

Assessment of Mother's Knowledge toward Breastfeeding at AL-Najaf City

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Abstract- Background: Breastfeeding is an important source of infant's nutrition in the first six months of their life. Breast milk is considered the first vaccine to infants, contains antibodies providing immunologic protection against death from infectious diseases.

Objective: to assess mother's knowledge toward breastfeeding, to find out relationship between mother's knowledge toward breastfeeding and their demographic data.

Material and methods: Across-sectional descriptive study is carried out in (6) primary health care centers at AL-Najaf city, from November 1st, 2015 until July, 21th, 2016. A non-probability (purposive sample) from 150 lactating mother.

Results: The study results reveal there is a significant relationship between mother's knowledge about breastfeeding with mother's age, method of delivery, educational status of the mother and husband.

Conclusion and Recommendation: Majority of the studied mothers have good knowledge about breastfeeding. The study recommends that educational programs for pregnant women and mothers to increase their knowledge and interest about breastfeeding; encourage mothers for exclusive breastfeeding within first six months of infant's life.

Index Terms- Mothers, Knowledge, Breastfeeding.

I. INTRODUCTION

World Health Organization (WHO) considered that breastfeeding as important source of nutrition for infants in the first 6 months of life, and emphasized on mothers to practice breastfeeding as an only source of feeding. Between 6 months and 2 years of child age, suggested that mothers can use supplemental food to feed their children along with breastfeeding⁽¹⁾.

Breast milk is one of the healthiest methods of infant's feeding and has various benefits for mother and children. It contains nutrients which provide the best nutritional combination for the child at least up to 6 months. Breast milk also has a special importance due to it contains known materials especially essential fatty acids for brain growth and nerves development⁽²⁾.⁽³⁾ ⁽⁴⁾.

Islam clearly emphasizes on breastfeeding until a child is two years of age as mentioned in the Holy Qur'an "The mothers shall give suck to their offspring for two whole years, for him who desires to complete the term"⁽⁵⁾.

Beneficial effects of breastfeeding are determined by many factors. These factors are: initiation, duration, and the age at

which the child is weaned⁽⁶⁾. WHO recommended that the breastfeeding should be initiated within the first hour of birth in case there is no any medical problems that prevent it, because colostrum has contain high in protein, fat-soluble vitamins and antibodies that protect the infant from bacterial and viral illnesses⁽²⁾.

A human baby is susceptible to infectious diseases due to the immaturity of immune system as well as of the major organs, according to that, it needs the additional protection of the bioactive factors in breast milk that strengthen host defense mechanisms against infection and other foreign agents and improve the immature immunologic system of the neonate⁽⁷⁾. According to World Health Organization, 220,000 babies could be saved every year if they were initially breastfeeding within the first hour and exclusively continuing breastfeeding for 6 months, and breastfeeding at appropriate age till the age of 2 years⁽¹⁾.

Breastfeeding initiation rate in Iraq, distributed in 2006 from 25.1% to 43% in 2011. But representing significantly increased and will remain very insufficient to ensure good initial in life for all Iraqi children. Actually, that almost six children of ten do not receive breast milk in the first hour of their life. In Erbil city, a published research in 2010 showed that 17.5% of mother's aware breastfeeding should be started during the first hour after birth⁽⁸⁾.

In Iraq, the Ministry of Health was reported that the prevalence of breastfeeding for infants within age six months was 41% in 2014, whereas in 2013 was 44%. Indeed, the report show that the prevalence of breastfeeding for infants within age six months in AL-Najaf city was 25% in 2015 while in 2014 was 37%. There were wide variations between governorates percentages of children who are exclusively breastfed. The percentage of adequately breastfed infants different between Najaf and Karbala (37% and 59 %) respectively⁽⁹⁾.

Objectives of the study:

This study aimed to assess mother's knowledge toward breastfeeding, to find out the relationship between mother's knowledge toward breastfeeding and their demographic data.

METHODOLOGY:

Across-sectional descriptive study is carried out in (6) primary health care centers at AL-Najaf city, from November 1st, 2015 until July, 21th, 2016. A formal agreement was acquired from Ministry of Planning/Central Council for statistic. Also an official permission obtained from Al-Najaf Al-Ashraf Health Directorate/ Northern and southern sectors of AL-Najaf City for getting sample from primary health care centers. A non-probability (purposive sample) of 150 lactating mothers were

selected and the criteria of the sample are: Mothers registered in primary health care centers and lived in al-Najaf city. All mothers were Iraqi Nationality. Babies were free from any congenital anomalies. Lactating mothers should have children within 2 years age. The questionnaire format consisted from (2) parts:

Part 1: Socio demographic data:

This part consists from four sections categorized as:

Section 1: Mother's demographic data:

This includes (age, education, occupation, type and place of delivery for recent child) and a question regarding resources of breastfeeding education there or not.

Section 2: Husband's demographic data:

This includes (education and occupation).

Section 3: Infant's demographic data:

This includes (age and gender).

Section 4: Socio-economic Status:

Socio-economic status scale obtained after the calculation of socioeconomic information about mother's occupation and education; husband occupation and education; crowding index, family type and family properties (house expenses), type of housing, household asset, possession of a car & other house excess). The calculated score help in classified the family level of socioeconomic as high or moderate or low level. These levels represented as following: high SES (80-100), middle SES (60-79), and low SES (59 and less).

Part 2: Mother's Knowledge about Breastfeeding: This part of the questionnaire is included 8 items that clarify mother's knowledge regarding breastfeeding which measures by multiple choices question.

The knowledge of mothers toward breastfeeding questionnaire items were rated and scored according to the following patterns:

a) Multiple choice questions used for rating the knowledge items.

The scoring is as following: (2) for correct answer, (1) for incorrect answer.

Statistical Analysis:

The Statistical Package SPSS (Statistical Package for Social Science) version (20) and Microsoft Excel application was used for data processing and statistical analysis. Data analyzed through the application of two statistical approaches. **A descriptive data analysis** includes: a- Tables (Frequencies, Percentages, and Mean of scores), b- Cutoff point (0.66), c- Statistical figure (Bar and Pie Charts) and d- Pearson's Correlation Coefficients (Reliability), and **Inferential Data Analysis includes** a- Chi-Square test.

II. RESULTS

Table 1: Socio-Demographic Characteristics of the Studied Families.

Socio-Demographic data	Rating and intervals	Frequency	Percent
Mother's age (Years)	≤ 20	22	14.6
	21 - 25	41	27.3
	26 - 30	46	30.7
	31 - 35	28	18.7
	36 and above	13	8.7
Mother's education	Illiterate	24	16.0
	Able to read and write	22	14.7
	Primary school graduated	43	28.7
	Intermediate school graduated	29	19.3
	Secondary school graduated	12	8.0
	Institute graduated	8	5.3
	College graduated	11	7.3
	Postgraduate	1	.7
Mother's occupation	High professional and managerial jobs	3	2.0
	Lower professional jobs	6	4.0
	Unskilled workers	141	94.0
Husband's education	Illiterate	17	11.3
	Able to read and write	21	14.0
	Primary school graduated	33	22.0
	Intermediate school graduated	32	21.3

	Secondary school graduated	14	9.3
	Institute graduated	8	5.3
	College graduated	25	16.7
Husband's occupation	Lower professional jobs	53	35.3
	Unskilled workers	97	64.7
Type of family	Nuclear Family	60	40.0
	Extended Family	90	60.0
Method of delivery	Normal delivery	111	74.0
	Cesarean sections	39	26.0
Place of delivery	Home (midwife)	22	14.7
	Hospital	128	85.3
Socio-economic status	Low	62	41.3
	Moderate	81	54.0
	High	7	4.7
Infant's age (Months)	≤ 5	79	52.7
	5 - 10	34	22.7
	10 - 15	18	12.0
	15 and above	19	12.6
Infant's gender	Male	90	60.0
	Female	60	40.0
Total		150	100.0

Table (1) shows that the socio-demographic characteristics of the studied families. The majority of study sample are (30.7%) within age group (26-30) years old. Concerning the mother's occupation, the study indicates that majority of mothers (28.7%) graduated from primary school. Regarding to mother's occupation, (94%) of them housewife. Concerning husband's education, (22%) of them was graduated from primary school, as well as the husband's occupation, (64.7%) are unskilled workers.

Regarding to family type, (60%) of them from extended families. In regard to method of delivery, (74%) are gives birth by normal delivery. Concerning to the place of delivery (85.3%) of mothers have given birth in the hospital. Regarding to socio-economic status, the majority of the study sample (54%) of them are from moderate socio-economic status. Concerning the infant's age, higher percentage of infants are within age ≤ 5 months, as well as the infant's gender, (60%) of them are males.

Table 2: Sources of mother education about breastfeeding

Items	Rating and intervals	Frequency	Percent
Are you receiving education about breastfeeding?	Yes	106	70.6
	No	44	29.4
Total		150	100.0
Sources of education	None	44	29.3
	Physician	8	5.3
	Health Workers	5	3.3
	Family	70	46.7
	physician, and Health Worker	4	2.7
	Physician, and Family	2	1.3
	Family, and Health Worker	5	3.3
	Family, Mass Media	4	2.7
Mass Media	8	5.3	
Total		150	100.0

Table (2) reveals that the (70.6 %) of mothers receive **education** about breastfeeding. The family is the main source of **education** about breastfeeding.

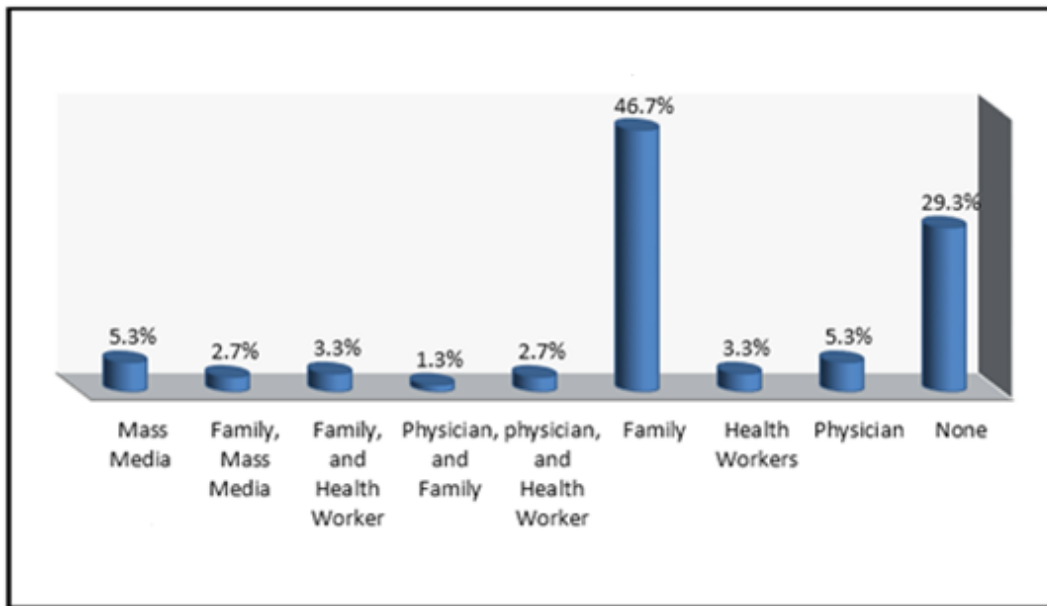


Figure 1: Distribution the sources of education about breastfeeding.

Table 3: Distribution the study sample responding to the knowledge items.

Items	Correct		Incorrect		M.S	Assessment
	Freq.	%	Freq.	%		
1. Ideal time for initiation of breastfeeding ½-1 hour after delivery.	69	46%	81	54%	1.46	Poor
2. Benefits of colostrum for newborn is considers the first vaccine for newborn.	127	85%	23	15%	1.85	Good
3. Meaning of exclusive breastfeeding is giving breast milk only for first 6 months.	36	24%	114	76%	1.24	Poor
4. Ideal duration of each breastfeeding two years	116	77%	34	23%	1.77	Good
5. Sign of effective breastfeeding for your baby will gain weight	102	68%	48	32%	1.68	Good
6. Benefit of breastfeeding to baby contains antibodies which protect a baby against infection	142	95%	8	5%	1.95	Good
7. Benefit of breastfeeding to mother is decrease incidence of breast and ovarian cancer	96	64%	54	36%	1.64	Good
8. Frequent breastfeeding is increases breast milk production.	113	75%	37	25%	1.75	Good

(Mean of score < 1.5 poor, Mean of score \geq 1.5 Good).

Table (3) shows that the majority of mother's responses to the knowledge items about breastfeeding are good to all items, except the items as numbered: (1 and 3) their responses are poor.

Table 4: Distribution the overall assessment of mother's knowledge about breastfeeding

Main Domain	Incorrect		Correct		M.S	Assessment
	Freq.	%	Freq.	%		
Overall Mother's Knowledge	44	29 %	106	71 %	1.66	Good

N(150), poor (Mean of score < 1.5), Good (Mean of score ≥ 1.5).

Table (4) shows that the overall assessment of mother's knowledge about breastfeeding is good.

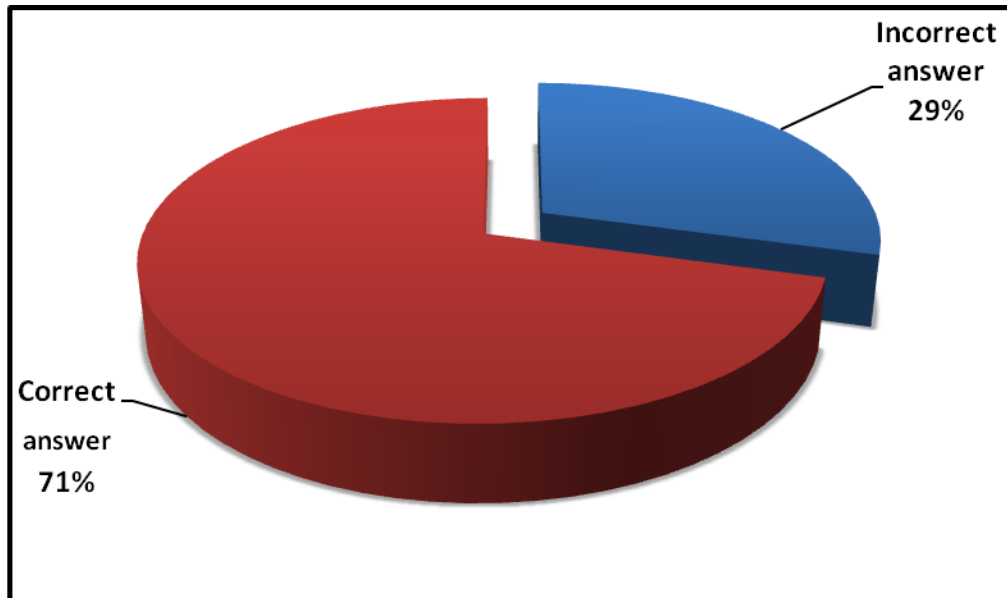


Figure 2: Distribution the study sample according to overall assessment of mother's knowledge about breastfeeding.

Table 5: Relationship between mother's knowledge about breastfeeding and their demographic data

Demographic data	Chi-square (X ²)	d.f	P-value (Sig.)
Mother's age (Years)	7.268	4	0.012 (S)
Mother's education	15.453	7	0.031 (S)
Mother's occupation	0.502	2	0.778 (NS)
Husband's education	16.820	6	0.010 (S)
Husband's occupation	1.771	1	0.183 (NS)
Type of family	0.906	1	0.341 (NS)
Method of delivery	4.947	1	0.026 (S)
Place of delivery	0.077	1	0.782 (NS)
Socio-economic status	0.442	2	0.802 (NS)

Table (5) reveals that there is a significant relationship between mother's knowledge about breastfeeding and some their demographic data such as mother's age, level of education for mother and husband, method of delivery at (p-value > 0.05), while there is a non-significant relationship between mother's knowledge with remaining demographic data.

III. DISCUSSION

According to (Table1) in regards to age, the majority of study samples are within age-group (26-30) years old. This result is supported by Ayed, (2014), who reported that the age 26 years old is dominant age for the study sample⁽¹⁰⁾. Concerning mother's education, there is a highest percentage of study sample graduated from primary schools. This result is in agreement with

other studies Jha, (2015), in their studies found that the majority of the study subjects are primary school graduated that effects on knowledge of mothers about breastfeeding⁽¹¹⁾.

In regard to mother's occupation, the highest percentage of mother's is housewife. This result is supported with Al-Hreashy, *et al.*, (2008); Al-Anazi, *et al.*, (2013), stated that most of the study participants are housewives. So, the breastfeeding is one of housewives priorities due to their ability to devote sufficient time to their children^{(4), (12)}. According to husband educational level, the highest percentage of husband graduated from primary schools. This results supported by Shaker, *et al.*, (2014), reported that the highest percentage of husband's educational level are primary school graduated⁽⁸⁾.

Concerning the husband's occupation, the majority of them are unskilled workers (non-professional work). This result agrees with Ouchi, *et al.*, (2013), reported that there is a highest percentage of husband's occupation is non-professional work. Regarding to type of family, the highest percentage of the participant from extended family⁽¹³⁾. This result is supported with Hassan, (2015), who reported that the highest percentage of participant from extended family⁽¹⁴⁾.

Regarding to method of delivery, the majority of study sample gives birth by normal delivery. This result agrees with Abu Shosha, (2015), who stated that the majority of mothers gave birth by normal delivery⁽¹⁵⁾. That means the mothers have given birth by normal delivery are more likely to breastfeed than those who have given birth by caesarean section. Concerning the place of delivery, the present study indicates that majority of mothers given birth in the hospital. This result approved with Ravi, *et al.*, (2015), they mentioned that highest percentage of mothers have given birth⁽¹⁶⁾.

Regarding to socio-economic status, the majority of study sample from moderate socio-economic status. This result is supported by Shommo & Al-Shubrumi, (2014), stated that the most of study sample are with moderate socio-economic status⁽¹⁷⁾. According to age of children, the study result indicates that the highest percentage of children age with ≤ 5 months. This result is supported by Chatterjee and Saha, (2007), reported that the age of the child ≤ 5 months is the dominant age⁽¹⁸⁾. Concerning the child's gender, the result indicates that male infant has a highest percentage in mothers attending primary health care centers. This result comes along with Atrushi and Mahmood (2014), they mentioned that the dominant gender is male infant for mothers who attending primary health care centers⁽¹⁹⁾.

According to the results show in (Table 2 and Figure 1) the study indicates that the highest percentage of mothers received education about breastfeeding. This result approved with the result done by Kadhum, (2013), who stated that the majority of study sample received education about breastfeeding⁽²⁰⁾.

Mothers with low educational levels make them incapable to understand and comprehend the educational information in pamphlet, poster and advanced media. So, they need to be educated about breastfeeding directly from family, friends or health workers. This means that the family plays an important role for successful breastfeeding.

The study results reveal that the family is the main source of mother's education about breastfeeding. This is similar to the reports of Dallak, *et al.*, (2016); mentioned that majority of the

study sample received education toward breastfeeding from their families⁽²¹⁾.

In (Table 3) shows that mothers have efficient knowledge regarding to the items: (benefits of colostrum for newborn is considers first vaccine for newborn; ideal duration of each breastfeeding is two years; sign of effective breastfeeding for baby will gain weight; benefit of breastfeeding to baby contains antibodies which protect a baby against infection; benefit of breastfeeding to mother is to decrease the incidence of breast and ovarian cancer; frequent breastfeeding is increases breast milk production). While, mothers have deficient knowledge concerning the items: (ideal time of breastfeeding initiation is 1/2-1 hour after delivery and meaning of exclusive breastfeeding is giving breast milk only for first six months).

The study results (Table 4) reveal that the overall assessment of mother's knowledge about breastfeeding is good.

These results mean that the involve mothers of this study have good knowledge about breastfeeding. This result is agreement with the study done by Mbada, *et al.*, (2013), they reported that the overall assessment of mother's knowledge about breastfeeding is good⁽²²⁾.

In regards to the result in (Table 5) indicates that there is a significant relationship between mother's knowledge about breastfeeding with mother's age, educational status of the mother and husband, and method of delivery. While, there is a non-significant relationship between remaining demographic variables including occupational status of the mother and husband, type of family, place of delivery and socio-economic status.

AL-Azzawi, *et al.*, (2010), they stated that a significant relationship between mother's age and knowledge about breastfeeding⁽³⁾. This result match with the result of the study done by Al-Hially, (2010), who reported that there is a significant relationship between mother's education and knowledge about breastfeeding. This might be that the educated mother has better knowledge about breastfeeding more than uneducated mother⁽²³⁾.

Tamiru and Mohammed, (2013), reported that there is a significant relationship between husband's education and mother's knowledge about breastfeeding⁽²⁴⁾. This result agree with Hanafi, *et al.*, (2014), indicate that there is a significant correlation between mother's knowledge and method of delivery⁽²⁵⁾. Maryam, *et al.*, (2014); Mahmud, (2011); Al-Asadi, (2011), all of them stated that a non-significant differences among mother's occupation and knowledge about breastfeeding^{(26), (27), (28)}. This result are supported by Pushpa and Chowti, (2012), mentions that there is a non-significant relationship between place of delivery and mother's knowledge about breastfeeding⁽²⁹⁾.

Ghaffari, *et al.*, (2007), revealed that a non-significant relationship among socioeconomic status and mother's knowledge about breastfeeding⁽³⁰⁾. This result comes along with Ekambaram, *et al.*, (2010), reported that a non-significant relationship between mother's knowledge and type of family⁽³¹⁾. This result is agree with Ayed, (2014), stated that a non-significant relationship between husband's occupation and mother's knowledge about breastfeeding⁽¹⁰⁾.

IV. CONCLUSION

According to the study findings and discussion, the study concluded the following: The family is the main source of mother's education regarding breastfeeding. Majority of the studied mothers have good knowledge about breastfeeding. There is a significant relationship between mother's (age, education, type of delivery) and husband's education with mother's knowledge about breastfeeding.

V. RECOMMENDATION

According to present results and conclusions, the researcher recommends that:

- 1- Educational programs for pregnant women and mothers to increase their knowledge and interest about breastfeeding.
- 2- Encouraging mothers for exclusive breastfeeding within first six months of infant's life.
- 3- Promoting mother's knowledge about the importance of breastfeeding in assessing domains (ideal time for initiation of breastfeeding and meaning of exclusive breastfeeding).
- 4- Emphasizing audio-visual mass media programs about breastfeeding.

REFERENCES

[1] World Health Organization: Nutrition. Retrieved August 22, 2013, http://www.who.int/nutrition/topics/infantfeeding_recommendation/en.

[2] Hoseini, B.L.; Vakili, R.; Khakshour, A.; Saeidi, M.; Zarif, B.; Nateghi, S.: Maternal knowledge and attitude toward exclusive breast milk feeding in the first 6 months of infant in Mashhad, *International Journal of Pediatrics*, 2014, 2(1), p.p.: 63-69.

[3] AL-Azzawi, S.; Shaker, N.; Hussein, K.: Assessment of Breastfeeding Knowledge among Mothers in Erbil City, 2010, *Zanco J. Med. Sci.*, (Special issue 2), p.p.: 1- 6.

[4] Al-Hreashy, F.; Tamim, H.; Al-Baz, N.; AL-Kharj, N.; AL-Amer, A.; AL-Ajmi, H.; Eldemerdash, A.: Patterns of breastfeeding practice during the first 6 months of life in Saudi Arabia, *Saudi Med J*, 2008, 29(3), p.p.: 427-431.

[5] Holy Quran, Verse 233/ Sura Al-Baqara.

[6] Kommula, A. and Kommula, V.: knowledge, attitude and practices of breast feeding among mothers in a slum area of amalapuram, east Godavari district, and hrapradesh, *National Journal of Medical and Dental Research*, 2014, 2(3), p.p.: 15-17.

[7] Mehkari, S.; Zehra, N.; Yasin, H.; Rauf, A.; Ali Jaliwala, H.; Zehra, T.; Ehsan, M.; & Amin, H.: Breastfeeding and weaning: awareness and practices among female health providers working in a tertiary care hospital of karachi-pakistan, *International Journal of Women's Health and Reproduction Sciences*, 2014, 2(5), p.p.: 281-286.

[8] Shaker, N.; Hussein, K.; AL-Azzawi, S.: Knowledge, attitude and practices of mothers toward infant and young child feeding in primary health care centers, Erbil city, *Kufa Journal for Nursing Sciences*, 2014, 2(2), p.p.: 118 - 126.

[9] Republic of Iraq, Ministry of Health, Annual Report, 2015.

[10] Ayed, A.: Knowledge, attitude and practice regarding exclusive breastfeeding among mothers attending primary health care centers in Abha city, *International Journal of Medical Science and Public Health*, 2014, 3(11), p.p.: 1355- 1363.

[11] Jha, S.: Knowledge, Attitude and Practices (KAP) Regarding Breastfeeding: A Community based Cross Sectional Study from Rural Utrakhand, *Health line Journal*, 2015, 6(2), p.p.: 17-22.

[12] Al-Anazi, W.; Saied, H.; Mohamed, A.; Suliman, A.: Breastfeeding knowledge, Attitude and Barriers among Saudi Women in Riyadh, *Journal of Natural Sciences Research*, 2013, 3 (12), p.p.: 6-13.

[13] Ouchi, M.; Inoue, M.; Binns, C.; Katsuki, Y.: Japanese mothers' breastfeeding knowledge and attitudes assessed by the Iowa Infant Feeding Attitudes Scale, *Asia Pacific journal of clinical nutrition*, 2013, 22(2), p.p.: 261-265.

[14] Hassan, M.: Assessment of Feeding Patterns Children Under Two Years at Primary Health Care Centers, *Kufa Journal For Nursing Sciences*, 2015, 5(3), p.p.: 1-8.

[15] Abu Shosha, G.: The Influence of Infant's Characteristics on Breastfeeding Attitudes among Jordanian Mothers, *Open Journal of Nursing*, 2015, 5, p.p.: 295-302.

[16] Ravi, Y.; Alok, K.; Aditi, S.; Pooja, T.; Rajender, D.; & pallavi, S.: Knowledge, attitude and practice of mothers regarding early initiation of breast feeding in the obstetric wards of a tertiary care hospital of Rohtak city of India, *International Journal of Interdisciplinary and Multidisciplinary Studies*, 2015, 2(5), p.p.: 18-23.

[17] Shommo, S. and Al-Shubrumi, H.: Breastfeeding knowledge, attitude and practice among mothers in Hail district, northwestern Saudi Arabia, *Journal of Nursing and Health Science*, 2014, 3(1), p.p.: 49-56.

[18] Chatterjee, S. and Saha, S.: Infant Feeding and Nutritional Status of Under-Five Children Attending Immunization Clinic of A Medical College, *The Internet Journal of Nutrition and Wellness*, 2007, 5(1), p.p.: 1-9.

[19] Atrushi, A.; Mahmood, W.: Attitudes and Trends of Kurdish Mothers Towards Breast Feeding in the First Six Months of Age in Duhok, *Medical Journal of Babylon*, 2014, 11(2), p.p.: 259-265.

[20] Kadhum R.: Maternal knowledge & Attitude towards Breast Feeding in Najaf, *Kufa Journal for Nursing Sciences*, 2013, 3(3), p.p.: 114-118.

[21] Dallak, A.; Al-Rabeei, N.; Aljahmi, Y.: Breastfeeding Knowledge, Attitude, and Practices among Mothers Attending Health Centers in Sana'a City, *ARC Journal of Public Health and Community Medicine*, 2016, 1(2), p.p.: 9-17.

[22] Mbada, C.; Olowookere, A.; Faronbi, J.; Oyinlola-Aromolaran, F.; Faremi, F.; Ogundele, A.; Awotidebe, T.; Ojo, A.; Augustine, O.: Knowledge, attitude and techniques of breastfeeding among Nigerian mothers from a semi-urban community, *BMC Research Notes*, 2013, 6(552), p.p.: 1-8.

[23] Al-Hially, Y.: Assessment of mothers' knowledge about breast-feeding and determining predictors, *Tikrit Medical Journal*, 2010, 16(2), p.p.: 77-83.

[24] Tamiru, D. and Mohammed, S.: Maternal knowledge of optimal breastfeeding practices and associated factors in rural communities of Arba Minch Zuria, *International Journal of Nutrition and Food Sciences*, 2013, 2(3), p.p.: 122-129.

[25] Hanafi, I.; Shalaby, H.; Falatah, N.; El-Ammari, H.: Impact of health education on knowledge of, attitude to and practice of breastfeeding among women attending primary health care centers in Almadinah Almunawwarah Kingdom of Saudi Arabia: Controlled pre-post study. *Journal of Taibah University Medical Sciences*, 2014, 9(3), 187-193.

[26] Maryam, Z.; Moniralsadat, H.; Zohreh, K.; Banafsheh, M.; Amir S.: The Knowledge and Attitudes towards Breastfeeding of Iranian Mothers during the First Year after Delivery in 2013, *Macedonian Journal of Medical Sciences*, 2014, 7(4), p.p.: 635-639.

[27] Mahmud, N.: Knowledge of Breastfeeding: A descriptive study among mothers in Kirkuk Governorate, *Iraqi National Journal of Nursing Specialties*, 2011, 24(2), p.p.: 84-93.

[28] Al-Asadi, K.: Assessment of Mother's Knowledge about Newborn Breast-Feeding, *Kufa Journal for Nursing Sciences*, 2011, 1(1), p.p.: 1- 7.

[29] Puchna S and Chowti V : A study to assess the knowledge regarding breastfeeding in rural women. *Indian Journal of Maternal and Child Health*, 2012, 14(2), p.p.: 2-9.

[30] Ghaffari, V.; Vahidshahi, K.; Parviniejad, N.; Ghavanch, T.: Assessment of mothers' attitude toward exclusive breast feeding, *Sari Journal of Jahrom University of Medical Sciences*, 2007, 7(1), p.p.: 53-61.

[31] Ekambaram, M.; Bhat, B.; Vishnu, B.; Ahamed, A.: Knowledge, attitude and practice of breastfeeding among postnatal mothers, *Current Pediatric Research*, 2010, 14(2), p.p.: 119-124.

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