

Factors Contributing to Breastfeeding Cessation Among Arab Women in Israel

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Background

WHO Recommendation: Exclusive breastfeeding for the first 6 months.

Infant Benefits: Lower risk of infections, SIDS, allergies, type 2 diabetes, and obesity.

Maternal Benefits: Reduced risk of breast and ovarian cancers, and osteoporosis.

Israel Rates: 6-month exclusivity – 22.5% Jewish mothers, 12.3% Arab mothers.

Cultural Context: Supported in both Islamic and Christian traditions.

Research Gap: Limited data on cultural, social, and occupational factors influencing early cessation in Arab populations.

Study Objective

Primary Goal:

Comprehensively explore factors influencing Arab Muslim and Christian women's decisions to discontinue breastfeeding

349
Participants

65% Muslim
35% Christian

64.8%
Academic
Degree

Methodology

Design: Cross-sectional survey

Analysis: Logistic regression

Variables: 24 predictors

Outcomes: 6 cessation reasons

Age range: 21-45 years

Key Findings



Religious Paradox:

Higher religiosity was associated with increased breastfeeding cessation (OR: 2.55-3.37)



Christian vs Muslim:

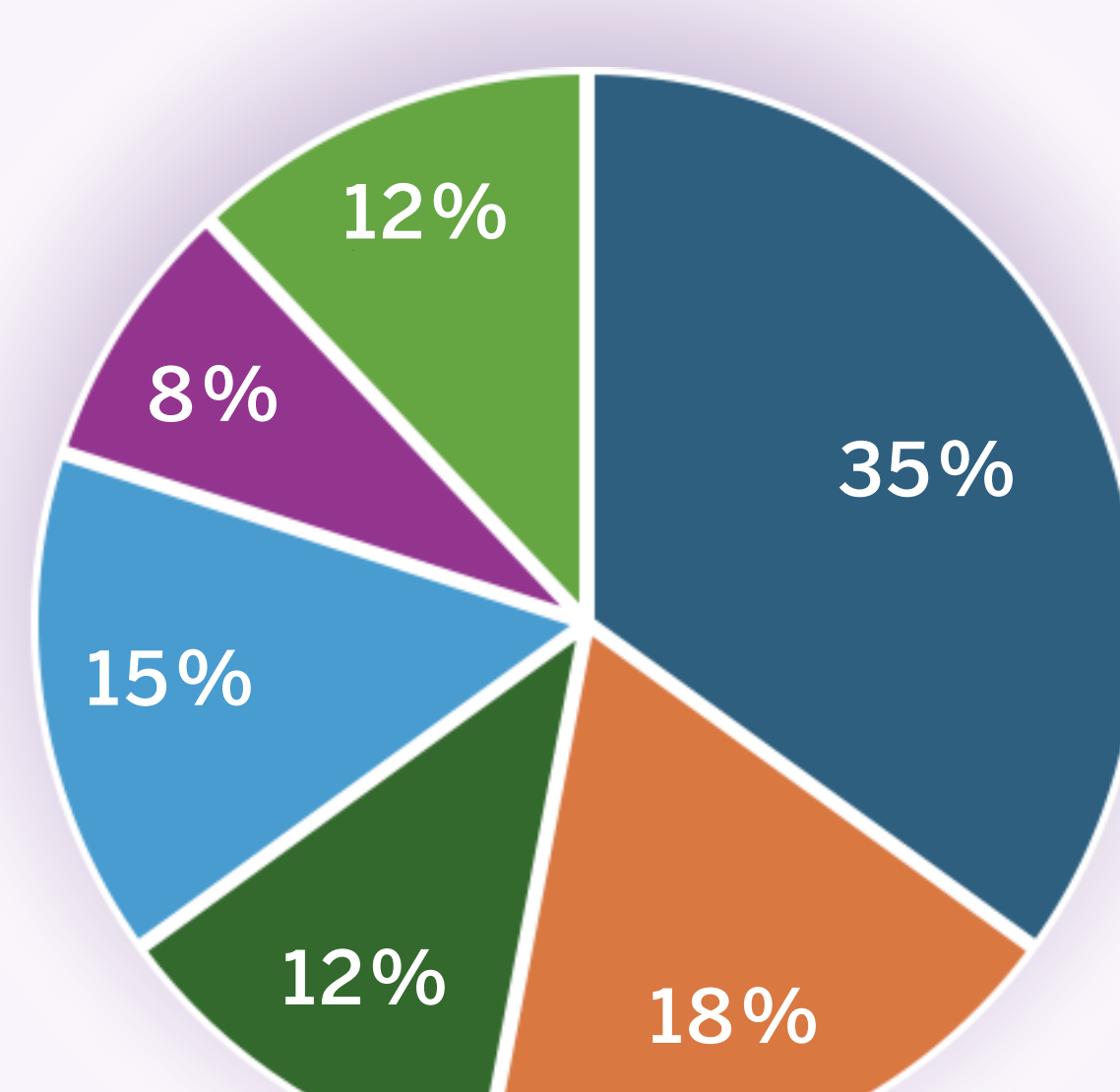
Christian women: 2.6-12.9 times more likely to stop breastfeeding early



Family Size Effect:

Mothers with 4+ children: 3.6-6.3 times more likely to cease

Main Results - Six Major Cessation Reasons



Insufficient Milk Supply

Maternal Health Issues

Lack of Professional Support

Infant Health Issues

Discomfort & Fatigue

Work Conditions

Conclusions

This study reveals complex interactions between cultural, religious, and practical factors affecting breastfeeding cessation among Arab women in Israel.

Study Limitations

- Cross-sectional design
- Self-reported data
- Limited to Arab women
- No causal inference

Recommendations

Healthcare: Cultural competency training, consistent guidance quality, targeted support for high-risk group

Policy: Enhanced workplace support, family-centered interventions, address economic barriers

Research: Longitudinal studies needed, mixed-methods approaches, intervention effectiveness testing