

INFLUENCE OF PARENTAL FACTORS ON EXCLUSIVE BREASTFEEDING IN BADAGRY LOCAL GOVERNMENT AREA OF LAGOS STATE

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Abstract

The study explored the influence of exclusive breastfeeding on child-rearing practices in the Badagry Local Government Area of Lagos State. A descriptive survey research design was employed; all parents in Badagry local Government area Lagos State were involved, with 384 respondents randomly sampled. Data were collected using a questionnaire, and both face and content validity were used, to examine the reliability, test re test method was used and yielded a coefficient of 0.71. Research questions were answered using frequency counts, percentages, and mean values. Hypotheses were tested using a t-test at a 0.05 level of significance. The findings revealed that parents' occupation has a low influence on exclusive breastfeeding in the Badagry Local Government Area. Similarly, parents' culture has a low influence on exclusive breastfeeding in the same area. There was no significant difference in the mean rating of respondents regarding the level of exclusive breastfeeding based on parents' occupation in the Badagry Local Government Area of Lagos State ($F(3,380) = 1.321, p > 0.05$). Likewise, there was no significant difference in the mean rating of respondents regarding the level of exclusive breastfeeding based on parents' culture in the Badagry Local Government Area of Lagos State ($F(6,380) = 82.661, p > 0.05$). It was concluded that there was no significant difference in the mean rating of respondents regarding the level of exclusive breastfeeding based on parents' occupation or culture. Health authorities and community leaders should organize regular awareness campaigns to educate parents about the importance of exclusive breastfeeding, irrespective of their occupational or cultural backgrounds.

Keywords: exclusive breastfeeding, child rearing practice, parent, early childhood

Introduction

There are numerous health advantages for both the mother and the child when it comes to exclusively breastfeeding, which is widely acknowledged as the best method for providing nutrition to infants. Exclusive breastfeeding for the first six months of a child's life is crucial for encouraging normal growth and development, reducing childhood diseases, and establishing the mother-child attachment, according to the World Health Organization (WHO) and other health organizations. Global breastfeeding rates remain below the desired levels in spite of these recommendations, and various factors influence whether mothers initiate and maintain exclusive breastfeeding. However, the practice of exclusive breastfeeding is infrequent; despite its many advantages, it is impacted by a range of parental factors, including socioeconomic position, cultural standards, occupational situations, and health difficulties.

Among these factors, parental occupation and culture have emerged as critical influences on exclusive breastfeeding practices. The time she has available for breastfeeding, the support she receives at work, and her general attitude toward breastfeeding can all be affected by a mother's occupation. As cultural norms and societal expectations can either encourage or discourage breastfeeding, a mother's decision to exclusively breastfeed plays a significant role in shaping cultural beliefs and practices regarding breastfeeding. (Ramat, 2024) One important factor that can either make or break exclusive breastfeeding is the parent's occupation. According to Adejuyigbe *et al.* (2017), working mothers, particularly those in formal employment, may face obstacles such as inadequate maternity leave, a lack of workplace support, and time constraints, all of which can make it more difficult for them to breastfeed exclusively.

According to WHO (2020), the absence of workplace policies that are supportive of breastfeeding frequently forces mothers to start formula or complementary feeding earlier than is recommended. This dynamic

demonstrates how important it is to investigate the impact of workplace demands on breastfeeding practices, especially in the Badagry Local Government Area, where informal employment is common. Attitudes and actions regarding breastfeeding are also significantly influenced by cultural factors. In many African communities, cultural norms and traditional beliefs influence infant feeding practices, sometimes discouraging exclusive breastfeeding (Adepoju & Kolawole, 2019). For instance, contrary to the tenets of exclusive breastfeeding, some cultures advocate feeding newborns water or herbal preparations.

Understanding how cultural influences operate in particular local contexts like Badagry is essential because these practices are frequently rooted in generational traditions and may persist despite educational interventions. In developing regions like Nigeria, where breastfeeding practices vary widely across communities, the interaction between parental occupation and cultural norms in determining exclusive breastfeeding rates is especially pertinent (National Population Commission [NPC], 2018). Cultural beliefs may have a greater impact in rural areas, where traditional lifestyles are more prevalent, while occupational demands may take precedence in urban or semi-urban areas. The Badagry Local Government Area's distinctive socioeconomic and cultural dynamics make it the ideal setting to investigate how these factors influence breastfeeding practices. According to Agho *et. al.*, (2019), previous studies have emphasised the significance of implementing targeted interventions to remove obstacles to exclusively breastfeeding, such as workplace policies, community education, and healthcare support.

However, very little research has examined how occupational and cultural factors interact in particular local contexts. By investigating how parental factors affect exclusive breastfeeding patterns in Lagos State's Badagry Local Government Area, this study aims to fill that void and contribute to a greater comprehension of how socio-cultural and economic contexts influence outcomes for maternal and child health. Since exclusively breastfeeding has numerous advantages for both the mother and the child, every mother longs for the joy of doing so with her child. Nevertheless, there are substantial challenges in spite of this enthusiasm that prevent exclusive breastfeeding from being implemented successfully. These difficulties are influenced by a variety of factors, including societal norms, personal circumstances, and inadequate support systems, and can vary from person to person (Ramat, 2023).

Exclusive breastfeeding is the practice of providing a newborn or infant with just breast milk and no other liquids or solid foods. Breast milk, the greatest and most natural food source for babies, provides all the nutrients the baby needs during this time. For the first six months of a baby's life, exclusive breastfeeding is advised by the World Health Organization (WHO) and other health organisations. After this period, complementary foods can be offered while breastfeeding for up to two years or longer if the mother and child so choose. There are numerous advantages to exclusive breastfeeding for both the mother and the child. Breast milk gives the baby vital nutrients, antibodies, and other bioactive elements that boost their immunity, promote healthy growth, and reduce their risk of contracting a number of diseases and infections. It also helps the mother and child form a solid attachment. Breastfeeding exclusively can help the woman lose weight, recuperate from childbirth, and reduce her risk of developing certain diseases like ovarian and breast cancer. Additionally, because breastfeeding doesn't involve any equipment or preparation, it is a convenient way to feed the baby and offers emotional fulfilment.

Breast milk contains all of the essential antibodies that guard against illnesses and infections, as well as nutrients for growth and development, making it the best food and immunological shield for infants. Obesity, diabetes, asthma, and sudden infant death syndrome (SIDS) risk reduction have all been linked to breastfeeding. Breastfeeding can benefit a mother's mental health while also reducing her risk of breast and ovarian cancer and diabetes and fostering a close bond with her child. However, breastfeeding is an essential skill that can be challenging for some mothers and requires training and support. As a result, to guarantee effective breastfeeding outcomes, healthcare professionals must inform and assist new mothers.

With many benefits for both mother and child, breastfeeding is a crucial aspect of childrearing. The Latin word "nutricus" (meaning "to suckle at the breast") is where the term "nutrition" originates. The three components of a balanced diet food security, disease prevention, and caring are all included in the single action of nursing. Breast milk is the gold standard since it's the best way to feed a baby. Two of the eight goals for human development that world leaders agreed upon at the United Nations Millennium Summit in 2000 are critical for 2015: a three-

fourths reduction in maternal mortality and a two-thirds reduction in child mortality. Breastfeeding may be the public health intervention that saves more lives and improves women's and children's health than any other. The act of breastfeeding best exemplifies the mother and child as an unbreakable pair.

According to the World Health Organization (2013), early sucking stimulates the release of a hormone that aids in the involution of the uterus to its normal size following delivery. Breastfeeding also benefits mothers. The benefits of breastfeeding are well-known and well-documented. Breastfeeding is strongly linked to a lower rate of infant mortality and morbidity in developing nations, whereas there is a lot of evidence in developed nations that breastfeeding protects against sudden infant death syndrome (Victora *et. al.*, 2016). Even in developed nations, research findings highlight both the advantages of breastfeeding and the drawbacks of formula feeding. The term "parent occupation" refers to the particular work or profession that a parent or career pursues as their main source of income. It includes all of the different roles and responsibilities that people play in their professional careers. A child's financial situation, access to resources, educational possibilities, and general well-being can all be significantly impacted by a parent's line of work. Parents can work in a variety of industries, including technology, healthcare, education, business, and skilled professions like plumbing and carpentry.

The child's development and upbringing may be affected in a variety of ways depending on the occupation. (Sirin, 2005; Lareau, 2011) In addition, a child's career aspirations and choices can be influenced by a parent's occupation because children frequently look up to their parents as role models (Mortimer & Lorence, 2012; Eccles, 2014). According to Lincoln *et. al.*, (2019), parents' professional networks and connections can also contribute to the provision of valuable opportunities and mentorship for their children. (Conger & Donnellan, 2007; Conger & Donnellan, 2007; Conger & Donnellan, 2007; McLoyd, 2008). By comprehending the intricate relationships between parent occupation and child development, researchers, policymakers, and practitioners can create ways to support families from a variety of occupational backgrounds and encourage fair opportunities for children's growth and achievement.

In addition, a child's career aspirations and choices can be influenced by a parent's occupation because children frequently look up to their parents as role models (Lorence, 2012; Eccles, 2014 Mortimer &). According to Lincoln *et. al.*, (2019), parents' professional networks and connections can also contribute to the provision of valuable opportunities and mentorship for their children. However, it is essential to acknowledge that there are multiple factors that influence exclusive breastfeeding, including parent-child relationships and more general socioeconomic factors (Conger & Donnellan, 2007; McLoyd, 2008). Within a society, individual and collective behaviour is influenced by cultural norms and values. Triandis (2014) defines norms as socially accepted rules and expectations that define appropriate behaviour in particular circumstances. They differ from culture to culture and include greetings, social graces, gender roles, and emotional expressions. A society's cultural values are the ideals and concepts that it values highly and finds important.

People's choices and actions are influenced by their attitudes, priorities, and decision-making processes (Hofstede, 2019). A culture's symbolic practices are recited and handed down through rituals and traditions. They reinforce cultural beliefs and values and give people a sense of continuity, belonging, and identity. According to Hobsbawm and Ranger (1983), rituals can be religious, social, or personal, and they can be used to mark significant life transitions, express gratitude, or strengthen social bonds. Culture shapes social roles and expectations, which define the behaviour and responsibilities of various positions in a society (Ridgeway, 2011).

These responsibilities may be influenced by factors such as age, gender, occupation, or social standing. Cultural expectations about gender roles, for example, can affect individual opportunities, family relationships, and the distribution of labour (Eggle & Wood, 2013). Culture has a significant influence on parents' attitudes and views about how to raise their children. Cultural perspectives on health, disease, and well-being can impact breastfeeding decisions. For example, because of cultural ideas regarding the advantages of nursing for the infant's health and the mother-child attachment, it is considered the norm and heavily supported in certain societies (Mandal *et. al.*, 2013). On the other hand, there is a dearth of studies that particularly look at how parental culture and occupation affect exclusive breastfeeding. Decisions about breastfeeding may be influenced by cultural norms or taboos in different cultures.

Statement of the Problem

It is widely acknowledged that exclusively for the first six months of a child's life, breastfeeding (EBF) is essential for the child's survival, growth, and development. However, despite efforts to raise awareness of the practice, exclusive breastfeeding rates in Nigeria remain low. Only 29% of infants fewer than six months are exclusively breastfed, far less than the 50% global target set by the World Health Assembly for 2025, according to the National Population Commission (NPC) and the Nigeria Demographic and Health Survey (NDHS).

Even though Lagos State is one of the most urbanised areas in Nigeria, exclusive breastfeeding rates remain unacceptably low, with substantial differences between urban and rural communities. Cultural practices, occupational demands, and a mix of urban and rural characteristics in the Badagry Local Government Area may contribute to a low rate of exclusive breastfeeding adherence. Lack of maternity leave, insufficient time, and breastfeeding support are among the obstacles that many mothers in the region face, particularly those who work in informal or labour-intensive occupations, which may make it difficult to exclusively breastfeed. Additionally, cultural beliefs and practices have a significant impact on breastfeeding behaviour. Contrary to EBF guidelines, some Badagry communities may follow traditional practices like giving infants water or herbal mixtures during the first six months. Exclusive breastfeeding efforts are significantly undermined by these practices, which frequently stem from generational traditions.

There is a dearth of research specifically addressing the interaction between parental occupation and cultural practices in influencing breastfeeding behaviour in the Badagry Local Government Area, despite numerous health campaigns and interventions to promote exclusive breastfeeding. Targeted interventions are further complicated by a lack of localised data, leaving many mothers without sufficient support for exclusive breastfeeding. This investigated the impact of parental variables on exclusive breastfeeding in the Badagry Local Government Area, including occupation and cultural customs. In order to develop culturally appropriate, effective interventions that will raise exclusive breastfeeding rates and ultimately improve child health outcomes in the region, an understanding of these factors is essential.

The main objectives are to:

- i. examine the influence of parents' occupation on Exclusive Breastfeeding Among parents in Badagry local Government Area of Lagos state.
- ii. examine the influence of parents Cultural Belief on Exclusive Breastfeeding Among parents in Badagry local Government Area of Lagos state.

Research Questions

The following questions were raised to guide this study.

- i. To what extent does parents' occupation influence exclusive breastfeeding in Badagry local government?
- ii. To what extent does parents' cultural belief influence exclusive breastfeeding in Badagry Local Government?

Research Hypotheses

The following research hypotheses were formulated for this study.

- H₀1:** There is no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' occupation in Badagry Local Government Area of Lagos State.
- H₀2:** There is no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' culture belief in Badagry Local Government Area of Lagos State.

Methodology

The research design adopted for this study is a descriptive survey design. This method is used to provide a detailed and comprehensive description of a specific phenomenon, event, or population. The population for this study consisted of all parents in Badagry Area of Lagos state. This includes both mothers and fathers who have children residing in the Badagry Area. The term "parents" refers to individuals who have biological, adoptive, or legal responsibility for the care and upbringing of their children. According to Annual national population census 2006, there are Two hundred thirty-seven thousand seven hundred thirty-one. (237,731) parents in Badagry local Government area of lagos state.

To determine the sample size for this study, the researcher made use of a research advisor. According to research advisor (2006) when population is 237, 731, a sample size of 384 is recommended. Therefore, the sample size for this study was 384. To select respondents, multi-stage sampling technique was employed. The first stage involved stratifying Badagry Local Government into three zones: Badagry Central, Badagry West, and Olorunda. In the second stage, simple random sampling techniques were used to select five communities from each zone, resulting in a total of 15 communities. Finally, in the third stage, convenience or accidental sampling technique was used to sample 26 parents from each of the 15 communities, yielding a total of 390 respondents for the study.

A structured questionnaire was utilized as the research instrument, divided into two sections: Section A focused on demographic information, while Section B addressed the research objectives. The face and content validity of the questionnaire were ensured. Reliability testing yielded a coefficient of 0.71 for the exclusive breastfeeding scale, indicating acceptable consistency. A letter of introduction and a consent form were provided to all respondents for their approval and participation in the study.

The data collected were analyzed using both descriptive and inferential statistics. Descriptive statistics, including mean, percentage, and frequency counts, were used to summarize demographic data and answer the research questions. Inferential statistics, specifically Analysis of Variance (ANOVA), were employed to test all the hypotheses at a 0.05 level of significance. This approach ensured a comprehensive analysis of the data to achieve the study's objectives.

Results

Demographic profile of the respondents was presented using frequency counts, mean and percentages. Inferential statistics of Analysis of Variance (ANOVA) was adopted to analyze the research hypotheses generated at 0.05 at level of significance.

Table 1: *Distribution of respondents based on gender*

Gender	Frequency	Percentage
Male	181	47
Female	203	52
Total	384	100.0

Table 1 shows the gender respondents on parental factors on exclusive breastfeeding among parents in Badagry. One hundred and eight-one (181) of the respondents representing 47.1% were male while two hundred and three (203) of the respondents were female representing 52.9%. From the analysis above, it was indicated that female respondents were found to be more in number than male respondents. Therefore, in view of the above result, female respondents prevailed of parental factors on exclusive breastfeeding among parents in Badagry.

Table 2: Distribution of respondents based on Parent Occupation

Parent Occupation	Frequency	Percentage
Civil Servant	148	38.5
Self-employed	94	24.5
Artisans	80	20.8
Farmer	62	16.2
Total	384	100

Table 2 shows the occupation of the respondents on the parental factors on exclusive breast feeding among parents in Badagry. It was indicated that one hundred and forty-eight (148) of respondents representing 38.5% were civil servant, ninety-four (94) of respondents representing 24.5% were self-employed, eighty (80) of respondents representing 20.8% were Artisans, while sixty-two (62) of respondents representing 16.2% were farmer. From the analysis above, it was indicated that the respondents who were civil servant found to be more in number than others with highest frequency and percentage. Therefore, in view of the above result, parent who were civil servant prevailed of parental factors exclusive breast feeding among parents in Badagry.

Table 3: Distribution of respondents based on Parent Culture belief

Parent Culture	Frequency	Percentage
Egun	93	24.2
Awori	83	21.6
Yoruba	78	20.3
Hausa	51	13.3
Igbo	31	8.1
Agoyin	28	7.3
Whedah	20	5.2
Total	384	100

Table 3 shows the parental cultural believe of the respondents on the parental on exclusive breast feeding among parents in Badagry. It was indicated that ninety-three (93) of respondents representing 24.2% were Egun, eighty-three (83) of respondents representing 21.6% were Awori, seventy-eighty (78) of respondents representing 20.3% were Yoruba, fifty-one (51) of respondents representing 13.3 % were Hausa, thirty-one of the respondents representing 8.1% were Igbo, twenty-eight of the respondents representing 7.3% were Agoyin. While, twenty (20) of the respondents 5.2% were Wheldah. From the analysis above, it was indicated that the respondents who were Egun found to be more in number than others with highest frequency and percentage. Therefore, in view of the above result, parent culture who were Egun prevailed of parental factors on exclusive breast feeding among parents in Badagry

Research Question One: To what extent does parent's occupation has influence on exclusive breastfeeding in Badagry Local Government?

Table 4: Frequency on the extent does parent occupation has influence on exclusive breastfeeding in Badagry Local Government.

S/N	Parent occupation and exclusive breastfeeding	VHE	HE	LE	VLE	Mean
1	Parents in higher demanding occupation find it difficult to practice exclusive breastfeeding	10(2.6)	46(12.0)	141 (36.7)	187 (48.7)	1.68
2	Flexibility and inflexibility of your 'work schedule influence your support for exclusive breastfeeding.	20(5.2)	51(13.3)	124(32.3)	189 (49.2)	1.74
3	The nature of your occupation influences your ability to lactate breastmilk effectively	20(5.2)	55(14.3)	113(29.4)	196 (51.0)	1.74
4	Parental stress arising from occupational demands affect your ability to establish successful breastfeeding practices.	20(5.2)	46(12.0)	71(18.5)	247 (64.3)	1.58
5	Occupation of the mother influences her access to breastfeeding resources and information?	10(2.6)	55(14.3)	148(38.5)	171 (44.5)	1.75
	Weighted Mean					1.69

Decision rule: Very High Extent: 3.0-4.0, High Extent: 2.0-2.9, Low Extent: 1.0-1.9, Very Low Extent: 0-0.9. Note: The figures in parentheses are in percentages

Table 4 shows the responses of the respondents on the extent to which parent's occupation has influence on exclusive breastfeeding in Badagry Local Government. It was indicated that Parents in higher demanding occupation does not find it difficult to practice exclusive breastfeeding (mean=1.68), Flexibility and inflexibility of 'work schedule does not influence support for exclusive breastfeeding (mean=1.74), The nature of occupation does not influences ability to lactate breastmilk effectively (mean=1.74), Parental stress arising from occupational demands does not affect ability to establish successful breastfeeding practices (mean=1.58), and Occupation of the mother does not influences her access to breastfeeding resources and information (mean=1.75). In the light of the result, it was revealed that the extent to which parent's occupation has influence on exclusive breastfeeding in Badagry Local Government is low. The weighted mean (**1.69**) which is a numeric indicator that the extent to which parent's occupation has influence on exclusive breastfeeding in Badagry Local Government low.

Research Question Two: To what extent does parent's culture has influence on exclusively breastfeeding in Badagry Local Government?

Table 5: Frequency on the extent to which parent culture has influence on exclusively breastfeeding in Badagry Local Government.

S/N	Parent culture and exclusive breastfeeding	VHE	VHE	VHE	VHE	Mean
1	Cultural upbringings influence your willingness to seek advice or guidance on exclusive breastfeeding from healthcare professionals	6(1.6)	48(12.5)	112(29.2)	218(56.8)	1.59
2	Parent cultural background influence your beliefs and practices regarding exclusive breastfeeding?	27(7.0)	48(12.5)	179(46.6)	130(33.9)	1.93
3	Traditional ceremonies or rituals in your culture influence the duration of exclusive breastfeeding for your child?	7(1.8)	126(32.8)	128(33.3)	123(32.0)	2.04
4	Cultural community's attitude towards breastfeeding in public influence your comfort level with exclusively breastfeeding in public?	32(8.3)	33(8.6)	147(38.3)	172(44.8)	1.80
5	Awareness and acceptance of modern healthcare practices related to breastfeeding exists within the cultural context of Badagry?	37(9.6)	83(21.6)	121(31.5)	143(37.2)	2.04
Weighted Mean						1.88

Decision rule: Very High Extent: 3.0-4.0, High Extent: 2.0-2.9, Low Extent: 1.0-1.9, Very Low Extent: 0-0.9.

Table 5 shows the responses of the respondents on the extent to which parent's culture has influence on exclusively breastfeeding in Badagry Local Government. The respondents indicated that; Cultural upbringings does not influence willingness to seek advice or guidance on exclusive breastfeeding from healthcare professionals (mean=1.59), Parent cultural background does not influence beliefs and practices regarding exclusive breastfeeding (mean=1.93), however, traditional ceremonies or rituals in culture does influence the duration of exclusive breastfeeding for children (mean=2.04), meanwhile cultural community's attitude towards breastfeeding in public does not influence comfort level with exclusively breastfeeding in public (mean=1.80), and Awareness and acceptance of modern healthcare practices related to breastfeeding exists within the cultural context of Badagry (mean=2.04). In the light of the result, it was revealed that the extent to which parent's culture has influence on exclusively breastfeeding in Badagry Local Government is low. The weighted mean (**1.88**) which is a numeric indicator that the extent to which parent's culture has influence on exclusively breastfeeding in Badagry Local Government is low.

Table 6: Summary of Analysis Variance (ANOVA) showing significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' occupation in Badagry Local Government Area of Lagos State

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	50.714	3	16.905	1.321	.267
Within Groups	4863.284	380	12.798		
Total	4913.997	383			

The results of analysis of variance as presented in Table 16 revealed that the calculated value of F was 1.321 ($F_{3,380}=1.321$) and observed probability value is .267 which is greater than the fixed probability value of 0.05 ($P>0.05$). This indicated that the hypothesis which stated that, there was no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' occupation in Badagry Local Government Area of Lagos State was not rejected. This implied that there was no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' occupation in Badagry Local Government Area of Lagos State ($F_{3,380}=1.321$, $p>0.05$). Considering this result, there was no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' occupation in Badagry Local Government Area of Lagos State.

H_{03} There is no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' culture in Badagry Local Government Area of Lagos State.

Table 7: Summary of Analysis Variance (ANOVA) showing significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' culture in Badagry Local Government Area of Lagos State

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	1924.989	6	320.831	82.661	.095
Within Groups	1463.251	377	3.881		
Total	3388.240	383			

The results of analysis of variance as presented in Table 14 revealed that the calculated value of F was 82.661 ($F_{6,380}=82.661$) and observed probability value is .095 which is greater than the fixed probability value of 0.05 ($P>0.05$). This indicated that the hypothesis which stated that, there was no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' culture in Badagry Local Government Area of Lagos State was not rejected. This implied that there was no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' culture in Badagry Local Government Area of Lagos State ($F_{6,380}=82.661$, $p>0.05$). In the light of the result, there was no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' culture in Badagry Local Government Area of Lagos State.

Discussion of Findings

The results show that in the Badagry Local Government, only a small percentage of parents' employment has an effect on exclusive breastfeeding. This may be because jobs with demanding schedules or extended work hours may make it difficult for a mother to exclusively breastfeed. Frew *et.al.*, (2020) found that moms working in governmental and non-governmental organisations in the research area had incredibly low exclusive breastfeeding practices. This result lends credence to the idea that maternal employment may impede exclusive breastfeeding practices. The results show that very few infants in Badagry Local Government are exclusively breastfed.

This could be due to the fact that some cultures within the Badagry local government may have outdated ideas or misconceptions regarding breastfeeding, which could make it more challenging to breastfeed on your own. This finding is in line with Williams's. This study examined how newborn feeding behaviours in a local area were influenced by cultural influences. The results showed that while cultural practices and beliefs did have an impact, exclusive breastfeeding practices were not dominated by them. Furthermore, the findings indicated that respondents in Lagos State's Badagry Local Government Area did not significantly differ in their mean assessment of the degree of exclusive breastfeeding according to the parents' work.

This suggests that regardless of the kind of employment parents held, there was no discernible variation in how parents in Badagry, Lagos State, perceived or rated exclusive breastfeeding. The findings of Kasahun and Abdul (2021), who discovered that being a parent had a major advantage over breastfeeding alone, conflict with this outcome. Frewet *et al.*, (2020) found that moms working in governmental and non-governmental organisations in the research area had incredibly low exclusive breastfeeding practices. These results, however, also run counter to this conclusion. Therefore, maternal employment may be a barrier to exclusive breastfeeding practices.

Additionally, these results are in opposition to those of Santos and Catrina (2022), who found that working mothers were less likely to exclusively breastfeed their children. This could be because it is difficult to maintain a work-life balance while breastfeeding, such as a lack of facilities for breastfeeding at work or limited breaks.

Conclusion

Based on the findings of the study, it was concluded that there was no significant difference in the mean rating of respondents on the level of exclusive breastfeeding based on parents' occupation culture in Badagry Local Government Area of Lagos State

Recommendations

Based on the findings for this study, the following recommendations were made

1. Since occupation and culture had a low influence, targeted education on the importance of exclusive breastfeeding should be provided to mothers through community-based workshops and healthcare settings to increase awareness and knowledge
2. Healthcare workers should offer consistent counseling and postnatal support to mothers regarding breastfeeding practices during and after pregnancy, ensuring that all mothers have access to accurate information and practical assistance
3. Policies that support breastfeeding in the workplace, such as paid maternity leave and designated breastfeeding spaces, should be implemented to make breastfeeding easier for working mothers, irrespective of their occupation
4. Community leaders, including traditional and religious leaders, should be involved in advocacy programs to promote breastfeeding in culturally appropriate ways, ensuring the integration of breastfeeding messages into local practices

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