

Introduction Smoking is one of the most significant public health problems on a global scale. In the "Health at a Glance" report in 2019, the rate of females smoking in Organization for Economic Co-operation and Development (OECD) countries is 14% (OECD, 2019). According to findings of the Global Adult Tobacco Survey, Turkey (2016), 17.5% of women use tobacco (Ontas & Aslan, 2016). Women who smoke before pregnancy tend to continue to smoke during pregnancy (Balmumcu, Unsal Atan & Kus, 2018). According to the European Perinatal Health Report (2015), more than 12.5% of the women in one fourth of 19 countries smoke during their pregnancy (Euro- Peristat Project, 2015). The rate of smoking during pregnancy in Turkey ranges between 10.3% and 17.5% (Bal Erbas et al., 2020; Seker, Aydogdu & Annette Akgur, 2019; Kose et al., 2019; Tarhan & Yilmaz, 2016).

The World Health Organization (WHO) and United Nations International Children's Emergency Fund (UNICEF) encourage breastfeeding within the first hour after birth, exclusive breastfeeding for the first 6 months, and continuing breastfeeding alongside supplementary foods for at least two years or more (WHO & UNICEF, 2018). According to the "Global Breastfeeding Scorecard 2018" report, the rate of breastfeeding within the first hour of birth is 42%, exclusive breastfeeding for infants younger than six months is 41%, continuing breastfeeding at the age of one is 71% and at the age of two is 45% (WHO & UNICEF, 2018). According to the findings of Turkey Demographic and Health Survey 2018 data, 41% of infants younger than six months are exclusively breastfed while the median breastfeeding duration of infants is 1.8 months (TDHS, 2019).