

شبكة المعلومات الجامعية التوثيق الإلكتروني والميكروفيلو

# بسم الله الرحمن الرحيم





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شبكة المعلومات الجامعية التوثيق الإلكتروني والميكرونيله



شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



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شبكة المعلومات الجامعية التوثيق الإلكترونى والميكروفيلم

## جامعة عين شمس التوثيق الإلكتروني والميكروفيلم قسم

نقسم بالله العظيم أن المادة التي تم توثيقها وتسجيلها على هذه الأقراص المدمجة قد أعدت دون أية تغيرات



يجب أن

تحفظ هذه الأقراص المدمجة بعيدا عن الغبار



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## Barriers for Continuation of Breast Feeding among Primipara Mothers

### Thesis

Submitted for Partial Fulfillment of Master Degree In Nursing Community

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2020

## Barriers for Continuation of Breast Feeding among Primipara Mothers

### Thesis

Submitted for Partial Fulfillment of Master Degree in Nursing Community (Community Health Nursing)

Under Supervision of

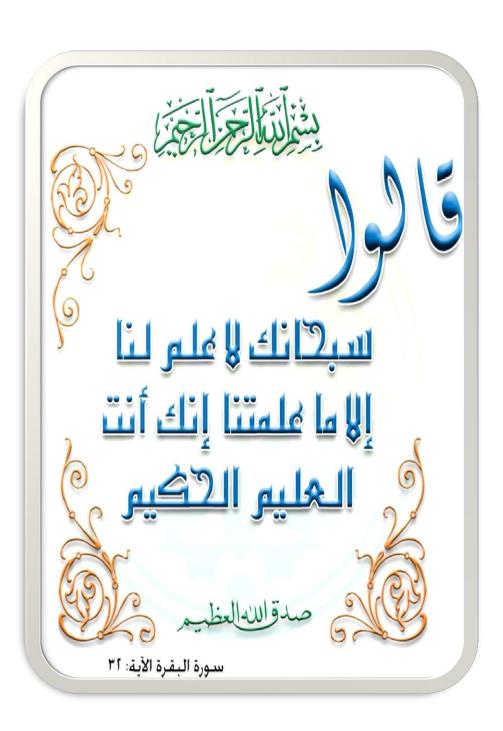
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#### **List of Abbreviations**

Full-term

**ANC** : Ante Natal Care

Abbr.

**ASHA**: American Speech –Language –Hearing Association

B.C : Before Christ
BF : Breastfeeding
BMI : Body Mass Index
C.S : Cesarean Section

CHNs : Community Health NursesCHW : Community Health Worker

**CPMC**: Celifornia Pacific Medical Center

**EBF** : Exclusive Breastfeeding

**EIBF** : Early Initiation of Breastfeeding

**IBFAN**: International Baby Food Action Network

IgA : Immunoglobulin AIgM : Immunoglobulin M

INC : Internal Nursing ConferenceIvcf) : Infant and Young Child Feeding

MCH : Maternal Child Health

**MOHP**: Ministry of Health and Population

PH: Power of Hydrogen
PPD: Postpartum Depression

**SPSS**: Statistical Package for Social Sciences

**UK** : United Kingdom

**UNICEF**: United Nations International Children's Emergency

Fund

US\$ : United States DollarsWHA : World Health AssemblyWHO : World Health Organization

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#### Barriers for Continuation of Breast Feeding among Primipara Mothers Abstract

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Background: Breastfeeding is the beast gift a mother can give to her baby; breast milk is rich in nutrients needed for optimal growth and development, and many barriers cause early cessation of breastfeeding. Design: a descriptive study design was used. Aim: to assess the barriers of continued breastfeeding among primipara mothers in Al wasta, Beni Suief, Egypt. Sampling: A convenient sampling technique was employed to select sample, two hundred primipara mothers were included in the study. Tools: for data collection two tools were used, the first tool: a structured interviwing questionnaire to assess socio-demographic characteristics of primipara mothers, and their knowledge and practices regarding breastfeeding, the barriers affects on the breastfeeding duration. Second tool: Observational checklist for primipara mother's attitude related to breastfeeding techniques. Results: The mean ages of the samples were 21.26±3.19 years. And 76.0 of them don't work. 79.5 % of them had satisfactory total knowledge score level. Only 12.0% of primipara mothers initiate breastfeeding within 1 hour. 37.5 % of the samples had unsatisfactorytotal practices score level. About 57.0 % of the samples reported the effect of family members to give additional food. There was a significant relation between knowledge and practice; the mothers who had high education were reliable to perform optimal breastfeeding practices. There was a significant correlation between type of delivery and breastfeeding practice where a mother with normal delivery without any problems made optimal breastfeeding practices. Conclusion: More than half of mothers had satisfactory knowledge regarding breastfeeding. Suboptimal breastfeeding practices reflect failure in counseling strategies during ante-post natal; the barriers are negatively affected on exclusive breastfeeding continuation. There is stastistically significant positive correlation between total knowledge practices. Recommendation: increasing awareness to the importance of breastfeeding during visits to maternal and child health center follow up, and family support especially for primipara before and after delivery.

**Kev words:** breastfeeding – primipara mothers – barriers

#### Introduction

Preast milk is considered rich in nutrients and antibodies as it contains the sufficient quantities of
essential fats, water, sugar, carbohydrates, proteins, and
immunological factors needed for infants to thrive and resist
infection in the formative first year of life. Breast milk is the
beast gift a mother can give to her baby. Breastfeeding is
recognized globally as a vital public health issue with vast
health, social and economic implications. Breastfeeding is
the act of milk conveyance from the mother to the infant
(Ihudiebube-Splendor et al., 2019).

Optimal breastfeeding consists of early initiation within an hour of birth, exclusive breastfeeding from birth to 6 months of life, breastfeeding up to 2 years of age or beyond and breastfeeding on demand as the child want day and night. Breast milk provides natural passive immunization that greatly reduces the risk of the infant developing respiratory infection. Developing countriers have the potential to reduce child mortality less than five years by 13% (Vass et al., 2019).

Optimal breastfeeding is the best way of nutrition for the infant and the cornerstone for effective growth and development for children; as it provides all needed supplies of energy, nutrients and fluids. Optimal breastfeeding has many