A Phenomenological Study on Understanding of Mothers' Knowledge on Breast Feeding Practices in Malaysia

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Abstract: Realizing the importance of children's nutrition, the World Health Organization strive vast effort to ensure revitalize promotion and protection of infant and young child feeding. Despite its benefits, the breastfeeding rate was still low worldwide including Malaysia. Based upon the findings of the scientific research, it was expected to contribute significant effects on people's knowledge and perception towards breastfeeding practice. In Malaysia, breastfeeding was found to be dominantly practiced among Malay. The qualitative study design was used to explore Malay mother's knowledge on the benefits of breastfeeding towards maternal and infant's health. Fifteen mothers who currently breastfeed their children were recruited by purposive sampling method for this study. Data were collected by in-depth interview using a semi-structured interview guide. Data obtained were analyzed using thematic analysis. Due to study findings, mothers were aware on the nutritional and protective factors contain in breast milk. However, the misperception on colostrum still exists and it was conveyed by influential people in mothers' life. Mothers perceived breastfeeding could help in maintaining their appearance following child birth. It protects mothers by minimizing the risk of postpartum haemorrhage and incidence of breast cancer. Mothers in this study recognized breastfeeding as a form of birth control. Even so, they doubted on its effectiveness because of lack of understanding on the mechanism of lactation amenorrhea. Social media, health care professionals particularly staff nurses, and breastfeeding support group were the first three most cited source of information by the mothers in this study. According to culture and religious in Malaysia, family greatly support to breast feeding mothers during their breast-feeding period. However, continuing of the breast feeding depends on mother's knowledge and decision. Therefore, as the health care providers, especially nurses who are closely with mothers keeps on giving health education regarding breast feeding practice to enhance their knowledge and understanding. *Keywords:* Breast feeding practice, knowledge, mother, Malaysia

I. Introduction

Realizing the importance of children's nutrition, the World Health Organization strives vast effort to ensure revitalize promotion and protection of infant and young child feeding²⁰. For this reason, global strategy for infant and young child feeding has been amended in 2002¹⁶. This strategy imposed mothers to sustain exclusive breastfeeding for 6 months of life to ensure appropriate time of introducing complementary foods along with continued breastfeeding up to 2 years old. Despite its benefits, the breastfeeding rate was still low worldwide. It was reported that only 43% of children were exclusively breastfeed worldwide. 74% continued breastfeeding at one year and the rate decline to 46% as the infants reach two years¹⁷. Breastfeeding is a form of nutrition regardless of socioeconomic status as it provides the same nutritional content for all children all over the world¹⁶. Scientific research proved that breast milk is not just a matter of nourishment for infant's physical survival, but its benefits last longer than childhood period^{8,9,10,18}. Benefits of breastfeeding extend to the mother as well. Mothers would be benefited through the protective effects against postpartum hemorrhage and gynecological cancer; breast and ovarian cancer due to breastfeeding ¹⁸.

Based upon the findings of the scientific research, it was expected to contribute significant effects on people's knowledge and perception towards breastfeeding practice. Mothers were influenced to breastfeed as they believe in the goodness of breast milk to their children^{3,14,21}. At the same time, mothers breastfeed as they perceived it could strengthen mother and child's relationship²¹ as it was remarked as a mother's love and affection³.Despite of its health benefits, breastfeeding was chosen due to its economical and convenience reasons²¹. The breastfeeding initiation rates in Malaysia were increasing year by year. The breastfeeding rate in Malaysia was low as 41% in the year 1996 and the rate was increased to 63% in 2006⁴ and it spiked to 90 percent in the year 2012¹². The prevalence of exclusive breastfeeding still fluctuated even though the vast effort had been done. The prevalence was decreased from 27% in year 1996 to 14.4% in year 2009⁴. In 2010, the rate was increased to 16.2% in year 2010¹². Even though the statistic illustrated an increment, it was far from the target to achieve 25.5% of infants to be exclusively breastfeed in 2020¹⁶.

It is recommended for a mother to exclusively breastfeed her baby from birth until 6 months of life. Complementary feeding should be introduced at 6 months and breastfeeding should be continued until the infant reaches 2 years or beyond²⁰. The Third National Health and Morbidity Survey III (NHMS III) conducted in 2006 reported that only 12% of infant in Malaysia breastfed until they reached 2 years in 1997⁴. The rate climbed up to 37.4% in the year 2010¹². However, the rate declined to 32.2% in the year 2015. The rate was still low compared to the global statistic that indicates 46% of infants were still breastfeeding at 2 years¹⁷. Prominent scholars in breastfeeding in Malaysia suggested that mothers' knowledge on the health benefits of breastfeeding play an important role in infant feeding preference²¹. Their studies found that mothers' knowledge on the benefits of breastfeeding would shape their perception towards this practice. Present research allows further exploration on what mothers really understand about the health benefits of breastfeeding. It is solely based on what they understand about the importance of breastfeeding towards infant and woman's health.

II. Materials and Method

This study was a qualitative study that explores mothers' understanding on the importance of breastfeeding maternal and infant's health. Participants for the study were breastfeeding mothers whose attended Maternal and Child Health Clinic (MCHC) in Kuantan, Pahang. Purposive sampling was used to get information rich participants. Fifteen mothers who currently breastfeed their children were recruited voluntarily for this study. Breastfeeding mothers who are unwilling to participate in this study, suffering mental disability or having a child with congenital disorder (e.g. cleft palate, cerebral palsy) were excluded from this study. Data were collected by in-depth interview using a semi-structured interview guide to facilitate the interview. Open ended questions and probing was used to get more information during the interview. All interviews were conducted in Malay language; however, some mothers used bilingual of Malay and English during the interviews. The duration of the interviews ranged from 40 to 90 minutes. The interviews were audio recorded with mothers' consent and field notes were taken concurrently. The data were analysed using thematic analysis. The field notes and transcriptions were read several times to ensure rigour. Data were coded and categorized. Similar themes and categories from all interviews were collected and differences were noted to verify the credibility and conformability of the findings. The team analysis may facilitate the transparency of the data analysis, thus improving rigour and transparency. For the ethical consideration, the approval was taken from Kulliyyah of Nursing Postgraduate and Research Committee, (KNPGR no.9/2015) with reference (IIUM/313/DDPG&R/C/20/4/I/O), International Islamic University Malaysia Research and Ethic Committee (IREC) with reference ID 514 and Malaysian National Medical Research Register, Ministry of Health (Code NMRR: 16-533-29189).

III. Results

3.1. Mothers' socio demographic

Fifteen mothers that fulfilled the sampling criteria of the study were recruited. All mothers in this study were Malay mother, married and Islam. Eleven of them are working mother; they were either self-employed or working in private or government sector. Three were homemakers and one of them still pursuing her PhD. The mean age of the mothers was 27 years old. Regarding their education, seven of them hold the diploma, four had bachelor degree and only one mother had Master Degree. Three mothers hold SPM. One mother ever attended secondary school up to form 3, however, the minimum certification level attained was UPSR. Eight of them were primigravida while the rest has a range of 2-4 children during the interview. The mean age of their infants is 13.5 months old. eleven mothers have baby boys while others were baby girls. Social media, health care professionals particularly staff nurses, and breastfeeding support group run by NGOs were the first three most cited source of information by the mothers in this study.

3.2. The importance of breastfeeding to infant health

3.2.1. Immunity

All mothers in this study believed that breast milk was perceived to have protective factor that boost child's immunity, reduce risk of infections and life-threatening illness.

"...breastfeeding provides antibody to the child so my child is not easily get sick..."

".it protects my child from respiratory infection..."

Besides, mothers linked their experience using infant formula for their older as bitter experience and they felt regret for not breastfeeding their baby.

"...I feel a little bit frustrated because I didn't breastfeed my first child. He always falls sick and easily infected with cough, flu..."

"...I didn't breastfeed my first child. She easily gets sick. She frequently had flu, cough and fever. She even had been hospitalized due to respiratory infections. I can see the difference..."

Mothers also linked the immunity factor in breast milk boost body's response towards illness and vaccination.

"... if my baby fall sick, the recovery is faster ..."

"...my baby didn't experience fever after being immunized...."

3.2.2. Colostrum

It was identified that the mothers have good knowledge about colostrum. All of them identified colostrum as the first milk and it contain a protective factor that is essential for the new-born.

".... the staff nurse told me that colostrum is the first milk. It is concentrated and only produced during first two days of delivery..."

"...colostrum was identified as gold droplet because its goodness. Baby needs colostrum. It has immunity factor..."

Even so, the false belief that transmitted from elderly on colostrum still exists in Malay culture. Colostrum was regarded as 'rotten,' 'deleterious,' cause illness,' and 'should be discarded'.

"....my mother in law said that colostrum is rotten milk. It will cause stomach-ache to the baby..."

3.2.3. Nutritious

Mothers in this study believed breast milk is the best nutritional choice for infants.

"...the contents of breast milk are well-balanced and nutritious enough for child's growth and development. It contains of protein and energy..."

"...breastfeeding reduces risks of constipation because it is easy to digest..."

3.2.4. Growth and development

Mothers also perceived breast milk contains of growth factors and hormones that help infant's growth and development.

"...my son is not fat. He is small but his muscle is well-build. It is different from his cousin who's formula-fed. He (mother's nephew) is flabby..."

Despite that, there was a mother who looks unhappy when discussing child's growth as she thought the formula fed infant is chubbier than her fully breastfed infant. She said that;

"...people always thought that chubbier baby is healthier...."

Mother also stated that breastfeeding helps brain development.

"...breast milk contains DHA and ARA required for brain development. My child can follow instructions. He is following the milestone according to his age. I think it was due to DHA and ARA in the breast milk...."

Mothers in this study also relates the nutrients contain in breast milk prevent child obesity in later life.

".... breastfeeding prevents child obesity because the milk is nutritious to fulfil baby's need. It's not like formula milk. Formula contains of sugar and fat. Child being overweight because of the unnecessary sugar and fats..."

3.2.5. Mother-child's bonding

Breastfeeding also was identified as a way of communication as most the participants cited that breastfeeding time promotes mother-baby's relationship. The feeling of satisfaction from breastfeeding was expressed when they talked about the emotional benefits of nursing process.

"...breastfeeding give a sense of security due to close bonding ... "

3.3. Benefits of breastfeeding to mother's health

3.3.1. Appearance

The initial response received while discussing on the benefits of breastfeeding to mothers was it helps the mothers to lose weight. They perceived breastfeeding helps their appearance in the way reducing their body weight and maintaining the body shape following pregnancy.

"...breastfeeding helps maintaining body weight. I got my pre-pregnancy weight..."

However, mother also commented that,

"...I lost weight during confinement period. I think it was due to breastfeeding. However, I could not strict my food intake while breastfeeding because I easily become hungry. It is even harder to lose weight when I use pregnancy and breastfeeding a baby as an opportunity that I can eat whatever I want and end up like this..."

3.3.2. Minimize risks

Breastfeeding also reduce the risks of getting breast cancer and post-partum haemorrhage.

"... it reduces risks of getting breast cancer..."

".... I had breast lumps and quite large. It happened before I got married. I afraid that it will recur if I did not breastfeed.... i read that breastfeeding lower the risk..."

"...uterus returns to its normal size. It was proven since *makbidan* (traditional midwife) told me that *batumerian* (womb) also was in its place. No need to massage..."

"....it (breastfeeding) promotes uterine contraction soon after baby birth. *Nifas*(blood discharge during or after the childbirth)stop as early as 1 month..."

3.3.3. Family planning

Mothers in this study recognized breastfeeding as a form of birth control. Even so, most them doubted that breastfeeding only was not a "reliable" method of family planning.

"...I worried of getting pregnant because I did not use any contraceptive methods other than breastfeeding. People said breastfeeding would delay menses but not for me. I got menses before my baby turns 2 months old..."

"...my menses returned when my baby's aged 42 days. *Nifas* (blood discharge during or after the childbirth) stopped after 23 days. People said breastfeeding has a contraceptive effect but it does not work on me. I got pregnant..."

IV. Discussion

Analysis of fifteen transcripts discovered all mothers in this study seem to have extensive understandings on the benefits of breastfeeding towards maternal and infant's physical health. This study allows further exploration on what mothers understand about the health benefits of breastfeeding practice to maternal and infant's health as discovered by previous study²¹.Such findings were anticipated as mothers received information on breastfeeding throughout their pregnancy. According to the National Breastfeeding Policy, expectant mothers should be informed about the benefits of breastfeeding by health care staffs during their antenatal visit⁷.

However, there is a misperception on the colostrum as it was believed to cause illness. It is contrary with the scientific fact that colostrum contains antibodies that is crucial to baby's health². This customary belief was accustomed in other ethnicities, all over the world ^{1,19}. Mothers in this study also linked breastfeeding to the psychological development few studies in Malaysian found similar results²¹. It could be observed that mothers would associate breastfeeding and motherhood as beautiful experience that woman can have the entire life. Breastfeeding was seemed to be exclusively connected to the mother.

Mothers in this study recognized breastfeeding as a way of losing weight. However, it was observed that majority of the mothers seems not confident as they would have said it was difficult to lose weight while breastfeeding their baby. It is because as the effectiveness of breastfeeding in reducing maternal weight depends on maternal weight gain during pregnancy, their activity level and the food consumption ⁵. A study conducted on the lifestyle of breastfeeding mothers may explain the mismatch between the fact that breastfeeding helps women to lose weight and its reality. The study was conducted among 190 breastfeeding mothers in Iran¹¹. They found that mother's involvement in sport and fitness activities were least was during the breastfeeding period. Limited access to sport facilities, lack of time as well as the culture that restricts woman to do physical activity after giving birth of the society were identified as the barriers.

However, it could be observed that mothers in this study did not really understand on the contraception effect of breastfeeding. Such finding would be explained by lack of understanding of its mechanism of action. This misunderstanding contributed to contraception failure. This finding supported previous study that lack of knowledge on lactational amenorrhea leads to contraception failure^{15.} The findings of present study identified information technology plays an important role in spreading breastfeeding information as majority of the mothers ever use the internet as a medium of seeking and sharing knowledge. However, the other study proved otherwise²¹. The trends have changed as people more preferred to seek information from the social media and online discussion due to convenience reason.

V. Conclusion

Mostly, the participants were identified useful information and understanding regarding breastfeeding practice during their antenatal period. In addition, it could be said that breast feeding mothers have been supported by the appropriate government organizations as well as health care providers. Further studies should be done in different races and culture in both Malaysia and other countries.

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