

Effect of Maternal-Infant Attitude on Breastfeeding Exclusivity and Duration

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Introduction

- Breast milk is the most optimal form for nutrition for infants & provides appropriate nutrients an infant needs to survive.
- Breastfeeding decreases incidence of breast cancer & ovarian cancer in mothers.
- Breastfeeding helps prevent respiratory tract infection, gastrointestinal complications, childhood obesity, and many other conditions in children.

Background & Significance

Breastfeeding Rates

- Approximately 84% of babies born in the United states are breastfed. Only 58% are breastfed for the recommended six months.
- In New Jersey, 89% of infants are breastfed but only 27% are exclusively breastfed for the recommended six months.
- At six months, Hispanic & African American breastfeeding rates are 55% & 48% from initial rates at 84% & 74%. Caucasian breastfeeding rates are initially 87% & declines to 62% at six months.

Benefits of Breastfeeding

- Breastfeeding protects mothers & infants from various illnesses
- If more women breastfed, about \$13 billion would be saved annually

Strategies to Improve Breastfeeding

- Breastfeeding support & interventions should begin during pregnancy & continue after childbirth
- Peer counseling is positively associated with breastfeeding initiation & continuation until 12 months of age.

Methodology

Design

Pilot project using prospective chart review design. There was also an educational group class about breastfeeding. Pre- and post-surveys regarding attitude toward infant feeding were administered.

Setting

Women's health clinic associated with a 554bed hospital in northern New Jersey

Study Population

Inclusion Criteria

- Females between the ages of 18 to 40 who were 37 to 41 weeks pregnant, English-speaking, & interested in breastfeeding

Exclusion Criteria

- Younger than 18-years-old or older than 40-years-old, did not complete pretest or posttest, did not attend a scheduled class, non-English speaking, contraindication to breastfeeding such as HIV

Measures

- Breastfeeding practices, intentions, and plan for breastfeeding exclusivity & duration
- Iowa Infant Feeding Attitude Scale (IIFAS) used to determine attitude toward infant feeding. Instrument includes statements about breastmilk & formula & how much the individual agrees or disagrees with the statements.

Analysis

- Demographic data- age, gravida, parity, estimated due date, gestational age, ethnicity, plan for feeding infant, breastfeeding experience, WIC enrollment, working status
- Due to limited number of participants, statistics were not evaluated.
- Demographic data was reviewed
- Scoring of the IIFAS done to compare survey answers pre- and post-breastfeeding educational session.

Results

A total of four patients showed interest in participating in the study. Three patients signed consents and completed the pre-survey. Two patients attended an online one-hour educational breastfeeding class & were contacted one week after delivery to assess for breastfeeding exclusivity and plans for breastfeeding duration. The patients completed the post-test during that time of contact. The women who showed interest in the study and educational intervention ranged in age from 20 to 29. One woman was African American and three were Hispanic. Those who participated in the study were Hispanic, between the ages of 20 and 29, and had gestational ages of 37 weeks and 38 weeks. Both women indicated it was their first child, and both were on disability leave at time of recruitment. When initially asked about plans for feeding their baby, participant A stated she wanted to exclusively breastfeed, and participant B mentioned she wanted to breastfeed and bottle-feed. Both women had no breastfeeding experience and were both enrolled in WIC.



Implications

Clinical Practice

- Peer support & group prenatal classes have been shown to have a significant impact on breastfeeding initiation, duration, & exclusivity

Health Policy

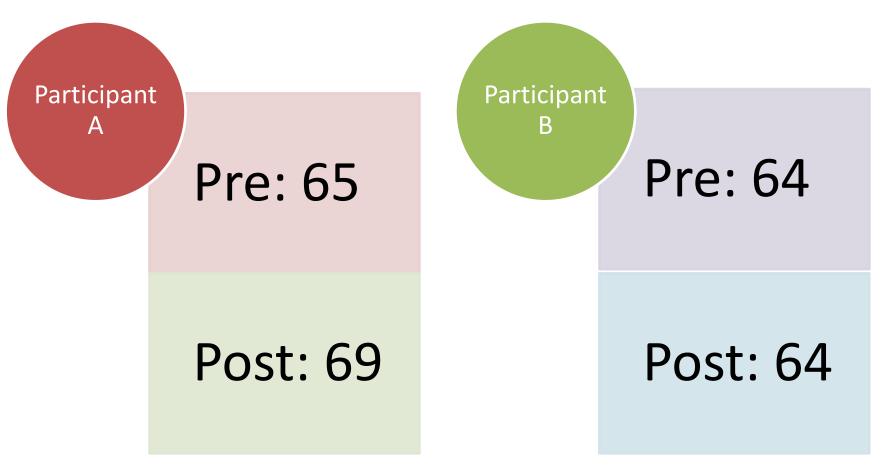
- Providing support to underserved populations including the Hispanic & African American populations can lead to major changes in practice & help increase the health of these populations.
- Increasing maternal attitudes toward breastfeeding will help increase breastfeeding exclusivity & duration, which will improve the health of breastfeeding infants & breastfeeding mothers
- Breastfeeding outcomes are considerably impacted by maternal practices & healthcare support

Economics

 Improved breastfeeding rates= reduced risk of long-term medical conditions= overall improved cost effectiveness

Quality & Safety

- Breastfeeding is safe & improves infant & maternal health



Discussion

- Although participants' attitudes were either similar or slightly increased after the education session, more information is needed to assess the benefits of online educational breastfeeding group sessions.

Barriers/ Limitations:

- Classes not well promoted by staff
- Posters written in English language
- Succinct inclusion criteria
- Large number of non-English speaking patients at time of recruitment
- Limited number of full-term patients during recruitment phase

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