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Factors affecting intention to breastfeed of a group of Brazilian childbearing women

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ABSTRACT

Background: Knowing the intention of mothers is important to plan actions to improve exclusive breastfeeding rates.

Aim: The objective of this retrospective study was to verify the intention to breastfeed and the intended breastfeeding duration of a group of women participating in a public prenatal dental care program in the city of Araçatuba, Brazil.

Methods: The records of 933 childbearing women were analyzed and their intention to breastfeed and intended breastfeeding duration were associated to women's age, ethnicity, marital status, education, employment, number of gestations, previous breastfeeding experience, previous breastfeeding guidance, presence of complications during pregnancy, and systemic diseases. Data were inserted into Epi Info 2000 and analyzed with Biostat, at a 5% level of significance, and confidence interval of 95%.

Findings: Participants mean age was 26.1 ± 5.9 years. The majority of women (96.5%) declared their intention to breastfeed their babies. The main variables to affect the intention to breastfeed were the number of gestations ($p=0.001$), previous breastfeeding experience ($p=0.03$), and previous breastfeeding guidance ($p=0.01$). Intended breastfeeding duration was significantly affected by women's age ($p=0.04$), employment (0.02), the number of gestations ($p=0.001$), and previous breastfeeding experience ($p=0.04$).

Conclusions: Previous positive breastfeeding experience and guidance during prenatal examinations positively affected women's intention to breastfeed; while older, unemployed women in their second or more gestation and previous breastfeeding experience intended to breastfeed their children for longer periods of time.

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Statement of significance

Problem or issue

Breastfeeding brings unquestionable nutritional, immunological, psychological and economic benefits both to mothers and babies, but its practice in Brazil tends to be discontinued early after the baby is born.

What is already known

The intention to breastfeed is indicated as one of the strongest predictors of the initiation and duration of breastfeeding.

What this paper adds

The evidence emerging from this study suggests that strategies should be developed and supported by all state health and dental services during the prenatal period to incentive breastfeeding. Particular attention should be given to primigravid women, who may be more reluctant to breastfeed their babies.

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1. Introduction

Breast milk provides babies the best possible nutrition and protection against infection during the first months of life and has a fundamental role in their development.^{1–3} The act of breastfeeding (BF) brings unquestionable benefits to both the general and oral health of the baby throughout life.^{1–6} According to the latest UNICEF update (2015), the prevalence of exclusive breastfeeding in Brazil up to six months of age is 39%.⁷ Data from the Brazilian Ministry of Health indicate that mean BF duration increased from 296 to 342 days, while exclusive BF raised from 23.4 to 54.1 days in the period between 1999–2008.^{8,9} Despite the improvements observed in the last few years, BF rates still fall short from those recommended by national and international organizations, that is, exclusive breastfeeding until the baby is at least six months old, to be followed in complemented form up to two years or more.^{1–3} Although considered natural and instinctive, BF can be affected by numerous biological, social, historical and cultural factors.^{10–12} According to Scavenius et al.¹² social constraints in relation to BF may develop, leading to decreased suckling and eventually to the cessation of BF.

The intention to breastfeed expressed by mothers during pregnancy is considered one of the strongest predictors of the initiation and duration of breastfeeding.^{13–19} The stronger the intention to breastfeed during the prenatal period, the more likely the mother will exclusively breastfeed after the baby is born.¹⁶ Previous studies showed that the intention reported by childbearing women in Brazil to breastfeed their babies is extremely high.^{18,19} In a study conducted by Issler et al.¹⁸ 98.5% of women studied reported the intention to breastfeed, while in a more recent study by Machado et al.¹⁹ this prevalence was even higher (100%).

In a country of continental size such as Brazil, with large social, ethnic and cultural differences, the challenges for the development of health in the population in general are enormous. Studies have shown that many women are reluctant to seek dental care during the pregnancy period, except in situations of emergency. The reasons for this behavior are rooted in cultural beliefs that dentistry is merely curative, as well as the fears and anxieties related to dental treatment.^{20,21} Thus, public programs dedicated to change this scenario and highlight the importance of oral care for both mothers and their babies can have a positive impact on their health.²²

In line with this perception, a public dental school in the city of Araçatuba (Brazil) has established a dental care program specifically designed for childbearing women.²² Local childbearing women who are cared for by the public health system are invited to participate in the program, where in addition to receiving oral care, they also receive information on the importance of breastfeeding on the oral health of their children. Women interested in participating in the program are closely followed by dental students and college professors, and detailed information are collected. The investigation of this particular group of women has the potential to bring to light some important evidence about the intention to breastfeed, which, in turn, could help in action planning to improve BF rates in the general population.

Thus, the objective of this study was to verify the intention to breastfeed and the intended BF duration of a group of women participating in a public prenatal dental care program in relation to the different variables that may affect this decision.

2. Participants, ethics and methods

This was a retrospective and descriptive study, in which data obtained from the records of participants in the Dental Care Program for Childbearing Women were analyzed. This study was

conducted in accordance with The Code of Ethics of the World Medical Association (Declaration of Helsinki) for experiments involving humans, and was approved by the Standing Committee on Ethics in Human Research of Araçatuba Dental School (FOA), São Paulo State University (UNESP), Brazil. All the patients signed an informed consent for the use of the information collected during their participation in the program in future research.

2.1. Dental care program

The Dental Care Program for Childbearing Women was established in 1999 in the city of Araçatuba, Brazil under the responsibility of dental students and college professors of FOA–UNESP, Brazil.²² This program is intended to promote the dental health of local childbearing women cared for by the national public health system. These are in general young women, who come from the economic lower end of society and join the program in the second quarter of their gestational period. Dental students visit local public health centers and invite childbearing women to participate in the program. In addition to the main objective (to ensure adequate dental health of mothers before babies are born), emphasis is also placed on the importance of BF on the general and dental health of their future babies.

Before starting dental treatment, childbearing women attend an educational workshop on the importance of oral health for mothers and their babies, prevention of oral diseases, diet, and self-care. Groups discussions are conducted with the use of audiovisual resources and the active participation of mothers. Although the program is free and open to anyone interested, only approximately 30% of the women invited attend the initial workshop.

In the first clinical consultation, intra and extraoral examinations are performed, instructions on oral hygiene and dental plaque control are provided, and supervised brushing is conducted. During this first visit, mothers are also individually interviewed and data concerning their socio-demographic status, general health, diet, intention to breastfeed, and previous BF experience are collected.

In subsequent consultations, preventive and/or restorative treatment is conducted by college students under the guidance of professors. In the last visit, mothers participate in a second educational workshop, similar to the first, in which any doubts they may still have on the oral health of their babies are clarified. Moreover, mothers also receive specific education and incentive on BF practice, exclusive BF, and BF duration. The clinical records of the childbearing women are then scanned and entered into an electronic database.

2.2. Study design

The medical records of all participants (n = 1020) since the start of the program in March 1999 till August 2014 were analyzed. Childbearing women who did not complete the treatment were excluded from the study. The following data were collected from the records:

- Age (≤ 18 years, 19–30 years, >30 years);
- Ethnicity (white, or non-white);
- Marital status (with, or without a steady partner);
- Education (primary education, or secondary education and higher);
- Employment (yes or no);
- Number of gestations (primigravid, or two or more);
- Previous BF experience (yes or no);
- Previous BF guidance (yes or no).
- Systemic diseases (yes or no); and

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