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Comparison of the Knowledge and Attitudes of Midwives about Breastfeeding with Breastfeeding Behaviors of the Mothers They Provide Counseling

Ebe ve Hemşirelerin Anne Sütü ve Emzirme Konusundaki Bilgi ve Tutumlarının, Danışmanlık Verdikleri Annelerin Bebeklerini Anne Sütü ile Besleme Davranışlarıyla Karşılaştırılması

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Objectives: Midwives and nurses are considered as the essential sources of information about feeding and nutrition of the babies, who encourage breastfeeding and support the mother. In this study, it is aimed to compare the knowledge and attitudes of midwives and nurses about breastfeeding with breastfeeding practices of the mothers they provide counseling on baby feeding.

Patients and Methods: The present study was carried out on 161 mothers having babies aged 12-18 months who lived in Edirne and on 59 midwives and nurses who had conducted their counseling and follow-up visits. Data were collected via two questionnaires prepared for the midwives and mothers.

Results: Midwives/nurses reported that they were visited by each mother for a mean of 6.5±2.9 times during their pregnancy. Twenty-two of them had fed their babies only with breast milk for at least six months and 33 of them had suckled their babies for at least 12 months. Of the mothers, 65 had fed their babies only with breast milk for at least six months, while 82 had suckled their babies for at least 12 months.

Conclusion: This study stresses the importance that nurses/midwives should enhance mothers' consciousness for a successful breastfeeding. It is important that midwives should provide continuous support to mothers, which can be achieved by continuous professional training to midwives, nurses and other health staff regularly.

Key words: Midwife; nurse; breast milk; breastfeeding.

Amaç: Ebe ve hemşireler emzirmeyi özendiren, emziren anneleri destekleyen ve bebek beslenmesi konusunda annelere temel destek sağlayan kişiler olarak görülmektedir. Bu araştırmada; ebe ve hemşirelerin, anne sütü ve emzirme konusundaki bilgi ve tutumları ile danışmanlık verdikleri annelerin bebeklerini anne sütü ile besleme davranışlarının karşılaştırılması amaçlanmıştır.

Hastalar ve Yöntemler: Çalışmaya, Edirne il merkezinde yaşayan ve 12-18 aylık bebekleri olan 161 anne ile bunların takiplerini yürütmüş 59 ebe ve hemşire alındı. Çalışmada veriler, anne sütü ve emzirme ile ilgili ebe/hemşireler (54 soru) ve annelere (34 soru) uygulanmak üzere hazırlanılan iki anket aracılığı ile toplandı.

Bulgular: Ebe/hemşireler, her anneyle gebelikleri boyunca ortalama 6.5±2.9 kez görüştüklerini bildirdiler. Elli bir ebenin bilgi puanı orta düzeyde iken, yedisinin iyi, birinin de kötü olarak saptandı. Ebe/hemşirelerin 22'si en az altı ay sadece anne sütü verirken, 33'ü en az 12 ay bebeğini emzirmişti. Annelerin 65'i en az altı ay sadece anne sütü verirken, 82'si en az 12 ay bebeğini emzirmişti.

Sonuç: Bu çalışmayla, emzirmenin başarılı bir şekilde yapılabilmesi için özellikle ebe/hemşirelerin bu konuda anneleri bilinçlendirmeleri gerektiği bir kez daha vurgulanmıştır. Bunun için, ebe/hemşireler annelere sürekli destek sağlamalıdırlar. Bu da, ebe/hemşirelerin ve diğer sağlık personelinin bu konuda düzenli eğitilmeleri ile sağlanabilir.

Anahtar sözcükler: Ebe; hemşire; anne sütü; emzirme.

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Breast milk provides the primary source of nutrition for the newborns. The ingredients of the breast milk vary according to the needs of the newborns; it protects the newborn until its own immune system is functioning properly, helps to decrease infant morbidity and mortality rates, and is also cheap.[1-4] The World Health Organization suggests feeding the newborns merely with breast milk for the first six months and then adding supportive food supplements to accompany the breast milk for the following months.[3] In Turkey, the rate of feeding merely with breast milk after two months following birth dropped to 43.5%, on the other hand, the mean time of feeding merely with breast milk is 0.7 month. This appears to be the result of inefficient informing of the mothers about baby feeding.[5-6] It is considered that the health personnel is the right information source on child care. It is stated that the most efficient way for the health personnel is face-to-face interview with the mothers.[3] Midwives and nurses who work in the primary care centers are the essential sources that help mothers to get the right information about feeding and nutrition of the babies. However, this is closely associated with the capacity and skills of the midwives and nurses.[3-6] In this study, it is aimed to reveal the knowledge, attitudes and practices of nurses/midwives and mothers they provide counseling about baby feeding and compare them for any similarity or distinction.

PATIENTS AND METHODS

The study included 161 mothers having 12-to-18-month-old babies who lived in the city center of Edirne and 59 midwives and nurses who had made their follow-up. The data in the study were collected by means of two questionnaires about mother's milk and breastfeeding. The questionnaire administered to midwives and nurses was composed of 54 questions in two parts. The first part was composed of 24 questions and was prepared to determine the midwives'/nurses' demographic and professional features (age, education level, job, etc., questions 1-5), personal breastfeeding experience (whether they breastfed or not their last child and factors which influenced this, questions 6-18) and second part included items about their knowledge about mother's milk and breastfeeding (whether they were educated, questions 19-20), and their thought about informing mothers about mother's milk and breastfeeding and whether they could use this knowledge. The part about knowledge (2nd part) was prepared in order to determine midwives'/nurses' knowledge and practical approach about mother's milk and breastfeeding. This part which was scored by using an answer key prepared by means of sources in literature, had the maximum score of 64 and was used for analysis. Each correct answer was scored "1", and each wrong or "I don't know" answer was scored "0".

The questionnaire applied to the mothers included 34 questions; 10 of them revealing demographic data and the rest 24 about attitudes and behaviors on breast milk and breastfeeding. The questions about behavior were the same as the ones applied to the midwives/nurses.

To define understandability and utility features of the questions and instructions given in questionnaire, a sample test was applied to 10 midwives/nurses working at Trakya University, and to 10 mothers chosen randomly who admitted to the hospital for several reasons representing different social backgrounds. Thus, the final version of the questionnaire became applicable after several changes.

The questionnaires for the midwives/nurses were applied where they work. On the other hand, questionnaires for the mothers were applied via phone calls and face-to-face interviews, and then the results were recorded by the researchers. Midwives/nurses who had been responsible for the follow-up care of one or more mothers of this study were chosen as participators. Trakya University Local Ethics Committee approval was granted. The mothers and midwives/nurses were informed about the study before interviews and all accepted to participate voluntarily. Data gathering process was completed between May and June 2007 and 70% of the midwives/nurses who had worked for puerperal follow-up cares of the region were reached. Every midwife/nurse interviewed had followed-up at least two mothers.

After the descriptive analyses were accomplished, the gathered data were analyzed on a model formed to define the variables determining the breastfeeding behavior of mothers and the state and the extent of

Table 1. Demographic features of the midwives/nurses

Demographic features	Count	%
Age		
18-24 years	0	0.0
25-34 years	31	52.5
35 years and over	28	47.5
Marital status		
Single	6	10.2
Married	50	84.7
Widow	3	5.1
Educational level		
Occupational high school	17	28.8
Associate degree	42	71.2
Length of service		
0-3 years	0	0.0
4-6 years	14	23.7
7 year and over	45	76.3
Having a child		
Yes	47	79.7
No	12	20.3

Table 2. Breastfeeding features of the mothers and midwives/nurses

Features	Mothers (n=161) n (%)	Midwives/nurses (n=47) n (%)	*p*
Initial breastfeeding time			
First ½ hour	75 (46.6)	24 (51.1)	0.73
First hour	60 (37.3)	17 (36.2)	
Second hour	14 (8.7)	5 (10.6)	
On baby's demand	11 (6.8)	1 (2.1)	
First food			
Breast milk	100 (62.1)	45 (95.7)	<0.001
Formula	34 (21.1)	2 (4.3)	
Water	25 (15.5)	0 (0.0)	
Water with sugar	2 (1.3)	0 (0.0)	
Breastfeeding frequency			
Baby's demand	107 (66.5)	41 (87.2)	0.01
Every hour	42 (26.1)	2 (4.3)	
Every 2 hour	9 (5.6)	3 (6.4)	
Every 3 hour	3 (1.8)	1 (2.1)	
Giving water			
Yes	102 (63.4)	13 (27.7)	<0.001
No	59 (36.6)	34 (72.3)	
Using pacifier			
Yes	76 (47.2)	21 (44.7)	0.45
No	85 (52.8)	26 (55.3)	
Bottle-feeding			
Yes	114 (70.8)	17 (36.2)	<0.001
No	47 (29.2)	30 (63.8)	
Duration of merely breastfeeding			
Less than 6 months	96 (59.6)	25 (53.2)	0.27
6 months and over	65 (40.4)	22 (46.8)	
Total breastfeeding duration			
Less than 12 months	79 (49.1)	14 (29.8)	<0.001
12 months and over	82 (50.9)	33 (70.2)	

the effects of the various characteristics of the midwives/nurses on this subject. The results were represented as mean ± standard deviation or numbers (%). The coherence on normal distribution of the quantitative variables was analyzed by the one sample Kolmogorov-Smirnov test. In comparisons amongst the groups, t test was used for variables showing normal distribution, and Mann-Whitney U test was used for variables not showing normal distribution. Chi-square test was used in the comparison of the categorical data amongst groups. Linear regression analysis was used in determining the factors on the knowledge points of the midwives/nurses, the duration of giving only breast milk and total breastfeeding time of the midwives/nurses. Pearson correlation test was used amongst the continuous variables; Kendall's Tau-b correlation test was used amongst ordinal variables. General limit for statistical significance was accepted as $p<0.05$.

RESULTS

The demographic data of the midwives/nurses are given in Table 1. The mean number of children followed-up by the midwives/nurses was 34.0±0.7. Mean pregnancy visit carried out for the mothers by them was 6.5±2.9 times.

The characteristics of the midwives/nurses on feeding with breast milk and breastfeeding are given in the Table 2. Forty-five (95.7%) of the 47 midwives/nurses that had a child gave breast milk, and two (4.3%) of them gave formula feeding for the first nourishment. Of these, 22 (46.8%) of them gave only breast milk for at least six months. Thirty-three (70.2%) of them nursed their babies at least 12 months. While the mean duration of having fed with breast milk was 5.0±1.2 months in the last born children of the midwives/nurses, the mean of total breastfeeding time was 12.8±6.6 months.

Table 3. Comparison of breastfeeding features of the mothers according to various factors (n=161)

Variables	Duration of merely breastfeeding		Total breastfeeding duration		*p*
	Less than 6 months (n=96) n (%)	6 months and over (n=65) n (%)	Less than 12 months (n=79) n (%)	12 months and over (n=82) n (%)	
Age					
18-24 years	19 (67.9)	9 (32.1)	15 (53.6)	13 (46.4)	0.02*
25-34 years	41 (49.4)	42 (50.6)	37 (44.6)	46 (55.4)	0.50**
35 years and over	36 (72.0)	14 (28.0)	27 (54.0)	23 (46.0)	
Educational level					
Primary school	41 (68.3)	19 (21.7)	33 (55.0)	27 (45.0)	0.21*
Secondary school	10 (62.5)	6 (27.5)	8 (50.0)	8 (50.0)	0.29**
High school	25 (49.0)	26 (51.0)	27 (52.9)	24 (47.1)	
University	14 (51.9)	13 (48.1)	10 (37.0)	17 (63.0)	
Type of birth					
Vaginal	29 (72.5)	11 (27.5)	22 (55.0)	18 (45.0)	0.04*
Cesarean	67 (55.4)	54 (44.6)	57 (47.1)	64 (52.9)	0.25**
Initial breastfeeding time					
First ½ hour	34 (45.3)	41 (54.7)	35 (46.7)	40 (53.3)	0.01*
First hour	42 (70.0)	18 (30.0)	30 (50.0)	30 (50.0)	0.85**
Second hour	11 (78.6)	3 (21.4)	7 (50.0)	7 (50.0)	
Baby's demand	8 (72.7)	3 (27.3)	6 (54.5)	5 (45.5)	
First food					
Breast milk	46 (46.5)	53 (53.5)	44 (44.4)	55 (55.6)	<0.001*
Formula	29 (85.3)	5 (14.7)	20 (58.8)	14 (41.2)	0.24**
Water	19 (76.0)	6 (24.0)	12 (48.0)	13 (52.0)	
Water with sugar	1 (50.0)	1 (50.0)	2 (100.0)	0 (0.0)	
Breastfeeding frequency					
Baby's demand	52 (48.6)	55 (51.4)	48 (44.9)	59 (55.1)	0.001*
Every hour	33 (78.6)	9 (21.4)	24 (57.1)	18 (42.9)	0.26**
Every 2 hour	8 (88.9)	1 (11.1)	4 (44.4)	5 (55.6)	
Every 3 hour	2 (100.0)	0 (0.0)	2 (100.0)	0 (0.0)	
Giving water					
Yes	70 (68.6)	32 (31.4)	59 (57.8)	43 (42.2)	0.002*
No	26 (44.1)	33 (55.9)	20 (33.9)	39 (66.1)	0.003**
Using pacifier					
Yes	54 (71.1)	22 (28.9)	53 (69.7)	23 (30.3)	0.004*
No	42 (49.4)	43 (50.6)	26 (30.6)	59 (69.4)	<0.001**
Bottle-feeding					
Yes	78 (68.4)	36 (31.6)	64 (56.1)	50 (43.9)	<0.001*
No	18 (38.3)	29 (61.7)	15 (31.9)	32 (68.1)	0.004**
Total breastfeeding duration					
Less than 12 months	58 (73.4)	21 (26.6)	–	–	<0.001
12 months and over	38 (46.3)	44 (53.7)			
Duration of merely breastfeeding					
Less than 6 months	–	–	58 (60.4)	38 (39.6)	<0.001
6 months and over			21 (32.3)	44 (67.7)	

*Duration of merely breastfeeding; **Total breastfeeding duration

Fifty-two of the midwives/nurses (88.1%) had taken occupational training on breastfeeding, meanwhile 53 of them (94.9%) had accepted that it is their responsibility to train the mothers on this subject, and they continuously had trained the mothers. The mean of knowledge scale with a maximum score of 64 was computed as 43.6±5.2. While 51 of the midwives/nurses (86.4%) had a medium (between 30-49) level of knowledge and seven (11.9%) of them had a high (50 and above) level of knowledge, only one (1.7%) of them had a poor level (below 30) of knowledge. Working duration, attending to occupational training, educational and marital status had no impact ($p>0.05$) on the knowledge levels of the midwives/nurses.

In order to determine the factors that affect the duration of merely breastfeeding and total duration of breastfeeding, linear regression models were applied. Age, educational level, length of service, having attend-

ed occupational trainings, type of delivery, pacifier use and method of nutrition were included in the regression model. Pacifier use in the merely breastfeeding and bottle-feeding in the duration of breastfeeding had statistically significant negative effects ($p<0.05$).

The mean age of the 161 mothers was 29.7±5.4 years; 125 of them (77.6%) were housewives, only 36 of them (22.4%) had permanent occupation; 159 (98.8%) were married, two (1.2%) were widow or divorced; 60 (37.3%) graduated from primary school, 16 (9.9%) graduated from school, 51 (31.7%) graduated from high school, and 27 (16.8%) had a university degree, seven (4.3%) were illiterate. While 61 of mothers (37.9%) stated they were smokers, 31 of them (50.8%) continued smoking during pregnancy.

The mothers stated they were visited by midwives/nurses during their pregnancy at a mean of 2.2±2.1 times. However, 47 of them (29.2%) stated that they were never visited by midwives/nurses, 20 of them (12.4%) were visited once, 55 of them (34.2%) twice or three times, 28 of them (17.4%) four or five times, and 11 of them (6.8%) six times or more. According to mothers' declarations, 103 of them (64.0%) received no information about breastfeeding and nutrition of the babies from midwives/nurses. When the mothers were asked from whom they received information on nutrition guidance, 110 of them stated doctors (68.8%), 28 stated (17.4) midwives, 21 stated (13.0%) elder relatives, and two stated (1.2%) neighbors and friends.

The main characteristics of the nutrition and breastfeeding of the mothers are given in Table 2. While the mean of breastfeeding duration of the mothers (for the last child) was 4.5±1.7 months, 96 mothers (59.6%) merely breastfed for less than six months. The mean of total breastfeeding duration was 12.0±5.7 months. Finally, 79 mothers (49.1%) breastfed their babies for less than 12 months.

The percentage of mothers aged 25-34 who breastfed for longer than six months was statistically higher than other groups ($p=0.002$). Among mothers who breastfed within the first half hour after birth, who gave breast milk as the initial food, who breastfed on demand of their baby, and who breastfed for longer than 12 months, the percentage of mothers who breastfed for six months or more was statistically lower than the percentage of mothers who did not ($p<0.05$) (Table 3).

The duration of breastfeeding was not affected by the initial time of breastfeeding, the initial food and the frequency of breastfeeding. Among mothers who used pacifier and baby bottle for their last child, the percentage of mothers who breastfed for 12 months or more was statistically lower than those who did not ($p<0.05$). Among mothers who breastfed their last child for shorter than six months, the percentage of those whose duration of breastfeeding was longer than 12 months was statistically lower ($p<0.05$). There was a positive correlation between duration of merely breastfeeding and the total duration of breastfeeding ($p<0.05$) (Table 3).

The percentage of mothers who gave their babies breast milk as initial food, who breastfed on babies demand and for longer than 12 months was significantly lower than the percentage of midwives/nurses ($p<0.05$). The percentage of mothers who bottle-fed their babies was statistically higher when compared to midwives/nurses ($p<0.05$). There was no statistically significant difference between the percentages of mothers and midwives/nurses who merely breasfed for shorter than six months, who breastfed within the first half hour and who used pacifier ($p>0.05$) (Table 2).

DISCUSSION

In society and health care sector, midwives/nurses are considered to be the ones who maintain, encourage, and support breastfeeding. However being able to carry out this work efficiently and consciously is closely related to sufficient knowledge and proper skills.[7,8] But in various studies it was found that knowledge and skills of midwives/nurses are at rather limited levels.[8,9] In our study, 86.4% of midwives/nurses were found to be at middle level and 11.9% of them were found at a high level with respect to their knowledge on breast milk and breastfeeding. In a study of Öztürk[10] on midwives/nurses, 78.1% of them were found to be at middle level and 22.9% of them were found to be at low level with respect to their knowledge on breast milk and breastfeeding. Having a limited knowledge may have resulted from inadequate education on breast milk and breastfeeding and also from being unable to follow the continuously changing information on this topic. Midwives/nurses may transfer their mistakes to mothers when they lack adequate and reliable knowledge.

In our study, 95.7% of midwives/nurses and 62.1% of mothers were found to have started feeding their babies initially with breast milk, and a significant difference was found between these two groups. While the rates found for midwives/nurses in our study is similar to the findings of Tunçel et al.[3] for midwives and Yapıcıoğlu et al.[11] for nurses; it was found as 60-79% for mothers that do not work for health services in Turkey in various studies.[12] The reason of having a higher rate in midwives/nurses initially breastfeeding their babies can be considered to be the result of their professional training and lack of information conveyed by them to the mothers.

In the studies, the most important factor in the adequacy and continuity of breastfeeding is emphasized to be initiating breastfeeding in the first half an hour period after birth.[4,13] In our study, 51.1% of midwives/nurses and 46.6% of mothers were found to have breastfed in the first half and hour, and no statistical difference was determined. While these rates are similar to the ones

found by Tunçel et al.[3] for midwives, by Yapıcıoğlu et al.[11] for nurses and by Turkey Population and Health Research in 2003;[14] it is rather higher than various studies done on mothers that do not work for health services.[12] However it is inadequate for a successful breastfeeding policy.

In the previous studies, using pacifiers or bottle-feeding is determined to have an effect on breastfeeding durations.[3] In some studies performed in our country, it was found that more than half of the mothers use pacifiers,[11] and 16.4% to 77.8% of them bottle-feed.[3,11] In our study, 44.7% of midwives/nurses and 47.2% of mothers were found to have used pacifiers and no statistically significant difference was found between the two groups. Bottle-feeding rates were 36.2% for midwives/nurses and 70.8% for mothers and the difference was significant. Finding similar results for a group that is trainer on breastfeeding and the society especially with respect to using pacifiers shows that this application has nothing to do with education. There is a need for precautions for common pacifier use by midwives/nurses to limit their negative effects on mothers.

In this study, while mean duration of merely breastfeeding was 4.97±1.2 months for midwives/nurses, and 4.5±1.7 months for the mothers with no significant difference. This rate was 3.4±1.8 months for the midwives according to Tunçel et al.,[3] 3.0±1.4 months for nurses according to Yapıcıoğlu et al.[11] and 3.9±2.1 months for mothers that are not health staff according to Uskun et al.[15] In our study, it was found that 46.8% of midwives/nurses and 40.4% of mothers have fed their babies merely with breastmilk for at least six months. No statistical difference was found between the two groups. While this rate was %51.4 for the midwives according to Tunçel et al.,[3] it was 52.8% for the midwives/nurses according to Öztürk et al.[10] They are similar to the results found for mothers that are not health staff in our country.[15] In addition, total period of breastfeeding was found as 12.8±6.6 months for midwives/nurses and it was 12.0±5.7 months for the mothers in our study. It was found that 70.2% of midwives/nurses and 50.9% of mothers have breastfed their babies for at least 12 months, and a statistically significant difference was found between the two groups. These rates were found as 10.9±8.3 months and 41.1% respectively by Tunçel et al.[3] Having knowledge but not practicing it limits the number of midwives/nurses merely breastfeeding for less than six months. But first, they should be good role models for mothers to lead public toward better baby feeding practices.

In our study, it was found that 70.8% of mothers were visited by midwives/nurses for at least once. This rate was found as 89% by Bodur et al.,[5] and 81% by Bekar and Karataş.[16] According to the study of Bekar and Karataş[16] 74% of mothers were visited for five times or less. In our study, the rate of mothers visited for six times or more was 6.8%, and visiting rate per pregnant women was 2.2. These rates are 18.3% and 3.3 respectively in the study of Bodur et al.[5] The reason of the high values compared to the other findings in Turkey may be the high number of health staff and therefore higher quality of health services in our study region.

In this study, the rate of getting help from midwives/nurses on breastfeeding was 28%. This rate was found as 25% by Bodur et al.,[5] 44% by Bekar and Karataş[16] and 34.4% by Vefikuluçay and Terzioğlu[13] These results are similar to ours. However, in other studies done on this topic, the rate of receiving information from health staff on breastfeeding was found to be relatively low.[17] It was upsetting that almost three-fourths of them had source of information other than their counseling midwives/nurses.

As a result, although breastfeeding is common in our country, the habit of feeding merely with breast milk is not at desired levels. The habit of using liquids like formula/baby food or water just after birth and using pacifiers and bottle-feeding is common mistakes. A procedure of delivering babies to their mothers just after birth has to be applied in order to initiate breastfeeding as soon as possible and to prevent possible problems. For this purpose, especially midwives/nurses have to inform pregnant women on proper baby feeding. In order to provide all these, the importance of continuous education for mothers by midwives/nurses and other health staff arises.

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