

AMERICAN UNIVERSITY OF BEIRUT

PROPOSING AN ASSESSMENT TOOL FOR BREASTFEEDING
INTENTIONS AND READINESS AMONG PREGNANT
WOMEN IN PRIMARY HEALTHCARE CENTERS IN
LEBANON

by
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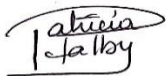
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ABSTRACT OF THE PROJECT OF

Patricia Assad Halby

for

Master of Science in Nursing

Major: Nursing

Title: Proposing an Assessment Tool for Breastfeeding Intentions and Readiness Among Pregnant Women in Primary Healthcare Centers in Lebanon.

Breastfeeding has always been encouraged by healthcare providers worldwide. In order to support and promote breastfeeding, the World's Health Organization has launched the Baby Friendly Hospital Initiative at the inpatient setting. However, there has been no primary healthcare initiative dedicated to support and protect breastfeeding practices at the community level. Therefore, this project aims at providing an assessment instrument that would evaluate the intentions and readiness of pregnant mothers at the level of community towards breastfeeding practices as a first step towards primary initiative. This tool will help understanding the mothers' health literacy, intentions and attitudes of the breastfeeding act. The assessment tool is previously provided by the Center of Disease Control but in English. This project provided a translated version of the instrument into the Arabic language and pilot tested the tool at the level of primary healthcare centers in north Lebanon over a sample of 8 primary healthcare nurses and 2 midwives.

Preliminary results have shown that 100% of participants reflected that the tool is completely readable, clear and understandable. Also, participants reported a practical way to the introduction of the instrument and the importance of such an assessment in nursing practice. This pilot activity gives implications for a follow-up validity implementation project.

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1. Questionnaire development and translation process. Tsang S, et al, 2017 18

ABBREVIATIONS

Center for Disease Control - CDC
Ministry of Public Health – MOPH
World's Health Organization - WHO

CHAPTER 1

INTRODUCTION

Breastfeeding is the process of feeding a newborn baby with the golden milk produced by the mother's breasts. It is recommended by the World Health Organization (World Health Organization, 2020) as the best source of nutrition for infants, as breast milk is uniquely tailored to meet the needs of a growing baby (Center for Disease Prevention and Control, 2019). Breast milk contains the right balance of nutrients, including proteins, fats, carbohydrates, vitamins, and minerals, as well as antibodies and other immune factors that can help protect the baby against infections and other health problems (Link, 2021).

There are many benefits to breastfeeding for both the mother and the baby (McKinsey, 2018). For the baby, breastfeeding can help improve overall health and development, reduce the risk of certain infections and illnesses, and may even have a positive effect on cognitive development (McKinsey, 2018). For the mother, breastfeeding can help reduce the risk of certain health problems, including breast and ovarian cancer, and may also help with postpartum weight loss (Ramadan et al., 2022). In addition to providing nourishment and promoting health, breastfeeding can also have emotional and social benefits. It can help establish a strong bond between the mother and baby and can provide a sense of comfort and security for the baby (Link, 2021).

Breastfeeding is recommended for at least the first six months of a baby's life, and it can be continued for as long as the mother and baby wish. It is important to note that breastfeeding may not be possible for all mothers, and it is important to consider individual circumstances and seek support as needed (McKinsey, 2018).

Breastfeeding is an important aspect of primary healthcare in Lebanon, and efforts have been made to promote and support breastfeeding in the country (Nabulsi, 2011). The Ministry of Public Health in Lebanon has established policies and initiatives to encourage and support breastfeeding, including the Baby Friendly Hospital Initiative (BFHI), which aims to ensure that hospitals and healthcare facilities provide an environment that is supportive of breastfeeding (MOPH, 2018). However, despite these

efforts, breastfeeding rates in Lebanon remain low, and there are several challenges such as the limited access to information and support, the social and cultural barriers, the lack of lactation support and the lack of protection in the workplace that need to be addressed to improve the practice of breastfeeding in the country (Nabulsi, 2011). For these reasons, and because the healthcare system's encouragement methods for breastfeeding initiation and continuation are still not enough to raise breastfeeding rates, a better insight on women's intentions and preparedness for breastfeeding is a must in today's literature. Women's readiness and preferences toward breastfeeding and breastfeeding practices differ from one woman to another and that's how they affect breastfeeding success rates. Therefore, it is better for healthcare professionals to know more about mother's preparedness and intentions for a better person-centered care that can positively impact the breastfeeding journey. In order to do that, this project will propose an assessment tool for breastfeeding intention, and preparedness among pregnant women that can serve for future nursing practices and will also shed light on the role of women's health community nurses in establishing grounds for this topic.

1.1. Aims and Objectives

The aim of this project is to do a purposive review of the literature in order to identify and translate it into Arabic so it can be validated in future studies. The criterion for selecting the tool is that it needs to assess breastfeeding knowledge, attitude, intentions, and preparedness among pregnant women.

CHAPTER 2

LITERATURE REVIEW

2.1. Application of Breastfeeding in primary Healthcare Centers in Lebanon

Under the BFHI, hospitals, primary healthcare centers and healthcare facilities in Lebanon are encouraged to adopt practices that support breastfeeding, such as providing education and support to mothers, promoting skin-to-skin contact between mothers and babies, and helping mothers initiate breastfeeding as soon as possible after birth (MOPH, 2018). These practices are designed to create an environment that is conducive to breastfeeding and to help mothers overcome any challenge they may face while breastfeeding.

Speaking of the application of BFHI in Lebanon, it is important to highlight that based on a personal communication with a breastfeeding consultant in MOPH, out of 166 hospitals in Lebanon (MOPH, 2018), including private and governmental hospitals, only 10 (2%) are committing to this initiative, and only three hospitals are ready for external assessment for accreditation; the other seven hospitals still do not meet the 80% requirements. In addition to these initiatives, there are also a few organizations in Lebanon that provide lactation support and counseling to mothers who are breastfeeding or considering breastfeeding (MOPH, 2018). These organizations offer resources and support to help mothers initiate and continue breastfeeding, and they can provide a valuable source of information and support for mothers who may be struggling with breastfeeding (CDC, 2019).

Despite these efforts, breastfeeding rates in Lebanon remain low, and there are several challenges that need to be addressed to improve the practice of breastfeeding in the country (MOPH, 2018). Some of these challenges include limited access to information and support during pregnancy, social and cultural barriers, a lack of lactation support after delivery, and a lack of protection and support for breastfeeding in the workplace (Johnson & Johnson, 2016). In order to improve the application of breastfeeding in healthcare centers in Lebanon, it will be important to address these challenges and provide more information, support, and resources to women who are pregnant, breastfeeding or

considering breastfeeding (CDC, 2019). This may include initiatives to promote breastfeeding in the workplace, increased access to lactation support and education, and efforts to address cultural and social barriers to breastfeeding (Link, 2021). By addressing these issues, it will be possible to increase breastfeeding rates and improve the health and well-being of mothers and babies in Lebanon (MOPH, 2018).

2.2. Breastfeeding Challenges in Lebanon

While breastfeeding has many benefits for both the mother and the baby, there are several challenges that can make it difficult for women to initiate and continue breastfeeding in Lebanon (Ramadan et al., 2022). One challenge is the limited access to information and support for breastfeeding (Johnson&Johnson, 2016). Many women in Lebanon do not receive adequate information or support when it comes to breastfeeding, which can make it difficult for them to initiate and continue breastfeeding (Nabulsi, 2011). This can be due to a lack of education and resources, as well as a lack of access to lactation support and education (Link, 2021). Another challenge is the presence of social and cultural barriers to breastfeeding. In some parts of Lebanon, breastfeeding may be discouraged or stigmatized due to cultural or social norms (Ramadan et al., 2022). This can make it difficult for women to breastfeed in public or to continue breastfeeding for as long as they would like. It is important to address these cultural and social barriers and promote a more supportive and accepting environment for breastfeeding (CDC, 2019). A third challenge is the lack of lactation support for women in Lebanon (Nabulsi, 2011). Many women do not have access to lactation support or education, which can make it difficult for them to overcome challenges or overcome problems related to breastfeeding (Link, 2021). This can be due to a lack of trained lactation professionals or a lack of resources and support for breastfeeding mothers. Finally, there is a lack of protection and support for breastfeeding in the workplace in Lebanon (Nabulsi, 2011). Many women face barriers to breastfeeding at work, including a lack of private spaces to pump breast milk and insufficient support from employers (Ramadan et al., 2022). This can make it difficult for women to continue breastfeeding while returning to work, which can be a significant barrier to breastfeeding for many mothers (CDC, 2019). These challenges can

make it difficult for women in Lebanon to initiate and continue breastfeeding, which can have negative consequences for both the mother and the baby (Nabulsi, 2011). It is important to address these challenges and provide more information, support, and resources to women who are breastfeeding or considering breastfeeding (McKinsey, 2018). This may include initiatives to promote breastfeeding in the workplace, increased access to lactation support and education, and efforts to address cultural and social barriers to breastfeeding (Link, 2021). Speaking of initiatives, there are no primary healthcare initiatives, like the BFHI, which would encourage and prepare mothers for breastfeeding initiation and continuation at the community level. Despite all the global and national challenges that women are facing outside the hospital, on the level of the community, the effort is still limited. Therefore, assessing the literacy levels of women about such a topic would be the base of further impactful initiatives.

2.3. Role of Women's Health Community Nurses

Woman's health community nurses play a crucial role in the healthcare system, particularly in the area of maternal and reproductive health (Johnson&Johnson, 2016). These nurses are trained to provide specialized care to women throughout their lifespan, with a focus on reproductive health, pregnancy, childbirth, and postpartum care (CDC, 2019). One of the main roles of woman's health community nurses is to provide education and support to women on issues related to reproductive health (Ramadan et al., 2022). This may include providing information on contraception, sexually transmitted infections, and pregnancy care, as well as helping women to understand their own bodies and make informed decisions about their health (Johnson&Johnson, 2016).

Woman's health community nurses also play a key role in supporting women during pregnancy and childbirth. They may provide prenatal care, including monitoring the health of the mother and the developing baby, and providing support and education to help mothers prepare for childbirth (Link, 2021). During childbirth, woman's health community nurses may provide support and guidance to help mothers manage labor and delivery. After childbirth, woman's health community nurses continue to provide care and support to mothers and newborns (McKinsey, 2018). This may include helping

mothers to initiate breastfeeding, providing postpartum care, and helping mothers to understand the physical and emotional changes they may experience after giving birth (CDC, 2019). In addition to providing care and support to women, woman's health community nurses may also work with other healthcare professionals, such as obstetricians and midwives, to provide a coordinated and comprehensive approach to care (MOPH, 2018). They may also work with community organizations and resources to help women access the healthcare and support they need (Johnson&Johnson, 2016). Overall, the role of woman's health community nurses is crucial in supporting the health and well-being of women throughout their lifespan. Their specialized training and expertise allow them to provide high-quality care and support to women, particularly in the area of maternal and reproductive health.

2.4. Gaps in Literature and Need for Assessment Tool

In order to improve breastfeeding rates and support the health and well-being of mothers and babies in Lebanon, it is important to have effective tools and strategies in place to assess and support breastfeeding among pregnant women (Ramadan et al., 2022). Often, assessment tools are used to assess and support breastfeeding mothers (Nabulsi, 2011). Such tools are used to assess the breastfeeding knowledge, attitudes, and practices of pregnant women, as well as to identify any barriers or challenges they may be facing. This information could then be used to develop targeted interventions and support to help women initiate and continue breastfeeding (Johnson&Johnson, 2016). A breastfeeding assessment tool could be used in a variety of settings, including healthcare centers, hospitals, and community organizations (Link, 2021). It could be administered by trained professionals, such as lactation consultants or woman's health community nurses, or it could be self-administered by women themselves. Two very common assessment tools that we refer to in this project: the Breastfeeding Assessment Tool (BBAT) (view appendix 2) and the LATCH (view appendix 3) (Ingram et al., 2015). One potential weakness of both the BBAT and the LATCH assessment tools is that they rely on visual observation, which can be subjective and may not accurately reflect the experience of the breastfeeding mother or the infant. Additionally, the tools do not consider the individual

circumstances or needs of the mother and infant, which can make it difficult to accurately assess breastfeeding and lactation (Ingram et al., 2015). Another weakness of the BBAT and LATCH assessment tools is that they do not consider the emotional or psychological factors that can impact breastfeeding and lactation. For example, they do not take into consideration the mother's feelings or attitudes towards breastfeeding, which can be an important factor in determining breastfeeding success (Ingram et al., 2015). Finally, both the BBAT and LATCH assessment tools can be time-consuming to administer, as they involve the detailed observation of breastfeeding and lactation. This can be a barrier to their use in certain settings or with certain populations. Thus, we can see that there are a number of reasons to using a new breastfeeding assessment tool in Lebanon that would assess the attitudes, knowledge and readiness of mothers towards the breastfeeding act (Link, 2021). This can improve the effectiveness of breastfeeding support and increase the likelihood of successful breastfeeding. In addition, this tool, that focuses on assessing knowledge and intentions, can help in the development of larger-scale interventions and policies to support breastfeeding in Lebanon (Nabulsi, 2011). Overall, the need for a breastfeeding assessment tool in Lebanon is clear (MOPH, 2018). By helping to identify the specific needs and challenges of pregnant women in health literacy as well as her intentions and attitudes to breastfeed her newborn, such a tool can be a valuable tool in supporting the health and wellbeing of mothers and babies in the country.

2.5 Theory of Planned Behavior

As for the theoretical model for behavioral change, this project adopted the theory of planned behavior (TPB) which has been initially proposed by Martin Fishbein and Icek Ajzen. According to the Boston University School of Public Health, the theory of planned behavior, a well-validated social-cognitive theory of the determinants of intention and behavior, predicts the person's "intention to engage in a specific behavior at a specific time and place" (Boston University School of Public Health, 2022). This theory's key component is the intent towards precise behavior, or behavioral intent (BI), over which the individual can exert self-control (Boston University School of Public Health, 2022). According to TPB, the individual's behavioral intent is the result of the following three concepts: attitude, subjective norms and perceived behavioral control (Rachmah et al, 2023). The attitude of the

individual towards performing a specific act is the degree to which the person evaluates personal performance of this behavior in an explicit (positive) or in a destructive (negative) manner (Rachmah et al, 2023). Subjective norms, however, are the individuals' insights and perceptions of social support or of the social opposition to their performance of the behavior (Zandi et al, 2023). Perceived behavioral control is the degree to which the individuals perceive they are in control over the performance of the behavior such as their skills, confidence, and ability to perform the act (Zandi et al, 2023). Therefore, according to this theory, the more positive the person's attitudes, subjective norms, and perceived behavioral control towards an act are, the more likely the individual is to implement this act (Rachmah et al, 2023).

The reason behind choosing this model among others is because the theory of planned behavior has been widely and successfully used to justify an extensive range of health behaviors such as smoking, drinking, using health services and most importantly this theory has been guiding the investigation of breastfeeding practices by assessing the intentions, attitudes, and beliefs of patients regarding each health-related behavior (Rachmah et al, 2023). The correlation between the theory of planned behavior and the breastfeeding assessment tool adopted for the sake of this project is that the two models intend to assess the intent of the health behavior accomplishment based on one's attitude and beliefs. Therefore, the theory of planned behavior is the theoretical model of choice for the behavioral change of the breastfeeding intentions and attitude assessment of pregnant women.

When implemented in this research, *breastfeeding* is the behavior or the desired act, while intentions are based on the *duration and degree* of carrying the breastfeeding behavior. For the three constructs of the theory's key component, first, attitude is the intensity of the mother or pregnant lady's beliefs about the possible health effects of breastfeeding on her as well as on her baby's health. So, it is represented by how strongly she believes that breastfeeding will have positive or negative health effects such as benefits or risks, often defined by breastfeeding knowledge or breastfeeding literacy. Subjective norms incorporate the social pressures and/ or motivation that the mother-to-be receives from her environment such as her family, friends, health professionals, and others towards the breastfeeding act. The perceived behavioral control includes the degree to which the mother evaluates

breastfeeding as an easy or a difficult practice based on her confidence in her ability to achieve breastfeeding expectations.

CHAPTER 3

METHODOLOGY

3.1 Study Design

A purposive review of the literature was conducted to search for tools and questionnaires that address prenatal breastfeeding assessment. A purposive review of the literature was adopted instead of a systematic review to promptly choose and decide on a suitable tool and to translate it for the aim of this project. Once selected, the tool was translated from English into Arabic, the designated language, back translated, then piloted as per the guidelines for translation recommended by Guillemin et Al described below (Guillemin et al, 1993). This project is using the theory of planned behavior as a theoretical framework.

3.2 Method

A purposive search of the literature that focused on available prenatal breastfeeding assessment tools in the literature for pregnant women was done. The American University of Beirut's library website was used for the purposive literature search and included the following databases: CINHALL Complete, Pub Med, National Institute for Health and Care Excellence and Google Scholar. The literature search was done by using the following main key words: "Breastfeeding", "intentions", and "prenatal assessment". The inclusion criteria were articles that encompass questionnaires/tools which assess prenatally the breastfeeding preparedness and intentions of the mother. We excluded articles with tools and questionnaires that assess breastfeeding performance postnatally.

The extensive research resulted in hundreds of articles and nursing journals. The yield of the search was managed and organized using an excel spreadsheet. The following criteria were extracted: year and country, title of the study, level of evidence (1- systematic review; 2- randomized controlled trial, 3- cohort study; 4- observation study), validity measures (internal and external validity), reliability, and adaptation of the tool to another language (Guillemin et al, 1993), whether the tool meets the eligibility criteria.

We identified 16 articles that contained a tool for prenatal assessment. However, the tool with the highest validity, reliability, and generalizability and containing all proposed

elements of the assessment (prenatal intention, and readiness of pregnant women) was selected.

The chosen tool was translated into Arabic, the targeted language, by two different and independent translators (Guillemin et al, 1993). The first translator was aware of the concepts the questionnaire intends to measure, to be able to provide a translation that is it more close to the original tool. The second translator was a language expert who is less aware of the concepts of the original tool assessment (Guillemin et al, 1993). Discrepancies, when resulted, were treated by a third individual, who has not been involved in the previous two translations (Guillemin et al, 1993).

Once translated into Arabic, this tool was back translated into English, also by two independent translators. Unclear wording was revealed through the back-translation (Guillemin et al, 1993). After the forward and backward translations, an expert committee, made of two healthcare professional experts: the assistant Professor and coordinator of the Public Health Track and a lactation specialist and Advanced Community Health Nurse, reviewed both translations and determined whether the translated versions along with the original versions achieve semantic, idiomatic, experimental, and conceptual equivalence. The committee helped also to resolve any discrepancies and thus contributed to the making of a pre-final version of the translation (Guillemin et al, 1993). As per Guillemin et al, the process of the tool's translation is best described in figure 1 (Guillemin et al, 1993).

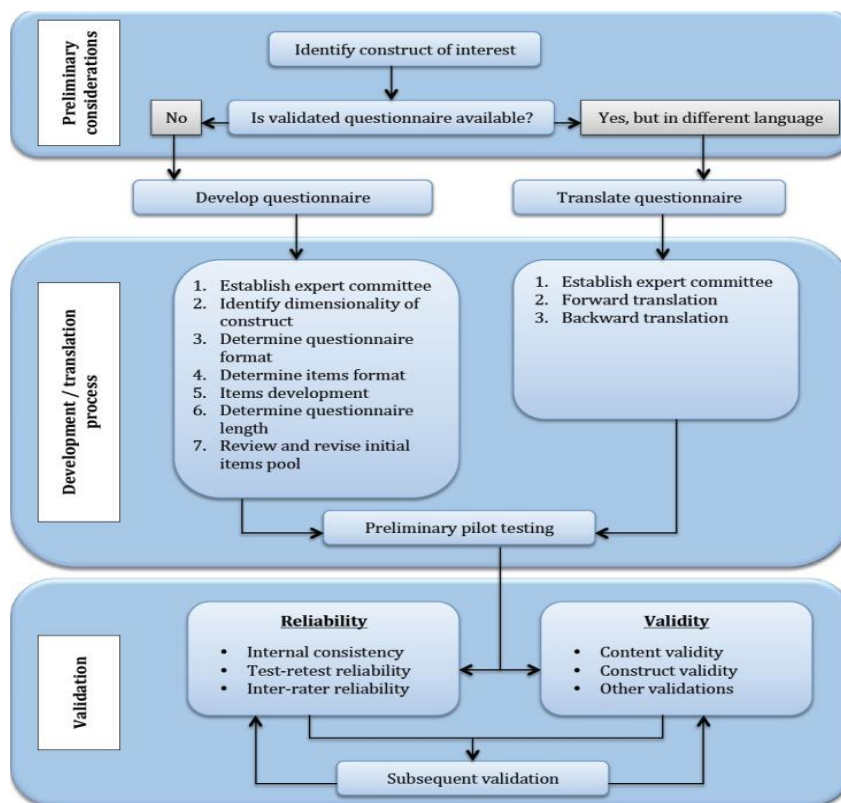


Figure 1. Questionnaire development and translation process. Tsang S, et al, 2017

3.3 Preliminary Pilot Testing

The pre-final version of the translated essential tool was tested on a sample of 10 primary healthcare nurses working in two different primary healthcare centers in North Lebanon. Inclusion criteria incorporated being a registered nurse or a midwife at the centers. A bachelor of scientific nursing or bachelor's degree in midwifery are also required as inclusion criteria for participants in this study. Master's degree for nurses or midwives is not required as inclusion criteria. Being a maternity (women's health) nurse of the center is not also incorporated in the inclusion criteria because all nurses are performing nursing assessments in the triage room so they all can provide their feedback regarding the use and the content of this project's tool.

After receiving and reading the translated questionnaire, each participant nurse/ midwife was asked verbally to elaborate what they thought each questionnaire question and their corresponding answers meant. This approach is used by the translator to be able to make sure that the translated version maintained the same meaning as the original items of the tool and to ensure that there is no confusion in the questionnaire (Tsang S., et al, 2017). This process has been done only once in this project.

The translator booked appointments with participants ahead of time before visiting them in the centers for the pilot activity. All of them were able to meet the translator except for one nurse who was introduced remotely to the tool due to time conflicting schedules. Two of the participants were midwives and the remainders are registered nurses.

The translator's role was to assess and check with the nurses if this proposed tool is accepted by them and whether it is suitable to be used. The translator handed the tool to the nurses to go over its content and asked them questions afterwards to assess how feasible, valid, and applicable the questions of the tool were for the nurses during their practice at the centers.

The questions that were asked are the following:

1. ***Is the tool clearly readable for you?*** Answer by Yes or No
2. ***Is there any language (Arabic) failure?*** Answer by Yes or No. If yes, please specify.
3. ***Is the tool generally acceptable by women?*** Answer by Yes or No.
4. ***Define each question and related answer: What do you think they mean?*** Open ended question.
5. ***Is the application of this tool feasible? What about the times of high patient load?*** Answer by Yes or No. Explain
6. ***How valid for you do the questions of the tool seem to be?*** Answer by Valid or Invalid.
7. ***When reading these tool questions, what did you think the tool aims to assess?*** Open ended question.
8. ***Do you think it successfully reflected the purpose that it aims to assess?*** Answer by Yes or No.
9. ***How easily were you able to read the questions and understand them?*** Choose one: very easy, easy, neutral, difficult, or very difficult.
10. ***How practical is this tool for you during your nursing plan of care?*** Choose one answer: very practical, practical, neutral, unpractical, or very unpractical.

Nurses' answers to each of the above questions were collected and recorded on a secure computer. Results will be displayed in the results section.

CHAPTER 4

RESULTS

4.1. Instrument

While most of the questionnaires were targeting breastfeeding assessment postnatally or during the breastfeeding process, such as the BBAT and LATCH, 16 assessment tools targeted prenatal mother-to-be. However, the tool by the Center for Disease Prevention and Control, CDC, under breastfeeding and infant feeding practices questionnaires section. (CDC, 2021) was chosen as it met all the eligibility criteria (validity, reliability, and more importantly knowledge, attitude, intention to breastfeed). The tool has four sections with a total of fifty-three questions. Thirteen questions were removed because they were not applicable to the Lebanese health system. Each section discusses one specific aspect of the mother's breastfeeding journey. Section A focuses on the mother's health status as well as the healthcare system that she seeks. Section B assesses the employment status of the pregnant lady and her alternatives while breastfeeding and being an employed mom. Section C measures the mother's health and breastfeeding literacy and her knowledge regarding best feeding practices. The last section, section D, considers other health information and problems that would affect the mother's choices and opportunities for being able to comfortably breastfeed her newborn. Please review appendix 1 to review the original instrument.

4.2 Extended Vs Essential Instrument

For the sake of this project, an essential version of the initial extended tool has been created. The extended tool is the original questionnaire without the removed questions. The removed questions were questions number 6, 13, 17, 18, 26, 41, 45, 46, 49, 50, 51, 52 and 53. No questions were added to any of the sections. The remaining tool that was used and translated is made up of thirty-four questions. Please review appendix 3 for extended tool version.

Out of the total thirty-four questions, sixteen questions were selected and combined in an essential version. This method has been adopted to save on time and eventually covers the essential elements of the assessment.

The questions were selected by high importance, relevance, and efficiency to the main tool's assessment purposes. Questions chosen to be kept in the essential tool are those which cover breastfeeding literacy, and future breastfeeding methods of the mother (intentions of the mother) within an attenuated version. The essential tool contains the same four sections of the extended tool, no sections were deleted but the questions with less importance were removed from each section.

To view the essential version of the instrument, please review Appendix 4

4.3 Translation and Back-Translation

The first translation to Arabic was done by a translator who is aware of the concepts of the questionnaire whereas the second translator was unaware of them. The two translations have been done in a different location and time settings. Two different translated documents resulted and have been kept separated in a locked computer. To see the translated version please review appendix 5.

Once the translation was done, back translation to the English language has been done, also by two separate translators similarly to the translation process.

Few unclear wordings have emerged in Section A, question 10 regarding the number of cigarettes smoked per day. The first translator included the pregnant mother and the visitors who smoke while the second translator asked about the number of visitors who do not smoke around the pregnant woman.

After the forward and backward translation, the expert committee reviewed both translated versions of the questionnaire and fixed the unclear wording that has resulted. different sections, and all questions of both tools and produced a pre-final version of the questionnaire. Please review appendix 6 to review the created pre-final version of the instrument.

4.4 Pilot Activity Results

Results showed that all participants, including nurses and midwives, answered “yes” to the first question that evaluates if the tool is clear to be read. In addition, eight out of 10 participants reported that there are no language failures when reading the tool in Arabic. However, one participant stated that she had to repeat question 9 twice to be able to fully understand it because of the wording in Arabic, and another participant mentioned that the second answer in question 13 was not very clear for her from the first time she read it. As for question three, which assesses if the tool would be accepted by the target population of pregnant women, 7 of them answered “yes”, some added and sure thing to their answers and the remaining three participants linked the acceptance of this tool by women, to the women’s cultural background that would consider such topic as a “taboo”. Question 4 results were a detailed explanation of each question and corresponding answer, that represented clear understanding of the items one by one. Some of them used French technical words to express themselves but the general idea behind the tool was clearly met. As for question number 5, most answers were consistent about the feasibility of this tool being implemented at primary health care centers away from high patient’s load. They have stated that this tool would not be affected during high patient’s load since they believe mothers can fill the survey while they are waiting for their turn in the waiting area of the center. Therefore, after filling it in the lobby, it will take nurses less time to discuss it when the patient enters the triage room for assessment. However, one participant mentioned that they are already understaffed in her center so she believes the implementation of this questionnaire would not be very feasible. Also, another answer was “depending on the center where the tool will be implemented.” As for this nurse, “some centers are not abiding by the current nursing assessment tools, so how will they adopt an extra tool such?”. On another hand, results of question 6 serve to confirm the validity of the questionnaire in hands since all answers ranged between “very valid” and “valid”. Question number 7 resulted in a mutual understanding between all participants. The wording was different, but all answers reflected the same idea: the objective of tool is to assess mothers breastfeeding literacy, attitude and readiness for breastfeeding which was also reflected successfully in the answers of question number 8 where all participants answered yes for the question. Also, answers for question 9: *“How easily were you able to read the*

questions and understand them?” consistently stated that the Arabic language used was very simple and clear and most of the answers ranged between easy and very easy, none noted difficult but some repeated question 9 twice to be able to understand its meaning. Last, results of question 10, that tackles how practical the use of this project’s survey was, demonstrated how practical this instrument is for the participants of this pilot activity.

CHAPTER 5

DISCUSSION

Results showed that both nurses and midwives were positive about the introduction of this tool to their existing nursing assessment tools. This attitude has been shown in the answers to all the above questions that are assessing distinct aspects of the instrument; from how readable and understandable to how practical and feasible this instrument can be. Most answers were consistent and supportive to the adopted matrix. Although there was one question that was not fully clear to two nurses, all other questions proved that the instrument is clear, easy to read, and understandable as per the participants answers. Most importantly, the results of question 10 verified how practical the questionnaire was for nurses and their practice.

The importance of this questionnaire goes beyond the impact it puts on nursing optimal practices, yet it also affects the psychological, physical, and emotional well-being of the mother-to-be during and after pregnancy. This is because it tackles how ready the mother is in regards with all aspects that would affect her health. Once the nurse, midwife or any other healthcare provider can tell what information the woman knows and what other knowledge she misses on, they will be able to counsel her with the most accurate and needed evidenced-based knowledge. In addition, it is crucial for the healthcare providers to discover the attitudes of the mothers to be regarding her breastfeeding plans because as per the theory of planned behavior, this would impact her behavior of the breastfeeding act. Therefore, the nurse can plan the breastfeeding plan of care accordingly for an optimal breastfeeding practice. The importance of this questionnaire, hence, is not only related to local and individual impacts yet it also affects national and global breastfeeding rates.

Based on the results shared above, the implementation of this assessment tool could be very feasible. As per the nurses' feedback, the instrument can be filled in the waiting area of each center. While they are waiting for their appointments, and before they enter the nursing assessments, they can take the survey. Based on the results shared by each pregnant lady, the nurses and the physician can plan accordingly. This questionnaire would allow every woman entering the center, to be assessed and taken care of. Surely,

nurses need to be trained on the implementation of this tool for ultimate and effective practices.

The strength of this questionnaire is the breastfeeding impact that it can have on the community and global level. It also makes the care of the patient, a person-centered care which increases breastfeeding rates and practices.

In addition, this instrument would be considered as an added value for community health nurses' practices. It provides better nursing assessment and understanding of pregnant women, thus, a better nursing care and prenatal support.

On another note, the implications of this piloted assessment activity yield to a validity implementation project. After validation and implementation project, the tool could be adopted in nursing community practices. Therefore, to be implemented in primary healthcare centers, another implication is the training for nurses and healthcare providers that must be held before the implementation takes place. Also, the healthcare system in Lebanon must be prepared to adapt such an instrument introduction to its health practices.

As for the limitations, one prominent limitation of this pilot activity is that the Lebanese healthcare system is not prepared for the implementation of such an instrument. Although the tool has been edited based on the current Lebanese healthcare practices and services, yet for the system is not fully ready to accommodate for it especially in the current economic and financial crisis in the country. As previously discussed, policies and procedures must be introduced to the national primary healthcare system in Lebanon to introduce the usage of the tool. Also, healthcare providers should be trained before the adoption of the instrument and the implementation itself needs to be well organized. Another limitation for this study is the current economic system of the Lebanese healthcare system and the situation of the Lebanese people where they are struggling to access primary healthcare systems.

CONCLUSION

The implementation of this project yielded to a very important assessment tool previously introduced by CDC. The instrument is a prenatal assessment questionnaire that aims to assess breastfeeding intentions and preparedness of pregnant women before they initiate breastfeeding and covers four important aspects that impact the initiation and duration of the breastfeeding behavior. The instrument was initially in English, so it was translated into Arabic and pilot tested upon a sample of 8 primary healthcare nurses and 2 midwives who work at PHCs in north Lebanon. The results showed that the instrument is clear, readable, understandable, practical, and acceptable. This study surely needs to be followed by a validity project to be adopted on the national primary healthcare program. It is important to highlight that such an instrument could not only provide person centered care but also can increase breastfeeding national and global rates which is one of the optimal community health nurses' goals.

APPENDIX 1

Prenatal assessment questionnaire as per CDC :

SECTION A: HEALTH AND HEALTH CARE

1. Are you currently pregnant and at least 18 years old?
 Yes..... No..... **(THANK YOU, PLEASE RETURN QUESTIONNAIRE IN THE ENCLOSED POSTAGE PAID ENVELOPE)**

2. When is your baby due? **(PLEASE WRITE IN MONTH AND DAY)**
 MONTH: _____ DAY: _____

3. Who provides your prenatal care? **(PLEASE "X" ALL THAT APPLY)**
 - An obstetrician
 - A family doctor, general practitioner, internist, or other physician.....
 - A midwife or nurse midwife.....
 - Another type of health care provider
 - I am not getting prenatal care from a health professional..... **(GO TO QUESTION 5)**

4. How many weeks pregnant were you when you went for your first prenatal visit?

4 weeks or less..... <input type="checkbox"/>	13 to 18 weeks..... <input type="checkbox"/>
5 to 8 weeks <input type="checkbox"/>	19 to 24 weeks..... <input type="checkbox"/>
9 to 12 weeks <input type="checkbox"/>	25 weeks or more..... <input type="checkbox"/>

5. Are you covered by any kind of health insurance or any kind of health care plan, such as insurance obtained through an employer or a government program like Medicaid?
 Yes..... No.....

6. In the past month, were you enrolled in the WIC program or did you get WIC food or vouchers for yourself or for any of your children? (WIC is a program that gives food to pregnant and nursing women, babies, and young children.) **(PLEASE "X" ALL THAT APPLY)**

Yes, I was enrolled or got WIC food for myself..... <input type="checkbox"/>	Yes, my child was enrolled or got WIC food <input type="checkbox"/>	No..... <input type="checkbox"/>
--	---	----------------------------------

7. What was your weight just before you became pregnant? _____ POUNDS

8. How tall are you? _____ FEET _____ INCHES

9. What is your age? _____ YEARS

10. On the average, how many cigarettes do you smoke a day now? *(Write in 0 if you do not smoke).*
 _____ CIGARETTES PER DAY

11. How many people not including yourself smoke inside your home most days? *(Include family members, friends, and anyone else.)*
 0..... 1 2 3..... 4 or more

12. Have you had gestational diabetes with this pregnancy?
 Yes..... No..... Don't know.....

	YOU, THE BABY'S MOTHER	THE BABY'S FATHER	THE BABY'S BROTHER OR SISTER	THE BABY'S GRANDPARENTS, AUNTS, OR UNCLES	NONE OF THESE RELATIVES
Juvenile onset diabetes (Type I).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adult onset diabetes (Type II).....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asthma.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eczema.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food allergy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Allergies to pollen, dust, animals, latex, or anything else	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overweight or obesity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. As best you know, which of the following health conditions do you yourself or your baby's other relatives have? **(PLEASE "X" ALL THAT APPLY)**

14. Since you learned that you were pregnant, have you eaten more, less, or about the same of the following foods? If you did not eat the food before you learned that you are pregnant and you don't eat the food now, please mark "Did Not Eat Before or Now."

	<u>EAT MORE</u>	<u>EAT LESS</u>	<u>EAT ABOUT THE SAME</u>	<u>DID NOT EAT BEFORE OR NOW</u>
Milk or other dairy foods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eggs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canned tuna.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swordfish, shark, tile fish, or king mackerel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other type of fish.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shellfish.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Luncheon meats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts, peanuts, or peanut butter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcoholic drinks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vitamin or mineral supplements.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any herbal or botanical supplement.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. For each food that you are eating less of, please indicate the reason. (PLEASE "X" ALL THAT APPLY)

	<u>UPSETS MY STOMACH OR MAKES ME FEEL SICK</u>	<u>MAY HARM MY BABY</u>	<u>TO PREVENT A FOOD ALLERGY IN MY BABY</u>	<u>OTHER REASON</u>
Milk or other dairy foods.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eggs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canned tuna	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swordfish, shark, tile fish, or king mackerel.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other type of fish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shellfish.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Luncheon meats	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts, peanuts, or peanut butter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcoholic drinks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vitamin or mineral supplements.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any herbal or botanical supplement.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION B: EMPLOYMENT

16. Did you work for pay at any time from the 3 months before you became pregnant up to the present time?

Yes No..... (GO TO QUESTION 23)

17. Using 1 to mean "None" and 5 to mean "Very much," how much satisfaction do you get from your paid work?

NONE (1) (2) (3) (4) VERY MUCH (5)

18. About how much of your family's income comes from the money you earn from work? (If you are no longer working, answer for the time you were working. If you have reduced your work hours because of your pregnancy, answer for the time before you reduced your hours.)

Less than half About half More than half

19. Do you work for pay now?

Yes, the same number of hours as before pregnancy.....
 Yes, but with reduced hours.....
 Yes, but on leave until after the baby's birth (GO TO QUESTION 21)
 No..... (GO TO QUESTION 23)

20. How many hours per week do you usually work at this job now? (If you work at two or more jobs, answer for the total number of hours you work.)

1 to 9 hours per week 30 to 34 hours per week.....
 10 to 19 hours per week 35 to 40 hours per week.....
 20 to 29 hours per week More than 40 hours per week.....

21. Thinking of work leave that you can use for maternity leave, how many weeks are you eligible for if you have no complications? (Please write in the number of weeks of leave you are eligible for in each of the categories listed below. If you have no leave that you can use for maternity leave, write 0 in all.)

_____ WEEKS OF FULLY PAID LEAVE _____ WEEKS OF PARTIALLY PAID LEAVE _____ WEEKS OF UNPAID LEAVE

22. In your opinion, how supportive of breastfeeding is your place of employment?

Not at all supportive..... Somewhat supportive.....
 Not too supportive Very supportive

23. Do you plan to work for pay during your baby's first year?

Yes No..... (GO TO SECTION C)

24. How many weeks after the baby is born do you plan to return to work?

Fewer than 4 weeks 13 to 16 weeks
 4 to 6 weeks 17 to 20 weeks
 7 to 9 weeks 21 to 30 weeks
 10 to 12 weeks More than 30 weeks.....

25. How many hours per week do you plan to work?

1 to 9 hours per week 30 to 34 hours per week.....
 10 to 19 hours per week 35 to 40 hours per week.....
 20 to 29 hours per week More than 40 hours per week.....

26. How many hours per week would you prefer to work when you return to work?

- | | |
|---|---|
| 1 to 9 hours per week..... <input type="checkbox"/> | 30 to 34 hours per week..... <input type="checkbox"/> |
| 10 to 19 hours per week..... <input type="checkbox"/> | 35 to 40 hours per week..... <input type="checkbox"/> |
| 20 to 29 hours per week..... <input type="checkbox"/> | More than 40 hours per week..... <input type="checkbox"/> |
| | Would prefer not to work..... <input type="checkbox"/> |

27. What will you do with your baby while you are working? (PLEASE "X" ALL THAT APPLY)

- | | |
|--|--|
| My baby will be cared for by a family member..... <input type="checkbox"/> | I will keep my baby with me while I work at home..... <input type="checkbox"/> |
| My baby will be cared for by someone not in my family..... <input type="checkbox"/> | I have not decided yet..... <input type="checkbox"/> |
| I will keep my baby with me while I work outside my home..... <input type="checkbox"/> | |

SECTION C: INFANT FEEDING

28. What method do you plan to use to feed your new baby in the first few weeks

- Breastfeed only (baby will not be given formula)
- Formula feed only..... (GO TO QUESTION 34)
- Both breast and formula feed
- Don't know yet

29. How old do you think your baby will be when you first feed him or her formula or any other food besides breast milk? Less

- | | |
|--|--|
| than one month..... <input type="checkbox"/> | 5 to 6 months..... <input type="checkbox"/> |
| 1 to 2 months..... <input type="checkbox"/> | 7 to 9 months..... <input type="checkbox"/> |
| 3 to 4 months..... <input type="checkbox"/> | More than 9 months..... <input type="checkbox"/> |

30. Do you plan to continue breastfeeding after you return to work?

- Yes..... No..... Do not plan to work after the baby's birth.....

31. How old do you think your baby will be when you completely stop breastfeeding?

_____ MONTHS

32. Using 1 to mean "Not at all Confident" and 5 to mean "Very Confident," how confident are you that you will be able to breastfeed until the baby is the age you marked in Question 31?

- | | | | | | |
|-----------------------------|--------------------------|--------------------------|--------------------------|--------------------------|-----------------------|
| <u>Not At All Confident</u> | | | | | <u>Very Confident</u> |
| <u>(1)</u> | <u>(2)</u> | <u>(3)</u> | <u>(4)</u> | <u>(5)</u> | |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | |

33. Using 1 to mean "Very Uncomfortable" and 5 to mean "Very Comfortable," how comfortable would you be in the following situations?

- | | VERY UNCOMFORTABLE | | | | VERY COMFORTABLE |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| | <u>(1)</u> | <u>(2)</u> | <u>(3)</u> | <u>(4)</u> | <u>(5)</u> |
| Nursing your baby in the presence of close women friends..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Nursing your baby in the presence of men and women who are close friends..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Nursing your baby in the presence of men and women who are not close friends..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

34. Which of the following statements is closest to your opinion? The best way to feed a baby is:

- Breastfeeding.....
- A mix of both breast and formula feeding.....
- Formula feeding.....
- Breastfeeding and formula feeding are equally good ways to feed a baby.....

35. How strongly do you agree or disagree with the following statements?

- | | STRONGLY DISAGREE | SOME-WHAT DISAGREE | NEITHER AGREE NOR DISAGREE | SOMEWHAT AGREE | STRONGLY AGREE |
|---|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|
| Infant formula is as good as breast milk | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If a baby is breastfed, he or she will be less likely to get ear infections..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If a baby is breastfed he or she will be less likely to get a respiratory illness.... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If a baby is breastfed he or she will be less likely to get diarrhea..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Babies should be exclusively breastfed (fed only breast milk) for the first 6 months..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If a child was breastfed, he or she will be less likely to become obese..... | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

36. How do the following people think your baby should be fed in the first few weeks? (Mark "No one in this category" if there is no one in the category, such as if you don't yet have a pediatrician for the baby.)

	ONLY BREASTFED	ONLY FORMULA FED	BOTH BREAST AND FORMULA FED	NO OPINION OR DON'T KNOW	NO ONE IN THIS CATEGORY
Baby's father.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your mother.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your mother-in-law.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your obstetrician or other doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baby's pediatrician or other doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

37. How important are the following people's opinions in your decision about how to feed your baby?

	NOT AT ALL IMPORTANT	NOT VERY IMPORTANT	SOMEWHAT IMPORTANT	VERY IMPORTANT	NO ONE IN THIS CATEGORY
Baby's father.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your mother.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your mother-in-law.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your obstetrician or other doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baby's pediatrician or other doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

38. About how many of your friends and relatives have breastfed their babies?

- | | |
|--|--|
| One or two..... <input type="checkbox"/> | None have breastfed..... <input type="checkbox"/> |
| Three to five..... <input type="checkbox"/> | None have children..... <input type="checkbox"/> (GO TO QUESTION 40) |
| More than five..... <input type="checkbox"/> | Don't know..... <input type="checkbox"/> |

39. About how many of your friends and relatives have never breastfed their infants at all?

- | | |
|--|---|
| One or two..... <input type="checkbox"/> | None – all with babies have breastfed..... <input type="checkbox"/> |
| Three to five..... <input type="checkbox"/> | Don't know..... <input type="checkbox"/> |
| More than five..... <input type="checkbox"/> | |

40. When you were babies, were you and the baby's father ever breastfed?

	Yes	No	Don't Know
You, the baby's mother.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baby's father.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

41. How many other babies have you had or adopted when younger than 12 months old? Do not include the baby you are expecting.

_____ OTHER BABIES HAD _____ BABIES ADOPTED

IF YOU HAVE NOT GIVEN BIRTH TO A BABY, GO TO SECTION D.

42. Have you ever given birth by cesarean?

- Yes..... No.....

43. Did you breastfeed, for any time at all, any of your other babies?

- Yes..... No..... (GO TO SECTION D)

44. How old was your baby when you stopped breastfeeding? (If you have breastfed more than one baby, answer for the youngest one.)

- | | |
|---|---|
| Less than one month..... <input type="checkbox"/> | 7 to 9 months..... <input type="checkbox"/> |
| 1 to 2 months..... <input type="checkbox"/> | 10 to 12 months..... <input type="checkbox"/> |
| 3 to 4 months..... <input type="checkbox"/> | More than 12 months..... <input type="checkbox"/> |
| 5 to 6 months..... <input type="checkbox"/> | |

SECTION D: OTHER INFORMATION

45. Have you heard about any problems in food related to:

	YES	NO
Listeria.....	<input type="checkbox"/>	<input type="checkbox"/>
Mercury.....	<input type="checkbox"/>	<input type="checkbox"/>
Dioxins or PCB's.....	<input type="checkbox"/>	<input type="checkbox"/>

IF YOU HAVE NOT HEARD OF ANY OF THESE PROBLEMS, GO TO QUESTION 47.

46. For each problem in Question 45 that you have heard of, do you remember what kind of food was related to the problem? (PLEASE "X" ALL THAT APPLY)

	SOME TYPES OF FISH	ALL TYPES OF FISH	SOME TYPES OF SHELLFISH	SOME TYPES OF MEAT OR CHICKEN	ALL TYPES OF MEAT OR CHICKEN	SOME TYPES OF CHEESES	SOME TYPES OF LUNCHEON MEATS	ALL TYPES OF LUNCHEON MEATS	DON'T KNOW
Listeria.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mercury.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dioxins or PCB's.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

47. Have you have obtained information about your diet or about feeding babies from any of the following sources for this pregnancy or a previous one? For information about feeding babies, please think of breastfeeding, formula feeding, feeding solid foods, or any other infant feeding information.

	INFORMATION ABOUT MY DIET WHILE PREGNANT	INFORMATION ABOUT FEEDING BABIES	NO INFORMATION FROM THIS SOURCE
Doctor, nurse, or other health professional.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
WIC food program.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relative or friend.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Books or videos.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newspaper or magazine.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Television or radio.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The web site, www.4woman.gov	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The web site, www.breastfeeding.com	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other government web site.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other non-government web site.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

48. Have you recently seen, heard, or read anything about breastfeeding or about infant formula from the following places?

	YES	NO	YES	NO
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TV.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Magazine.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newspaper.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Radio.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On the internet or web.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Billboards or outdoor posters.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOR QUESTION 49, PLEASE LOOK AT THE PICTURES ON THE AD INSERT INCLUDED WITH THIS QUESTIONNAIRE.

49. Have you recently seen the ads shown on the Ad Insert? Have you recently seen an ad...

	YES	NO	NOT SURE
On TV that shows a pregnant woman riding a mechanical bull? <i>See TV Ad 1</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On TV that shows a pregnant woman drinking soda and eating greasy food? <i>See TV Ad 2</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On TV that shows pregnant women in a log rolling competition? <i>See TV Ad 3</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In a magazine or newspaper that shows two dandelions? <i>See Print Ad 1</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In a magazine or newspaper that shows two otoscopes, the medical tool used to examine the ear? <i>See Print Ad 2</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In a magazine or newspaper that shows two scoops of ice cream? <i>See Print Ad 3</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In a magazine or newspaper or on a billboard or the internet that has only words giving a message about breastfeeding? <i>See Print Ad 4</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

50. Have you recently heard any ads on the radio that feature a man singing a song about breastfeeding? One ad is a song set to soul music and another ad is a song set to country western music. Have you recently heard either of these ads?

- Yes, the soul music ad
- Yes, the country western music ad
- No, have not heard either
- Not sure.....

51. Date you completed this form: MONTH ____ DAY ____ YEAR ____

52. As mentioned in the brochure, we need your current telephone number in order to ensure that you are involved at every step of Project FIRST. My current telephone number is: _____
Area code Telephone number

53. Are you the Synovate Consumer Opinion Panel Member?
Yes..... No.....

**THANK YOU.
PLEASE RETURN THIS QUESTIONNAIRE AND THE AD INSERT AS SOON AS POSSIBLE IN THE POSTAGE PAID ENVELOPE PROVIDED**

APPENDIX 2

	0 Poor	1 Moderate	2 Good	Score
POSITIONING Baby well supported; Tucked against mother's body; Lying on side /neck not twisted; Nose to nipple; Mother confident handling baby	No or few elements achieved Needs to be talked through positioning	Achieving some elements Some positioning advice still needed	Achieving all elements No positioning advice needed	
ATTACHMENT Positive rooting; Wide open mouth; Baby achieving quick latch with a good amount of breast tissue in mouth; Baby stays attached with a good latch throughout feed	Baby unable to latch onto breast or achieves poor latch. No/few elements achieved Needs to be talked through attachment	Achieving some elements Some advice on attachment needed	Achieving all elements No advice on attachment needed	
SUCKING Able to establish effective sucking pattern on both breasts (initial rapid sucks then slower sucks with pauses). Baby ends feed.	No effective sucking; no sucking pattern	Some effective sucking; no satisfactory sucking pattern; on and off the breast	Effective sucking pattern achieved	
SWALLOWING Audible, regular soft swallowing- no clicking	No swallowing heard; clicking noises	Occasional swallowing heard; some swallows noisy or clicking	Regular, audible, quiet swallowing	

APPENDIX 3

Extended Version of the instrument:

SECTION A: HEALTH AND HEALTH CARE

1. When is your baby due? **(PLEASE WRITE IN MONTH AND DAY)**
 MONTH: _____ DAY: _____

2. Who provides your prenatal care for you? **(PLEASE "X" ALL THAT APPLY)**
 - Obstetrician
 - A family doctor, general practitioner, internist, or other physician.....
 - A midwife or nurse midwife.....
 - Other health care provider.....
 - I am not getting prenatal care from any health professional.....

3. Do you have any kind of health insurance coverage or any kind of health care plan?
 Yes..... No.....

4. What was your weight just before you became pregnant? _____ Kilograms
5. How tall are you? centimeters
6. What is your age? _____ YEARS

7. On the average, how many cigarettes do you smoke a day now? *(Write in 0 if you do not smoke).*
 _____ CIGARETTES PER DAY

8. How many people do not smoke inside your house? *(Include family members, friends, and anyone else.)*
 0..... 1..... 2..... 3..... 4 or more.....

9. Have you got diagnosed with gestational diabetes with this pregnancy?
 Yes..... No..... I Don't know.....

10. Since you learned that you were pregnant, have you eaten more, less, or about the same of the following foods? If you did not eat the food before you learned that you are pregnant and you don't eat the food now, please mark "Did Not Eat Before or Now."

	<u>EAT MORE</u>	<u>EAT LESS</u>	<u>EAT ABOUT THE SAME</u>	<u>DID NOT EAT BEFORE OR NOW</u>
Milk or other dairy foods.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eggs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canned tuna.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swordfish, shark, tile fish, or king mackerel.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other type of fish.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shellfish.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Luncheon meats.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts, peanuts, or peanut butter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcoholic drinks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vitamin or mineral supplements.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any herbal or botanical supplement.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. For each food that you are eating less of, please indicate the reason. **(PLEASE "X" ALL THAT APPLY)**

	<u>UPSETS MY STOMACH OR MAKES ME FEEL SICK</u>	<u>MAY HARM MY BABY</u>	<u>TO PREVENT A FOOD ALLERGY IN MY BABY</u>	<u>OTHER REASON</u>
Milk or other dairy foods.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eggs.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Canned tuna.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swordfish, shark, tile fish, or king mackerel.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any other type of fish.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shellfish.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Luncheon meats.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nuts, peanuts, or peanut butter.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcoholic drinks.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vitamin or mineral supplements.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any herbal or botanical supplement.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION B: EMPLOYMENT

12. Did you work for pay at any time from the 3 months before you became pregnant up to the present time?
 Yes..... No..... (GO TO QUESTION 23)

13. Do you work for getting paid now?
 Yes, the same number of hours as before pregnancy.....
 Yes, but with reduced hours.....
 Yes, but on leave until after the baby's birth..... (GO TO QUESTION 21)
 No..... (GO TO QUESTION 23)

14. How many hours per week do you usually work at this job now? *(If you work at two or more jobs, answer for the total number of hours you work.)*

1 to 9 hours per week..... <input type="checkbox"/>	30 to 34 hours per week..... <input type="checkbox"/>
10 to 19 hours per week..... <input type="checkbox"/>	35 to 40 hours per week..... <input type="checkbox"/>
20 to 29 hours per week..... <input type="checkbox"/>	More than 40 hours per week..... <input type="checkbox"/>

15. Thinking of work leave that you can use for maternity leave, how many weeks are you eligible for if you have no complications? (Please write in the number of weeks of leave you are eligible for in each of the categories listed below. If you have no leave that you can use for maternity leave, write 0 in all.)

_____ WEEKS OF FULLY PAID	_____ WEEKS OF PARTIALLY PAID	_____ WEEKS OF UNPAID
LEAVE	LEAVE	LEAVE

16. In your opinion, how supportive of breastfeeding is your place of employment?

Not at all supportive..... <input type="checkbox"/>	Somewhat supportive..... <input type="checkbox"/>
Not too supportive <input type="checkbox"/>	Very supportive <input type="checkbox"/>

17. Do you plan to work for pay during your baby's first year?

Yes No..... (GO TO SECTION C)

18. How old your baby will be when you plan to return to work?

Fewer than 4 weeks <input type="checkbox"/>	13 to 16 weeks <input type="checkbox"/>
4 to 6 weeks <input type="checkbox"/>	17 to 20 weeks <input type="checkbox"/>
7 to 9 weeks <input type="checkbox"/>	21 to 30 weeks <input type="checkbox"/>
10 to 12 weeks <input type="checkbox"/>	More than 30 weeks..... <input type="checkbox"/>

19. How many hours per week do you plan to work?

1 to 9 hours per week <input type="checkbox"/>	30 to 34 hours per week..... <input type="checkbox"/>
10 to 19 hours per week..... <input type="checkbox"/>	35 to 40 hours per week..... <input type="checkbox"/>
20 to 29 hours per week..... <input type="checkbox"/>	More than 40 hours per week <input type="checkbox"/>

20. What will you do with your baby while you are working? (PLEASE "X" ALL THAT APPLY)

My baby will be cared for by a family member <input type="checkbox"/>	I will keep my baby with me while I work at home..... <input type="checkbox"/>
My baby will be cared for by someone not in my family <input type="checkbox"/>	I have not decided yet <input type="checkbox"/>
I will keep my baby with me while I work outside my home..... <input type="checkbox"/>	

SECTION C: INFANT FEEDING

21. Which feeding method are you planning to use to feed your new baby in the first few weeks?

Breastfeed only (baby will not be given formula)..... <input type="checkbox"/>	
Formula feed only..... <input type="checkbox"/>	<input type="checkbox"/> (GO TO QUESTION 34)
Both breast and formula feed <input type="checkbox"/>	<input type="checkbox"/> (GO TO QUESTION 30)
Don't know yet <input type="checkbox"/>	<input type="checkbox"/> (GO TO QUESTION 33)

24. How old do you think your baby will be when you first feed him or her formula or any other food besides breast milk? Less than one month

1 to 2 months..... <input type="checkbox"/>	5 to 6 months <input type="checkbox"/>
3 to 4 months..... <input type="checkbox"/>	7 to 9 months..... <input type="checkbox"/>
	More than 9 months..... <input type="checkbox"/>

25. Are you planning to continue breastfeeding after you return to work?

Yes No Do not plan to work after the baby's birth

26. How old do you think your baby will be when you completely stop breastfeeding?

_____ MONTHS

27. Using 1 to mean "Not at all Confident" and 5 to mean "Very Confident," how confident are you that you will be able to breastfeed until the baby is the age you marked in Question 31?

<u>Not At All Confident</u>					<u>Very Confident</u>
<u>(1)</u>	<u>(2)</u>	<u>(3)</u>	<u>(4)</u>		<u>(5)</u>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

28. Using 1 to mean "Very Uncomfortable" and 5 to mean "Very Comfortable," how comfortable would you be in the following situations?

	Very					Very
	UNCOMFORTABLE					COMFORTABLE
Nursing your baby in the presence of close women friends.....	<u>(1)</u>	<u>(2)</u>	<u>(3)</u>	<u>(4)</u>		<u>(5)</u>
Nursing your baby in the presence of men and women who are close friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
Nursing your baby in the presence of men and women who are not close friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

29. Which of the following statements is closest to your opinion? The best way to feed a baby is:

Breastfeeding..... <input type="checkbox"/>	
A mix of <u>both</u> breast and formula feeding..... <input type="checkbox"/>	
Formula feeding <input type="checkbox"/>	
Breastfeeding and formula feeding are equally good ways to feed a baby <input type="checkbox"/>	

30. How strongly do you agree or disagree with the following statements?

		Some-	Neither		
	STRONGLY	WHAT	AGREE NOR	SOMEWHAT	STRONGLY
	DISAGREE	DISAGREE	DISAGREE	AGREE	AGREE
Infant formula is as good as breast milk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a baby is breastfed, he or she will be less likely to get ear infections.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a baby is breastfed he or she will be less likely to get a respiratory illness....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a baby is breastfed he or she will be less likely to get diarrhea.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Babies should be exclusively breastfed (fed only breast milk) for the first 6 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If a child was breastfed, he or she will be less likely to become obese.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. How do the following people think your baby should be fed in the first few weeks? (Mark "No one in this category" if there is no one in the category, such as if you don't yet have a pediatrician for the baby.)

	ONLY	BOTH BREAST	NO	NO ONE IN
	BREASTFED	AND	OPINION	THIS
		A FED	OR DON'T	CATEGORY

FED KNOW

Baby's father.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your mother.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your mother-in-law.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your obstetrician or other doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baby's pediatrician or other doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

32. How important are the following people's opinions in your decision about how to feed your baby?

	NOT AT ALL IMPORTANT	NOT VERY IMPORTANT	SOMEWHAT IMPORTANT	VERY IMPORTANT	NO ONE IN THIS CATEGORY
Baby's father.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your mother.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your mother-in-law.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your obstetrician or other doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Baby's pediatrician or other doctor.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

33. About how many of your friends and relatives have breastfed their babies?

- One or two..... None have breastfed.....
- Three to five..... None have children..... **(GO TO QUESTION 40)**
- More than five..... Don't know.....

34. About how many of your friends and relatives have never breastfed their infants at all?

- One or two..... None – all with babies have breastfed.....
- Three to five..... Don't know.....
- More than five.....

35. When you were babies, were you and the baby's father ever breastfed?

	Yes	No	Don't Know
You, the mother of the baby.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Father of the baby.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

36. Have you ever given birth by cesarean?

- Yes..... No.....

37. Did you breastfeed, for any time at all, any of your other babies?

- Yes..... No..... **(GO TO SECTION D)**

38. How old was your baby when you stopped breastfeeding? *(If you have breastfed more than one baby, answer for the youngest one.)*

- Less than one month..... 7 to 9 months.....
- 1 to 2 months..... 10 to 12 months.....
- 3 to 4 months..... More than 12 months.....
- 5 to 6 months.....

APPENDIX 4

Essential version of the instrument: A total of 16 questions:

1- When is your baby due? (PLEASE WRITE IN MONTH AND DAY)

MONTH: _____ DAY: _____

2- Who provides your prenatal care? (PLEASE "X" ALL THAT APPLY)

- An obstetrician
-
- A family doctor, general practitioner, internist, or other physician
-
- A midwife or nurse midwife
-
- Another type of health care provider.....
- I am not getting prenatal care from a health professional..... (GO TO QUESTION 5)

3- How many weeks pregnant were you when you went for your first prenatal visit?

4 weeks or less..... 13 to 18 weeks.....
5 to 8 weeks 19 to 24 weeks.....
9 to 12 weeks 25 weeks or more

4- Are you covered by any kind of health insurance or any kind of health care plan, such as insurance obtained through an employer or a government?

Yes No.....

5- Have you had gestational diabetes with this pregnancy?

Yes..... No..... Don't know

6- Do you work for pay now?

- Yes, the same number of hours as before pregnancy
- Yes, but with reduced hours.....
- Yes, but on leave until after the baby's birth (GO TO QUESTION 21) No.....
- (GO TO QUESTION 23)

- 7- How many hours per week do you usually work at this job now? (If you work at two or more jobs, answer for the total number of hours you work.)**
- 1 to 9 hours per week 30 to 34 hours per week

 20 to 19 hours per week 35 to 40 hours per week

 20 to 29 hours per week More than 40 hours per week

- 8- Thinking of work leave that you can use for maternity leave, how many weeks are you eligible for if you have no complications? (Please write in the number of weeks of leave you are eligible for in each of the categories listed below. If you have no leave that you can use for maternity leave, write 0 in all.)**

_____ Weeks of full paid leave
 _____ Weeks of partially paid leave
 _____ Weeks of unpaid leave

- 9- In your opinion, how supportive of breastfeeding is your place of employment?**

Not at all supportive..... Somewhat supportive.....
 Not too supportive Very supportive

- 10- How many weeks after the baby is born do you plan to return to work?**

Fewer than 4 weeks 13 to 16 weeks
 4 to 6 weeks 17 to 20 weeks
 7 to 9 weeks 21 to 30 weeks
 10 to 12 weeks More than 30 weeks.....

- 11- What will you do with your baby while you are working? (PLEASE "X" ALL THAT APPLY)**

My baby will be cared for by a family member
 I will keep my baby with me while I work at home
 My baby will be cared for by someone not in my family
 I have not decided yet.....
 I will keep my baby with me while I work outside my home.....

- 12- What method do you plan to use to feed your new baby in the first few weeks?**

Breastfeed only (baby will not be given formula)
 Formula feed only.....
 Both breast and formula feed
 Don't know yet

13- How old do you think your baby will be when you first feed him or her formula or any other food besides breast milk?

Less than one month..... 5 to 6 months.....
 1 to 2 months..... 7 to 9 months.....
 3 to 4 months..... More than 9 months

14- Using 1 to mean "Very Uncomfortable" and 5 to mean "Very Comfortable," how comfortable would you be in the following situations?

	Very uncomfortable			Very comfortable	
	1	2	3	4	5
Nursing your baby in the presence of close women friends					
Nursing your baby in the presence of men and women who are close friends					
Nursing your baby in the presence of men and women who are not close friends					

15- How strongly do you agree or disagree with the following statements?

	Strongly disagree	Somewhat disagree	Neither Agree nor Disagree	Somewhat Agree	Strongly Agree
Infant formula is as good as breast milk					
If a baby is breastfed, he or she will be less likely to get ear infections					
If a baby is breastfed, he or she will be less likely to get a respiratory illness					
If a baby is breastfed, he or she will be less likely to get diarrhea					
Babies should be exclusively breastfed (fed only breast milk) for the first 6 months					
If a child was breastfed, he or she will be less likely to become obese					

16- How important are the following people's opinions in your decision about how to feed your baby?

	Not At All Important	Not Very Important	Somewhat Important	Very Important	No one in This Category
Baby's Father					
Your Mom					
Your Mother-In-Law					
Baby's Obstetrician or Other Doctor					
Baby's Pediatrician or Other Doctor					

APPENDIX 5

Translation to Arabic:

قسم ألف: الصحة والرعاية الصحية

1- هل انت حامل حالياً؟

كلا نعم

2- متى يستحق موعد ولادة طفلك؟ (الرجاء كتابة الشهر واليوم)

اليوم.....

الشهر.....

3- من يقدم لك خدمات الرعاية الصحية ما قبل الولادة ؟ (الرجاء وضع × لكل ما ينطبق)

- طبيب النساء والتوليد
 قابلة قانونية أو ممرضة قابلة
 طبيب العائلة، طبيب صحة عامة، طبيب داخلي، طبيب آخر
 مقدم رعاية صحية آخر
 لا اتلقى اي نوع من الرعاية الصحية السابقة للولادة من اي مقدم رعاية صحية

4- كم كان عمر الحمل بالأسابيع عندما ذهبت الى اول زيارة قبل الولادة؟

- أربع اسابيع وما دون
 من 5 الى 8 اسابيع
 من 9 الى 12 اسبوع
 من 13 ال 18 اسبوع
 من 19 الى 24 اسبوع
 من 25 اسبوع وما فوق

5- هل انت مشمولة بأي نوع من انواع التأمين الصحي؟

- نعم
 كلا

6- ما هو متوسط عدد السجائر التي تدخينها في اليوم؟ (الرجاء كتابة صفر إذا كنت غير مدخنة)

..... سجائر في اليوم

7- كم عدد الأشخاص، باستثنائك انت، الذين يدخلون داخل منزلك؟ (بما في ذلك افراد العائلة والاصدقاء

واي شخص آخر)

- صفر
 واحد
 اثنين
 ثلاثة
 اربعة وما فوق

8 - هل تعاني من مرض سكري الحمل خلال حملك هذا

- نعم
 كلا
 لا اعلم

قسم ب - الحالة الوظيفية

9- هل عملت مقابل اجر في اي وقت خلال 3 أشهر ما قبل الحمل حتى الوقت الحاضر؟

- نعم
 كلا

10 - هل تعملين مقابل اجر حاليا؟

نعم، نفس عدد ساعات عمل فترة ما قبل الحمل

نعم، ولكن مع عدد ساعات عمل منخفضة عن فترة ما قبل الحمل

نعم، ولكن انا في اجازة الى ما بعد ولادة الجنين

كلا

-

11- كم عدد ساعات العمل التي تعملينها بالاسبوع حاليا؟ (اذا كان لديك اكثر من وظيفة الرجاء الاجابة عن عدد الساعات الاجمالي بالاسبوع)

- ساعة الى 9 ساعات
 10 الى 19 ساعة
 20 الى 29 ساعة
 30 الى 34 ساعة
 35 الى 40 ساعة
 أكثر من 45 ساعة

12- كم عدد اسابيع الاجازة التي يحق لك الحصول عليها كاجازة امومة؟ (يرجى كتابة عدد اسابيع الاجازة التي يحق لك الحصول عليها لكل فئة من الفئات المذكورة ادناه):

..... اسابيع مدفوعة بالكامل

..... اسابيع مدفوعة جزئيا"

..... اسابيع غير مدفوعة

13- برأيك، الى أي مدى يدعم مكان عملك الرضاعة الطبيعية؟

- غير داعم على الاطلاق
 غير داعم كثيرا
 داعم الى حد ما
 داعم جدا"

14- هل تخططين للعمل مقابل اجر خلال السنة الاولى من ولادة طفلك؟

- نعم
 كلا

15- كم سيكون عمر مولودك الجديد حين ستعاودين عملك

- أقل من 4 اسابيع
 4 الى 6 اسابيع
 7 الى 9 اسابيع
 10 الى 12 اسبوع
 13 الى 16 اسبوع
 17 الى 20 اسبوع
 21 الى 30 اسبوع
 30 اسبوع وما فوق

16- كم ساعة في الاسبوع تخططين للعمل عند العودة الى عملك؟

- 1 الى 9 ساعات
 10 الى 19 ساعة
 20 الى 29 ساعة
 30 الى 34 ساعة
 35 الى 40 ساعة
 40 ساعة وما فوق

17- من سيقوم برعاية طفلك عندما تعودين الى العمل؟ (ضع × امام كل ما يتوافق)

- أحد افراد العائلة سيهتم بالمولود
 سيقوم برعاية الطفل شخص من خارج العائلة
 سيكون طفلي معي خلال عملي خارج المنزل
 لم اتخذ القرار بعد

القسم ج- تغذية الطفل

18- ما هي وسيلة التغذية التي ستبعينها لإطعام طفلك خلال اسابيعه الاولى

- الرضاعة الطبيعية فقط (لن يعطى الطفل غذاء مخصص للرضع)
 غذاء مخصص للرضع (حليب بودرة)
 رضاعة طبيعية وغذاء مخصص للرضع معا
 لا اعلم

19- براك، كم يجب ان يبلغ حديث الولادة من العمر لكي تقدمي له الحليب الصناعي او اي طعام آخر الى جانب

- حليب الام؟
 شهر الى شهرين
 3 الى 4 أشهر
 5 الى 6 أشهر
 7 الى 9 أشهر
 10 وما فوق

20- هل تخططين لمتابعة الرضاعة الطبيعية بعد عودتك الى العمل؟

- نعم
 كلا
 لا اخطط الى العودة الى العمل

21- براك، كم يبلغ طفلك من العمر عندما ستتوقفين تماما عن الرضاعة الطبيعية؟

..... أشهر

22- باستخدام 1 بمعنى "غير واثقة على الاطلاق" و5 بمعنى "واثقة جدا"، الى اي مدى أنك ستكونين قادرة على ارضاع طفلك الى حد العمر الذي وضعته اعلاه في السؤال رقم 21؟
غير واثقة على الاطلاق

واثقة جدا"
5 4 3 2 1

23- استخدمي 1 للدلالة على "غير مريح على الاطلاق" و 5 للدلالة على "مريح جدا" ، الى اي مدى من الراحة ستكونين في الحالات التالية:

مريح جدا		غير مريح على الاطلاق				
5	4	3	2	1		
					ارضاع طفلك بوجود صديقات مقربات	
					ارضاع طفلك بوجود صديقات واصدقاء مقربين	
					ارضاع طفلك بوجود رجال ونساء غير اصدقاء	

24- اي من العبارات التالية هي أقرب الى رأيك؟

الطريقة الافضل لإطعام وتغذية الطفل هي:

الرضاعة الطبيعية

مزيج من الرضاعة الطبيعية والغذاء المخصص للأطفال

الحليب الصناعي

الرضاعة الطبيعية والحليب الصناعي بنفس قدر الاهمية

25- الى اي مدى توافقين او لا توافقين على ما يلي؟

لا اوافق ابدا	اوافق قليلا	حيادي	اوافق قليلا	اوافق كثيرا
				الحليب الصناعي مفيد بقدر حليب الام

					إذا كان الطفل يرضع، فهو/هي أقل عرضة لالتهاب الأذن.
					إذا كان الطفل يرضع، فهو/هي أقل عرضة لالتهاب الرئة
					إذا كان الطفل يرضع، فهو/هي أقل عرضة للإسهال
					يجب ان يتم ارضاع الطفل حصريا" من حليب الام اول ستة أشهر من عمره
					إذا كان الطفل يرضع، فهو/هي أقل عرضة للسمنة

26- كيف يعتقد هؤلاء الأشخاص انه يجب عليك اطعام طفلك في اسابيعه الاولى؟

رضاعة طبيعية حصرية	غذاء مخصص للرضع	مزيج من الاثنين	لا رأي / لا أعلم	لا شيء مما ذكر

27- ما مدى أهمية آراء هؤلاء الأشخاص فيما يخص قرارك في طريقة تغذية طفلك؟

غير مهم بتاتا"	ليس مهم جدا	مهم قليلا	مهم جدا	لا شيء مما ذكر
				والد الطفل
				والدتك
				والدة زوجك
				طبيبك النسائي
				طبيب الاطفال

28- تقريبا" كم من اصدقائك واقربائك اتبعوا الرضاعة الطبيعية؟

- 1 الى 2
 3 الى 5
 أكثر من 5
 لا اعلم
 لا أحد لديه اطفال
 لا أحد قام باتباعها

29- كم عدد اصدقائك واقربائك لم يقوموا باتباع الرضاعة الطبيعية مطلقا"؟

- 1 الى 2
 3 الى 5
 أكثر من 5
 لا اعلم
 لا أحد، جميعهم اتبعوها

30- هل سبق وخضعت لجراحة قيصرية؟

- نعم
 كلا

31- هل سبق واعتمدت الرضاعة الطبيعية مع اي من أطفالك السابقين؟

- نعم
 كلا

32- كم كان عمر طفلك عندما أوقفت الرضاعة الطبيعية؟

- من شهر الى شهرين
 3 الى 4 أشهر
 5 الى 6 أشهر
 7 الى 9 أشهر
 10 الى 12 شهر
 ما فوق 12 شهر

القسم د- معلومات اخرى

33- هل سبق وحصلتي على معلومات عن التغذية الصحية لك ولطفلك من اي من المصادر التالية؟ عند خاتمة تغذية الاطفال الرجاء التفكير بجميع انواع التغذية.

لا معلومات من هذا المصدر	معلومات حول تغذية الاطفال	معلومات حول تغذية الام خلال الحمل	
			طبيب/ة، ممرض/ة، مقدم/ة رعاية صحية آخر/ى
			اصدقاء/ اقرباء
			كتب
			جريدة او مجلة
			التلفاز/ راديو
			الانترنت
			الموقع الالكتروني لوزارة الصحة
			لوحات

34- هل سبق وقرأت، رأيت او سمعت اي معلومة عن الرضاعة الطبيعية والغذاء المخصص للرضع في اي من الاماكن التالية؟

لا معلومات من هذا المصدر	معلومات حول تغذية الاطفال	معلومات حول تغذية الام خلال الحمل	
			جريدة او مجلة
			التلفاز/ راديو
			الانترنت
			الموقع الالكتروني لوزارة الصحة
			لوحات

APPENDIX 6

Pre-final version of the questionnaire:

قسم ألف: الصحة والرعاية الصحية

1- متى يستحق موعد ولادة طفلك؟ (الرجاء كتابة الشهر واليوم)
اليوم.....
الشهر.....

2- من يقدم لك خدمات الرعاية الصحية ما قبل الولادة ؟ (الرجاء وضع × لكل ما ينطبق)

- طبيب النساء والتوليد
 قابلة قانونية أو ممرضة قابلة
 طبيب العائلة، طبيب صحة عامة، طبيب امراض داخلية، طبيب آخر
 مقدم رعاية صحية آخر
لا اتلقى اي نوع من الرعاية الصحية السابقة للولادة من اي مقدم رعاية صحية

3- هل انت مشمولة بأي نوع من انواع التأمين الصحي؟
 نعم
 كلا

4 - هل تعاني من مرض سكري الحمل خلال حملك هذا
 نعم
 كلا
 لا اعلم

قسم ب - الحالة الوظيفية

5 - هل تعملين مقابل اجر حالياً؟
نعم، نفس عدد ساعات عمل فترة ما قبل الحمل

نعم، ولكن مع عدد ساعات عمل مخفضة عن فترة ما قبل الحمل

نعم، ولكن انا في اجازة الى ما بعد ولادة الجنين

كلا

6- كم عدد ساعات العمل التي تعملينها بالأسبوع حالياً؟ (اذا كان لديك اكثر من وظيفة الرجاء الاجابة عن عدد الساعات الاجمالي بالأسبوع)

- ساعة الى 9 ساعات
 10 الى 19 ساعة
 20 الى 29 ساعة
 30 الى 34 ساعة
 35 الى 40 ساعة
 أكثر من 45 ساعة

7- كم عدد اسابيع الاجازة التي يحق لك الحصول عليها كاجازة امومة؟ (يرجى كتابة عدد اسابيع الاجازة التي يحق لك الحصول عليها لكل فئة من الفئات المذكورة ادناه):
..... اسابيع مدفوعة بالكامل
..... اسابيع مدفوعة جزئيا"
..... اسابيع غير مدفوعة

8- برأيك، الى أي مدى يدعم مكان عملك الرضاعة الطبيعية؟

- غير داعم على الاطلاق
 غير داعم كثيرا
 داعم الى حد ما
 داعم جدا"

9- كم سيكون عمر مولودك الجديد حين ستعاودين عملك؟

- اقل من 4 اسابيع
 4 الى 6 اسابيع
 7 الى 9 اسابيع
 10 الى 12 اسبوع
 13 الى 16 اسبوع
 17 الى 20 اسبوع
 21 الى 30 اسبوع
 30 اسبوع وما فوق

10- من سيقوم برعاية طفلك عندما تعودين الى العمل؟ (ضع × امام كل ما يتوافق)
أحد افراد العائلة سيهتم بالمولود

سيقوم برعاية الطفل شخص من خارج العائلة

سيكون طفلي معي خلال عملي خارج المنزل

لم اتخذ القرار بعد

القسم ج- تغذية الطفل

11- ما هي وسيلة التغذية التي ستتبعينها لإطعام طفلك خلال اسابيعه الاول
الرضاعة الطبيعية فقط (لن يعطى الطفل غذاء مخصص للرضع)
غذاء مخصص للرضع (حليب بودرة)
رضاعة طبيعية وغذاء مخصص للرضع معا"
لا اعلم

12 - برأيك، كم يجب ان يبلغ حديث الولادة من العمر لكي تقدمي له الحليب الصناعي او اي طعام آخر الى جانب حليب الام؟

- شهر الى شهرين
 3 الى 4 أشهر
 5 الى 6 أشهر
 7 الى 9 أشهر
 10 وما فوق

13- برأيك، كم يبلغ طفلك من العمر عندما ستتوقفين تماما عن الرضاعة الطبيعية؟
..... أشهر

14- استخدمي 1 للدلالة على "غير مريح على الاطلاق" و 5 للدلالة على "مريح جدا" ، الى اي مدى من الراحة ستكونين في الحالات التالية:

مريح جدا		غير مريح على الاطلاق				
5	4	3	2	1		
					ارضاع طفلك بوجود صديقات مقربات	
					ارضاع طفلك بوجود صديقات واصدقاء مقربين	
					ارضاع طفلك بوجود رجال ونساء غير اصدقاء	

15- الى اي مدى توافقين او لا توافقين على ما يلي؟

اوافق كثيرا	اوافق قليلا	حيادي	لا اوافق	لا اوافق اطلاقا	
					الحليب الصناعي مفيد بقدر حليب الام
					إذا كان الطفل يرضع، فهو/هي اقل عرضة لالتهاب الاذن.
					إذا كان الطفل يرضع، فهو/هي اقل عرضة لالتهاب الرئة
					إذا كان الطفل يرضع، فهو/هي اقل عرضة للإسهال
					يجب ان يتم ارضاع الطفل حصريا" من حليب الام اول ستة أشهر من عمره
					إذا كان الطفل يرضع، فهو/هي اقل عرضة للسمنة

16- ما مدى أهمية آراء هؤلاء الأشخاص فيما يخص قرارك في طريقة تغذية طفلك؟

لا شيء مما ذكر	مهم جدا	مهم قليلا	ليس مهم جدا	غير مهم بتاتا"	
					والد الطفل
					والدتك
					والدة زوجك
					طبيبك النسائي
					طبيب الاطفال

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