**Original Article**

## Factors Influencing the Practice of Exclusive Breastfeeding Among Nursing Mothers Attending Public Health Facilities in Ilorin Metropolis

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**ABSTRACT**

**Background:** Despite several efforts by UNICEF and WHO to promote EBF, the prevalence in Nigeria remains low. Although EBF is acknowledged as the most effective way to reduce infant morbidity and mortality, social and occupational factors continue to influence its usage.

**Objective:** This study assessed the variables influencing exclusive breastfeeding practices among nursing mothers attending public health facilities in Ilorin Metropolis, Kwara State.

**Methodology:** A descriptive cross-sectional study design was used to select 413 nursing mothers with children aged 0 to 24 months from public health facilities in Ilorin metropolis using a multistage sampling technique. A standardized self-administered questionnaire was used to gather data, and SPSS version 23 was used for analysis. Chi-square test and logistic regression analysis were performed at a 5% significance level, and descriptive statistics were employed.

**Results:** Although 94.9% of mothers were aware of exclusive breastfeeding, only 79.2% actually practiced it. EBF practice was substantially correlated with maternal employment level ( $p = 0.009$ ), cultural or religious views ( $p = 0.033$ ), and awareness and understanding of EBF ( $p = 0.001$ ).

**Conclusion:** Despite widespread awareness, exclusive breastfeeding practice is still low to its full potential. It is advised to provide workplace assistance, culturally responsive interventions, and enhanced health education.

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**Introduction**

Despite widespread promotion, exclusive breastfeeding (EBF) is still not at the recommended levels in Nigeria and around the world. Despite years of lobbying and shown advantages, rates remain low (Olabisi Oyelana *et al.*, 2020). Compared to older Mothers, younger women are less likely to exclusively breastfeed (Benova *et al.*, 2020). Because it can save

millions of deaths among children under five, raising EBF to six months is a top public health priority (Buckland *et al.*, 2020). Particularly in South Asia and Africa, non-exclusive breastfeeding is linked to poor health and high child mortality (Yimer *et al.*, 2021). Socioeconomic, demographic, obstetric, and medical factors all have an impact on EBF practices (Tsegaw SA *et al.*, 2021). Just 48% of babies under six months

old worldwide are exclusively breastfed (WHO, 2023). Although breastfeeding is widespread in Nigeria, EBF is still low at roughly 29% (Adamu *et al.*, 2022). The majority of newborns are not exclusively breastfed for six months, according to national reports (NPC & ICF, 2019). There are still obstacles to EBF, such as a lack of policies and assistance (Adebayo *et al.*, 2021). Breastfeeding policies are present in only 9% of workplaces (Ileyemi, 2023).

### Study Objectives

The general objective is to identify the factors influencing the practice of exclusive breastfeeding among nursing mothers attending public health facilities in Ilorin Metropolis.

### The Specific Objectives were:

To assess the level of awareness and knowledge of exclusive breastfeeding among nursing mothers attending public health facilities in selected LGAs

To determine the prevalence of exclusive breastfeeding among nursing mothers in the selected LGAs

To determine the socio-demographic characteristics of nursing mothers attending public health facilities in selected LGAs

To identify the barriers influencing nursing mothers' decisions regarding exclusive breastfeeding.

### Methodology

A descriptive cross-sectional study was carried out among nursing mothers attending public health facilities in Ilorin Metropolis, Kwara State.

### Study Area

Ilorin West, Ilorin East, and Ilorin South are the three local government areas of Ilorin Metropolis where the study was conducted. Health facilities, including primary health care centers was chosen.

### Study Population

The research population is made up of nursing women with children aged 0-24 years living in Ilorin, regardless of the location of delivery. However, the WHO's standards for the first six months of life were used to evaluate exclusive breastfeeding practices.

### Sample Size Determination

Fischer's method was used to determine the minimal sample size, which came out to be 375 respondents with an estimated EBF prevalence of 57.6%, a 95% confidence level, and a 5% margin of error. The total sample size was around 413 after accounting for a 10% non-response rate.

### Sample Technique

A multistage sampling technique was used. Health facilities within wards were chosen at random, wards were stratified, and participants were recruited from each facility using proportional random sampling.

### Instrument for Data Collection

A standardized, pre-tested questionnaire with questions on demographics, EBF awareness and knowledge, and barriers affecting breastfeeding behaviors was used to gather data. To administer the questionnaire, research assistants received training.

### Validity and Reliability

Pretesting and expert review were used to guarantee the reliability of the questionnaire; nevertheless, internal consistency testing was not carried out, which is recognized as a shortcoming.

### Data Analysis

SPSS version 23 was used to analyze the data. The characteristics of the respondents were summed together using descriptive statistics. While logistic regression analysis was utilized to find predictors of exclusive breastfeeding at a 5% level of significance, chi-square testing evaluated correlations between factors.

### Ethical Approval

The Kwara State Ministry of Health granted ethical approval (ERC/MOH/2025/02/388). Every participant gave their informed consent, and the study's confidentiality and anonymity were upheld.

### Results

The study identifies important variables that affect nursing Mothers in Ilorin Metropolis' exclusive breastfeeding practices. Healthcare access, cultural factors, awareness and behaviors, difficulties, and demographics are the five categories around which the conversation is organized.

### Socio-demographic Characteristics (n=413)

The majority of participants were young mothers aged 25-34 (62%), and 97% were married. The majority (92.7%) were Yoruba, and 92% practiced Islam. Education levels were relatively high, with 41.6% completing secondary school and 50.1% completing tertiary education. The majority of Mothers (81%) were self-employed, which may limit workplace nursing support. In terms of parity, 30.9% had one child, while 27.6% had two.

Awareness and knowledge of Exclusive Breastfeeding (n=413).

The result shows that awareness is proportionately high among respondents (94.9%), whereas practices of exclusive breastfeeding is 79.2%. 84.8% of the

respondents have received information on exclusive breastfeeding. 85.9% believes that exclusive breastfeeding has long term benefits, while 80.6% of the respondents believe that one of the perceived benefits of exclusive breastfeeding is to enhance growth.

Frequency Distribution of barriers influencing nursing mothers' decisions regarding exclusive breastfeeding (n = 413)

Exclusive breastfeeding is unaffected by culture or religion, according to the majority of mothers (94.2%), although few mentioned water-giving beliefs (3.6%). While proposals for mixed feeding were reported by few (4.6%), family influence was largely missing (93.7%). While some experienced pressure to give water (21.1%), the majority had no difficulties (73.1%). There was very little social pressure (96.1%) and a lot of workplace support (98.3%). Regular postnatal visits were lower (73.6%), although access to healthcare was great (99.0%). The majority found it extremely helpful (87.9%), got advice (88.6%), and recommended additional awareness initiatives (65.9%).

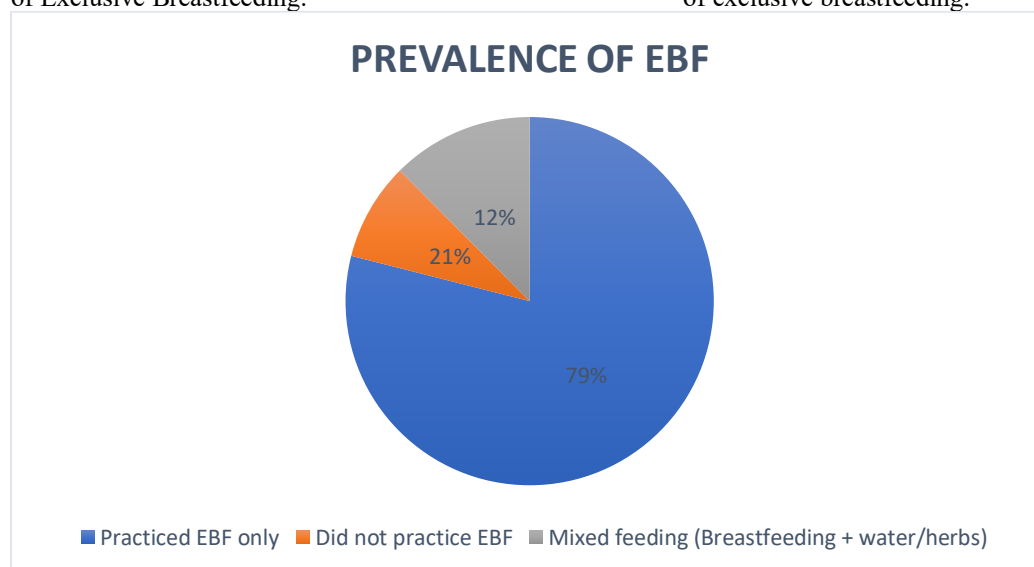
Association between Employment Status and Practice of Exclusive Breastfeeding.

The Chi-square analysis found that there was a statistically significant relationship between mothers employment status and exclusive breastfeeding practice ( $\chi^2 = 13.47$ ,  $df = 4$ ,  $p < 0.009$ ). This implies that mothers occupational status influences their decision to exclusively breastfeed their babies.

Association between Awareness and Knowledge of Exclusive Breastfeeding Benefits and Practice of Exclusive Breastfeeding

We reject the null hypothesis since the calculated  $\chi^2$  (65.1053) is greater than the critical value (3.841) and the p-value ( $<0.000$ ) is less than 0.05. There was a statistically significant association between awareness and knowledge of exclusive breastfeeding and the practice of exclusive breastfeeding.

Association between barriers influencing Exclusive Breastfeeding and Practice of Exclusive Breastfeeding According to this Chi-square analysis, cultural and religious beliefs were found to have a statistically significant relationship with EBF practice. The estimated  $\chi^2$  (4.5681) is more than the critical value (3.841), and the p-value (0.033) is less than 0.05, indicating a statistically significant relationship between cultural and religious beliefs and the practice of exclusive breastfeeding.



The prevalence of EBF among nursing mothers in Ilorin metropolis was 79%

## Discussion

The exclusive breastfeeding (EBF) practices of nursing women in Ilorin Metropolis were investigated. EBF awareness was high (94.9%), while actual practice was lower (79%), indicating a disconnect between behavior and knowledge. Suboptimal practices were caused by structural problems including missed postnatal visits and work-related difficulties, as well as cultural and familial reasons like administering water or herbs before six months. The

significance of continuing education was shown by the strong correlation between mothers' knowledge and EBF practice. Overall, cultural, familial, and professional factors continue to restrict complete adherence to EBF despite high awareness. The Public Health and Policy Implications emphasize the need for improved postnatal counseling services, culturally responsive health education, and workplace breastfeeding policies. Sustained exclusive breastfeeding practices could be improved by

strengthening maternity protection and employer assistance.

### Conclusion

Although awareness of EBF among nursing mothers was high, its practice remains low. Cultural belief, employment status and family influence continue to hinder optimum adherence to exclusive breastfeeding recommendations.

### Recommendation

Encourage culturally sensitive communities' education initiatives.

Strengthen workplace breastfeeding support policies

Improve follow-up and postpartum counseling services

Carry out long-term research to track interventions and match regional initiatives with national and international breastfeeding regulations

### Public Health Impact

In Ilorin Metropolis, encouraging exclusive breastfeeding can promote child development and growth, lower newborn morbidity and mortality, and help achieve Sustainable Development Goal 3.2, which is to halt avoidable under-five deaths. Maternal-child health outcomes and newborn survival will be improved by bolstering healthcare, education, and structural support.

### Conflict of Interest

The author declares no conflict of interest regarding the publication of this manuscript.

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