BREASTFEEDING SELF-EFFICACY IN MALAYSIAN EXPECTING MOTHERS

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INTRODUCTION

- According to World Health Organization (WHO, 2001), it is recommended infants should be exclusively breastfed for the first 6 months of life and continues the breastfeeding until the second year of life or longer.
- Breastfeeding provides positive health benefits to both infants and mothers for short and long term (Joshi et al., 2016).
- Breastfeeding self-efficacy refers to maternal’s perceived ability or confidence to breastfeed her newborn and this influence her decisions regarding breastfeeding such as duration of breastfeeding or how she will tackles any breastfeeding issues (Dennis, 1999).
Adopted from Bandura’s Social Cognitive Learning Theory (Bandura, 1977) and Self-efficacy Theory (Dennis, 1999).
Early breastfeeding initiation

Exclusivity of breastfeeding

Duration of breastfeeding

Breastfeeding intention

Positive breastfeeding attitude

SOCIAL LEARNING THEORY

ANTecedents → SELF-EFFICACY → CONSEQUENCES → BEHAVIOR

Sources of Information: Information
Performance Accomplishments
Vicarious Experience
Verbal Persuasion
Physiological and Affective States

Self-efficacy

Confidence

Individual Response:
Choice of Behavior
Effort and Persistence
Thought Patterns
Emotional Reactions

Activity:
Initiation
Performance
Maintenance
Breastfeeding rates in South-East Asia

Breastfeeding Initiation within One Hour in Southeast Asia

<table>
<thead>
<tr>
<th>Country</th>
<th>Year</th>
<th>Breastfeeding Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Singapore</td>
<td>2013</td>
<td>0.0</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>2013-14</td>
<td>26.5</td>
</tr>
<tr>
<td>Lao PDR</td>
<td>2011-12</td>
<td>39.1</td>
</tr>
<tr>
<td>Thailand</td>
<td>2012-13</td>
<td>46.3</td>
</tr>
<tr>
<td>Philippines</td>
<td>2008</td>
<td>48.3</td>
</tr>
<tr>
<td>Indonesia</td>
<td>2012</td>
<td>49.3</td>
</tr>
<tr>
<td>Cambodia</td>
<td>2014</td>
<td>62.6</td>
</tr>
<tr>
<td>Malaysia</td>
<td>2016</td>
<td>65.3</td>
</tr>
<tr>
<td>Myanmar</td>
<td>2015-16</td>
<td>66.8</td>
</tr>
<tr>
<td>Brunei</td>
<td>2012</td>
<td>92.2</td>
</tr>
</tbody>
</table>

Source: INFANT AND YOUNG CHILD FEEDING, UNICEF (2018)
Trends of Exclusive Breastfeeding for Six Months in Southeast Asia

The national prevalence is still far behind the global target of exclusive breastfeeding.
Breastfeeding trends in Malaysia (1996-2016)

Although there an increasing trend in breastfeeding rates in Malaysia, the rates however still behind the global rate.

PROBLEM STATEMENT

- Theory of Plan Behaviour (TPB) stated breastfeeding knowledge, attitude, subjective norm and perceived control are important to determine breastfeeding outcomes. If mothers have positive towards this theory, they will have high breastfeeding self-efficacy and directly will influence mothers to breastfeeding practices. This will increase breastfeeding rates. (Zhu, Zhang, Ling, & Wan, 2016).

- Existing research also has examined the relationship between many variables and their impact on breastfeeding initiation, duration of breastfeeding and exclusivity of breastfeeding. These variables are sometimes classified as either intrinsic or extrinsic and modifiable or non-modifiable.

- The evidence has demonstrated the impact of non-modifiable factors, such as maternal age, parity, race/ethnicity, and economic status, on breastfeeding (Bonsjak, 2009 & Tarrant et al., 2011).

- Intrinsic factors such as maternal attitudes, self confidence and self-efficacy demonstrate a positive relationship with continued breastfeeding and some evidence exists that these variables may be modifiable to impact the breastfeeding experience (Meedya, Fahy & Kable, 2014 & Leahy-Warren, Mulcahy, Pheelan, 2010). One factor that plays a role in breastfeeding duration and may be modifiable by nursing intervention is maternal self-efficacy (O’ Brién, Buikstra & Hegney, 2008).

- Specifically, woman with a higher perceived self-efficacy for breastfeeding tend to initiate breastfeeding and persist even through challenges, whereas a woman with a lower perceived self-confidence may decide not even to initiate breastfeeding or wean prematurely due to lack of confidence or effective coping skills.
Breastfeeding self-efficacy is influenced by four information sources (as explained in page 4), therefore it may be modifiable by education and intervention by health care providers (Bandura 1977 & Dennis, 1999).

Some studies have established a positive relationship between self-efficacy and breastfeeding accomplishment thus signifying the prognostic value of screening to identify mothers at risk for early weaning which would assist healthcare staff in planning appropriate intervention targeting these mothers (Blyth 2004, Dennis 2006).
OBJECTIVES

- To compare levels of breastfeeding knowledge and breastfeeding self-efficacy among expectant mothers.
- To investigate predictors that influence breastfeeding self-efficacy in expectant mothers.
METHODOLOGY
RESEARCH DESIGN: A cross-sectional study.

DESIGN: Convenience sampling

SAMPLE & SETTING: 190 expectant mothers attending antenatal examination at six (6) Maternal and Child Department Health Clinics in Selangor, Malaysia. Inclusion criteria are expectant mothers aged between 18 to 40 years old, could speak and read in English or Malay.

INSTRUMENTS: The questionnaires were in dual language which is Bahasa Melayu and English which consisted of Socio-demographic, Breastfeeding Self-Efficacy Short Form (BSES-SF) and Iowa Infants Feeding Attitude Scale (IIFAS).

  - BSES-SF has been adopted from Bandura’s social learning theory to measure breastfeeding self-efficacy and practices (Dannis, 2003).
  - IIFAS was used to measure breastfeeding knowledge and attitude (De La Mora, 1997)

ETHIC APPROVAL: Ethical approval have been applied and approved by UiTM research committee and National Medical Research Register (NMRR) with ID number NMRR 17-1299-36056

DATA ANALYSIS: Statistical Package for Social Sciences (SPSS), ANOVA Test, Chi-Square Test and Multiple Linear Regression.
RESULTS & DISCUSSION
Majority are Malay (91.7%) because of the geographic location where most Malays reside, 8.3 % were non-Malays and illiterate in Malay language.

The age of participants ranged from 19 and 40 years old. More than half of the expectant mothers (69.4%) were aged between 19 to 30 years old and 30.6 % were between 31 to 40 years old.

65.6% of respondents received higher education (more than 12 years of education) and 34.4% of them had lower educational background (less than 12 years of education).

58.3 % had more than one child and only 41.7 % were expecting their first baby.

Majority had lower level of income (< RM 3000)

<table>
<thead>
<tr>
<th>Socio-demographic factors</th>
<th>n</th>
<th>Percentage (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age(years)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>19-30</td>
<td>125</td>
<td>69.4</td>
</tr>
<tr>
<td>31-41</td>
<td>55</td>
<td>30.6</td>
</tr>
<tr>
<td>Race</td>
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<td></td>
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<tr>
<td>Malay</td>
<td>165</td>
<td>91.7</td>
</tr>
<tr>
<td>Non-Malay</td>
<td>15</td>
<td>8.3</td>
</tr>
<tr>
<td>Area of residency</td>
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<td></td>
</tr>
<tr>
<td>Klung</td>
<td>148</td>
<td>82.2</td>
</tr>
<tr>
<td>Kuala Selangor</td>
<td>32</td>
<td>17.8</td>
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<tr>
<td>Occupation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Working</td>
<td>113</td>
<td>62.8</td>
</tr>
<tr>
<td>Housewife</td>
<td>67</td>
<td>37.2</td>
</tr>
<tr>
<td>Education level</td>
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<td></td>
</tr>
<tr>
<td>&lt;12 years</td>
<td>62</td>
<td>34.4</td>
</tr>
<tr>
<td>&gt;12 years</td>
<td>113</td>
<td>65.6</td>
</tr>
<tr>
<td>No of pregnancy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Uniparous</td>
<td>75</td>
<td>41.7</td>
</tr>
<tr>
<td>Multiparous</td>
<td>105</td>
<td>58.3</td>
</tr>
<tr>
<td>Level of income (rm)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>&lt;RM3000</td>
<td>92</td>
<td>51.1</td>
</tr>
<tr>
<td>&gt;RM3000</td>
<td>88</td>
<td>48.9</td>
</tr>
</tbody>
</table>
Association between breastfeeding self-efficacy with demographic factors

**Results**

- Mean score of Breastfeeding Self-Efficacy was 51.78 (SD = 11.94), expectant mothers in this study have high breastfeeding self-efficacy.
- Number of pregnancy show positive association with breastfeeding self-efficacy.
- Mothers who have more than one child (54.05±10.82) had higher levels of breastfeeding self-efficacy than first-time mothers (48.6±12.76).

**Discussion**

- Mothers who have experience in birthing and have had breastfed before tend to have high breastfeeding self-efficacy (Dennis, 2003).
- Pregnant mothers were more likely to breastfeed their child if they had previous breastfeeding experience or exposure (Abdul Hamid et al., 2017).
Association between breastfeeding knowledge with demographic factors

Results

- Majority mothers had high knowledge and imposed more positive attitude towards breastfeeding IIIFAS with mean score of 63.32±5.96
- Employment (p=0.001), level of education (p=0.008), area of residency (p=0.020), and level of income (p=0.04) showed positive association with breastfeeding knowledge.

Discussion

- The higher the family income, the better the knowledge about breastfeeding (Boff et al., 2015)
- Levels of education also play an important role in breastfeeding knowledge, higher educated mothers are more knowledgeable on the benefits of breastfeeding and they were 3 times more likely to breastfeed (Joshi et al., 2016).
- Working mothers showed more positive towards breastfeeding as compared to non-working mothers. As outlined in Breastfeeding-Friendly Hospital Initiative (BFHI), it is important for employers to provide a breastfeeding-friendly room, equipped with facilities to sustain breastfeeding practices among the employees (Rahmah, Zakiah, Rosnah, Shamsul, Azlan & Khadijah, 2011).
Results

- This study demonstrated that breastfeeding knowledge ($p=0.000$), employment ($p=0.007$) and number of pregnancy ($p=0.014$) are predictors of breastfeeding self-efficacy.

Discussion

- Expected mothers who had higher score in breastfeeding knowledge showed positive attitudes towards breastfeeding. Therefore, mothers who had positive knowledge towards breastfeeding, it will influence breastfeeding self-efficacy and breastfeeding practice. (Abdul Hamid et al., 2017).

- Working mothers are more likely to breastfeed their babies when their employer provide breastfeeding facilities at work place as breast pump and nursing room (Alzaheb, 2017).

- Breastfeeding self-efficacy is more likely related with mothers who had breastfeeding experience (Version & Access, 2017).
There are various independent variables predicting breastfeeding self-efficacy, but this study suggested that predictors of breastfeeding self-efficacy among expectant mothers in Malaysia are breastfeeding knowledge, maternal employment and number of pregnancy.

Therefore, in order to increase breastfeeding rates, exposure of breastfeeding should be given attention by providing continuous breastfeeding knowledge among expectant mothers and to provide well-equipped breastfeeding facilities at workplace.
REFERENCE