FACTORS INFLUENCING EARLY INITIATION OF BREAST FEEDING AMONG MOTHERS AT POST NATAL WARD, KABALE REGIONAL REFERRAL HOSPITAL

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DECLARATION

I, **MUGABI PATRICK,** hereby declare that except for references to the work of others, which have been cited out, this report entitled " **Factors influencing early initiation of breast feeding among mothers at post natal ward Kabale Regional Referral Hospital**" is the true result of my own research work. It is being submitted for the a ward of Diploma in Nursing by Uganda Nurses and Midwifery Examination Board. To the best of my knowledge it has never been submitted to any institution or examination board for any award.

Signature.....Date.....

MUGABI PATRICK

(RESEARCHER)

APPROVAL OF SUBMITION

SUPERVISORS`S APROVAL

This research report entitled "**Factors influencing early initiation of breast feeding among mothers at post natal ward Kabale Regional Referral Hospital"** has been developed under my guidance and supervision, and is being submitted with my approval.

Signature…….. Date ……/……/……

Mr OSORO ERICK

(Supervisor)

DEAN`S APROVAL

SIGNATURE…….DATE……/……./2017

MS. KABANYORO ANNET

Dedication

I dedicate this research to the my beloved daughter that is Daniella Nantale, my wife, my parents, family members , the staff of Kabale Regional Referral Hospital, colleagues at Kampala International University Western Campus School of Nursing most especially my class mates, my supervisor Mr. Erick Osoro.

Acknowledgement

Compiling this report has been a result of combined efforts and assistance from a number of individuals, institutions and God`s divine mercy. I express my sincere gratitude to all for the support and encouragement.

Special thanks to my Supervisor Mr. Erick Osoro whose intellectual and academic guidance enabled me to organize this presentable work out of this study. Your experience and expertise has made this research report possible.

I thank the dean of school of nursing, all my lecturers at Kampala International University School of Nursing sciences, from whom I have learnt much throughout my training in the field of Nursing both in class and practicals.

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Iam very much grateful to my friends and classmates for the unreserved guidance and constructive suggestions from the stage of proposal to report writing development up to this end.

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ABREVIATIONS

HMIS	Health Management Information System
UDHS	Uganda Demographic and Health Survey
WHO	World Health Organization
KRRH:	Kabale Regional Referral Hospital
UNMEB:	Uganda Nurses and Midwives Examination Board
UNICEF:	United Nations International Children's Education Fund

DEFINITION OF TERMS

Breast feeding. This is the act of feeding a baby with milk direct from human breasts

Early initiation of breast feeding. This is the introduction of feeding immediately after birth

Colostrum. This is the first and highly nutritious milk with protective properties produced after birth.

Weaning - is the process of gradually introducing an infant to what will be its adult diet and withdrawing the supply of its mother's milk.

Normal weaning practice. Start of weaning food at the completion of 5 months and beginning of age of 6 months.

Abstracts

Background:

Breastfeeding has been accepted as the most vital intervention for reducing infant mortality and ensuring optimal growth and development of children (WHO, 2015).

Methods:

A cross-sectional descriptive study with both quantitative and qualitative data collection techniques was used.

Results:

The study found out that post natal mothers had various factors including young age 78 (58.6%), marital status 91 (68.4%), education 52(39.1%), employment status 48 (36.1%), parity 52 (39.1%) and area of residence 67 (50.4%). All respondents 133 (100%) had ever heard about early initiation of breast feeding, most 43 (32.3%) had not initiated breast feeding early as recommended they initiated between 2 – 3 hours after birth, most 81 (60.9%) were not aware of the potential dangers of late initiation of breast feeding. Respondents did not face cultural factors as most 81 (60.9%) reported that their tribe viewed the use of colostrum as good.

Conclusion:

In conclusion, the study revealed that respondents faced various demographic, knowledge deficits as well as cultural factors which affected early initiation of breast feeding.

CHAPTER ONE

INTRODUCTION

1.0 Introduction

This chapter presents the background of the study, problem statement, purpose of the study, specific objectives, research questions and justification of the study as well as the conceptual framework of the study, as the researcher seeks to identify factors influencing early initiation of breast feeding among mothers at postnatal ward Kabale Regional Referral Hospital.

1.1 Background of the study

Breastfeeding has been accepted as the most vital intervention for reducing infant mortality, morbidity and ensuring optimal growth and development of children (WHO, 2015). Many infant deaths could be averted through optimal breastfeeding practices such as early initiation of breast feeding in the first 24 hours (Leon-Cava, Lutter, Ross and Martin, 2012).

Globally, early initiation of breast feeding has been found to be poor especially in developing countries which are more likely to have poor health care delivery systems. A study carried out in Mexico found out that only 39% of mothers ensure initiation of breast feeding and post natal mothers are not adequately sensitized and educated on the importance and benefits of immediate initiation of breast feeding after birth.

Okolo, Adewunmi and Okonji (2011) documented that the high infant mortality rate observed in most of the countries in sub Saharan African countries like Nigeria and Togo are partly attributable to practices such as the late initiation of breast feeding which ranges from 29% - 49% (Okolo et al, 2011). Poor initiation of breast feeding has also been found to be influenced by cultural beliefs and practices such as throwing away of colostrum, misperceptions that colostrum is dirty and will make the baby sick (Wen, Baur, Rissel, Alperstein and Simpson, 2009).

It is estimated that up to 56% of mothers in Uganda fail to effectively initiate breast feeding as recommended and only 48% of the mothers had received any advice on early initiation of breastfeeding during antenatal period **(**Tumwine et al, 2010).

Reviews of studies from developing countries show that infants who are not breastfed early are 6 to 10 times more likely to die in the first months of life than infants who are breastfed (Oddy, Scott, Binns and Graham, 2012). Therefore, the aim of this study is to identify the factors influencing early initiation of breast feeding among mothers at post natal ward, Kabale Regional Referral Hospital.

1.2 Problem Statement

Child survival is an ongoing public health priority in many countries.

Late initiation of exclusive breast feeding is a threat to babies in Uganda and according to Uganda Demographic and Health Survey (2011), only 49% of mothers initiate breast feeding early as recommended by health workers (UDHS, 2011), yet it

is recommended that all mothers should initiate breast feeding early unless there are health challenges.

According to Health Management Information System (HMIS, 2014) reports at Kabale Regional Referral Hospital, an average of 200 mothers deliver at the hospital every month, however, few mothers initiate breast feeding immediately as recommended by health workers yet poor and delayed initiation of breast feeding forces neonates to miss out on colostrum with all its protective properties,

Thereby greatly affecting the immunity of these infants as they are likely to suffer from hypoglycemia, develop infections such as diarrhea, pneumonia and many others. As well as early bonding between mother and child. It may also lead to missed opportunities to practice Kangaroo mother care if needed.

Ensuring early initiation of breast feeding of babies confers short-term and long-term benefits on both baby and mother including helping to protect the babies against a variety of acute and chronic disorders as well as overall infant mortality and morbidity. (Duong, Lee and Binns, 2013).

However, despite all the advantages and benefits of early initiation of breast feeding and despite the strong efforts by the Ugandan government and Ministry of Health through programs on radio, newspapers and hospitals which promote and encourage mothers to ensure initiation of breast feeding, many mothers fail to initiate breast feeding immediately after birth (Subbiah, 2007).

Therefore, if this problem is not solved, the researcher anticipates that infant morbidity and mortality in south western region will increase which will contribute to the National mortality rate which is currently 75/1000 live births according to Uganda Demographic Health Survey (UDHS), (2011). Hence the researcher found it necessary to find out the factors influencing early initiation of breast feeding among mothers at post natal ward KRRH, as no study had ever been carried out in Kabale to identify these factors.

1.3 Purpose of the study

To assess the factors influencing early initiation of breast feeding among mothers at post natal ward, Kabale Regional Referral Hospital, with the aim to reduce infant mortality rate in the country, improve the quality health of neonates in the community and prevent all complications associated with late initiation of breast feeding in the Hospital and design strategies to health educate about importance of early initiation of breast feeding.

1.4 Specific Objectives

1) To determine the socio-demographic factors influencing early initiation of breast feeding among post natal mothers at Kabale Regional Referral Hospital.

2) To assess the knowledge of post natal mothers regarding the importance of early initiation of breast feeding at Kabale Regional Referral Hospital.

3) To identify the cultural factors influencing early initiation of breast feeding among post natal mothers at Kabale Regional Referral Hospital.

1.5 Research Questions

1) What are the socio demographic factors influencing early initiation of breast feeding among post natal mothers at Kabale Regional Referral Hospital?
2) What is the knowledge of post natal mothers regarding the importance of early initiation of breast feeding at Kabale Regional Referral Hospital?
3) What are the cultural factors influencing early initiation of breast feeding among post natal mothers at Kabale Regional Referral Hospital?

1.6 Justification of the study

According to WHO (2015) policy on child health and survival, some of the key recommendations for improving health and outcomes of infants globally is through ensuring effective early initiation of breast feeding which improves survival rates of babies by 60%.

Child survival is an ongoing public health priority in many countries such as South Asia region, which includes eight countries - Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri-Lanka, Countries within the region had made significant progress towards reducing this problem as it was stated in Millennium Development Goal 4 (MDG 4) but still failing .

The research findings will also help the policy makers especially the Ministry of Health to find ways to curb the late initiation of breastfeeding and understand its associated complications on neonates.

To the administrators and hospital management, the results of the study will reveal the health facility related factors influencing early initiation of breast feeding among postnatal mothers which will provide room for the organization to develop strategies to improve it for the betterment of the entire health system.

Upon completion of the study, the researcher will have fulfilled the partial requirement for the award of a diploma in nursing.

The results of this research will help to reduce infant morbidity and mortality due to late initiation breast feeding if given a platform to disseminate the results and carry out health education to the community.

The results of this research will also help the health workers to realize their obligations and responsibility of ensuring early initiation of breast feeding among postnatal mothers.

The study findings will also add to the existing literature on the prevalence, factors influencing early initiation of breast feeding among postnatal mothers.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This chapter presents literature reviewed from relevant books and articles researched in relation with the specific objectives of the study which include the social demographic factors, knowledge of mothers on the importance of early initiation of breast feeding as well as cultural factors influencing early initiation of breast feeding among post natal mothers.

2.2 Social demographic factors influencing early initiation of breast feeding among post natal mothers

Maheswari, Vishnu, Mohamed and Padiyath, (2010) mentioned in their study that some of the social demographic factors influencing early initiation of breast feeding among post natal mothers include mother's illness due to breast infection as well as other infections.

Boyle et al, (2013) report in their study about the influence of economic development level, household wealth and maternal education on child health in the developing world. Also other social demographic factors influencing early initiation of breast feeding among post natal mothers include age of the mother. Similarly, Bahl et al, (2013) revealed in a multicenter cohort study about infant feeding patterns and risks of death and hospitalization in the first half of infancy that some of the factors

influencing initiation of breast feeding among post natal mothers include young maternal age. It was noted that younger mothers may fail to initiate breast feeding due to inexperience.

In a study by Health promotion international (2015) found out that in United Kingdom prime gravida mothers aged between 16 to 30 years had prior decision for formula feeds.

Also where there was no father involvement for encouragement early initiation of breast feeding was not done.

Buniyaad-Early initiation of breast feeding by Agakhan foundation development network from 2012 to 2015, the Agakhan foundation in India and its partners have worked with 400,000 mothers from marginalized communities in rural Bihar where there was poor early initiation of breastfeeding compared to those in urban areas. This has significantly improved infant and young child feeding practices.

Tiwari and Singh (2007) document in a study regarding breastfeeding in an urban area of Fazidabad district, Pakistan, findings showed that an important factor influencing early initiation of breast feeding among post natal mothers include, poverty whereby mothers did not have adequate nutrition and thus could not maintain adequate breast feeding. Similarly, in a study which assessed first-time mothers' intentions to breastfeed and awareness of health recommendations in southwest Sydney, Australia. Findings revealed that an important social demographic factors influencing initiation of breast feeding among post natal mothers include is unemployment (Wen, Baur,Rissel, Alperstein and Simpson, 2009).

The research on resulted Factors associated to breastfeeding in the first hour of life by Tania Maria Brasil Esteves, Regina Paiva Daumas I, Maria Inês Couto de Oliveira , Carlos Augusto de Ferreira de Andrade 2013. These were conducted in Asia (9), Africa (5), and South America (4), between 1999 and 2013. The prevalence of breastfeeding within the first hour of life ranged from 11.4%, in a province of Saudi Arabia.

Cesarean delivery was the most consistent risk factor for non-breastfeeding within the first hour of life. “Low family income”, “maternal age less than 25 years”, “low maternal education”, “no prenatal visit”, “home delivery”, “no prenatal guidance on breastfeeding” and “preterm birth” were reported as risk factors in at least two studies.

Breastfeeding has declined worldwide in recent years, as a result of urbanization and maternal employment outside the home. Studies in India have also shown a decline in breastfeeding trends, especially in urban areas. Early initiation of breastfeeding is not seen in over 75% of the nation’s children and over 50% of children are not exclusively breastfed. Hence, the low figures for early initiation of breastfeeding in India are a matter of urgent concern.

According the International Breastfeeding Journal2016, Factors at geographical, socioeconomic, individual, and health-specific levels, such as residence, education, occupation, income, mother’s age and newborn’s gender, and ill health of mother and newborn at delivery, affect early or timely breastfeeding initiation in South Asia. Reported barriers impact through influence on acceptability by traditional feeding

practices, priests' advice, prelacteal feeding and discarding colostrum, mother-in-law's opinion; availability and accessibility through lack of information, low access to media and health services, and misperception, support and milk insufficiency, involvement of mothers in decision making.

Knowledge, attitude and practice of postnatal mothers for early initiation of breast feeding in the obstetric wards of a tertiary care hospital of Vadodara City June 2012. Most common causes of delay in initiating breastfeeding were caesarian section and fatigue (29.7% and 21.1% respectively). 32.6% mothers initiated breastfeeding within one hour of delivery. Incidence of early initiation of breastfeeding in mothers less than 21 years of age was 29.4%, 24.6% in illiterate mothers and 25% in those delivering by caesarian section. Early initiation of breastfeeding was maximum (46.7%) in the first and minimum (24.3%) in the third shift of work of health care workers. Conclusion: Lack of adequate information, maternal education level, socioeconomic factors, etc. influences the early breast feeding practices which can be overcome by proper support, care and counseling provided by health care staff.

Okolo, Adewunmi and Okonji (2011) in a study about breastfeeding knowledge of mothers in five rural communities in the Savannah region of Nigeria. The findings revealed that an important factor influencing early initiation of breast feeding among post natal mothers include area of residence. It was noted that residing in rural, hard to reach areas with poor access to mass media and information may affect mothers' awareness of the importance of early initiation of breast feeding.

Hector, King, Webb and Heywood (2012) reveal in their study about the factors affecting breastfeeding practices that some of the factors influencing initiation of breast feeding among post natal mothers include marital status. It was revealed that women who were formally married had a greater chance and likelihood of initiating breast feeding early as recommended as they were likely to have support and encouragement from their partners.

Khin, Cheung and Loh (2007) document in their study about the support and promotion of breastfeeding that some of the factors influencing early initiation of breast feeding among post natal mothers include parity. It was noted after analysis that as parity increases, women tended to have poor practices towards the early initiation of breast feeding as they were used to the procedure and others disregarded it.

Hendricks, Briefel and Novak (2012) report in their study about maternal and child characteristics associated with infant and toddler feeding practices that factors such as area of residence are some of the things which influence early initiation of breast feeding. It was further reported that most mothers who resided in rural areas lacked adequate access to information and this could greatly affect their awareness of the importance of initiation of breast feeding.

In Africa Early initiation of breast feeding in urban Africa is poor towards empowering working mothers through innovation by Philips Health care 2015.

In East Africa a study done by UNICEF 2010 found out most mothers especially in rural hard to reach areas had no knowledge about early initiation of breast feeding and preferred to give their babies other feeds such as cow`s milk, water and others.

A study done in Uganda (2014) by feed the child Uganda, found out up to about 80% of young teenage prime gravidas especially those who were still school going, aged between 15 t0 20 could refuse to initiate theirs babies on breast feeding because of fear their breasts to sag and lose their beautiful figures and thus having no more market for men in future since most of them had got un wanted pregnancies.

Most mothers especially young prime gravida in Uganda do not know how to attach babies on breast and thus take long to learn there by delaying to initiate breast feeding according to a study conducted in different regional referral hospitals in Uganda by Ministry of Health 2015.

2.3 Knowledge of post natal mothers about the importance of early initiation of breast feeding

Narayan, Natarajan and Bawa, (2012) document in their study about maternal and neonatal factors adversely affecting breastfeeding in the perinatal period that some of the factors influencing initiation of breast feeding among post natal mothers include ignorance about the importance of early initiation of breast feeding and proper exclusive breast feeding.

A study on Knowledge, attitudes, and breast feeding practices of postnatal mothers. By Poreddi Vijayalakshmi, T Susheela, and D Mythili

Findings revealed that, merely 27% of the mothers were exclusive breast feeders and only 36.9% initiated breast feeding within first hour. Mothers those who were currently breast feeding (58.83 ± 4.74) had more positive attitudes than non-breastfeed mothers (45.21±5.22).

Factors associated with early initiation of breastfeeding among Nepalese mothers: further analysis of Nepal Demographic and Health Survey, 2011

Mandira Adhikari, Vishnu Khanal, Rajendra Karkee, and Tania Gavidia Timely initiation of breastfeeding has been reported to reduce neonatal mortality by 19.1%. The World Health Organization recommends early initiation of breastfeeding i.e. breastfeeding a newborn within the first hour of life. Knowledge on the rate and the determinants of early initiation of breastfeeding may help health program managers to design and implement effective breastfeeding promotion programs. The aim of this study was to determine the rate and the determinants of early initiation of breastfeeding in Nepal.

Chudasama, Amin and Parikh, (2009) mention in their study about the prevalence of exclusive breastfeeding and its determinants in first 6 months of life that post natal mother had inadequate knowledge about the initiation of breast feeding due to low literacy rate. It was further revealed that the higher the literary rate of mothers the more the likelihood that they would properly initiate breast feeding for their children as recommended.

Indu K. Sharmal and Abbey Byrne the author of International Breastfeeding Journal2016, Indicated that Early or timely initiation of breastfeeding is crucial in preventing newborn deaths and influences childhood nutrition however remains low in South Asia due to poor perception and the factors and barriers warrant greater consideration for improved action. This review synthesizes the evidence on factors and barriers to early initiation of breastfeeding within 1 hour of birth in South Asia encompassing Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Sri Lanka.

Similarly, Aidam, Perez-Escamilla and Lartey, (2010) document in their study about how lactation counseling increases exclusive breast feeding rates in Ghana that the majority of respondents had poor level of knowledge and awareness of the importance and benefits of initiation of breast feeding. This was attributed to lack of lactation counseling and sensitization of mothers.

Ahluwalia, Morrow and Hsia, (2011) report in their study about why women stop breastfeeding that one of the factors contributing to improper breast feeding of children below 2 years is inadequate knowledge about the importance of early initiation of breast feeding as well as the potential dangers associated with late initiation of breast feeding.

Harder, Bergman, Kallischnigg and Plagemann, (2012) mention in their study about the duration of breastfeeding and risk of overweight that the majority of respondents

did not possess sufficient knowledge about how to initiate breast feeding. This was attributed to lack of health education by health workers.

Hornell, Hofvander and Kylberg, (2010) reveal in their study about the introduction of solids and formula to breastfed infants: a longitudinal prospective study in Uppsala, Sweden that the majority of respondents, 65% had a fair level of knowledge about the initiation of breast feeding as well as the importance of early initiation. This was attributed to having ready access to information about breast feeding.

A study by Cambridge University 2011 in sub-Saharan countries like Uganda, found out that some mothers who are HIV positive still have fear of transmitting HIV virus to their babies through breast milk and choose not to breast feed at all.

2.4 Cultural factors influencing early initiation of breast feeding among post natal mothers

Maheswari, Vishnu, Mohamed and Padiyath, (2010) document in their study about breastfeeding among postnatal mothers that some of the cultural factors influencing initiation of breast feeding among post natal mothers include the prevalence of cultural practices such as initiation of supplementary feeds.

A study conducted by Yadavannavar, Shailaja and Patil (2011) in India about the socio cultural factors affecting breast feeding practices and decisions in rural women that some of the cultural factors influencing initiation of breast feeding among post natal mothers include beliefs like the first milk is not good or there is no secretion of milk in first three days which greatly affect the health and development of the infant.

Similarly, Chen, Liu, Merrett, Chuo and Wan (2008) document in a study about initiation of breastfeeding lessons from Taiwan that some of the cultural factors influencing initiation of breast feeding among post natal mothers include negative practices such as throwing away colostrum and promoting prelacteal feeds, yet this first milk is very beneficial to the growth, development and immunity of babies from illness.

Pisacane, Continisio, Aldinucci, D'Amora and Continisio (2012) reveal in their study about the father's role in breastfeeding promotion that one of the influencing initiation of breast feeding among post natal mothers include low involvement and encouragement of breast feeding by fathers. Similarly, Kong and Lee (2014) mention in their study about the factors influencing decision to breastfeed that a major factor influencing initiation of breast feeding among post natal mothers include lack of support for breast feeding by husbands/male partners. It was further revealed that male involvement in and support of breast feeding ensured a higher rate of breast feeding among babies.

Mamiro et al, (2010) document in their study about feeding practices and factors contributing to wasting, stunting, and iron-deficiency anaemia among 3-23 month old children in Kilosa district, rural Tanzania that some of the cultural factors influencing early initiation of breast feeding include prevalent beliefs that colostrum is dirty and it will cause sickness for the baby.

A study on Sociocultural factors influencing breastfeeding practices in two slums of Korogocho and Viwandani slums in Nairobi, Kenya by Milka Wanjohi, Paula

Griffiths, Frederick Wekesah, Peter Muriuki, Nelson Muhia, Rachel N. Musoke, Hillary N. Fouts, Nyovani J. Madise and Elizabeth W. Kimani-Murage in 2016. Social and cultural beliefs and practices that result to suboptimal breastfeeding practices were highlighted including; considering colostrum as 'dirty' or 'curdled milk', a curse 'bad omen' associated with breastfeeding while engaging in extra marital affairs, a fear of the 'evil eye' (malevolent glare which is believed to be a curse associated with witchcraft) when breastfeeding in public and breastfeeding being associated with sagging breasts.

A study by Makerere University 2012 in rural districts of Kiboga and Mubende in Uganda discovered that some mothers do not initiate breast feeding early because they believe that colostrum causes abdominal pains in young babies which make them to over cry there by giving them tea and water in the first days hence delaying to initiate breast feeding.

In summary, the literature review cited from studies carried out in various countries globally, in Africa and East Africa including United Kingdom, Pakistan, Australia, Sweden, Taiwan, Nigeria, Ghana, Kenya, Tanzania and Uganda revealed that early initiation of breast feeding is greatly affected by many factors.

CHAPTER THREE

METHODOLOGY

3.1 Introduction

The chapter describes the practical procedures for carrying out the study. It gives details of the research methods to be adopted, including research design, study population, sampling procedure, sample size, data sources, data collection methods, data processing, data analysis and presentation of findings.

3.2 Study Design

A descriptive cross sectional study employing quantitative data collection methods will be employed. It will be a cross sectional study design because independent and dependent variables will be assessed and data will be collected at one point in time without any type of manipulation.

3.3 Study Setting

The study will be conducted at the Post Natal Ward, Kabale Regional Referral Hospital, Kabale District which is found in south western Uganda. It is the biggest in the district and it offers many curative and preventive health services, ANC, immunizations, growth and monitoring, palliative care, health education, ARV's provision, RCT, PMTCT, including infant feeding counseling. On average 200 mothers are delivered at the hospital every month. The study setting is selected because the problem of poor initiation of breast feeding among post natal mothers has been noted by the researcher.

3.4 Study Population

The study includes all post natal mothers who have stayed at least 2 to 3 days in post Natal Ward, Kabale Regional Referral Hospital, Kabale District.

3.4.1 Sample Size Determination

The sample size will be determined by using Solvin's formular by Ariola et al (eds, 2006) was used

$n = N/(1+ne^2)$

$n = 200/(1+200\ (0.05^2))$

= 133.3 approximately 133 respondents

Where; n = sample size required, N = Total population of postnatal mothers at Kabale regional referral hospital, e = Error tolerance (5 % or 0.05).

3.4.2 Sampling Procedure

The data will be collected from 133 respondents in 12 days where approximately 11 mothers researcher will go to the post natal ward and proceed to sample respondents until the total of 11 will be achieved.

3.4.3 Inclusion Criteria

- ✓ The study will include all post natal mothers who have just delivered at post Natal Ward aged between 15-45 years, Kabale Regional Referral Hospital, Kabale District.
- ✓ Who have voluntarily consented to participate in the study.
- ✓ And are available during the study period.

3.4.4 Exclusion Criteria

- Mothers who are very ill and still in severe pain.
- Mothers whose babies have died shortly after birth.
- Mothers who have not consented to participate in the study

3.5 Definition of Variables:

A variable is an attribute that varies. The independent variable is the one which can be manipulated and a dependent variable is the presumed outcome**.**

3.5.1 Dependent Variables

This study considered Early Initiation of breast feeding as the dependent variable.

3.5.2 Independent Variables.

- In this study, individual factors, and socio-cultural factors were the independent variables. Individual Socio demographic factors such as age, marital status, parity and level of education were studied.
- Socio-cultural factors such as stigma, poverty, norms and beliefs of the community were also investigated in this study.

3. 6 Research Instruments

Data collection will be carried out by use of questionnaires to enable the respondents to exhaust each posed question after consent. This method will be used because it will allow for accurate recording of responses from both the illiterate and literate respondents. Two research assistants will be identified. The questionnaire has 3 sections and section A has 8 questions, section B has 11 questions while section C has 6 questions

3.7 Data collection procedure

The researcher will obtain an approval letter from the Research Committee of Kampala International University Western Campus which will be taken to Administration KRRH seeking permission to carry out the study. The Hospital Administration will provide an approval letter to conduct the research in the hospital and also introduce the researcher to the in-charge of the post natal ward who will hence introduce the researcher to the respondents. At this point, the researcher will introduce himself to the respondents and seek for their permission to participate in the study. Informed consent will be sought and secured from the respondents. Confidentiality will be observed by not asking for the names of the respondents. The filled questionnaires will be safely kept under lock and key and only accessed by the researcher and they will be used for this study

3.7.1 Data Management

At the end of each day of data collection, completed questionnaires will be organized and kept in a safe custody to avoid loss before entry into the computer. All the collected data will be put in the file and kept under lock and key.

Editing

This will involve checking for errors and omissions in the research instruments to ensure consistency, completeness and accuracy of data collection. This will be done in the field immediately after the questionnaires are filled.

Coding

The coding will be done at home daily after each field day. It will involve grouping responses into categories. This will be facilitated by constructing coding frames. Each response will be entered into the computer.

3.7.2 Data Analysis

Data was entered into a computer and analyzed using descriptive statistics. Data collected was analyzed by using the Statistical Package for Social Science (SPSS) version 18 and Microsoft Excel. It was summarized in descriptive statistics namely, mean, median, frequency, percentage distributions and means was used to present patterns in the data.

Question 1 was summarized in descriptive measures of dispersion namely mean, SD, median and presented in frequency tables, bar graphs and pie charts.

Question 2 was summarized and presented in frequency tables, bar graphs and pie charts.

Question 3 was summarized and presented in frequency tables, bar graphs and pie charts.

3.8 Ethical Considerations

The researcher will obtain an approval letter from the Research Committee of Kampala International University Western Campus which will be taken to the administration of KRRH seeking permission to carry out the study. The Hospital administration will provide an approval letter to conduct the research in the hospital

and also introduce the researcher to the in-charge of the post natal ward who will hence introduce the researcher to the respondents. At this point, the researcher will introduce himself to the respondents and seek for their permission to participate in the study. Informed consent will be sought and secured from the respondents. Confidentiality will be observed by not asking for the names of the respondents and also not allowing others to look in the filled interview guides. The filled questionnaires will be safely kept under lock and key and only accessed by the researcher and they will be used for this study only.

3.9 Study Limitations

The researcher anticipated difficulty in obtaining adequate and accurate information from respondents as they were tired and weak from the delivery.

Some respondents could not be interviewed as they did not open up to the researcher some of their private issues despite all the endeavors by the researcher explaining to them that confidentiality would be kept as their names were not be needed.

It was also challenging to balance academic work with carrying out all necessary steps to do the research. The researcher needed to employ research assistants to collect data.

There was language barrier as the researcher was not well acquainted with the local language.

3.10 Dissemination of results

Upon completion of the study, a report will be developed and 4 copies will be printed out. They will be disseminated as follows:-

- 1 copy will be given to UNMEB for award of Diploma in Nursing.
- 1 copy will be given to Kampala International University Western Campus School of Nursing for reference to diploma students (School library).
- 1 Copy will be given to Kabale Regional Referral Hospital for implementation of the recommendations proposed by the researcher.
- 1 copy will be kept by the researcher for reference purposes

CHAPTER FOUR:

DATA PRESENTATION AND ANALYSIS

4.0 Introduction

This chapter represents the data obtained from the study of 133 respondents and it focused on identifying the factors influencing early initiation of breast feeding among mothers at Post Natal Ward, Kabale Regional Referral Hospital. The study findings have been analyzed and The results are presented under three main headings including; The socio-demographic factors, knowledge of postnatal mothers regarding the importance of early initiation of breast feeding and cultural factors influencing early initiation of breast feeding among post natal mothers at Kabale Regional Referral Hospital. The researcher gathered data using structured questionnaires and the findings were analyzed and presented in form of frequency tables and graphs. The findings were in reference to the research objectives and questions and it is presented commencing with the demographic and social characteristics of respondents.

4.1 Demographic and social characteristics of post natal mothers

Table 1: Socio-Demographic characteristics of respondents

Variables	**Frequency (n=133)**	**Percentage (%)**
Respondents' Age		
16 – 25 years	78	58.6
26 – 35 years	35	26.4
36 – 45 years	20	15.0
Marital status		
Single	42	31.6
Married	91	68.4
Level of education		
Primary level	34	25.6
Secondary level	52	39.1
Tertiary level	21	15.8
No formal education	26	19.5
Occupation		

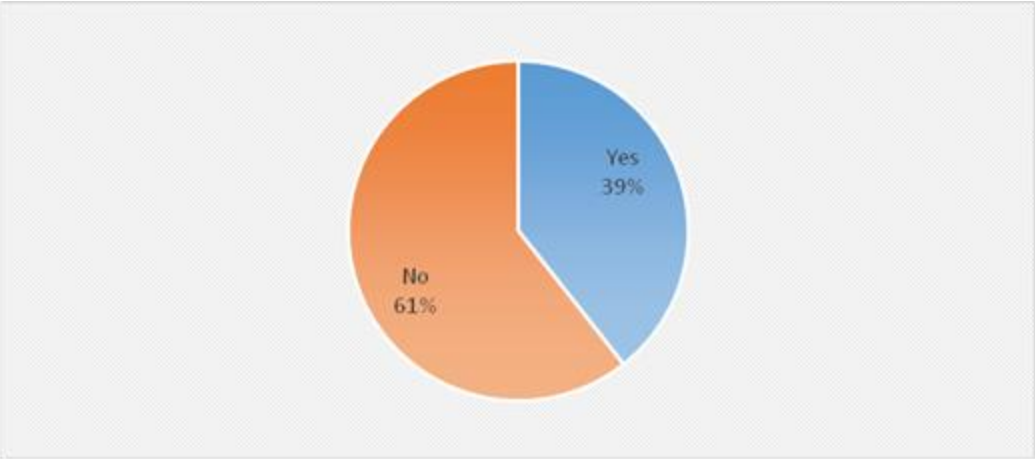
House wife	45	33.8
Self employed	48	36.1
Civil servant	14	10.5
Unemployed	26	19.6
Number of children		
1 child	34	25.6
2 – 3 children	52	39.1
More than 4 children	47	35.3
Level of education of spouse		
Primary level	31	23.3
Secondary level	47	35.3
Tertiary level	26	19.6
No formal education	29	21.8
Spouse' Occupation		
Self employed	67	50.3
Civil servant	23	17.3

Unemployed	15	11.3
Peasant/farmer	28	21.1
Distance to KRRH (in km)		
Less than 1km	19	14.3
2 – 3 km	47	35.3
4km and above	67	50.4

- Most respondents 78 (58.6%) were in the age range of 16 – 25 years.
- The majority of respondents 91 (68.4%) were married.
- Results showed that 52 (39.1%) respondents had attained secondary level education while the least 21 (15.8%) had attained tertiary level education.
- Findings showed that 48 (36.1%) were self-employed.
- Results showed that 52 (39.1%) respondents had 2 – 3 children.
- Out of the 91 respondents who were married, most 47 (35.3%) reported that their partners had attained secondary level education.
- Out of the 91 respondents who were married, most 67 (50.3%) reported that their partners were self-employed.
- Most respondents 67 (50.4%) resided 4 km and above away from KRRH.

4.2 Knowledge of post natal mothers at KRRH regarding early initiation of breast feeding.

Figure 1: Awareness of post natal mothers about potential dangers of late initiation of breast feeding n=133



Results showed that most respondents 81 (61%) were not aware of the potential dangers of late initiation of breast feeding.

Table 2: Awareness and importance of early initiation of breast feeding as well as dangers of late initiation of breast feeding.

Variables	Frequency (n=133)	Percentage (%)
Ever heard about initiation of breast feeding		
Yes	133	100
No	0	0
Recommended period to initiate breast feeding		
Immediately after birth	38	28.6
Within 1 hour	27	20.3
2 – 3 hours after birth	43	32.3
Next day	25	18.8
Awareness of importance of early initiation of breast feeding		
Yes	52	39.1
No	81	60.9
Ever been health educated about importance of early initiation		
Yes	63	47.4
No	70	52.6

Importance of early initiation of breast feeding	**Frequency (n=52)**	**Percentage (%)**
Improving baby's immunity	31	60
Promoting growth and development	21	40
Potential dangers of late initiation of breast feeding	**Frequency (n=52)**	**Percentage (%)**
Baby may fall sick	22	42
It affects proper growth of the baby	30	58

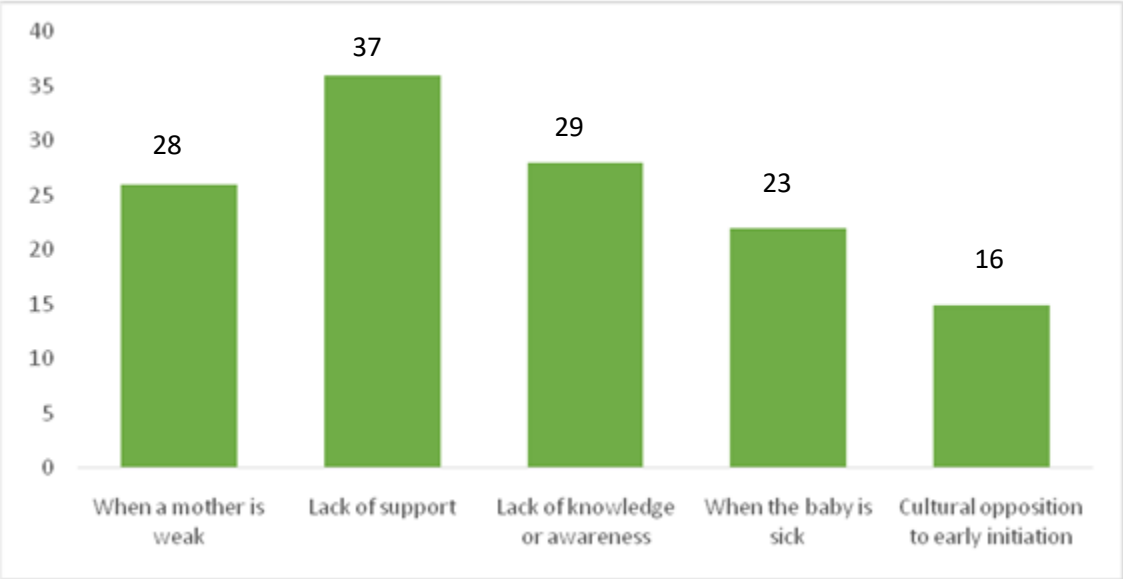
- All the respondents 133 (100%) had ever heard about early initiation of breast feeding and they understood it as breast feeding a baby immediately after birth.

- Most respondents 43 (32.3%) reported that the recommended period to initiate breast feeding was 2 – 3 hours after birth while the least 25 (18.8%) reported the next day.

- The majority of respondents 81 (60.9%) were not aware of the importance of early initiation of breast feeding.
- Most respondents 70 (52.6%) had never been health educated about importance of early initiation of breast feeding.
- Out of the 52 respondents who were aware of the importance of early initiation of breast feeding, most respondents 31 (60%) reported improving baby's immunity while the least 21 (40%) mentioned promoting growth and development.
- Out of the 52 respondents who were aware of the potential dangers of late initiation of breast feeding, most 30 (58%) reported that it affected proper growth of the baby while the least 22 (42%) said the baby may fall sick.

Figure 2: Reasons for not initiating breast feeding early

n=133



Results showed that majority 37 (27.8%) of respondents reported that lack of support stopped mothers from early initiation of breast feeding

While the least 16 (12.0%) mentioned cultural opposition to early initiation.

Table 3: Distribution of respondents who had initiated breast feeding

Responses	**Frequency (n=133)**	**Percentage (%)**
Yes	52	39.1
No	81	60.9

When respondents initiated breast feeding		
Immediately after birth	38	28.6
Within 1 hour	27	20.3
2 – 3 hours after birth	43	32.3
Next day	25	18.8
Total	133	100

Most respondents 81 (60.9%) had not initiated breast feeding early as recommended.

Most respondents 43 (32.3%) initiated breast feeding between 2 – 3 hours after birth.

4.3 Cultural factors influencing early initiation of breast feeding among post natal mothers

Table 4: Whether respondents' culture allowed early initiation of breast feeding

Variables	Frequency (n=133)	Percentage (%)
Whether respondents' culture allowed early initiation of breast feeding		
Yes	81	60.9
No	52	39.1
Tribal view of using colostrum		

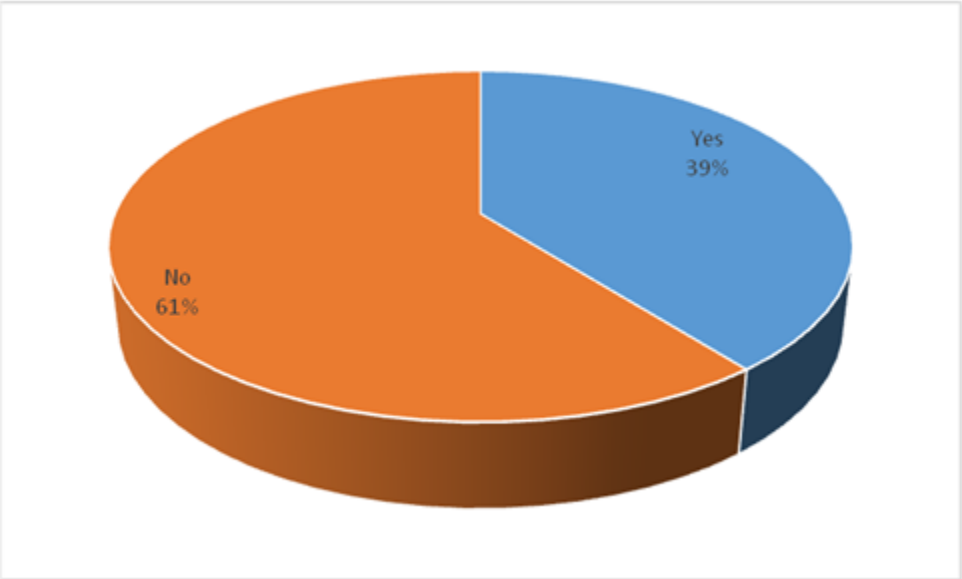
Good	81	60.9
Bad	52	39.1
Total	133	100
Reasons for tribal view of using colostrum		
It is good and nutritious for babies and boosts their immunity	81	60.9
It is dirty and unhealthy for babies	52	39.1

Most respondents 81 (60.9%) reported that their tribe viewed the use of colostrum as good. Results showed that most respondents 81 (60.9%) reported that their cultures allowed early initiation of breast feeding.

Most respondents 81 (60.9%) said their tribe viewed the use of colostrum as good because it is good and nutritious for babies and boosts their immunity.

Other respondents 52 (39.1) said that the use of colostrum was not good because it is dirty and unhealthy for babies.

Figure 3: Whether cultural beliefs influenced early initiation of breast feeding n=133



Most respondents 81 (61%) reported that cultural beliefs did not influence early initiation of breast feeding.

CHAPTER FIVE

DISCUSSION, CONCLUSIONS, RECOMMENDATIONS

5.1 Introduction

This chapter presents the discussion of findings, conclusions and recommendations of the study which were obtained after data analysis. In regard to factors influencing early initiation of breast feeding among mothers at postnatal ward Kabale Regional Referral Hospital.

5.1.1 Discussion

5.1.2 Demographic and Social Characteristics of post natal mothers

These include age, marital status, occupation, level of education and the distance from Hospital of post natal mothers.

Most respondents 78 (58.6%) were in the age range of 16 – 25 years. This demonstrated that most respondents were still relatively young and this could potentially affect their awareness about the importance of early initiation of breast feeding due to inexperience and lower parity perhaps. This study was in agreement with Bahl et al, (2013) revealed in a multicenter cohort study about infant feeding patterns and risks of death and hospitalization in the first half of infancy that some of the factors influencing early initiation of breast feeding among post natal mothers

included young maternal age. It was noted that younger mothers may fail to initiate breast feeding due to inexperience. Furthermore, it was also in line with Boyle et al, (2013) who reported in their study about the influence of economic development level, household wealth and maternal education on child health in the developing world that some of the social demographic factors influencing initiation of breast feeding among post natal mothers included age of the mother.

The majority of respondents 91 (68.4%) were married, which implied that since they were married, they would be able to count on and receive physical and emotional support from their partner to ensure early initiation of breast feeding as recommended. This study finding was in line with Hector, King, Webb and Heywood (2012) who revealed in their study about the factors affecting breastfeeding practices that some of the factors influencing early initiation of breast feeding among post natal mothers included marital status. It was revealed that women who were formally married had a greater chance and likelihood of initiating breast feeding early as recommended as they were likely to have support and encouragement from their partners.

Results showed that 52 (39.1%) respondents had attained secondary level education. This showed that most respondents had attained a fair level of education and would be expected to be more knowledgeable about the benefits of early initiation of breast feeding. However, this was not the case as most did not initiate breast feeding early as recommended due to inadequate knowledge. This study was in line with Chudasama, Amin and Parikh (2009) who mentioned in their study about the prevalence of

exclusive breastfeeding and its determinants in first 6 months of life that post natal mother had inadequate knowledge about the initiation of breast feeding due to low literacy rate.

It was further revealed that the higher the literacy rate of mothers the more the likelihood that they would properly initiate breast feeding for their children as recommended.

Findings showed that 48(36.1%) were self-employed which implied that since respondents were employed, they would afford adequate nutrition and have enough breast milk as well as access to health care services in the study setting. This study was in line with Tiwari and Singh (2007) who documented in a study regarding breastfeeding in an urban area of Fazidabad district among post natal mothers included poverty whereby mothers did not have adequate nutrition and thus could not maintain adequate breast feeding.

Results showed that 52 (39.1%) respondents had 2 – 3 children which implied that since most respondents had a higher parity, they would be more experienced and knowledgeable about the importance of early initiation of breast feeding as well as how to initiate breast feeding. This study was opposed by Khin, Cheung and Loh, (2007) who documented in their study about the support and promotion of breastfeeding that some of the factors influencing early initiation of breast feeding among post natal mothers include parity. It was noted after analysis that as parity

increases, women tended to have poor practices towards the early initiation of breast feeding as they were used to the procedure and others disregarded it.

Most respondents 67 (50.4%) resided 4 km and far away from KRRH which demonstrated that most respondents resided a considerable distance out of the urban center and this could negatively affect their access to and utilization of health services. This study was in agreement with Hendricks, Briefel and Novak, (2012) who reported in their study about maternal and child characteristics associated with infant and toddler feeding practices that factors such as area of residence are some of the things which influence early initiation of breast feeding. It was further reported that most mothers who resided in rural areas lacked adequate access to information and this could greatly affect their awareness of the importance of early initiation of breast feeding.

Out of the 91 respondents who were married, most 47 (35.3%) reported that their partners had attained secondary level education. Out of the 91 respondents who were married, most 67 (50.3%) reported that their partners were self-employed. This study was in agreement with another study which assessed first-time mothers' intentions to breastfeed and awareness of health recommendations in southwest Sydney, Australia. Findings revealed that an important social demographic factors influencing early

initiation of breast feeding among post natal mothers include, unemployment (Wen, Baur Rissel, Alperstein and Simpson, 2009).

5.1.3 Knowledge of post natal mothers at KRRH regarding early initiation of breast feeding

Results showed that most respondents 81 (60.9%) were not aware of the potential dangers of late initiation of breast feeding, perhaps due to inadequate sensitization/health education by health workers. This study was in line with Narayan, Natarajan and Bawa (2012) who documented in their study about maternal and neo-natal factors adversely affecting breastfeeding in the perinatal period that some of the factors influencing early initiation of breast feeding among post natal mothers included ignorance about the importance of exclusive and proper breast feeding.

All the respondents 133 (100%) had ever heard about early initiation of breast feeding and they understood it as breast feeding a baby immediately after birth which implied that since they had ever heard of early initiation, they would be more knowledgeable and also ensure early initiation of breast feeding. This study was contrary to Harder, Bergman, Kallischnigg and Plagemann (2012) who mentioned in their study about the duration of breastfeeding and risk of overweight that the majority of respondents did not possess sufficient knowledge about how to initiate breast feeding. This was attributed to lack of health education by health workers.

Most respondents 43 (32.3%) reported that the recommended period to initiate breast feeding was 2 – 3 hours after birth while the least 25 (18.8%) reported the next day.

This demonstrated that may be due to inadequate sensitization, most respondents did not possess sufficient knowledge about the recommended period to initiate breast feeding and this potentially led to poor practices towards early initiation of breast feeding. This study was opposed by Hornell, Hofvander and Kylberg (2010) who revealed in their study about the introduction of solids and formula to breastfed infants: a longitudinal prospective study in Uppsala, Sweden that the majority of respondents, 65% had a fair level of knowledge about the initiation of breast feeding as well as the importance of early initiation. This was attributed to having ready access to information about breast feeding.

The majority of respondents 81 (60.9%) were not aware of the importance of early initiation of breast feeding. This implied that since mothers were ignorant about the importance of early initiation of breast feeding, they may not place much emphasis on it, leading to late initiation of breast feeding. This study was in agreement with Aidam, Perez-Escamilla and Lartey (2010) who documented in their study about how lactation counseling increases exclusive breast feeding rates in Ghana that the majority of respondents had poor level of knowledge and awareness of the importance and benefits of initiation of breast feeding. This was attributed to lack of lactation counseling and sensitization of mothers.

Results showed that most respondents 81 (60.9%) had not initiated breast feeding early as recommended. Most respondents 43 (32.3%) initiated breast feeding between 2 – 3 hours after birth. This demonstrated that most respondents in the study setting had poor practices towards early initiation of breast feeding as they failed to initiate

breast feeding immediately after birth as required by health workers. This study finding was in line with Ahluwalia, Morrow and Hsia (2011) who reported in their study about why women stop breastfeeding that one of the factors contributing to improper breast feeding of children below 2 years was inadequate knowledge about the importance of early initiation of breast feeding as well as the potential dangers associated with late initiation of breast feeding.

5.1.4 Cultural factors influencing early initiation of breast feeding among post natal mothers

Most respondents 81 (60.9%) reported that their tribe viewed the use of colostrum as good because it is good and nutritious for babies and boosts their immunity which implied that in this case, tribal views on the use of colostrum could not be blamed for late initiation of breast feeding but it could be blamed on other factors. This study finding was contrary to findings by Yadavannavar, Shailaja and Patil (2011) in India about the socio cultural factors affecting breast feeding practices and decisions in rural women which revealed that some of the cultural influencing initiation of breast feeding among post natal mothers include beliefs like the first milk is not good or there is no secretion of milk in first three days which greatly affect the health and development of the infant.

Results showed that most respondents 81 (60.9%) reported that their cultures allowed early initiation of breast feeding which demonstrated that in this study setting, culture and cultural norms and practices could not be blamed for late initiation of breast

feeding among mothers. This study was opposed by Maheswari, Vishnu, Mohamed and Padiyath, (2010) document in their study about breastfeeding among postnatal mothers that some of the cultural factors influencing initiation of breast feeding among post natal mothers include the prevalence of cultural practices such as early initiation of supplementary feeds.

Most respondents 81 (60.9%) reported that cultural beliefs did not influence early initiation of breast feeding. This study was opposed by Maheswari, Vishnu, Mohamed and Padiyath, (2010) who documented in their study about breastfeeding among postnatal mothers that some of the cultural factors influencing initiation of breast feeding among post natal mothers included the prevalence of cultural practices such as early initiation of supplementary feeds.

5.2 Conclusion

The study found out that post natal mothers had various demographic and social characteristics which influenced early initiation of breast feeding among post natal mothers including young age 78 (58.6%), marital status 91 (68.4%), level of education 52 (39.1%), employment status 48 (36.1%), parity 52 (39.1%) and area of residence 67 (50.4%).

Results showed that respondents also faced knowledge deficits about early initiation of breast feeding. The study noted that although all respondents 133 (100%) had ever heard about early initiation of breast feeding and 133 (100%) understood it as breast feeding a baby immediately after birth, most 43 (32.3%) had not initiated breast

feeding early as recommended as they initiated breast feeding between 2 – 3 hours after birth, which was perhaps not surprising as most 81 (60.9%) were not aware of the potential dangers of late initiation of breast feeding or even the importance of early initiation of breast feeding 81 (60.9%).

Respondents did not face cultural factors influencing early initiation of breast feeding among post natal mothers as most 81 (60.9%) reported that their tribe viewed the use of colostrum as good because it is good and nutritious for babies and boosts their immunity and also allowed early initiation of breast feeding which implied that failure to ensure early initiation of breast feeding was attributed to other factors other than cultural related factors.

5.3 Recommendations

5.3.1 Recommendations to the Ministry of Health

The Ministry of Health should re-emphasize sensitization and health education programs to improve the awareness and knowledge of post natal mothers about the importance of early initiation of breast feeding as well as the benefits of early initiation provides.

5.3.2 Recommendations to the administration of KRRH

The administration of KRRH should put in place programs to sensitize and health educate mothers about the dangers of poor/late initiation of breast feeding.

Secondly, the administration should strive to ensure regular provision of post natal services at all times to enable easy access to and utilization of the services.

Furthermore, the hospital should enable health workers to carry out community outreach and sensitization about the importance of early initiation of breast feeding as improving community awareness, understanding and appreciation of this act would enable them to offer support and encourage post natal mothers to breast feed appropriately as recommended.

5.3.3 Recommendations to the health workers at KRRH

Health workers at KRRH, especially those in ANC clinic should endeavor to health educate pregnant mothers about the importance and need to ensure early initiation of breast feeding as well as the benefits of ensuring early initiation of breast feeding.

Health workers should further encourage the involvement and participation of husbands in supporting their wives/partners to ensure early initiation of breast feeding.

5.3.4 Recommendations to the mothers at KRRH

Post natal mothers at KRRH and elsewhere should ensure that they adequately attend ANC services during pregnancy and hence get a chance to be sensitized about the importance and need for early initiation of breast feeding.

Mothers should also ensure they initiate breast feeding immediately after birth as recommended by health workers as this provides many benefits to the neonates.

5.4 IMPLICATIONS TO NURSING PRACTICE

It is imperative that health workers especially nurses to be aware and address the factors influencing early initiation of breast feeding among postnatal mothers. While providing health education to mothers and the community at large about the many benefits of early initiation of breast feeding, nurses should base themselves on the individual demographic and social characteristics baseline factors. Health care interventions should re-focus on encouraging the effective early initiation of breast feeding as early as possible such that babies do not miss out on colostrum and thereby preventing the dangers of late initiation of breast feeding such as; hypoglycaecimia, neonatal infections, retarded growth, infant morbidity and mortality.

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Appendix I: Consent Form

My name is **Mugabi Patrick,** a student Nurse of Kampala International University Western Campus. I am carrying out a study to identify the factors influencing early initiation of breast feeding among mothers at Post Natal Ward, Kabale Regional Referral Hospital. Your participation is voluntary and you may pull out at any time if you wish. There are no risks associated with your participation in the study.

The study will benefit post natal mothers at Kabale Regional Referral Hospital as they will get an opportunity to update their knowledge about the importance of early initiation of breast feeding.

You are under no obligation to participate in the study, and refusal to participate will not affect you in any way. The information collected from you will be coded so that it is not linked to your name and your identity will not be revealed at any time during the study.

All data will be kept in a safe place and will not be shared with anybody and will not be used for any other purposes apart from this study. You are free to ask any question about the study at any time if you need more clarification.

I have explained the study the purpose and objectives of the study to the participant, and She has understood and voluntarily consent to participate in the study.

Researcher's

Signature…….**Date**…….

(RESEARCHER)

The topic and its objectives have been fully explained to me, and I have understood and voluntarily agreed and consent to participate in the study.

Respondents

Signature……Date……

(RESPONDENT)

Appendix II: Questionnaire

My name is **Mugabi Patrick,** a student Nurse of Kampala International University Western Campus. I am carrying out a study to identify the factors influencing early initiation of breast feeding among mothers at Post Natal Ward, Kabale Regional Referral Hospital. You have voluntarily consented to participate in the study and all the information you give will be kept confidential. Your participation will take a maximum of 15 minutes.

Instructions

Please tick in the boxes or write in the spaces provided

Please answer as accurately as possible to enhance data quality

Section A: Socio demographic factors influencing early initiation of breast feeding

1) Age

a) 15 - 25 years ☐

b) 26 - 35 years ☐

c) 36 - 45 years ☐

2) Marital status

a) Single ☐

b) Married ☐

c) Divorced ☐

d) Others (specify)……..

3) Level of education

a) Primary level ☐

b) Secondary level ☐

c) Tertiary level ☐

d) No formal education ☐

4) Occupation

a) House wife ☐

b) Self employed ☐

c) Civil servant ☐

d) Unemployed ☐

5) Level of education of the spouse/husband

a) Primary level ☐

b) Secondary level ☐

c) Tertiary level ☐

d) No formal education ☐

6) Occupation of spouse/husband

a) Self employed ☐

b) Civil servant ☐

c) Unemployed ☐

d) Peasant/farmer ☐

7) Number of children

a) 1 child ☐

b) 3 children ☐

c) More than 4 children ☐

8) Distance to KRRH?

a) Less than 1 km ☐

b) 2 – 3 km ☐

c) 4 km and above ☐

Section B: Knowledge of post natal mothers regarding early initiation of breast feeding

9) Have you ever heard about early initiation of breast feeding?

a) Yes ☐

b) No ☐

10) If yes, what do you understand by early initiation of breast feeding?.....……

……

11) What is the recommended period to initiate breast feeding?

a) Immediately after birth ☐

b) Within 1 hour ☐

c) 2 – 3 hours after birth ☐

d) Next day ☐

e) Others

(specify)……..

12) Are you are aware of the importance of early initiation of breast feeding?

a) Yes ☐

b) No ☐

13) If yes, what is the importance of early initiation of breast feeding?.....……

……

14) Are you aware of the potential dangers of late initiation of breast feeding?

a) Yes ☐

b) No ☐

15) If yes, what are the potential dangers of late initiation of breast feeding?.....……

……..……

16) Have you ever been health educated about the importance and need for early initiation of breast feeding?

a) Yes ☐

b) No ☐

17) What stops mothers from early initiation of breast feeding?.....

..... ……

……

Have you initiated breast feeding?

a) Yes ☐

b) No ☐

18) If yes, when did you initiate breast feeding?

a) Immediately after birth

b) Within 1 hour ☐

c) 2 – 3 hours after birth ☐

d) Next day ☐

e) Others

(specify)……

Section C: Cultural factors influencing early initiation of breast feeding among post natal mothers

19) Basing on your culture, are you allowed to ensure early initiation of breast feeding?

a) Yes ☐

b) No ☐

20) If no, give reasons why…….....

……

……

Do cultural beliefs influence early initiation of breast feeding?

a) Yes ☐

b) No ☐

21) Basing on your tribe, how do you view the use of colostrum?

a) Good ☐

b) Bad ☐

C) Give reasons for your

answer…….

……

……

What other cultural factors influence early initiation of breast feeding?

.....……

……

……

Thanks for your participation

Appendix III: Work Plan

S/NO.	ACTIVITIES	APR	MAY	JUN	JUL	AUG	Person Responsible
1	Topic formulation and approval						Researcher and supervisor
2	Synopsis and proposal development						Researcher
3	Approval of proposal						Supervisor & Researcher
4	Questionnaire testing & Data collection						Researcher
5	Data analysis						Researcher
6	Correction of report drafts						Supervisor & Researcher
7	Production of final report.						Supervisor & Researcher
8	Approval & Submission						Supervisor & Researcher

Appendix IV: Estimated budget

	Research items	Quantity	Amount	Source	Total
a	Photocopying Papers	1 Reams	15,000	self	15,000
b	File Folders	3 Pieces	2000	self	6,000
c	Pens	4	500	self	2,000
d	Flash Disk	2 GB	10,000	self	10,000
2	**Literature Search(Libraries, internet, primary data)**				10,000
3	**Typing services**				
a	Questionnaire	133	200	self	26600
b	Proposal	1 Copy	10,000	self	10,000
c	Report	4 Copies	10,000	self	40,000
4	**Data Collection**				
a	Transport		40,000	self	40,000
b	Data Analysis		20,000	self	20,000
c	Report writing			self	20,000
d	Allowances for research assistants	2	10,000	self	20,000
	GRAND TOTAL			self	**219,600**

Appendix V: introductory letter

KAMPALA INTERNATIONAL UNIVERSITY
WESTERN CAMPUS
EXPLORING THE HEIGHTS

School of Nursing Sciences,
P.O.BOX 71 Bushenyi, Ishaka
Tel: +256 (0) 701 975572
E-mail: akabanyoro@gmail.com
Website:http://www.kiu.ac.ug

Office of the Dean - School of Nursing Sciences

TO WHOM IT MAY CONCERN

PRINCIPAL NURSING OFFICER 17 JUL 2017 KABALE REGIONAL REFERRAL HOSPITAL

Received on
Accepted to do research

Dear Sir/Madam,

RE: MUGABI PATRICK - DNS/E/5508/162/DU

The above mentioned is a student of Kampala International University – School of Nursing Sciences undertaking Diploma in Nursing Science and he is in his final academic year.

He is recommended to carry out his data collection as a partial fulfillment for the award of the Diploma in Nursing Science.

His topic is **FACTORS INFLUENCING EARLY INITIATION OF BREAST FEEDING AMONG MOTHERS AT POST NATAL WARD, KABALE REGIONAL REFERRAL HOSPITAL**

Any assistance rendered to him will be highly appreciated.

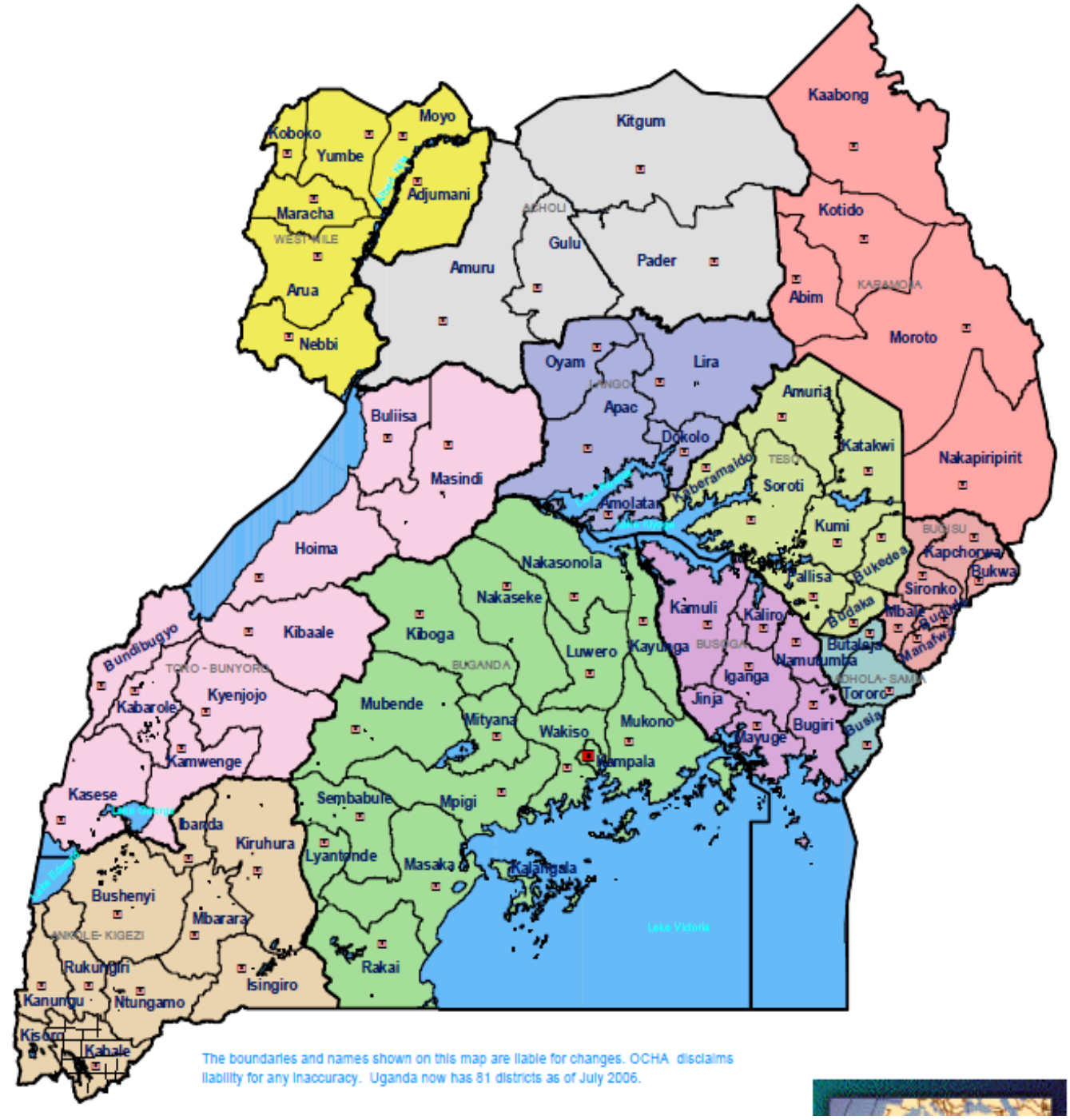
Thank you in advance for the positive response.

KAMPALA INTERNATIONAL UNIVERSITY 14 JUL 2017 DEAN SCH. OF NURSING WESTERN CAMPUS

.....
Naballisa Sarah
RESEARCH COORDINATOR

"Exploring the Heights"

Appendix VI: Map of Uganda Showing Kabale District



KABALE DISTRICT

Appendix VII: Map of Kabale Showing Kabale Regional Referral Hospital

KEY

Kabale Regional Referral