

MATERNAL HABITS RELATED TO BREASTFEEDING

HÁBITOS MATERNOS RELACIONADOS À
AMAMENTAÇÃOHÁBITOS MATERNOS RELACIONADOS A LA
AMAMENTACIÓN

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Objective: To characterize habits related to the breastfeeding of children of under five years of age. **Method:** Cross-sectional, quantitative descriptive study. A total of 385 mothers of children of under five years of age were interviewed at eight Primary Health Care Units in the interior of the state of Ceará, Brazil, between August and October, 2015. Descriptive statistical analyses were carried out. **Results:** It was found that 96.6 percent of the women breastfed their children; however, of these, 40.7 percent breastfed them for fewer than six months. Of the mothers interviewed, 42.1 percent reported not using pacifiers to calm their children down; however, 61.7 percent used a bottle to feed them. **Conclusion:** It was found that a considerable number of mothers weaned their children early and, as a consequence, introduced new foods before the child's six months of age.

Descriptors: Breastfeeding. Child health. Nursing.

Objetivo: caracterizar os hábitos relacionados ao aleitamento materno de crianças menores de cinco anos. Método: estudo descritivo, transversal, quantitativo. Foram entrevistadas 385 mães de crianças com idade inferior a cinco anos, em oito Unidades de Atenção Primária à Saúde do interior do Ceará, Brasil, no período de agosto a outubro de 2015. Realizaram-se análises estatísticas descritivas. Resultados: constatou-se que 96,6% das mulheres amamentaram seus filhos, contudo, dessas, 40,7% amamentaram por um período inferior a seis meses. Das mães entrevistadas, 42,1% referiram não recorrer ao uso de chupeta para acalantar seus filhos, no entanto, 61,7% utilizaram mamadeira para a alimentação da criança. Conclusão: constatou-se que um considerável número de mães desmamou precocemente seus filhos e, em consequência disso, elas introduziram novos alimentos antes do sexto mês de vida da criança.

Descritores: Aleitamento materno. Saúde da criança. Enfermagem.

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Objetivo: caracterizar los hábitos relacionados con la lactancia materna de niños menores de cinco años. Método: estudio descriptivo, transversal, cuantitativo. Fueron entrevistadas 385 madres de niños con edad inferior a cinco años, en ocho Unidades de Atención Primaria a la Salud del interior de Ceará, Brasil, en el periodo de agosto a octubre de 2015. Fueron realizados análisis estadísticos descriptivos. Resultados: se constató que el 96,6% de las mujeres amamantaron a sus hijos; sin embargo, de estas, 40,7% los amamantaron por un periodo inferior a seis meses. De las madres entrevistadas, 42,1% refirieron no recurrir al uso de chupo para calmar a sus hijos; sin embargo, 61,7% utilizaron biberón para la alimentación del niño. Conclusión: se constató que un considerable número de madres desmamó precozmente a sus hijos y, en consecuencia de eso, ellas introdujeron nuevos alimentos antes del sexto mes de vida del niño.

Descriptor: Lactancia materna. Salud del niño. Enfermería.

Introduction

The World Health Organization (WHO) recommends Exclusive Breastfeeding (EBF) until the child is six months old. This is very relevant to ensure adequate growth and psychological and motor development, considering the child's nutritional and immunological needs, and to avoid more financial expenses at the household⁽¹⁾.

Breastfeeding is defined as a child being fed breast milk, whether direct or pumped. In exclusive breastfeeding, meanwhile, the child is deprived of other liquid and solid foods, except for drops of syrups. Breastfeeding can also be predominant, complemented and, also, mixed or partial⁽²⁾.

Thus, breastfeeding establishes an affective and unique relationship between the mother and child, and provides an adequate source of nutrients and antibodies that confer protection and immunity to the infant. Notwithstanding, a woman's decision to breastfeed is intertwined with her life story and the meaning she attributes to this act, which may be influenced by emotional, social, economic, and cultural aspects⁽³⁾.

It is worthy of note that beginning complementary feeding before the child's sixth month of age is related, among others, to increased gastrointestinal infections and to a greater risk for allergies due to physiological immaturity. The reason for this is the reduction in the immunity conferred by breast milk and the ingestion of contaminated food and water. Therefore, it is at this stage that the child is more prone to diarrhea,

which can lead to malnutrition and to a compromised immune system⁽¹⁾.

Thus, an increase in early weaning is a public health issue that hinders the child's health and development, especially among populations with low socioeconomic conditions, considering the growing number of mothers opting for other foods in lieu of breast milk⁽⁴⁾.

WHO data show that only 34.8 percent of the world's children aged up to six months got EBF in 2010. Studies show that breastfeeding soon after birth can reduce neonatal mortality by 22 percent in developing countries. In Brazil, of the total deaths of children aged less than a year, 69.3 percent occurred in the neonatal period, while 52.6 percent in the first week of life⁽⁵⁾.

With a view to raising the prevalence of breastfeeding, improving the mother-child interaction, and to promoting cultural change insofar as the use of pacifiers, baby bottles, and processed milk are concerned, the WHO, together with the United Nations Children's Fund (Unicef), created the "Baby-Friendly Hospital Initiative" (BFHI). This is a set of goals called "Ten steps to successful breastfeeding," which is to be followed by hospitals in the prenatal, birth, and postpartum periods⁽⁶⁾. Brazil currently has 322 hospitals accredited under the BFHI, which corresponds to a coverage of 28 percent of the births in the country⁽⁷⁾.

Thus, nurses stand out for actively participating in promoting the breastfeeding of infants and for instructing mothers about the importance of this act, from the prenatal to postpartum periods, as well as for informing them

about including complementary foods at the appropriate time⁽⁸⁾.

Therefore, the study aimed to characterize habits related to breastfeeding children aged fewer than five years.

Method

This is a cross-sectional descriptive study with a quantitative approach. The study's population consisted of mothers of children of under five years of age living in the city of Redenção, which is part of the Maciço de Baturité region, located 65 km from Fortaleza, Ceará, Brazil. The survey was carried out in eight Primary Health Care Units (PHCU) in urban and rural areas.

A sample was calculated for infinite populations considering the mothers of children of under five years of age, which is recommended in situations where the population is not known with accuracy⁽⁹⁾, considering that the actual number of mothers of children under the age of five residing at the study area is unknown.

In addition, phenomenon prevalence was set at 50 percent because the percentage of maternal self-efficacy in the place where the study is performed was not yet known. Furthermore, a 5-percent sample error and the $Z = 1.96$ constant were considered for this calculation. A sample of 385 mothers was thus reached, and they were invited to participate in the study at the moment they arrived at the unit for care.

The following inclusion criteria were considered for this purpose: Mothers who had children aged fewer than five years and who were being monitored by the PHCU. The exclusion criterion was: Mothers with difficulties and restrictions that rendered it impossible for them to understand the instruments used, such as mothers with hearing, visual, and mental impairments.

The data were collected from August to October 2015 through an interview carried out after the presentation and signing of the

Free and Informed Consent Term (FICT); such interview was done in a PHCU room that afforded privacy to the participants. The instrument used addressed socio-demographic variables such as age, schooling, housing, family income, and other breastfeeding-related matters involving exclusive breastfeeding time and breastfeeding time, among others. Although sampling was done among 385 mothers, there were not complete samples for some of the variables, since only the number of mothers responding to these items was considered.

The data were organized and analyzed using the IBM SPSS *Statistics* program (version 20.0) through descriptive statistics using absolute and relative data, as well as central trend and dispersion measures. To meet Resolution No. 466/12, the study was approved by the University of International Integration of the Afro-Brazilian Lusophony (Unilab) Research Ethics Committee, as per Opinion No. 1.140.095.

Results

The data featured in Table 1 show that most of the mothers resided in urban areas (55.8%), and their ages ranged from 13 to 49 years, with a mean of 27.55 years ($SD = \pm 7.2$). The most prevalent age group was that between 19 and 29 years of age (56.7%). Insofar as marital status is concerned, married mothers prevailed (32.0%) compared to single mothers (23.2%). The main maternal occupation reported was that of housewife (48.6%). Regarding schooling time, most of the sample had gone to school for 1 to 4 years (38.1%), and the mean was 7.5 years ($SD = \pm 4.6$). In addition, 68.4 percent of the mothers reported supporting their families with a *per capita* income of up to R\$ 197, averaging R\$ 210 ($SD \pm R\$ 216$).

Regarding the children, females prevailed (50.6%); the prevalent age group of the children of the interviewed mothers was 1 to 3 years incomplete (39.2%), followed by children under one year (34.3%) and finally, three to five years

Table 1 – Distribution of mothers of children aged fewer than five years based on household, age, marital status, education, occupation, income, and the sex of the child. Redenção, CE, Brazil, 2015 (n = 385)

Variable	N	%	Mean (SD)
Housing area (n = 385)			
Urban	215	55.8	
Rural	170	44.2	
Age group (n = 385)			
			27.55 (± 7.2)
13–18	28	7.3	
19–29	218	56.6	
30–39	109	28.3	
40–49	28	7.3	
Marital status (n = 384)			
Union by mutual consent	164	42.7	
Married	123	32	
Single	89	23.2	
Others	8	2.1	
Years of study (n = 383)			
			7.5 (± 4.6)
1–4	146	38.1	
5–8	67	17.5	
9–12	128	33.4	
≥ 13	42	11.0	
Maternal occupation (n = 379)			
Housewife	187	48.6	
Student	26	6.9	
Saleswoman	11	2.9	
Seamstress	8	2.1	
Self-employed	9	2.4	
Others	138	36.4	
Family income per capita in minimum wages (n = 377)*			
			210 (± 216)
0–¼ minimum wage	258	68.4	
¼–½ minimum wage	86	22.8	
½–1 minimum wage	28	7.4	
≥ 1 minimum wage	5	1.3	
Number of people residing at the household (n = 383)			
			4.3 (± 1.4)
2–3	126	32.9	
4–5	194	50.7	
6–10	63	16.4	
Sex of the child (n = 385)			
Female	195	50.6	
Male	190	49.4	
Age of the child (n = 385)			
			22 months (16 months)
< 1 year	132	34.3	
1 to 3 incomplete	151	39.2	
3 to 5	102	26.5	
The child studies (n = 383)			
Yes	99	25.8	
No	186	48.6	
Never studied	98	25.6	

* Minimum wage in the year of the study: R\$ 788.00.

(26.5%) of age. As for schooling, children not attending school (48.6%) prevailed, being that they were not at school age, followed by children attending school (25.8%), and ending with those who did not attend school (25.6%).

Table 2 shows the main results in child care, health, and the provision of breastfeeding (BF). The study found that most children whose mothers participated in the study had no disease (89.6%) and were not born prematurely (92.2%).

It was found that 96.6% of the women breastfed their children, and 189 (50.9%) mothers breastfed for more than six months. However, also noticeable was the considerable

number of women who breastfed for less than the recommended 6-month period (40.7%).

A total of 346 (91.8%) mothers breastfed, and the most recurrent periods were, respectively, fewer than or equal to 4 months (57.3%) and 6 months (30.2%).

Most mothers said they did not use pacifiers to calm their children down (42.1%); however, 61.7 percent used a bottle to feed them. It is pointed out that most mothers discarded leftover bottle contents (86.3%). Most of the interviewees get help from third parties in taking care of the child (67.5%).

Table 2 – Child care, health, and breastfeeding conditions. Redenção, CE, Brazil, 2015 (n=385)

Variable	N	%
Child has some disease (n = 384)		
Yes	40	10.4
No	344	89.6
Child prematurity (n = 383)		
Yes	30	7.8
No	353	92.2
Breastfeeding (n = 385)		
Yes	372	96.6
No	13	3.4
Time of breastfeeding (n = 371)		
< 6 months	151	40.7
6 months	31	8.4
> 6 months	189	50.9
Exclusive breastfeeding (n = 377)		
Yes	346	91.8
No	31	8.2
Exclusive breastfeeding time (n = 344)		
≤ 4 months	197	57.3
5 months	24	7.0
6 months	104	30.2
> 6 months	19	5.5
Use of a pacifier (n = 382)		
Yes	161	42.1
No	221	57.9
Use of bottle for feeding the child (n = 381)		
Yes	235	61.7
No	146	38.3
Destination of leftover bottle contents (n = 233)		
Discards	201	86.3
Gives leftovers to third parties	20	8.6
Stores at room temperature to give to the child	7	3
Stores in the refrigerator to give to the child	5	2.1
Gets help from third parties to care for the child (n = 385)		
Yes	260	67.5
No	125	32.5

Discussion

Maternal age and the level of education are characteristics often associated with early weaning. Studies have confirmed that children of adolescent mothers were breastfed for less time compared to those of adult mothers, 49.2 percent and 66.0 percent, respectively⁽¹⁰⁾. Poor knowledge about breastfeeding is concerning when it comes to adolescent mothers, since they are unaware of the importance of breastfeeding⁽¹¹⁾. Thus, the higher the mothers' educational level, the longer they tend to breastfeed⁽⁶⁾.

The results show that most mothers of children aged fewer than 5 years lived with a partner, being married (32%) or in a consensual union (42.7%). Outreach should not be only for woman, rather for the core family as well, because many men are happy to support breastfeeding. However, some of them have negative behaviors and, thus, interfere with the practice. Such behaviors include anxiety, jealousy, rejection, sexual difficulty, and these reactions may be detrimental to the duration of breastfeeding, since the woman starts feeling alone, unsupported by their partners⁽⁴⁾.

Regarding maternal occupation, 48.6 percent of the mothers were housewives. This can be considered as a protection factor for EBF, since when compared to women who work outside of the home, they tend to worry about the child's adaptation, so they start offering the bottle early on⁽¹¹⁾.

Such statements were also found in a study carried out in a city in the northwestern region of the state of Paraná, which showed that mothers cannot maintain EBF because they need to return to their jobs⁽⁸⁾. However, studies show that EBF does not depend on maternal occupation, since, to the authors, the most determining factor is the number of hours worked and the multiple work days, and the greatest early weaning rate is among mothers who work more than 20 hours per week⁽¹²⁾.

Among the mothers participating in this study, 68.4 percent had a *per capita* income of less than a minimum wage. Studies already

indicate that family income may influence the duration of breastfeeding, since mothers with low economic conditions residing in rural areas are believed to breastfeed more, while women from higher economic classes have lower rates of breastfeeding⁽¹²⁾. EBF is essential especially for low-income families, since breast milk has the advantage of not incurring an additional cost in the family budget and provides protection to the infant by preventing illnesses and avoiding possible expenses with hospitalization and medications⁽¹⁰⁾.

Predominant in this study were families living with 4–5 residents in the same household, at 50.7 percent. The positive influence of the number of people residing in the same household is evident, since the amount of people in the family may influence and encourage BF due to the influence of verbal persuasion⁽¹¹⁾.

The Pan American Health Organization (PAHO) points out that EBF significantly decreases infant mortality caused by common childhood illnesses, such as diarrhea and pneumonia, and aids in recovering from these diseases⁽¹⁰⁾.

Of the children in the present study, only 7.8% were born prematurely. Studies have shown that this factor is not considered a risk for EBF. Breastfeeding during the hospitalization of preterm infants is encouraged and practiced in most services. A study of newborns with gestational ages of less than 37 weeks admitted to neonatal units in the northeast showed that 69.4% of newborns were discharged with exclusive breastfeeding⁽¹³⁾.

Although 91.8% of the interviewed mothers reported having offered EBF, the study pointed out that only 5.5 percent of them provided EBF until the child turned six months old, and 57.3 percent initiated complementary feeding before the age of four months. These data are similar to those of the study carried out in the city of Picos (PI), showing that 57.8 percent of the mothers provided EBF, and 31.1 percent of the children started complementary feeding before the fourth month of age⁽¹⁰⁾.

Breastfeeding is the single strategy that most prevents infant deaths and promotes the

physical, mental, and psychological health of the child and of the woman who breastfeed⁽¹⁴⁾. Although EBF duration increased between 1999 and 2008, from 23.4 days to 54.1 days, respectively, it is still considerably below the WHO target of 180 days⁽⁶⁾.

The results of this study indicate that 42.1 percent and 61.7 percent of the children used pacifiers and got bottle feeding, respectively. It is known that the use of pacifiers and bottles can negatively influence the practice of breastfeeding, and may also pose a risk of contamination to infants if utensil sanitation is not adequately addressed⁽⁴⁾.

Of the mothers interviewed, 67.5 percent reported getting help from family members in caring for their children. The woman's decision to breastfeed is intertwined with her life history and the meaning she attributes to this act. Thus, this personal choice may be influenced by emotional, social, cultural, and economic aspects. Breastfeeding is a matter of taking risks or ensuring benefits for the mother, child, and family, and it is determined by the interactions that occur during this experience of the nursing mother⁽³⁾, thus maternal empowerment with regard to the maintenance of breastfeeding is relevant.

Limiting factors of this research project include the fact that it used convenience sampling to obtain the required number of mothers and that it consists of a single-center study.

Conclusion

It was found that a considerable number of mothers weaned their children early and, as a consequence, introduced new foods before the child turned sixth month old.

Thus, it is necessary to implement new public policies and adjust existing ones to change the reality of maternal and child health, valuing aspects related to awareness about the importance of exclusive breastfeeding.

It is also essential that interventions such as health education about breastfeeding be carried out from the gestational period so that mothers

can gain knowledge about breastfeeding management and understand its importance.

Thus, implementing educational actions for professional nurses is imperative, since nurses are present in all the moments experienced by the woman, from gestation to child follow-up at the PHCU.

Finally, it should be pointed out that the results of this study may contribute to the nursing practice, since, based on these findings, health professionals, in particular nurses, can direct their instructions and interventions aiming to promote exclusive maternal breastfeeding for six months and, consequently, improve the child's health.

Collaborations

1. design, project, analysis and interpretation of the data: Jallyne Bezerra Colares e Emanuella Silva Joventino.

2. article writing and critical review of the intellectual content: Jallyne Bezerra Colares e Suelen Alves Sousa.

3. final approval of the version to be published: Rhaiany Kelly Lopes de Oliveira, Brena Shellem Bessa de Oliveira, Francisca Mayra Sousa Melo e Emanuella Silva Joventino.

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