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Original Research – Quantitative

Impact of support networks for breastfeeding: A multicentre study

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ARTICLE INFO

Article history:

Received 22 June 2017

Received in revised form 20 September 2017

Accepted 3 October 2017

Available online xxx

Keywords:

Breastfeeding support networks

Lactation

Validated questionnaire

Satisfaction

Duration of breastfeeding

ABSTRACT

Background: The rates of breastfeeding worldwide are slowly improving since 1996. Europe is still trailing behind the global breastfeeding incidence and prevalence rates. Thus, breastfeeding promotion, protection, prolongation and support have become an important challenge as breastfeeding sharply decreases in the first six months of life.

Objectives: The aim of this project is to determine, assess and identify the real impact of breastfeeding support networks in Murcia (Spain).

Methods: After searching unsuccessfully for a validated questionnaire, a specific one was developed and validated for measuring the impact of formal and informal support networks through five dimensions: satisfaction, consultation, experience, problems and support. The questionnaire was provided to 500 mothers with experience in breastfeeding, who brought their children to baby paediatricians between 2 June and 27 November 2014. Upon completion of the survey and fieldwork, a detailed statistical analysis was conducted.

Results: The degree of satisfaction perceived by the users of the services of support breastfeeding networks is remarkable. In addition, mothers who clarified their doubts and discussed their problems with health professionals and/or breastfeeding support networks were more likely to breastfeed for a longer duration compared to those who did not ($p = 0.005$). Furthermore, mothers who sought support in breastfeeding are more likely to breastfeed for more than 6 months ($p < 0.0005$).

Conclusion: Based on this information, we conclude that breastfeeding support networks have a positive influence in the duration of a women's decision to breastfeed.

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Statement of significance

Problem or issue

The drastic decline in prolonged breastfeeding rates is a current health problem that affects the mother, infant, family and society.

What is already known

Europe is still trailing behind the global breastfeeding incidence and prevalence rates in the world. Similarly, in Spain, a downward trend in exclusive breastfeeding was found, falling from 66.2% at six weeks to 37.8% at six months.

What this paper adds

Mothers who clarified their doubts and discussed their problems with breastfeeding support networks are significantly more likely to breastfeed for a longer duration compared to those who did not.

Abbreviations: AAP, American Academy of Pediatrics; AEP, Asociación Española de Pediatría, translated Spanish Association of Pediatrics; INE, Instituto Nacional de Estadística, translated Statistics National Institute; PANA, Programa de Atención al Niño y al Adolescente, translated Child and Adolescent Health Care Program.

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<https://doi.org/10.1016/j.wombi.2017.10.002>

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1. Introduction

Although abundant scientific evidence proving the benefits and superiority of human milk over any other type of infant nutrition is currently available in the literature,^{1–3} Europe is still trailing behind the global breastfeeding incidence and prevalence rates.⁴

In Spain, a downward trend in exclusive breastfeeding was found, falling from 66.2% at six weeks to 37.8% at six months. Conversely, mixed and artificial feeding exponentially increase with age, and artificial feeding shows the most significant increase from six weeks (27.6%) to six months (53.2%).⁵

The Region of Murcia, located in the Southeast of Spain, follows the same trend as other Spanish communities. Although breastfeeding rates at hospital discharge are high, prolonged breastfeeding remains a key objective of breastfeeding promotion, protection and support because breastfeeding sharply decreases in the first six months of life in our region.⁵

All studies reviewed show the importance and influence of both formal support (health care professionals) and informal support (community breastfeeding support groups, family and friends) on the families of infants.^{6–9} However, studies assessing the impact of breastfeeding support networks are very heterogeneous and often overlook some key aspects, including maternal and family characteristics, the type of support program used or the contexts in which support programs are applied.¹⁰

To better understand the actual impact of different breastfeeding support networks in the Region of Murcia, and after the validation of the questionnaire published in 2015,¹¹ we decided to use this specific questionnaire for measuring the impact of formal and informal support networks through five dimensions: satisfaction, consultation, experience, problems and support.

2. Methods

The study was designed as a cross-sectional study using a questionnaire previously developed and validated by our research team to assess the impact of different breastfeeding support networks for lactating women in the Region of Murcia.¹¹

2.1. Development and validation of the questionnaire

As part of a previous pilot study, the development and validation of the questionnaire was evaluated subjecting the survey to a breastfeeding expert's opinion in the Region of Murcia.¹¹ This pilot test was conducted between the months of March and April 2014. Briefly, for construction validity, a factor analysis was performed, which determined the different dimensions that the survey could measure. A description of each of the items on the statistics was conducted. Through principal component analysis, the total variance explained was obtained, determining the factors that define the elements. Through factor analysis, the questionnaire has a high internal consistency for its five components, obtaining values from 0.942 to 0.632. And a high percentage of total variance explained (11,157%–5093%). Giving rise to a relevant and valid, in terms of content and construction, instrument, capable of measuring the impact of breastfeeding support networks through 5 dimensions:

- Degree of satisfaction or quality perceived by the users of breastfeeding support services. This dimension collected data related to the abilities of staff members of breastfeeding support networks and others to solve problems by listening, providing support and devoting time to breastfeeding mothers.
- Consultations attended by users of the breastfeeding support services. This dimension collected data on all aspects related to

the number of consultations provided or the most frequently demanded breastfeeding support professionals or services.

- Experience before breastfeeding. This dimension referred to aspects that could positively or negatively affect the decision to breastfeed before problems developed or initial doubts emerged.
- Problems during breastfeeding. This dimension focused on the main problems that breastfeeding women experienced and when they occurred.
- Support perceived by users. This component encompassed the source of and need for breastfeeding support.

2.2. Data collection

The questionnaire, after validated (previous pilot study)¹¹ was used as a study tool for the fieldwork. It was administered from June 2 to November 27, 2014, at the four accredited health care centers in the Region of Murcia (Alcantarilla, Sangonera la Verde, San Andrés and El Palmar). The study was approved in May 2014 for the Center for Ethics and Research and the Continuing Training Unit of the Murcia Health Service.

The target population comprised women who brought their infants to well-child checkups within the Child and Adolescent Health Care Program (Programa de Atención al Niño y al Adolescente – PANA), had some breastfeeding experience (i.e., were breastfeeding at the time or had previously breastfed), could read and write in Spanish and volunteered to participate in the study.

430 valid questionnaires were obtained from a total of 500 questionnaires administered, since some of the questionnaires were rejected because were incomplete or with inconsistent answers. The women voluntarily participated in the study after receiving information on the study objective from the nurses who performed the well-child checkup and after signing the informed consent form. The anonymity of the study participants was guaranteed, and the respondents were never pressured to complete the questionnaire against their will.

2.3. Statistical analysis

Continuous variables were analyzed for normal distribution using the Kolmogorov–Smirnov test. Continuous variables with normal distribution are expressed as means \pm standard deviations, and those with nonparametric distribution are expressed as medians (interquartile ranges). Categorical variables are expressed as frequencies (percentages). Discrete variables were compared using the chi-squared test, whereas two continuous variables were correlated using the Pearson product-moment correlation test. A p -value <0.05 was considered significant. Statistical tests were performed using the Statistical Package for the Social Sciences (SPSS), version 21.0, for Windows software (Chicago, Illinois, USA).

3. Results

The mean age of the mothers who completed the questionnaire was 34.4 ± 6.1 years, with ages ranging from 15 to 58 years. The average number of children per family was 1.86. The women's nationality was mainly Spanish (90.7%). Among the mothers, 60.7% had graduated from university, and only 2.3% had no official education. The mother was working in 51.2% of the cases, and 14.2% were on maternity leave.

The analysis of the time of breastfeeding cessation showed that the breastfeeding rates fell significantly after the infants were 6 months old (Fig. 1).

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