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Predictors of Breastfeeding Confidence in the Early Postpartum Period

Katherine Hinic Q18

Correspondence

Katherine Hinic, PhD, RNC, APN, College of Nursing, Seton Hall University, 400 South Orange Ave., South Orange, NJ 07079 katherine.hinic@shu.edu

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ABSTRACT

Objective: To identify factors related to breastfeeding self-efficacy, an important psychological variable in sustained breastfeeding, in the postpartum period.

Design: Descriptive correlational study.

Setting: Data were collected on the mother-baby unit of an academic medical center in the Northeastern United

States.

Participants: This convenience sample (N = 107) was composed of women in the first 4 days postpartum and included nearly equal numbers of primiparas (49.5%, n = 53) and multiparas (50.5%, n = 54).

Methods: Participants completed the Perceived Stress Scale–10, Birth Satisfaction Scale–Revised, Breastfeeding Self-efficacy Scale–Short Form, and a demographic questionnaire. Descriptive and inferential statistics were used to analyze the data.

Results: Breastfeeding self-efficacy was positively correlated with birth satisfaction, number of children, partner support of breastfeeding, intention to breastfeed, intention to breastfeed exclusively for 6 months, and feeling prepared for birth. Breastfeeding self-efficacy was greater in women with previous breastfeeding experience and lower in mothers of newborns who received in-hospital formula supplementation. A standard multiple linear regression explained approximately 38.5% of the variance in self-efficacy scores.

Conclusion: Nurses can apply our findings to inform strategies to increase breastfeeding confidence, such as promoting birth satisfaction, involving partners in breastfeeding education, and limiting the use of in-hospital formulasupplementation.

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Katherine Hinic, PhD, RNC, APN, is an assistant professor in the College of Nursing, Seton Hall University, South Orange, NJ.

reastfeeding an infant for the first year of life D is one of the most effective strategies to promote health and prevent morbidity in developing and industrialized nations (American Academy of Pediatrics, 2012; Association of Women's Health, Obstetric and Neonatal Nurses, 2015; World Health Organization, 2011). Exclusive breastfeeding for the first 6 months of life followed by breastfeeding with the addition of complementary foods for at least the first year of life is recommended as the "normative standard for infant feeding" (American Academy of Pediatrics, 2012, p. e827). Despite welldocumented maternal, infant, and societal benefits and recent improvement in breastfeeding rates, 60% of women stop breastfeeding earlier than they wish (Odom, Li, Scanlon, Perrine, & Grummer-Strawn, 2013). Fewer than half of mother-infant dyads in the United States who begin breastfeeding are still breastfeeding at

6 months of life, and less than one third continue to 1 year (Centers for Disease Control and Prevention, 2014).

Although numerous factors affect breastfeeding outcomes, only a few of these can be modified by health care providers. There is a well-developed body of literature regarding risk factors for early cessation of breastfeeding, including maternal age, educational and income levels, and race (Centers for Disease Control and Prevention, 2014; Meedya, Fahy, & Kable, 2010; U.S. Department of Health and Human Services, 2012). These factors, however, are not modifiable and present little opportunity for practical solutions for health care providers to intervene to improve breastfeeding outcomes. Recently, researchers highlighted the importance of psychological variables in sustained breastfeeding. These psychological factors, including

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Confidence is key to sustained breastfeeding, but very few investigators have identified factors that nurses may be able to influence to promote breastfeeding confidence.

self-efficacy, or confidence, are of unique importance because they are modifiable and can provide the foundation for the design of interventions to make progress toward national breastfeeding goals. However, little is known about the effect of maternal psychological factors on a woman's level of breastfeeding self-efficacy.

Breastfeeding self-efficacy, or confidence, is a modifiable psychological factor that has been identified as a significant predictor of breastfeeding intention, duration, and exclusivity. Mothers who are more confident about breastfeeding in the early postpartum period are more likely to have longer breastfeeding durations and higher levels of exclusive breastfeeding (Bosnjak, Rumboldt, Stanojevic, & Dennis, 2012; de Jager et al., 2015; Dennis, 2003; Glassman, McKearney, Saslaw, & Sirota, 2014; Linares, Rayens, Dozier, Wiggins, Dignan, 2015; McCarter-Spaulding & Gore, 2009; Semenic, Loiselle, & Gottlieb, 2008; Wilhelm, Rodehorst, Stepans, Hertzog, & Berens, 2008). Therefore, the comprehension and promotion of breastfeeding self-efficacy are necessary for nurses who work with mothers and families to demonstrate progress toward meeting public health goals for breastfeeding and to reduce preventable morbidity in this population.

Although numerous researchers have explicated the relationships between breastfeeding confidence and sustained breastfeeding, few have addressed the effect of various maternal and social factors on breastfeeding confidence. A review of peer-reviewed publications from the years 2000 through 2015 in the CINAHL, PubMed, and PsychINFO databases and Google Scholar was conducted to identify factors that affect breastfeeding confidence. Four international studies were identified that specifically addressed this topic (Dennis, 2003, 2006; Kingston, Dennis, & Sword, 2007; Zhu, Chan, Zhou, Ye, & He, 2014). Authors of these studies from Canada and China supported the significance of theoretically related constructs including postpartum depression, perceived stress, and self-esteem (Dennis, 2003); vicarious experience (Kingston et al., 2007); and perceived social support (Zhu et al., 2014) to breastfeeding self-efficacy.

Dennis (2006) additionally developed a multifactorial predictive model that explained 54% of the variance in breastfeeding self-efficacy at 1 week postpartum and included the following factors: maternal education, type of birth, support from other women, satisfaction with pain relief during labor and postpartum care, breastfeeding progress, and feeding infant as planned. However, we did not locate any U.S. studies that specifically examined psychosocial correlates of breastfeeding self-efficacy in this review of the literature. Although the international literature provided valuable information on maternal factors related to self-efficacy, the experiences of childbearing women in the United States may be different.

Nurses require more information about factors that influence breastfeeding confidence in the first days of a newborn's life, because this is a critical time in the establishment of breastfeeding. This information is needed to effectively plan and implement interventions aimed at the improvement of breastfeeding outcomes among mothers in the United States. The purpose of our descriptive correlational study was to examine the effect of key theory-based perinatal experiences, including perceived stress and birth satisfaction, on breastfeeding confidence in the early postpartum period.

Theoretical Framework

Social cognitive theory (Bandura, 1977, 1997) provides a context to understand human behavior as a component of a complex social structure that includes internal personal factors such as cognitive, affective, and biological events; behavior; and environmental events, all of which influence one another bidirectionally. Within this model, self-efficacy beliefs, or confidence, are the most consequential cognitive determinants of behavior, particularly as tasks become more complicated (Bandura, 1997).

Self-efficacy refers to individuals' confidence in their ability to perform specific behaviors, rather than their actual observed abilities. A strong sense of self-efficacy enables a person to be persistent in a behavior, engage in positive thought patterns that promote success, and react emotionally to new situations in a positive way. Individuals with lower self-efficacy are more likely to anticipate failure, perceive a new behavior as daunting and overwhelming, and engage in negative thought patterns and emotional reactions (Bandura, 1997).

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