

# Infant Feeding in Halton

Initiation, Duration, and Exclusivity of Breastfeeding



# Project Team

- Karen Moynagh – Health Analyst
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# Purpose

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- To determine current breastfeeding initiation, duration and exclusivity rates to age twelve months.
- To compare current (2007/2008) breastfeeding initiation, duration and exclusivity rates to those described in the 2000/2001 Infant Feeding Study.
- To determine how breastfeeding initiation, duration and exclusivity are affected by demographic characteristics such as maternal age, education and income.
- To determine when other infant feeding practices such as breastmilk substitutes and solids are introduced to baby.

# Purpose

- To determine current awareness and use of breastfeeding support services.
- To determine the impact of mothers return to work on breastfeeding duration and exclusivity.
- To determine why women continue to breastfeed to age six months and age twelve months
- To determine dental care practices for babies at twelve months of age.

# Methodology

# Six Month Survey

- Sample recruited using 48 hour postpartum telephone assessment interview
- Telephone and electronic surveys
- 47 questions on: initiation, duration, exclusivity, other feeding practices, sources of breastfeeding support, work practices, demographics

# Twelve Month Survey

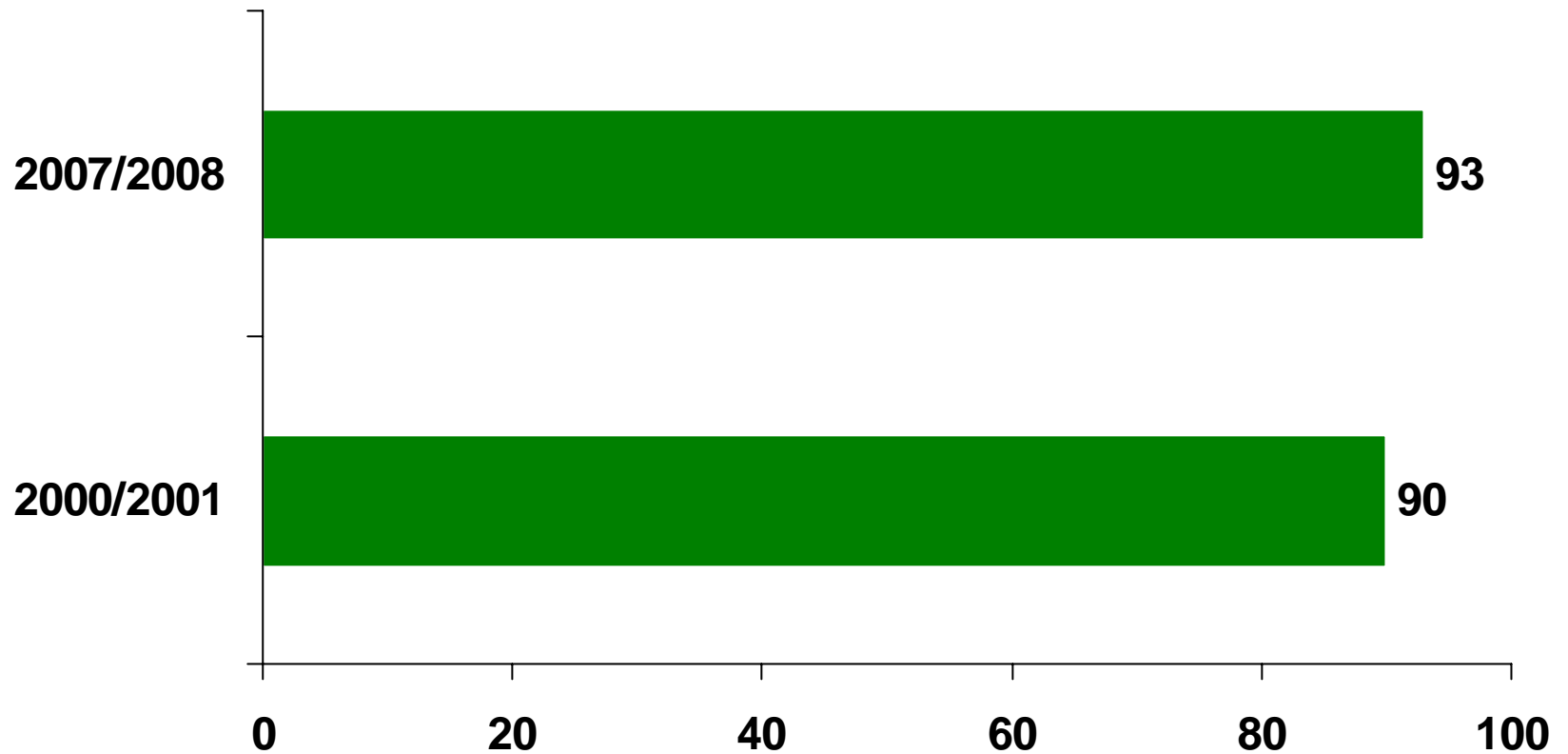
- Sample recruited from Six Month Survey - mothers breastfeeding at age six months
- Telephone and electronic surveys
- 29 questions on: duration, exclusivity, other feeding practices, sources of breastfeeding support, work practices, **dental care practices**, demographics

# Response Rates

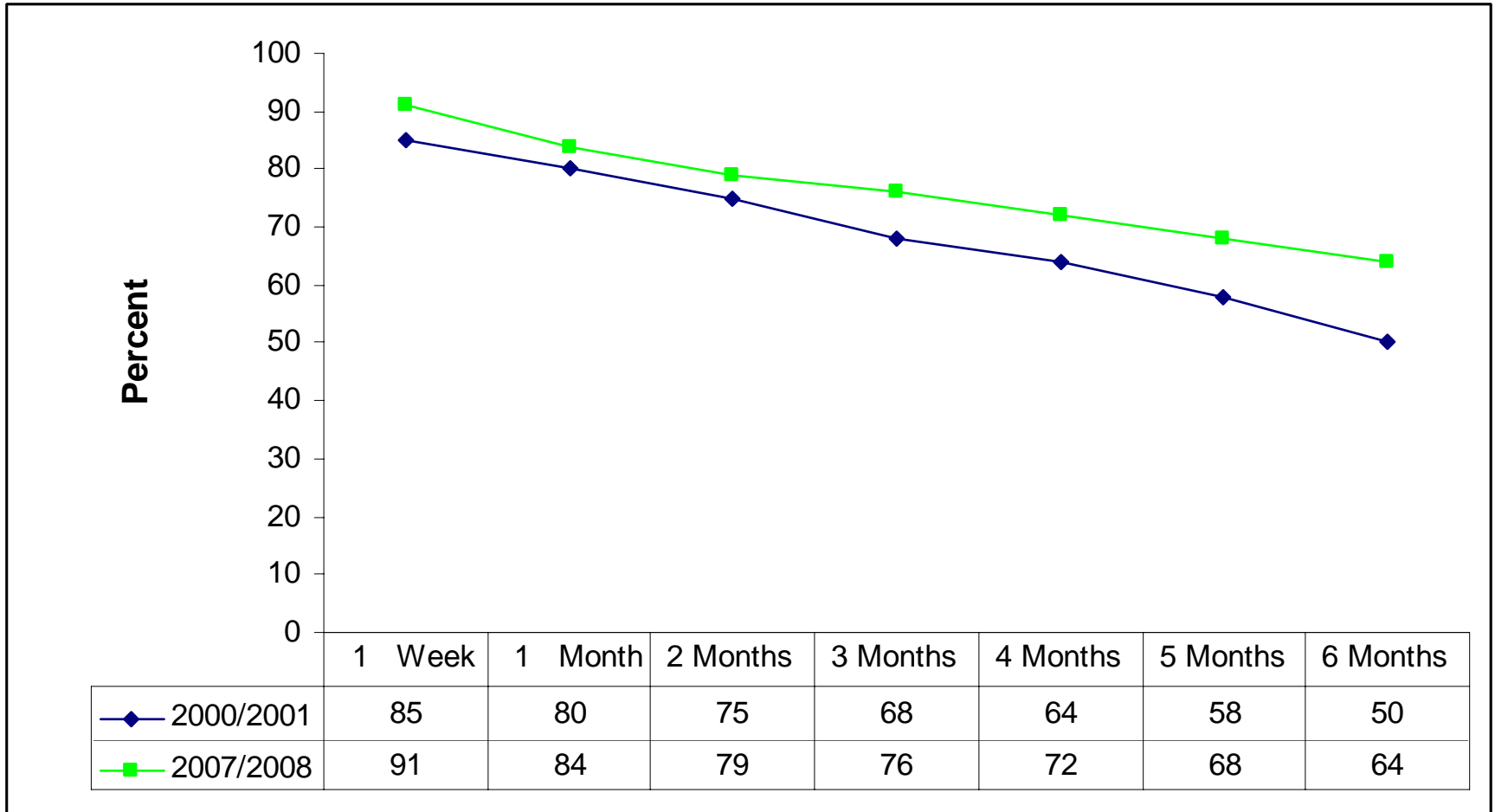
- **Six Month Survey – 78%**
  - Phone Survey -78%
  - Electronic Survey - 78%
- **Twelve Month Survey -86%**
  - Phone Survey – 85%
  - Electronic Survey -87%

# Key Findings

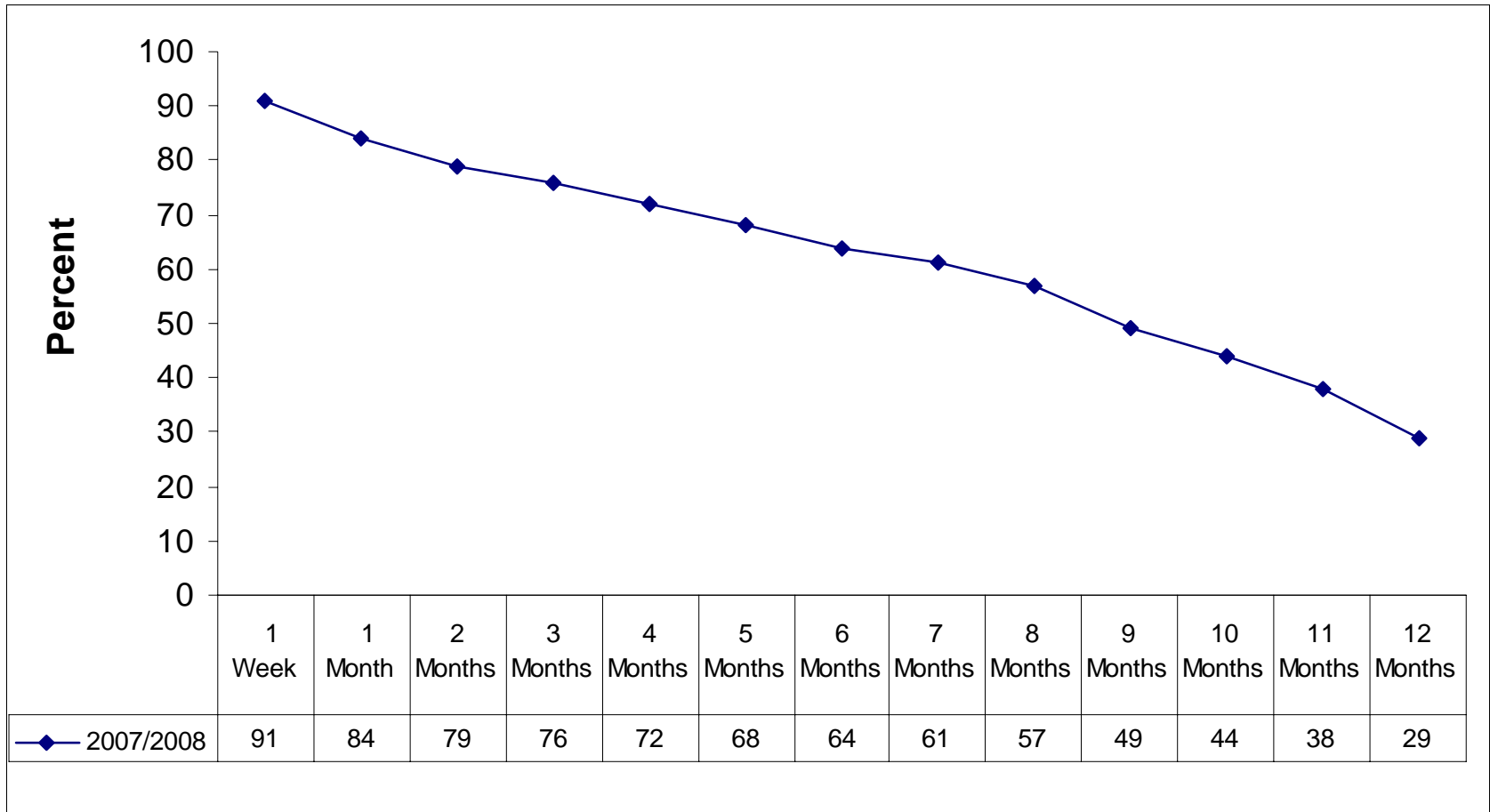
# Initiation



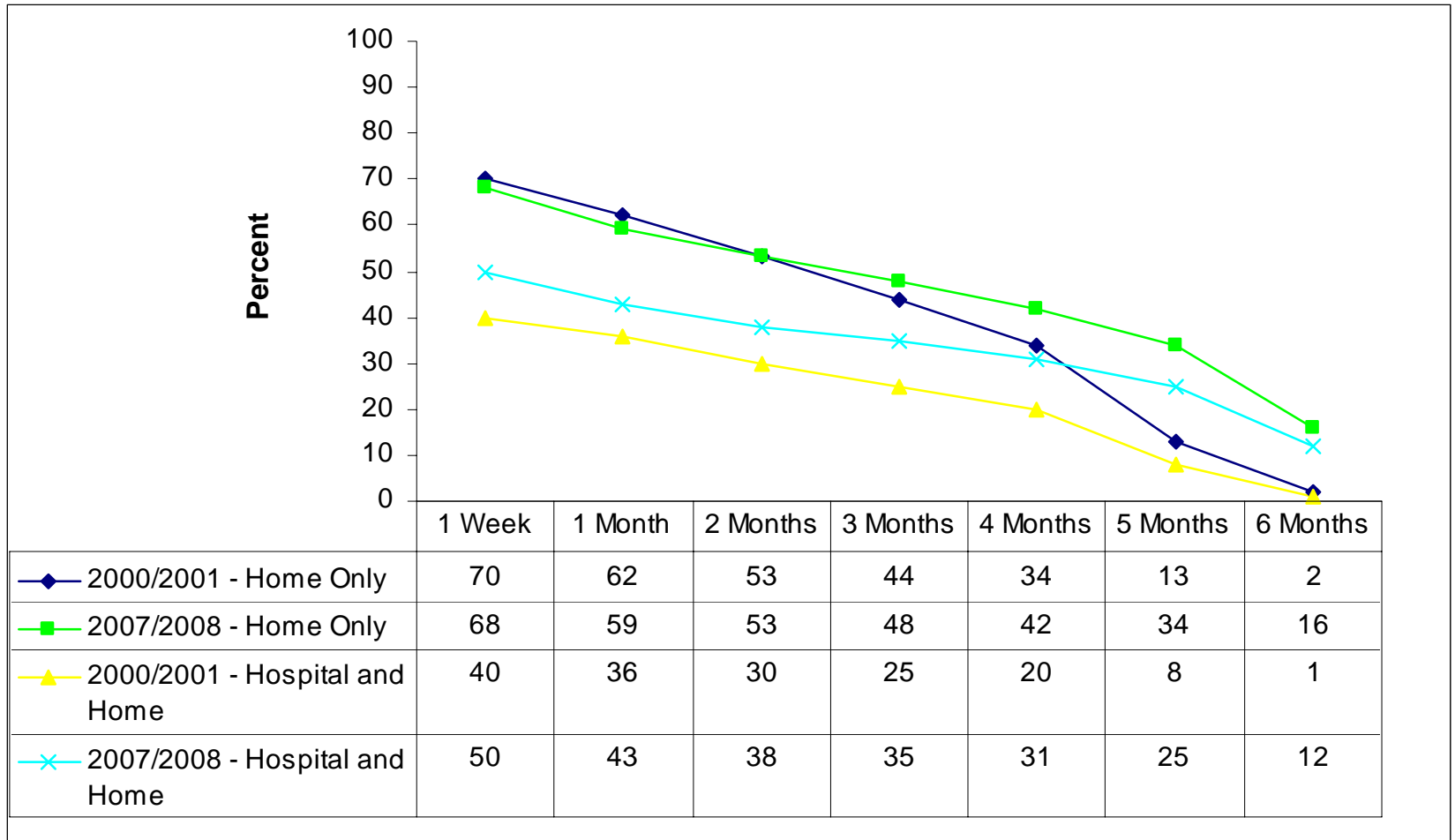
# Duration



# Duration



# Exclusivity

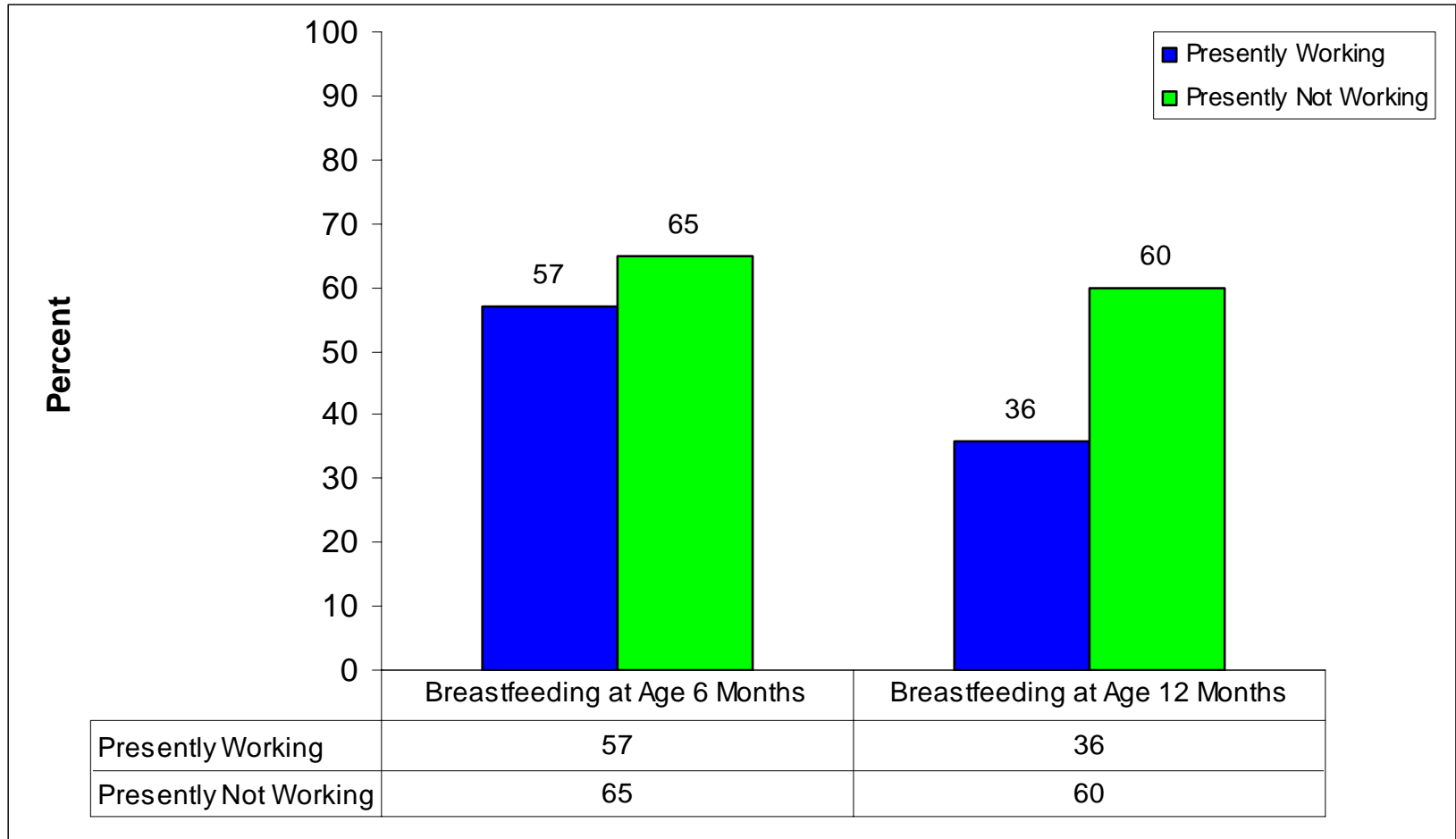


# Sources of Breastfeeding Support

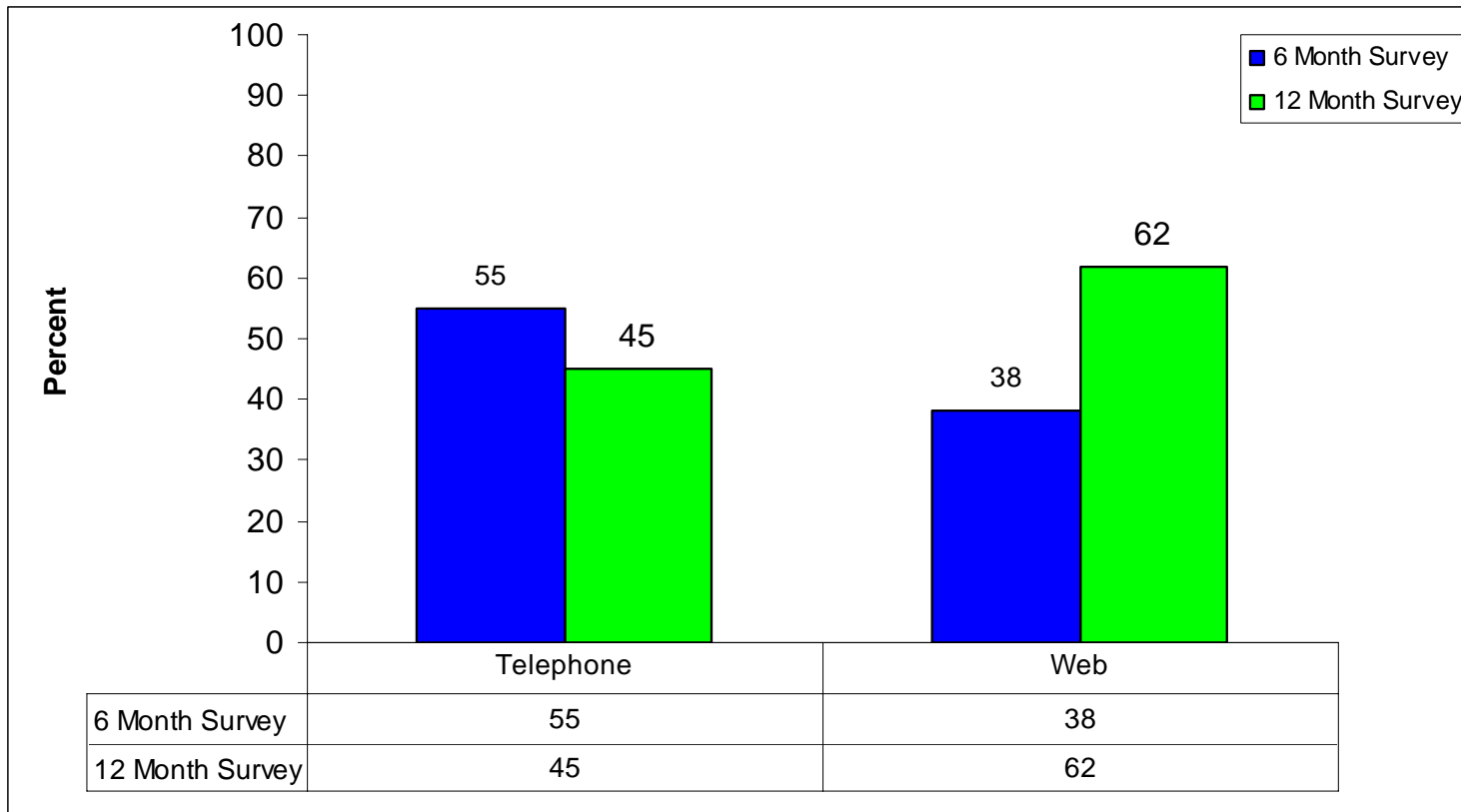
## Six Month Study

Source of Breastfeeding Support	Percent of Mothers who Received Support	Percent of Mothers Receiving Breastfeeding Support who Rated Breastfeeding Support as...		
		Very Helpful (Percent)	Somewhat Helpful (Percent)	Not Very Helpful (Percent)
Nurses at the Hospital	96%	59%	32%	9%
Friends and Family Members including Spouse or Partner	87%	68%	29%	3%
Halton's Breastfeeding Your Baby Booklet	76%	46%	46%	8%
Breastfeeding Clinic or Lactation Consultant from Breastfeeding Clinic	71%	77%	18%	5%
Healthcare Provider (family doctor, obstetrician, midwife)	50%	40%	40%	20%
Prenatal Classes	49%	28%	48%	24%
La Leche League	11%	47%	47%	6%
Private Lactation Consultant	9%	69%	26%	5%

# Return to Work



# Telephone Vs. Electronic Survey



# Recommendations

# Initiation, Duration and Exclusivity

1. Continue to provide breastfeeding support to all mothers, and increase support for first time mothers, mothers who have previous breastfeeding difficulties and younger mothers.
2. Expand messaging beyond the benefits of breastfeeding to include strategies which address the barriers to breastfeeding identified through the 2007/2008 study, for example address perceived lack of supply of breast milk with strategies to overcome problems associated with milk supply.

# Initiation, Duration and Exclusivity

3. Continue the education of health care providers who care for pregnant and postpartum mothers and parents regarding the medical indications for supplementation.
4. Encourage the introduction of solids and liquids after six months of age and when baby is physiologically ready for solids.

# Initiation, Duration and Exclusivity

5. Use the principles of BFI as the standard to guide practices and messages related to infant feeding in Halton.
6. Encourage exclusive breastfeeding for the first six months and breastfeeding duration to two years and beyond as per the WHO recommendation.

# Support for Breastfeeding

1. Ensure that all healthcare providers who care for pregnant and postpartum mothers within the Halton community are using common messages related to breastfeeding support. Ongoing education to all healthcare providers should be done in accordance with requirements for BFI accreditation.
2. Continue to look at strategies to market Health Department programs as community breastfeeding supports.
3. Conduct further research on breastfeeding support.

# Return to Work

1. Educate women about their right to breastfeed when they return to work as well as how to continue breastfeeding when they return to work (eg. pumping breastmilk)
2. Educate and provide resources to employers about ways to provide baby friendly workplaces.

# For Future Infant Feeding Studies

1. Conduct future surveys using an electronic survey, and only offer a phone survey to those who refuse to complete the electronic survey.
2. Conduct a modified Infant Feeding Study every two years with a smaller sample of mothers to collect data on initiation, duration and exclusivity. Conduct the full Infant Feeding Survey or an Infant Health Survey every five years.

# For Future Infant Feeding Studies

3. Future studies should separate questions about milk from questions about other liquids when asking about other feeding practices
4. More of an effort should be made to include mothers who do not speak English in future studies. Interpreters could be used to conduct interviews with these mothers

# For Future Infant Feeding Studies

5. The recruitment process must be improved for future studies, so that almost all mothers are asked to participate. Consider recruiting mothers for future studies from the hospital, through the hospital liaison program or directly through entry onto the parkyn

# For More Information

- Executive Summary
- Sign up sheet for distribution of final report or visit [www.region.halton.on.ca/health](http://www.region.halton.on.ca/health)
- Contact:
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