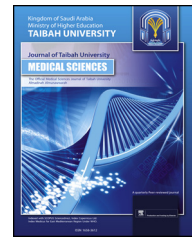




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Original Article

## The decision of breastfeeding practices among parents attending primary health care facilities in suburban Malaysia

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### المخلص

**أهداف البحث:** تهدف هذه الدراسة لتحديد العلاقة بين إتخاذ القرار لممارسات الرضاعة الطبيعية والعوامل المرتبطة لممارسة الرضاعة الطبيعية الحصرية بين الأمهات اللاتي يراجعن مرافق الرعاية الصحية الأولية.

**طرق البحث:** تضمنت هذه الدراسة المستعرضة 196 من الأمهات اللاتي يراجعن مرافق الرعاية الصحية الأولية في ضواحي ماليزيا. وزعت استبانة-تعبأ ذاتيا لتقييم أسلوب صنع القرار، والعوامل المرتبطة بممارسة الرضاعة الطبيعية الحصرية. واستخدمت عينة عشوائية منهجية لمجموعة الرضاعة الطبيعية غير الحصرية كما استخدمت عينة مناسبة لمجموعة الرضاعة الطبيعية الحصرية. وأجري تحليل متعدد الانحدار اللوجستي لتحديد العوامل المرتبطة لممارسة الرضاعة الطبيعية الحصرية.

**النتائج:** وجدنا علاقة بين القرار المتبادل من الآباء والأمهات للرضاعة الطبيعية الحصرية، وممارسة الرضاعة الطبيعية الحصرية. الخبرة السابقة للرضاعة الطبيعية الحصرية، وعمر الأب، ومهنة الأم، والقرار المتبادل لهم تأثير كبير على ممارسات الرضاعة الطبيعية الحصرية.

**الاستنتاجات:** أهم عامل لممارسة الرضاعة الطبيعية الحصرية هو القرار المتبادل بين الوالدين. لذلك يجب على الممارسين التثقيف المستمر والتأكيد على دور الأب في عملية الرضاعة الطبيعية.

**الكلمات المفتاحية:** الرضاعة الطبيعية الحصرية؛ القرار المتبادل؛ مساندة الأب؛ مهنة الأم؛ ممارسة الرضاعة الطبيعية

### Abstract

**Objectives:** This study aimed to determine the association between decision making for breastfeeding practices and associated factors for exclusive breastfeeding practices among parents attending primary health care facilities.

**Methods:** This cross-sectional study involved 196 parents who attended primary health care facilities in suburban Malaysia. A self-administered questionnaire was given to assess decision-making styles and factors associated with exclusive breastfeeding practices. Systematic random sampling was used for the non-exclusive breastfeeding group, and convenience sampling was used for the exclusive breastfeeding group. Multiple logistic regression analysis was conducted to determine the associated factors for exclusive breastfeeding practices.

**Results:** We found an association between the mutual decision of parents on exclusive breastfeeding and exclusive breastfeeding practices. Previous exclusive breastfeeding experience, fathers' ages, mothers' occupations and mutual decisions had significant impact on exclusive breastfeeding practices.

**Conclusion:** The important determinant for practising exclusive breastfeeding is parents' mutual decisions. Therefore, practitioners need to continuously educate

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and emphasize the fathers' role in the breastfeeding process.

**Keywords:** Breastfeeding practice; Exclusive breastfeeding; Father's support; Mother occupation; Mutual decision

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## Introduction

Over the past decade, the Malaysian government has recognized the importance of breastfeeding and infant nutrition. Exclusive breastfeeding has since been highly recommended and encouraged for infants in the first six months of life.<sup>1</sup> However, current breastfeeding practices in Malaysia are still inadequate compared to other South-East Asian countries; only 14.5% of infants below six months were exclusively breastfed in 2006.<sup>2,3</sup>

There are multiple issues that affect the decision to initiate breastfeeding, as well as the duration of breastfeeding itself. Psychological, emotional, social and environmental factors all play a part in determining if a child is bottle-fed or breastfed.<sup>4</sup> Stress over not producing enough milk, uncertainty about whether the infant is getting enough milk, mother/infant discomfort with breastfeeding, nipple or breast problems, embarrassment to breastfeed in public, maternal fatigue, returning to work, non-supportive employers, previous breastfeeding history and concern about weight loss were the reported barriers to initiate breastfeeding and the factors associated with breastfeeding duration.<sup>5–9</sup> Other reported barriers towards breastfeeding include negative attitudes of the women themselves, their partners and family members as well as health care professionals.<sup>4</sup>

Previous research also found that demographic factors are associated with breastfeeding duration. Younger women with lower incomes, ethnic minorities and full-time employees were more likely to stop breastfeeding within the first month of a baby's life.<sup>9,10</sup> However, in terms of educational level of the mother, other research found that the breastfeeding duration is longer in better educated mothers.<sup>11,12</sup>

Evidence suggests that the decision of a mother to breastfeed is significantly influenced by various factors.<sup>11</sup> A study performed by Odom EC et al. found that the prenatal opinions of health care providers or family members, including the maternal grandmother and the infant's father, play an important role in women's breastfeeding decisions after infant birth. In this study, they found that mothers who had never breastfed were significantly associated with the perceptions of the maternal grandmother, infant's father or health care providers who prefer only formula feeding, who prefer both formula and breastfeeding or who do not have specific preferences. On the other hand, mothers who believed their family members and health care providers preferred breastfeeding only were least likely not to initiate breastfeeding.<sup>13</sup>

The literature on breastfeeding initiation and duration provides evidence that mothers who start weaning before the recommended period of 6 months postpartum do so because the decision to breastfeed was made during or late into the pregnancy and that the mothers have low confidence in their ability to breastfeed.<sup>10</sup>

Thus, the decision making of parents and associated factors for exclusive breastfeeding practices are the most important factors that determine whether the child was exclusively breastfed in the first 6 months.<sup>14–16</sup> Therefore, this study was conducted to evaluate the association between the decision-making style of the parents and breastfeeding practices and to determine the associated factors for exclusive breastfeeding practices among parents attending primary health care facilities in suburban Malaysia. The results from this study may be used by policy makers to improve strategies related to the promotion of breastfeeding, directly targeting fathers as supporters of breastfeeding with a focus on exclusive breastfeeding practice for 6 months.

## Materials and Methods

This study is a cross-sectional study that was conducted in all Machang district health centres of Kelantan. Reference populations were parents from Machang, Kelantan, and the source population was parents whose children were having follow-up meetings at a health or community clinic in Machang, Kelantan. Study populations were divided into two groups: the case group and control group. The case group comprised parents who have had an exclusive breastfeeding practice with children, while the control group comprised parents without an exclusive breastfeeding practice with children.

A list of exclusive breastfeeding (case group) and non-exclusive breastfeeding (control group) parents was identified earlier by a staff nurse in charge from each health clinic. From the list, one hundred parents from exclusive breastfeeding (case group) and two hundred parents from non-exclusive breastfeeding (control group) groups were selected from all five health clinics available in the district of Machang, Kelantan. The total number of parents in the exclusive breastfeeding group (case) versus the non-exclusive breastfeeding group (control) were distributed equally among these health clinics. In the exclusive breastfeeding group (case) the convenient sampling method was used, while systematic randomized sampling with a ratio of 1:2 was used to select subjects in the non-exclusive breastfeeding group (controls).

The size of the sample was calculated based on a pilot study. The calculated minimum sample size was 83 but was then increased to 100 per group after an additional 20% was added to account for nonresponse rates.

The biological parents of a healthy singleton infant born at term between 6 months and 2 years of age were included in the study. However, those who were illiterate, had psychiatric disorders and malformation or had disordered children were excluded from the study.

## Questionnaire

The self-administered questionnaire was used to determine the decision-making style and the associated factors for

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