 (24.9%)	23 (28.0%)	290 (25.2%)	
A How long can breast milk be stored?	3 hours	223 (20.8%)	20 (24.4%)	243 (21.1%)	0.054
	3 months	199 (18.6%)	12 (14.6%)	211 (18.3%)	
	3 day	133 (12.4%)	3 (3.7%)	136 (11.8%)	
	All	516 (48.2%)	47 (58.8%)	563 (48.8%)	
Can a breastfeeding woman become pregnant?	Yes	1001 (93.5%)	72 (87.8%)	1073 (93.1%)	0.007
	No	70 (6.5%)	10 (12.2%)	80 (6.9%)	
What is the first thing given to the baby after birth?	Breast milk	1005 (93.9%)	72 (87.8%)	1077 (93.4%)	0.021
	Sugar water	66 (6.2%)	10 (12.2%)	76 (6.6%)	
What is the breastfeeding position?	Scissor hold	340 (31.7%)	29 (35.4%)	369 (32.0%)	0.261
	C hold	731 (68.3%)	53 (64.6%)	784 (68.0%)	
Why do you think the baby is not satisfied while breastfeeding?	Crying	267 (24.9%)	18 (22.0%)	285 (24.7%)	0.266
	Constantly wanting to suckle	133 (12.4%)	8 (9.8%)	141 (12.2%)	
	No weight gain	208 (19.4%)	14 (17.0%)	222 (19.3%)	
	All	463 (43.2%)	42 (51.2%)	505 (43.8%)	
What is an effective breastfeeding indicator?	Baby's weight gain	167 (15.6%)	20 (24.4%)	187 (16.2%)	0.399
	Baby's urination 6-8 times a day	64 (6.0%)	15 (18.3%)	79 (6.9%)	
	Mother seeing her milk coming in	203 (19.0%)	16 (19.5%)	219 (19.0%)	
	Baby vomiting after breastfeeding	83 (7.7%)	7 (8.5%)	90 (7.8%)	
	All	554 (51.7%)	24 (29.3%)	578 (50.1%)	

who breastfed, 69.8% were housewives and 30.2% has a job. It was observed that housewives breastfed more compared to employed women, indicating a significant relationship between employment status and breastfeeding ($p<0.001$). Out of the 1071 women who had breastfeeding education, 45% breastfed their babies, while 51.2% did not.

There was no significant difference between receiving breastfeeding education and breastfeeding ($p=0.317$). Among the 482 women who received breastfeeding education, 73.7% received education from maternity hospitals/healthcare professionals, and there was a significant difference between the place of education and breastfeeding ($p<0.001$). Among women who had a vaginal birth, 62.7% breastfed their babies, while 37.3% of those who had a cesarean section were able to breastfeed. It was found that having a vaginal birth had a significant impact on breastfeeding ($p<0.001$). 89.1% of women stated that they received spousal support while breastfeeding, while 10.9% did not. There was a significant difference in breastfeeding between women who had spousal support and those who did not ($p<0.001$) (Table 3).

A study was conducted to examine the relationship between the level of knowledge about breastfeeding and breastfeeding practices among women who have given birth and are breastfeeding. The results showed that 46.1% of women knew that breast milk should be given for 12-24 months, 74.8% knew that complementary feeding should start between over 6 months, 74.8% knew how to express

breast milk, 93.1% knew that breastfeeding can breastfeeding women can get pregnant, 93.4% knew that the first thing given breast milk should be given to the baby after birth, 68% knew that the correct breast latch position is the C-hold, 43.8% knew the reasons indicating that the baby is not satisfied, and 50.1% knew the signs of effective breastfeeding.

Significant differences were found between the timing of breastfeeding for 12-24 months, the timing of starting complementary feeding between 6 months and 1 year, knowledge about expressing breast milk, and knowing that breastfeeding can lead to pregnancy, and the practice of giving the first breast milk to the baby after birth ($p<0.001$).

Discussion

Although breastfeeding is both economical and the most effective form of nutrition, it is observed that breastfeeding rates are low in Turkey. When looking at the reasons, it is observed that socio-demographic characteristics of individuals play a role. This study aimed to determine the socio-demographic characteristics and thoughts about breastfeeding/breast milk among women living in İnegöl to plan an awareness education about breastfeeding according to these factors.

When comparing the demographic data and breastfeeding status of women living in İnegöl who participated in our study, it was found that breastfeeding rates increase with age and there was a significant difference between age groups. The breastfeeding rate was higher in the primary education group with

35.9%. As education level increases, breastfeeding rates decrease. There was a significant relationship between working status and breastfeeding, with more homemakers breastfeeding compared to working women ($p < 0.005$) (**Table 3**).

Income level did not affect breastfeeding attitude. In a study conducted by Yigitbaş et al., it was found that age did not affect breastfeeding attitude, but women's education level and employment status increased breastfeeding attitudes.⁽¹⁴⁾ In a study by Kurnaz and Hazar, it was found that age did not affect breastfeeding attitude, but education level and income level were positively correlated with breastfeeding attitude.⁽¹⁵⁾ Overall, the literature suggests that education level and income level generally affect breastfeeding attitude.⁽¹⁶⁻¹⁹⁾

In our study, the decrease in breastfeeding attitude with increasing education level may be due to the lower breastfeeding rates among working women. Additionally, our study found that women who received education about breastfeeding and breast milk breastfed less, but this difference was not significant. However, the source of education being prenatal classes/healthcare professionals was significant (**Table 3**). Our study is consistent with the literature in terms of the source of education.⁽²⁰⁻²²⁾ The lower breastfeeding rates among those who received education suggest that the content of the education should be examined.

Our study found that women with spousal support breastfed more (**Table 4**). Previous studies have also

found that women with positive relationships with their partners have higher breastfeeding attitudes and success scores.^(15,21,23) The identification of the mother's relationship with her spouse can be guiding in breastfeeding.

In our study, it was found that breastfeeding women had a higher level of knowledge about breastfeeding and breast milk (**Table 5**). It was determined that breastfeeding is given between 12-24 months, complementary feeding should be started between 6 months and 1 year, knowing the methods of expressing breast milk and that breastfeeding can lead to pregnancy, and knowing how to give the baby the first breast milk after birth significantly increases the breastfeeding rate ($p < 0.005$).

Our study is consistent with the literature, as previous studies have reported positive breastfeeding experiences among mothers who have prior knowledge and information about breastfeeding.^(16,18,24) These results suggest that providing mothers with information and encouragement about breastfeeding and breast milk, especially during their first pregnancy, can increase breastfeeding rates.

Conclusion

This study found that the demographic characteristics of women aged 18-60 living in İnegöl district affect their attitudes towards breastfeeding and breast milk, and that spousal support significantly contributes to breastfeeding. Additionally, it is noteworthy that the breastfeeding rate is low among working mothers. Particularly, it is remarkable that

women who receive education on breastfeeding from healthcare professionals through prenatal classes and lactation clinics have higher rates of breastfeeding.

As recommendations:

Based on this article,

-The content of education on breast milk and breastfeeding should be reviewed, and the timing of education should be considered to provide personalized education. Women should be encouraged to seek support from the lactation counseling services at the state hospital for their breastfeeding education.

-Data on the relationship between expectant mothers and fathers should be collected to plan family counseling, and education should be provided to both parents together.

-Working women should be supported in terms of adjusting working hours or schedules to increase the duration of time they can stay at home with their child until at least one year of age.

-Gebe okulları (prenatal classes) and lactation clinics (lactation counseling) should be expanded to increase accessibility in İnegöl district.

Ethics committee: The approval for this study was obtained from the Bursa Yüksek İhtisas Education and Research Hospital Ethics Committee with the protocol number (2011-KAEK-25 2023/04-10) (Date: 05.04.2023).

Conflict of interest

The authors declared no conflict of interest. The authors declared that they received no financial support for this study.

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