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## Original Research - Quantitative

# Intentions and barriers toward breastfeeding among Jordanian mothers—A cross sectional descriptive study using quantitative method \*\*

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#### ABSTRACT

*Problem/background:* Breastfeeding is very important for both mother and infant. Within Jordanian hospitals, intentions and barriers to breastfeeding have not been addressed effectively during preparing policies in routine antenatal care or in maternal and child health care.

Aim: To identify the intentions and barriers toward breastfeeding among Jordanian mothers with a specific focus on women from low income circumstances.

*Methods*: A cross-sectional descriptive study using quantitative methods was adopted in this study. Data was collected via the Modified Infant Feeding Intention Scale (MIFIS).

Findings: Women reported that for the most part their intention to feed their babies was using formula milk. However, they reported a desire to breastfeed but this intention could be hindered due to limited social support and challenges related to work arrangements. Further, participants also reported concerns regarding perceived pain that breastfeeding may cause and concerns regarding changes in their body shape and weight as a result of breastfeeding.

Conclusion: Views toward breastfeeding among Jordanian women are not homogeneous. Policymakers and nurse educators should be cognizant of findings from this study and use them as guidelines for decision making. Efforts to improve intention toward breastfeeding can be achieved through structured and targeted educational programs for women from low income circumstances, and by modifying policies concerning work conditions for mothers to enable them to breastfeed their babies.

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## Statement of significance

## Problem or issue

Breastfeeding practice is acceptable and highly appreciated by the Jordanian population.

Limited investigations can be found in the literature that identifies the factors that cause Jordanian women to abstain or refrain from adopting breastfeeding.

## What is already known

Many studies showed that barriers and low intentions of breastfeeding were associated with maternal factors, but some child characteristics also contribute to avoiding or abstaining from breastfeeding.

## What this paper adds

Based on the findings of this study, new empirical data provides evidence to decision-makers to adopt policies that would improve rates of breastfeeding among women in Jordan.

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<sup>☆</sup> This study was conducted at AL-Basheer Governmental hospital Amman—lordan.

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#### 1. Introduction

Breastfeeding is very important for both mother and infant.<sup>1</sup> It is a natural human act that has many benefits. The American Academy of Paediatrics<sup>2</sup> recommends not only the initiation of breastfeeding for infants, but also the continuation of this practice until the end of the first year of life or longer based on the mother and her child's health status. This is because one of the remarkable benefits of breastfeeding is a reduced mortality rate among children.<sup>2</sup>

Intentions to breastfeed among Jordanian women have been investigated by other researchers who studied 600 female undergraduate university students, in the northern part of Jordan.<sup>3</sup> The study participants reported a commitment toward breastfeeding among Jordanian females. In this study Al-Ali et al.,<sup>3</sup> reported that Jordanian culture encourages women to breastfeed, producing positive attitudes that improve the prevalence of intentions toward, acceptance of, and practice of breastfeeding in the community.

Positive attitudes among Arabian women in the postpartum period with regard to intentions to breastfeed have been reported in the research literature, including studies from Jordan. Breastfeeding intent is thought to be influenced by a number of factors; including spousal support, community understanding and attitudes, and the contribution of health care providers to promote and educate women on this practice. There are, however, factors that could influence women avoiding or abstaining from breastfeeding. The next section discusses these challenges and difficulties

The literature reported a number of challenges and barriers that negatively influence intentions and actual breastfeeding among women in Jordan. Abuidhail<sup>5</sup> found that one of the main barriers toward continued breastfeeding in Jordan was that the mothers felt that infants still felt hungry after breastfeeding. In addition, there is a short and convergent period between pregnancies, and the mothers reported experiencing physical breast problems during breastfeeding, such as nipple engorgement and dryness.<sup>6</sup> Additionally, Jordanian women, who delivered by caesarean section, showed lower levels of intent to breastfeed compared with women who birthed by vaginal delivery.<sup>6</sup> The prevalence of caesarean section is increasing globally. Abu Omar et al.,<sup>7</sup> reported a caesarean section rate of 18.75% in their study of 2400 deliveries in Jordan.

Another barrier contributing to the inability or desirability to breastfeed is that a woman's workplace can sometimes not be as supportive as it could be in enabling breastfeeding to occur, especially as a result of the current economic situation among Jordanian citizens. Khassawneh et al.,8 reported that employed Jordanian women practised breastfeeding less, compared to mothers who were home makers. The working mothers indicated a less positive attitude toward breastfeeding practices with Khassawneh et al., 8 reporting that the workplace environment (the absence of a private place to breastfeed and the distance between workplace and the nursery) and short maternity leave, restrained breastfeeding practices and introduced a negative impact on breastfeeding. Given the importance of breastfeeding this study also aimed to explore the intentions and barriers of breastfeeding among Jordanian mothers but with a specific focus on women from low income circumstances.

#### 2. Methods, participants and ethics

A cross-sectional descriptive study design, using quantitative methods, was adopted for this study.

Approval for the study was obtained from the Institutional Review Board (IRB) of the Jordanian Ministry of Health (approval number MoH ERC 150003).

#### 3. Research setting

This study was conducted in AL-Basheer Hospital, which is considered the largest Jordanian governmental hospital.

#### 3.1. Recruitment and data collection

One hundred (*n* = 100) Jordanian women from low income circumstances between 3–9 months gestation were recruited to participate in this study, via convenience sampling, between July and August 2015. Data were collected to identify the intentions and barriers toward breastfeeding among Jordanian women via the Modified Infant Feeding Intention Scale (MIFIS). The original Infant Feeding Intentions Scale, created by Dr. Rivers. The modified Infant Feeding Scale was developed by Alicia C. Simpson to explore the intentions and potential barriers to breastfeeding. The instrument used to evaluate the mothers Ideas, beliefs and thoughts about the breastfeeding as quantitative measurement tool of mothers breastfeeding intentions.<sup>9</sup>

The English version of the Modified Infant Feeding Intentions Scale translated from English to Arabic by a bilingual expert translator after that, the scale was reviewed and checked by three nursing academics to ensure the accuracy of translation and content validity by judging the scale items and by giving their opinion about whether the scale items were adequate and relevant to measure the construct under study. Pilot study was performed on a sample of 10 mothers, and the instrument was comprehensible, clear, easy to administer and took approximately 10 minutes to complete.

The women who met the inclusion criteria and agreed to participate in the study were met in the waiting room of obstetrics and gynaecology clinics in Al-Basheer Hospital.

A member of the research team approached each potential participant individually to confirm that she satisfied the inclusion criteria and that she understood the intent of the study and could ask any questions. The women took 10–15 minutes to complete the MIFIS during a routine antenatal follow-up. The data collection process was completed within approximately one month.

## 3.2. Data analysis

The IBM SPSS version 21 was used to generate descriptive statistics. Means, standard deviations, and frequencies were reported for the sample variables. In addition, analyses of variance (ANOVAs) were used to test the impact of participants' characteristics on factors influencing their intentions to breastfeed their babies.

## 4. Results

## 4.1. Participant characteristics

A response rate of 100% was achieved for the study. Table 1 provides an overview of demographic characteristics of the participants. Participants' ages ranged from 18 to 42 years. Age was found to be bimodal; the majority of participants were aged between 18–30 years (70%), with the remaining participants aged between 31–42 years (30%). The majority of participants had educational levels less than that of secondary school (n = 76, 76%) and the majority of participants were unemployed (n = 94, 94%).

More than two-thirds of the participants had a monthly income of 400 Jordanian Dinar (36 US\$) or less (n = 77, 77%). While 17% of the participants were experiencing their first pregnancy (during data collection), the percentage of women went as high as 28% when asked about previous pregnancies. This difference results from the history of previous pregnancy terminations. Finally, the

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