

## Full Length Research Article

### THE EXTENT OF IMPLEMENTATION OF BREASTFEEDING PROGRAM ON THE KNOWLEDGE AND PRACTICE LEVELS OF PRIMIGRAVIDA AND MULTIPARA MOTHERS AT SELECTED HOSPITALS IN CEBU CITY, 2012

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#### ABSTRACT

**Background:** The vast majority of mothers are perfectly capable of breastfeeding their babies exclusively for four to six months. Breastfeeding duration and practice have declined in the Philippines since 1973, particularly among urban, better-educated and higher income groups. As more and more women move into these modern groups, breastfeeding may continue to decline, making attempts to decrease fertility more difficult.

**Objective:** This research study aimed to focus on the extent of implementation of breastfeeding program on the knowledge and practice levels of primigravida and multipara mothers at selected hospitals in Cebu City

**Methods:** The descriptive co relational analysis was employed among 150 primigravida and multipara mothers with a sampling technique of simple random sampling technique.

**Results:** This study investigated that the level of knowledge had a weighted mean of 3.90, interpreted as knowledgeable and breastfeeding practices had a weighted mean of 4.0, rated often practiced. The Extent of implementation had a weighted mean of 4.1, interpreted as considerable extent.

**Conclusion:** Based on these research findings there was an average degree of implementation of the Breastfeeding Program, so it follows that the mothers were knowledgeable and often practice breastfeeding to their infants. Extent of implementation influenced the level of knowledge of mothers as to breastfeeding.

**KEY WORDS:** Breastfeeding Program, Mothers, Extent of implementation and Knowledge, Cebu City.

#### INTRODUCTION

The National Movement for the Promotion of Breastfeeding (NMPB) seeks to overcome the decline by encouraging a wide range of Breastfeeding promotion activities including improving hospital practices and implementing a 5-year plan. In 1988, the 2<sup>nd</sup> 5 years of the United Nations International Children's Emergency Fund Support for Breastfeeding promotion started as part of a program to strengthen health services for child survival. The overall goal of the program is to improve the survival of infants and young children by inspiring their nutritional status, growth and development through optimal breastfeeding. This program was implemented on June, 1992 (Dayrit, 2005). Moreover, challenges of the Philippines' breastfeeding promotion program cover four (4) areas namely the health facilities; information, education and communication; training and outreach. In 1994, physicians all over the country, signed the physicians' pledge to protect, promote and support breastfeeding as per E.O. 51, Philippine Code of Marketing of Breast milk Substitutes. Earlier in 1993, 39 institutions -- non government offices, other government organizations, health professional groups and the military -- signed a memorandum of agreement with the DOH for the promotion of breastfeeding and the implementation of Mother and Baby Friendly Hospital

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Initiative (MBFHI) has been fully assisted by UNICEF in financial and technical aspects. On the other hand, the World Health Organization (WHO) also offered technical assistance in this advocacy (Midterm Review, 1994-1998). Differences in extent and duration of breastfeeding between rural and urban areas in the Philippines increased between 1973 and 1983. Although urbanization has been seen as responsible for a decline in duration of breastfeeding, nonetheless urban women with at least 10 years of education in the Philippines showed an increase in duration and rate of breastfeeding (Popkin *et al.*, 1984).

#### MATERIALS AND METHODS

The study was conducted at selected hospitals in Cebu City particularly Vicente Sotto Medical Center, Cebu City Hospital and St. Anthony's Mother and Child Hospital. The sample size for the study was determined using single population proportion and correction formulas. Data was collected using standardized structured questionnaire and nurses were recruited as data collectors. The questionnaire was pre-tested in the hospital among 5% participants and necessary corrections and amendment was considered. The collected data was reviewed and checked for completeness and consistency. The descriptive co relational analysis was employed. Information was recorded anonymously and confidentiality and beneficence was assured throughout the study period.

## RESULTS

### 1. Socio demographic profile of the Primigravida and Multipara Mothers

As to age, majority (44.66%) belonged to the age bracket of 14-24 years old which accounts for 67 respondents. As to educational attainment, majority (51.33%) of the respondents had reached only until the secondary or high school level. As to economic status, majority had a combined monthly income of P5, 000 and below (81.33%). As to the parity of the mothers based on the number of pregnancies, majority (72.67%) of the mothers had been pregnant within the range of 1 – 3 times. As to number of births, majority (70.67%) of the mothers had also given birth within the range of 1 - 3 times.

### 2. Level of Knowledge, practice and extent of implementation of Primigravida and Multipara Mothers.

In this study the level of knowledge had a weighted mean of 3.90, interpreted as knowledgeable and breastfeeding practices had a weighted mean of 4.0, rated often practiced.

The current study identifies that the extent of implementation had a weighted mean of 4.1, interpreted as considerable extent.

### Test of Hypotheses

There was a significant relationship between the extent of implementation between the Breastfeeding Program and the level of knowledge of mothers. There was a significant relationship between the extent of implementation between the Breastfeeding Program and the practices of primigravida and multipara mothers.

## DISCUSSION

As to age, youngest respondent was 14 years old while the oldest was 47 years old. Majority (44.66%) belonged to the age bracket of 14-24 years old which accounts for 67 respondents. This means that majority of the mothers were young or had married early. Sixty four (64) or 42.66% of the respondents on the other hand ranked second and are within the age range of 25-35 years of age. As to educational attainment, majority (51.33%) of the respondents had reached only until the secondary or high school level. This explains why majority were young mothers as they did not have the chance to go college education. Some had chosen to marry at an early age. As to economic status, majority had a combined monthly income of P5,000 and below (81.33%) every month. The fact that the data were gathered from public hospitals the result was expected that mothers or patients were indigent or those who belonged to low income families. The income was based on the standard income bracket identified by the National Economic Development Authority (NEDA, 2006) based on the standard living of Filipinos. As to the parity of the mothers based on the number of pregnancies, majority of the mothers had been pregnant within the range of 1 – 3 times (72.67%). This implied that the mothers, considering their economic status, were now familiar with the family planning methods that are now accessible including the dangers of having many dependents.

As to number of births, majority (70.67%) of the mothers had also given birth within the range of 1 - 3 times. Economic status had greatly affected the decreased number of pregnancies and frequency of births of the mothers. Over-all level of knowledge had a weighted mean of 3.90 rated knowledgeable. This is because the extent of implementation was only rated considerable extent. The fact that the degree of implementation was perceived to be not that extensive, it should follow that their level of knowledge is not that high.

The mothers rated highly knowledgeable (4.71) on the statement: "Breast milk is the most complete form of nutrition for newborn". This implied that with the influx of advertising campaigns on mass media (i.e. print, radio, televisions) and the usual orientation programs conducted by student nurses as part of their community exposure, it was already a common knowledge to people from all walks of life that still, breast milk is best for babies. Nipple sore hinders breastfeeding had the lowest weighted mean of 2.92, rated moderately knowledgeable. This implied that in some cases, when hospitals and health care personnel orient mothers, such information was disregarded as not important. In public hospitals, where there was always a lack of health care personnel, mothers were immediately sent to the delivery room since no available staff could render such orientation.

Washing their hands before breastfeeding had the highest frequency of practice rated 4.54, interpreted as always practiced. Optimal infant health hygiene is the ultimate concern of mothers. This is due to the massive information dissemination on the significant benefits of hand washing. Proper infant feeding starting at birth is important for the child's physical and mental development. Continuing breastfeeding even if their breasts are no longer producing milk had the lowest weighted mean of 3.49 or often practiced. This means that they don't practice it all the time. The perception of the mothers could be a factor considering that if there was no milk, they get discouraged easily and they tend to shift to bottle feeding immediately. Extent of implementation was 4.1 rated considerable extents. This means that implementation was not that extensive or not exactly implemented as perceived by the primigravida and multipara mothers. The extent to which the hospital has provided a written breastfeeding policy that is routinely communicated to all health care staff had a weighted mean of 4.33, rated great extent.

### Conclusion and recommendations

Based on the findings of the study, the researcher concludes that majority of the primigravida and multipara mothers from the selected public hospitals in Cebu City were young (14 – 24 years old), less educated and belonged to the low income bracket. There was an average degree of implementation of the Breastfeeding Program, so it follows that the mothers were knowledgeable and often practice breastfeeding to their infants. Extent of implementation influenced the level of knowledge of mothers as to breastfeeding. Likewise, the extent of implementation also affects the manner and frequency of practice on breastfeeding their infants.

### Recommendations

Anchored on the findings of the study, the following are recommended:

1. Training on Breastfeeding implementation should first be targeted to staff of teaching and training hospitals; hospitals with affiliation programs for medical, nursing and midwifery students; tertiary hospitals; provincial hospitals and private hospitals;
2. Advocacy meetings and focused – group discussions should be conducted with medical professional groups, administrators of hospitals and professional academic groups on scientific symposia on breastfeeding and MBFHI both at national and sub national levels.
3. There should be a continued monitoring on patterns and trends of breastfeeding;
4. Local government units should be advocates in transforming all hospitals with maternity and newborn services into facilities which fully protect, promote and support breastfeeding and rooming-in practices;
5. Future researchers or organizations focused on the health and wellness of mothers could delve into the following activities for future undertaking:

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