

R E V I E W

Rates of ever breastfeeding, early initiation, and exclusive breastfeeding in Saudi Arabia: A narrative review

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Abstract. *Background and aim:* Every infant and child has the right to good nutrition according to the “Convention on the Rights of the Child”. Hence, Optimal breastfeeding is so critical that it could save the lives of over 820 000 children under the age of 5 years each year. Breastmilk is the ideal food for infants. However, contrary to the World Health Organization (WHO) recommendations, global breastfeeding rates remain below the target. *Aim:* Hence, this review aimed to update and assess the reported rates of ever breastfeeding, early initiation of breastfeeding (EIBF), and exclusive breastfeeding (EBF) in recent Saudi Arabian studies (2018–2023). *Methods:* Databases were searched for recent breastfeeding-related studies published between January 2018 and June 2023. This review comprised 18 cross-sectional studies. *Results:* The reported rates of ever breastfeeding ranged from 64.7% to 97.5%, and the EIBF rates ranged from 13.9% to 85.1%. In addition, 16.3%–45.7% of women practiced EBF for their infants’ first 6 months of life. *Conclusions:* Breastfeeding rates reported by women in various regions of Saudi Arabia are lower than the current WHO recommendations. Our results thus demonstrate the significant geographic and temporal data heterogeneity in breastfeeding practices in Saudi Arabia. Recommendations are made to enhance these rates. (www.actabiomedica.it)

Key words: child, woman, breastfeeding, Saudi Arabia

Background

Every infant and child has the right to good nutrition according to the “Convention on the Rights of the Child” (1) Hence, Optimal breastfeeding is so critical that it could save the lives of over 820 000 children under the age of 5 years each year. Breastmilk is the ideal food for infants. It is safe, clean and contains antibodies which help protect against many common childhood illnesses. Breastmilk provides all the energy and nutrients that the infant needs for the first months of life, and it continues to provide up to half or more of a child’s nutritional needs during the second half of the first year, and up to one third

during the second year of life (2). The World Health Organization (WHO) and United Nations Children’s Funds (UNICEF) monitor several global indicators of breastfeeding practices. Ever breastfeeding initiation (i.e., “ever breastfeeding”) refers to infants having been breastfed even for a short period. Early initiation of breastfeeding (EIBF) is a global indicator that, according to the WHO, refers to the percentage of newborns breastfed within 1 hour of birth in a specific time (3). The WHO has defined exclusive breastfeeding (EBF), which is another global indicator, as the percentage of infants aged 0–5 months (<6 months) who are fed exclusively with breast milk (4). Globally, despite the WHO and UNICEF recommendations, breastfeeding

still tends to be below the expected levels, and only fewer than half of infants under 6 months old are exclusively breastfed. Moreover, the EIBF is still below the 2025 target of 50% (5). Currently, Saudi Arabia has no systematic surveillance system that shares and compiles data nationally for breastfeeding (6,7). According to a systematic review published in 2014, breastfeeding practices were reported to be inadequate and unfavorable. Despite the high reported rates (commonly above 90%) of breastfeeding initiation overall among Saudi women, low EBF rates have been extensively reported (8). Since the time of that review, various aspects of breastfeeding practices have been widely explored in Saudi Arabia. The Saudi Ministry of Health (MOH) created a maternal health passport that covers various areas of maternal and child health, including breastfeeding. This passport includes documents that provide breastfeeding advice during the prenatal and postnatal periods. Breastfeeding counseling is also included in MOH well-baby clinics for women during visits on the first 6 months of the infants' life (9). As part of the Saudi Childbirth Initiative, the MOH launched the mother-and-Baby-friendly Hospital Initiative in January 2018. The MOH continues to activate and monitor the Baby-friendly Hospital Initiative among healthcare facilities in over 40 hospitals and primary healthcare centers, and within this initiative, the Breastfeeding Encouragement Program was created (10,11). The Saudi Vision 2030 initiative has contributed to economic, social, and cultural advancements that have improved women's standing, given them more authority, and increased their economic engagement. As a result of these social advancements, the manner of breastfeeding may vary in several ways. Women's engagement in the labor force has significantly increased recently in Saudi Arabia, thereby possibly changing how women feed their infants (12). Furthermore, the COVID-19 pandemic is anticipated to disrupt the WHO's 2025 global aim of raising the EBF rate in infants in the first 6 months to at least 50% (13,14).

Objectives

This review aimed to update and assess the rates of ever breastfeeding, EIBF, and EBF that have been reported in recent studies conducted in Saudi Arabia.

Methods

We obtained such objectives through searching (PubMed/Medline, ScienceDirect, Scopus, and Google Scholar) for recent breastfeeding-related studies published between January 2018 and June 2023. The search word "Breastfeeding," "Breast feeding," "Breastfed," "Breast fed," or "Breast milk" was combined with the search term "Saudi," "Saudi Arabia," or "Middle East." This search was enhanced by manual searches of reference lists from each relevant publication identified. We included all English-language studies reporting the rates of ever breastfeeding, EIBF, and/or EBF for up to 6 months among women in Saudi Arabia. Studies targeting a special population, such as women with a systemic disease, were excluded.

Results

This review included 18 cross-sectional studies. An analytical cross-sectional study of women living in Riyadh with children aged 6–24 months reported the lowest rate (64.7%) (15), possibly because of two points. First, the proportion of individuals (30.7%) who underwent cesarean section was high. This method of delivery has been extensively cited as a factor associated with low rates of breastfeeding initiation (8,16) (Table 3). Surprisingly, only 32% of the women received postnatal breastfeeding counseling within the first 6 months of their pregnancy. Breastfeeding knowledge and education have been identified as factors of breastfeeding initiation (8,16). The WHO recommends a minimum of six prenatal and postpartum counseling sessions (17) (Table 3). Among the studies included in our review, the study conducted in the Eastern region of Saudi Arabia, particularly in two prominent cities (Alkhobar and Dammam), on women aged 18–55 years revealed the highest reported rate of ever breastfeeding (97.5%) (18) (Table 3). This previous study has two plausible justifications. First, only 18.2% of the participants underwent cesarean section. Second, nearly 78% of the participants had received health education regarding breastfeeding from various sources, with 70% receiving it in a hospital setting. Women who attended the maternal and child health clinic services at two major hospitals were included in

that study, and one of these hospitals is a globally recognized baby-friendly hospital. Hence, they were possibly exposed to repeated messages that promote EBF. In comparison with the preceding decade, Al Juaid et al. published a systematic review of breastfeeding in Saudi Arabia in 2014, analyzing 17 studies published between 1979 and 2011 (8). Although most of these previous studies reported ever breastfeeding rates of more than 90% in this country, the ratings ranged from 76% to 98.9% (8). The average rate of breastfeeding in the Eastern Mediterranean region was recently 84.3%. Thus, Saudi Arabia has a relatively higher rate than the Eastern Mediterranean region (19) (Table 1). Of note,

breastfeeding practice is influenced by many factors, which have been discussed in several reports. These factors include knowledge, education, woman's age, geographical location, delivery mode, obesity, systemic disease, and occupational status (7,20,21) (Table 3).

Rate of early initiation of breastfeeding

Among these included studies, a cross-sectional study conducted at the Maternal and Children's Hospital (MCH) in Najran City, Saudi Arabia, reported the greatest rate of EIBF (85.1%) (21). Clinics in MCH provide immunization, pediatrics, and breastfeeding

Table 1. Studies reported rates of ever breastfed according to its geographical distribution.

Citation	Study	Place	Population	Sample size (N)	Ever Breastfed (N)	Ever Breastfed Rate (%)
(23)	Azzeh et al, 2018.	Mecca	Mothers having children aged 2 to 3 years old	814	658	80.8 %
(24)	Raheel et al, 2018.	Riyadh & Dammam	Mothers having at least one child	614	545	88.8 %
(25)	Khresheh et al, 2018.	Umluj	Mothers aged 20 to 45 Years old	67	60	89.6 %
(14)	Elmougy et al, 2018.	Eastern (Alkhobar & Dammam)	Mothers aged 18 to 55 Years old	280	273	97.5 %
(19)	Alsulaimani 2019.	Taif	Mothers of infants aged. 6–12 months	202	176	87.1 %
(5)	Ahmed & Salih, 2019.	KSA	Mothers with infants less than 24 months of age	1700	1559	91.7 %
(26)	Hegazi et al, 2019.	Rabigh	Mothers of children aged 6 months to 5 years	420	403	96 %
(27)	Al-Katufi et al, 2020.	Al-Ahsa	Mothers working in primary health care	200	182	91 %
(28)	Alyousefi, 2021.	Riyadh	Mothers with infants between 6 and 24 months of age	322	263	81.7 %
(10)	Albar, 2022.	Jeddah	Mothers of infants aged 4–12 months	247	229	92.7 %
(16)	Ibrahim et al, 2023.	Najran	Mothers aged 18 years and older	251	233	92.8 %
(13)	Hassounah et al, 2023.	Riyadh	Mothers of 6–24-month-old children	323	209	64.7 %
(30)	Gohal et al, 2023.	Jazan	Mothers with infants up to 2 years old	360	334	92.8 %

This table shows that the reported rates of ever breastfeeding and its geographical regions of Saudi Arabia that ranged from 64.7% - 97.5%.

Table 2. Studies reported rates of early initiation of breastfeeding <1 hour (EIBF).

Citation	Study	Sample size (N)	EIBF (N)	Percentage (%)
(24)	Raheel et al, 2018.	614	224	36.5 %
(23)	Azzeh et al, 2018.	814	310	38.1 %
(19)	Alsulaimani, 2019.	202	28	13.9 %
(26)	Hegazi 2019.	420	178	42.4 %
(5)	Ahmed & Salih, 2019.	1700	742	43.6 %
(10)	Albar, 2022.	247	111	44.9 %
(20)	Elgzar et al, 2023.	403	343	85.1 %
(13)	Hassounah et al, 2023.	323	126	39.0 %

According to the included studies, the rates of EIBF (<1 hour) ranged from 13.9% to 85.1%.

support. In Najran City, MCH is the sole hospital that offers services for maternity and child health. EIBF within an hour is also supported by the MCH rules; it is a critical responsibility for medical professionals in the delivery room and must be recorded in the patient's file. Hence, the high rate of EIBF recorded might be explained by justification (22). Conversely, a study conducted in Taif in 2019 among women of infants aged 6–12 months reported the lowest rate of EIBF (13.9%) (23) (Table 2). This result might be explained by the inclusion of younger women as participants [mean age: 23.4 years (SD = 4.89)]. Although authors could not support the results they found, their findings highlight the significant regional and historic heterogeneity in Saudi Arabian data, making the interpretation challenging (23) (Table 2). Alzaheb reviewed breastfeeding in the Middle East in 2017, analyzing studies published between 2001 and 2017. In terms of EIBF rates in the first hour of life, only two studies in Saudi Arabia showed rates of 11.4% and 22%, respectively. The author found that the pooled rate of EIBF in the Middle Eastern region was 34.3% according to the results of eight included studies (24,25) (Table 1). According to the current UNICEF global database (updated in December 2022), no data were found for Saudi Arabia. The global rate of EIBF scored 47%, and UNICEF targets 50% by 2025 and 70% by 2030 (5) (Table 1).

Rate of exclusive breastfeeding

Among the included studies, the study conducted in the Eastern region of Saudi Arabia reported the

highest rate of EBF (45.7%) (18) (Table 3). As previously demonstrated by the low percentage of women who underwent cesarean section (18.2%), the high exposure to breastfeeding health education and the frequent exposure to messages that support the continuation of EBF can explain this rate (18) (Table 3). In Taif City, the reported rate of EBF for the first 6 months was low (16.3%), possibly impacted by the inclusion of younger women (mean age = 23.4 years) (23) (Table 2). These findings also reflect Saudi Arabia's wide-ranging regional and temporal data heterogeneity, making the interpretation difficult (23) (Table 2). In comparison with previous reviews, the systematic review conducted by Al Juaid et al. in 2014 revealed that the EBF rate could not be reliably estimated because the rates ranged from 0.8% to 43.9% by region among the 17 studies conducted in Saudi Arabia. This limitation may be explained by the lack of specific parameters and the nature of study design (8).

According to the review of breastfeeding in the Middle East by Alzaheb in 2017, the rates of EBF in Saudi Arabia ranged from 12.2% to 31.4% in six studies (24) (Table 1). The author also found that across the Middle East, the reported rate of EBF at 6 months of the infants' life was 2%–56.4%. Furthermore, the combined data of the 17 studies included in this review reported that the pooled rate of EBF at 6 months in the Middle Eastern region was 20.5% (24) (Table 1). According to a review in 2022, the average rate of EBF in the Eastern Mediterranean region was 30.9%. As a result, Saudi Arabia ranks marginally above this score within the Eastern Mediterranean region (19) (Table 1).

Table 3. Studies reported rates of exclusive breastfeeding up to 6 months.

Citation	Study	Sample size (N)	Exclusive Breastfeeding (N)	Percentage (%)
(24)	Raheel et al, 2018.	614	227	37%
(14)	Elmougy et al, 2018.	280	128	45.7%
(19)	Alsulaimani, 2019.	202	33	16.3%
(26)	Hegazi et al, 2019.	420	116	27.6%
(27)	Al-Katufi et al, 2020.	200	87	43.5%
(28)	Alyousefi, 2021.	322	90	28%
(4)	Abualreesh et al, 2021.	400	182	45.5 %
(17)	Al-Anazi et al, 2022.	360	133	36.9%
(16)	Ibrahim et al, 2023.	251	67	26.7%
(13)	Hassounah et al, 2023.	323	67	20.7%
(30)	Gohal et al, 2023.	360	104	28.9%
(18)	Al-Thubaity et al, 2023.	1577	506	32.1%
(31)	AlQurashi et al, 2023.	664	220	33.1%
(20)	Elgzar et al, 2023.	403	165	40.9%

The rate of EBF for the first six months of life of the infants ranged from 16.3% to 45.7%.

As mentioned, the UNICEF's current global database showed no data for Saudi Arabia. Only 48% of infants worldwide were exclusively breastfed; this rate is still below the targets of 50% by 2025 and 70% by 2030 (5) (Table 1).

Discussion

This review revealed that the rates of breastfeeding practice reported by women in the reviewed studies in different regions of Saudi Arabia are lower than the current WHO recommendations. Our findings reflect Saudi Arabia's broad geographical and temporal data divergence in terms of breastfeeding behavior and practice. Recent cross-sectional surveys in Saudi Arabia indicated that breastfeeding rates in this country remain below the global standards, despite the Saudi MOH's emphasis on EIBF and EBF continuation. Presently, breastfeeding research in Saudi Arabia has relied on cross-sectional study designs and self-reported breastfeeding practices, raising the possibility of recall bias or a desire for social acceptance. Considering the complexity and multidimensional nature of this surveillance, we recommend conducting

longitudinal and cohort studies in Saudi Arabia to measure breastfeeding and risk factors because multiple variations and various sociocultural and physiological factors would influence the results more accurately. To meet the worldwide breastfeeding targets of 2025 and 2030, healthcare providers need to exert more efforts and conduct greater interventions to encourage breastfeeding. Interventions include those designed to eliminate preventable causes of breastfeeding avoidance. We recommend more creative initiatives to improve breastfeeding practice, nationwide follow-up studies, and establishment of a breastfeeding surveillance system.

Limitations

The cross-sectional nature of the studies conducted in Saudi Arabia. In addition to the subjective pattern of such studies as it depends mainly on the self-reported practice by the lactating mothers so, it's a subject to recall bias. Exploring the lack of longitudinal data to examine breastfeeding patterns across time would provide a more comprehensive understanding of the present evidence base's shortcomings. Other

limitations of this study include the lack of quality evaluation for the included papers and the possibility of publication bias.

Conclusion

There is a need for well-designed longitudinal studies and deeper analysis of the causes of heterogeneity in breastfeeding practices. In addition to, more investigation of breastfeeding rates and associated factors with a focus on more reliable and detailed responses, such as face-to-face interviews. Hence, understanding of the social, personal, and medical circumstances that affect the breast-feeding practice in the Saudi Community.

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