# Factors Affecting the Practice of Exclusive Breast – Feeding Among Nursing Mothers Working with Tertiary Institutions in Port Harcourt Metropolis, Rivers State

#### Orukwowu Udo

Department of Nursing Science Faculty of Basic Medical Sciences, College of Medical Sciences, Rivers State University, Port Harcourt, Nigeria udocd27@gmail.com

DOI: <u>10.56201/ijmepr.v8.no1.2024.pg14.21</u>

#### Abstract

The purpose of the study was to determine the factors affecting the practice of exclusive breastfeeding among nursing mothers working with tertiary institutions in Port Harcourt metropolis. The study adopted the descriptive survey research design with a sample of 60 nursing mothers randomly selected from 2 tertiary institutions in Rivers State using the multi-stage sampling technique. A self-structured and validated questionnaire was used as the instrument for data collection with all ethical procedures carefully observed. Data obtained were carefully coded and analyzed using descriptive statistics of frequency and percentages. Findings revealed that there are factors already present in the practices of exclusive breast feeding among nursing mothers workers in the two selected tertiary institutions in Port Harcourt City Local Government Rivers State, which include; lack of time due to the full time employment status of mothers, absence of supportive facilities in the workplace and lack of support from family members. The study recommended that nursing mothers under full time employment should be given additional break times to enable them breastfeed their babies at regular intervals. Again, crèche and other supportive facilities should be provided in the workplace for nursing mothers and government should make provision to enhance the breast nursing mothers who are workers of the selected university to enhance their productivity and commitment to work.

**Keywords:** Practice, Exclusive-Breastfeeding, Nursing Mothers.

#### Introduction

Deprived and sub-optimal breastfeeding practices regularly result to child undernourishment which is a key cause of more than half of all child deaths (Sokol; Aguayo & Clark 2007). It is estimated that about 6.9 million under five children who were reported dead globally in 2011 alone, out of which, at least, 1 million lives could have been saved if they were exclusively breastfeed (WHO, 2012). The practice of not giving breast milk has been connected with unexpected infant death syndrome and other neonatal morbidity and mortality. Breastfeeding can save premature infants from life intimidating gastro-intestinal diseases such as necrotizing *enterocolitis* 

There has been a growing attention in recent times, for the endorsement of Exclusive Breastfeeding (EBF) as the recommended feeding practice for newborns globally. This trend has been encouraged to a large extent by the increasing scientific substantiation on the significance of EBF in reducing infant morbidity and mortality especially in developing countries (Labbok & Taylor, 2008). Breast milk is the natural and original first food for babies and it provides all the essential nutrients that a child needs for the first six 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 (WHO, 2012).

EBF is therefore the act of feeding newborns with breast milk alone from age 0-6 months without water or any other kind of liquid or solid except for medications as the need may arise such as oral rehydration solution, drop or syrups (World Health Organization, 2012). The United State breastfeeding committee (USBC) and the American Academy of Pediatrics (AAP) declared that breastfeeding is the physiologically normal form of child and infant feeding and that it is the most efficient type of infant feeding for the first six months of life (USBC & AAP, 2018). Several health benefits have been associated with the practice of EBF for both the mother and child. Apart from the fact that it is safe, free of charge, readily available in the right temperature, EBF also creates bonding between mother and child, serves as birth control method in most women and it protects the child against common childhood illnesses including reducing the risk of overweight and infant obesity (Meek, 2001; Wyatt, 2002; Venneman, 2009 & Brulde, 2011).

Regardless of the importance of EBF to the survival of newborns, several factors have been identified as barriers to the practice of EBF in Nigeria and other developing Countries (Aidam 2005; Otoo, Lartey & Perez-Escamilla 2009; Senarath, Dibley & Agho, 2010). This includes poor knowledge of mothers about the health benefits of EBF, the assumption that no child can survive for that long with breast milk alone, lack of time due to the active engagements of mothers now, lack of enabling facilities in work places for mothers and lack of social support among others (Duncan, 1993; coutsoudis 1999; Arora, Mcjunkin, Wehrer & Kuhn, 2000; Kramer, 2003; Susin & Giuglian 2008).

## **Statement of the Problem**

In spite of the importance of EBF to the survival of newborns and several health benefits associated with the practice of EBF for both the mother and child, several factors are responsible as barriers to the practice of EBF in Nigeria and other developing Countries. More so, not much has been documented in literature about the practice of EBF among working class mothers in the study Area. Based on these prevailing circumstances, this research was, therefore, deemed necessary to determine the factors affecting EBF among working class women in Port Harcourt metropolis.

# **Purpose of this Study:**

The purpose of this study was to determine the factors affecting the practice of EBF among nursing mothers in Port Harcourt metropolis.

The specific objectives of this study are highlighted below:

- 1. To examine the sources of information of Working Mothers to the practice of exclusive breastfeeding.
- 2. To determine the barriers to the practice of exclusive Breastfeeding among Working Class Mothers.
- 3. To determine the Challenges Working Mothers Face at Work Places.
- 4. To find out the Exclusive Breastfeeding Practice among Working Class Mothers.

# **Research Questions**

In other to realize the purpose of this study, the following research questions were formulated which need to be addressed:

- 1. What are the Sources the sources of information of working mothers to the practice of exclusive breastfeeding?
- 2. What are the Barriers to Exclusive Breastfeeding among Working Class Mothers?
- 3. What are the Challenges Working Mothers Face at Work Places?
- 4. What are the Exclusive Breastfeeding Practice among Working Class Mothers?

# Methodology

## **Study Area**

The study Area is Port Harcourt metropolitan City in Rivers State. It is the headquarter of Rivers State. Port Harcourt is one of the industrialized and commercial Cities in Nigeria It lies between the geographical coordinates of Latitude 6°50E and 8° 00°E in the Niger Delta region of Nigeria. (South South Geopolitical Zone). It shared common boundaries with Oyigbo LGA in the North, Emoha and Ikwerre Local government Areas in the West, Okrika LGA in the South and Eleme LGA in the East respectively.

# Research Design.

The study adopted a descriptive survey research design. This design was considered appropriate because the study made use of existing data without any form of manipulation of any variable in order to have a given outcome. The study was conducted between February, 2022 - March, 2022 to investigate factors affecting the practice of exclusive breast – feeding among nursing mothers working with tertiary institutions in Port Harcourt metropolis, Rivers State.

## **Study Population**

The population for the study was working class mothers in (6) public-owned tertiary institutions in Port Harcourt metropolis which includes; University of Port Harcourt, Rivers State University, Ignatius Ajuru University, National Open University, Captain Elechi Amadi Polytechnic and Rivers State College of Health Sciences & Management Technology, who are within the age bracket of 20 -60 years irrespective of their educational status, cultural inclination or religious denominations.

## Sample Size and Sampling Technique

The sample size for the study consisted of 60 working-class mothers in the employment of 6 tertiary institutions in Rivers State. To arrive at this, two (2) out of the (6) public-owned tertiary institutions in Port Harcourt metropolis were randomly selected using the multi-stage sampling technique. Secondly, three faculties with more working class mothers were purposively selected while 30 persons were randomly drawn from each of the two selected faculties.

## **Instrument for Data Collection**

The instrument for data collection was a 15-item self-structured and validated questionnaire with a reliability index of 0.67 which is within the acceptable limits set by the study.

#### **Method of Data Collection**

Copies of the instrument were administered directly on and retrieved from 60 respondents using the interviewer-administration method.

# Method of Data Analysis

The data collected from this study are subjected to statistical analysis using Statistical Package for Social Sciences (SPSS) of windows (version 20.0). Frequency table and simple percentage are also used for analyzing the data.

#### **Ethical Consideration**

An approval letter from the ethical committee, department of public health, Rivers State College of Health Science and Management Technology, Port Harcourt was given to the researcher which authorized him to conduct research in the study Area.

#### **Result and Discussion**

Research Question 1: What are the Sources of Exclusive Breastfeeding Information? Hypothesis 1: To What Extent is the Affecting the Practice of Exclusive Breast Feeding among Nursing Mothers Workers in the two Selected Public Owned Institutions in Rivers State.

Table 1: T – Test Analysis of Mean Rating of Source to the Practice of Exclusive Breast Feeding among Nursing Mothers Workers in two Selected Public Owned Tertiary Institutions in Rivers State.

Sources of variance	N	$\overline{\mathbf{X}}$	SD	Df	T – Cal.	T – Cri	Decision
Personal interaction	20	2.00	0.385	28	0.04	1.91	Accept
Antenatal manual	10	1.89	0.226				

The Data on table indicates the mean rating of sources of information to the breast feeding nursing mothers selected 2 universities in Rivers State.

The data was subjected to t – test analysis to find out whether there is a significant difference between the mean rating of the two sources. The result of the analysis shows that t- cal.is 0.04 is less than the t – cri. value of 1.91 hence the null hypothesis is accept this shows that there is no significant difference in the mean rating of the source of breast feeding among nursing mothers workers in Rivers State.

Research Question 2: What are the Barriers to Exclusive Breastfeeding among Working Class Mothers?

Hypothesis 2: To What Extent in the Barrier in Exclusive among Mothers Workers In the two selected

**Public – Owned Tertiary Institutions in Rivers State.** 

Table 2: T – Test Analysis of the Mean Rating of Barriers in Exclusive the Breast Feeding among Mothers in two Selected Public Owned Tertiary Institutions in Rivers State.

Source of variance	N	X	SD	DF	T – Cal.	T – Cri.	Decision
All barriers are applicable	21	1.67	0.511	28	0.151	2.00	Accept
None applicable	9	1.22	0.240				

In table 2, the result indicates that the computed t – value of 0.151 is less than the T – cri value of 2.00 on the 28 degree of freedom (DF) at 0.05 level of significance in 2 tailed test. Since the T – cal. of 0.151 is less than (<) the t – cri. value of 2.00, we accept the null hypothesis that there is no significant different barriers in exclusive breast feeding nursing mothers in 2 selected public none tertiary institution in Rivers State.

Research Question 3: What are the Challenges Working Mothers Face at Work Places? Hypothesis 3: To What Extent is the Challenges Facing Exclusive Nursing Mothers Breastfeeding Practices in two Selected Public Owned Tertiary Institutions in Rivers State.

Table 3: T – Test Analysis of the Mean Rating of Challenges Facing Exclusive Nursing Mothers Breast Feeding in two Selected Tertiary Institutions in Rivers State.

	Source of variance	N	$\overline{X}$	SD	DF	T – Cal	T – Cri	Decision
L								

All challenges	19	2.00	0.300	28	1.60	1.78	Accept
None applicable	11	2.15	0.480				

From the table above the calculated T – value of 1.60 is less than the T – Cri of 1.78. Since the T calculated is less than the T critical, we accept the null hypothesis that there is no significant difference in the mean rating of the challenges facing exclusive nursing mothers' breast feeding in 2 selected public owned tertiary institutions in Rivers State.

Research Question 4: What are the Exclusive Breastfeeding Practice among Working Class Mothers?

Hypothesis 4: To What Extent are the Exclusive Breast Feeding Practices among Working Class Mothers in two Institutions in Rivers State.

Table 4: T – Test Analysis of the Mean Rating of Exclusive Breast Feeding Nursing Mothers Practice in two Selected Push Owned Tertiary Institutions in Rivers State.

Sources of variance	N	X	SD	DF	T – Cal.	T – Cri.	Decision
Normal practice	25	2.50	0.360	28	3.04	2.19	Reject
Abnormal practice	5	2.25	0.210				

The table above shows the fact that the data indicates the means rating of exclusive breast feeding nursing mothers who are working does not practice the principles involve the breast feeding calculated value the T – critical value to be 2.19. this remains the fact that the null hypothesis others is reject which the alternative hypothesis is accept to this effect it means that there are significant difference in the mean rating exclusive breast feeding in selected tertiary institution of Rivers State

# **Discussion of Findings**

Based on what has been done in the work entirely, it appears that the factors are already present in the exclusive practices of breast feeding among nursing mothers workers in the selected tertiary institution in Port Harcourt City Local Government Rivers State. To this effect, government should make provision to enhance the breast nursing mothers who are workers of the selected university to enhance there productivity and commitment to work. The four analyzed research hypothesis are clear indication to this effect.

## **Conclusion and Recommendation**

In all ramification, it is expedient to know that nursing mothers are strong animals in every system. Secondly, their entitlement and maternity leave allowance should be made prompt by Government to produce good virtues. Thirdly there must be span of control to enhance absolute productivity in the selected Tertiary institution in Rivers State.

## References

- Anorlu, R.I. (2006). Tumours of the cervix uteri. In A. Agboola (Ed.), *Textbook of obstetrics and Gynaecology for medical students* (2nd ed.), 167-182. Ibadan: Heinemann.
- Arevian. M, Noureddine, S & KabakianKhasholian T. (2006). Raising awareness and providing free screening improves cervical cancer screening among economically disadvantaged Lebanese/Armenian women. *Journal of Transcultural Nursing*, 17:357–6Ayinde, O.A, Omigbodun, A.O. & Ilesanmi, A.O. (2004). Awareness of cervical cancer, papanicolaou'ssmear and it's utilisation among female undergraduates in Ibadan. *African Journal of Reproductive Health* (8), 68-80.
- Dim, C.C., Ekwe, E., Madubuko, T., Dim, N.R. & Ezegwui, H.U. (2008). Improved awareness of pap smear may not affect its use in Nigeria: Acase study of female medical practitioners in Enugu South Eastern Nigeria. *Tropical Journal of Obstetrics and Gynaecology*. 25(1); 1-2.
- Ehiemere, I.O., Maureen, D.F., & Robinson-Bassey, G.C. (2015). Attitude and practice of cervical cancer screening among female health workers in university of Port Harcourt teaching hospital, Rivers State. *Journal of Research in Nursing and Midwifery (JRNM)*, 4 (4), 072-082.
- Mutyaha, T., Mmiro, F. & Weiderpass, E. (2006). Knowledge, attitudes and practice on cervical cancer screening among the medical workers of Mulago hospital, Uganda. *BMC Medical Education*, 6 (13), 6-13.
- Ngoma, T. (2006). World Health Organization cancer priorities in developing countries. *Ann. Oncol.*, 17 (8),9-4.
- Obalase, S.B., Akindutire, I. O., Adelusi, J. O. & Adegboro, J. S. (2017). Knowledge and awareness of cervical cancer screening among women of reproductive age in IkereE k i t i Local Government Area, Ekiti State, Nigeria. *International Journal of Caring Sciences*, 10 (2), 755
- Obalase, S. B., Akindutire, I. O., Adelusi, J. O. & Adegboro, J. S. (2017). Knowledge and awareness of cervical cancer screening among women of reproductive age in IkereEkiti

- Local Government Area, Ekiti State, Nigeria. *International Journal of Caring Sciences*, 10 (2), 755
- Ojiyi, E. & Dike, E. (2010). The influence of sexual attitudes on genital human papilloma virus infection. *Port Harcourt Medical Journal*, 4,135 140.
- Oyedunni, S. A. & Opemipo, O.M. (2012). Perception and utilization of cervical cancer screening services among female nurses in University College Hospital, Ibadan, N i g e r i a. The Pan African Medical Journal, 11, (69), 1580.
- Peto, J., Gilham, C., Fletcher, O. & Matthews, F.E. (2004). The cervical cancer epidemic that screening has prevented in the UK. *Lancet*, 364,249-256.
- Qiao, Y. (2009). A new HPV-DNA test for cervical cancer screening in developing regions: A cross sectional study of clinical accuracy in rural China. *Cancer in Africa, Epidemiology and Prevention IARC Publications* No 153.
- Tate, D.R. & Anderson, R.J. (2002). Recrudescence of cervical dysplasia among women who are infected with the human immunodeficiency virus: A case-control analysis. *American Journal of Obstetrics & Gynecology*, 186, 880-882.
- World Health Organization (2006). Comprehensive cancer control. A guide to essential practice. Geneva: World Health Organization.