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BACKGROUND

- Despite the evidence of the benefits of breastfeeding many women initiate breastfeeding only to stop shortly thereafter or decide not to breastfeed their infants at all
- According to the 2016 Breastfeeding Report Card (CDC, 2016) 16.7% of breastfeeding women in Massachusetts (MA), USA introduced formula < two days of age
- In March 2016, of the 131 Asian mothers who chose to breastfeed their infant at Lowell General Hospital (LGH), MA, USA, 71% introduced formula prior to discharge
- The LGH Asian population is far below the MA Healthy People 2020 success rate of 67% breastfed babies at 6 months
- Previous studies validate the need for further investigation of cultural variables that present barriers or facilitators to breastfeeding

PURPOSE

- To inform stakeholders about infant feeding practices amongst postpartum Asian women (Cambodian & Vietnamese) who deliver at LGH, MA, USA

METHODS

- A purposive sample of 45 Asian postpartum women (Cambodian and Vietnamese), ≥ 18 years old, literate in either English, Khmer or Vietnamese, who delivered full term at LGH during a 4 month period participated in this quality improvement project
- The Iowa Infant Feeding Attitude Scale (IIFAS) modified with additional demographic questions, translated in Khmer and Vietnamese, was completed within 48 hours postpartum in the hospital setting
- In addition, 2 focus groups, consisting of 6 Cambodian women, recruited from 5 of the Obstetric/Gynecology offices in the greater Lowell area were held to further explore factors influencing infant feeding decisions; No Vietnamese women volunteered for focus groups

ACKNOWLEDGEMENTS

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SAMPLE DEMOGRAPHICS

	N=45	%
Cambodian /Vietnamese	38/7	84%/16%
Age		
18-21	4	9%
22-26	7	16%
27-30	11	24%
30-34	14	31%
35-40	8	18%
40-45	1	2%
C/S	16	36%
Introduced formula within 2 days	30	67%
Planned to BF	34	76%
Changed mind (no/yes)	35/10	77.8/22.2%
Birthweight 2500-4000 g	40	89%
Work	32	71%

SURVEY RESULTS

Table 3

Mothers' knowledge and attitudes towards breastfeeding using the IIFAS (n = 45)

Item	Item Agree [‡] (%)	Neutral (%)	Item Disagree [†] (%)
*1. The nutritional benefit of breastmilk last only until the baby is weaned from breastmilk	31.1	22.2	46.7
*2. Formula feeding is more convenient than breastfeeding	11.1	44.4	44.4
3. Breastfeeding increases mother -infant bonding	91.1	4.4	4.4
*4. Breastmilk is lacking in iron	6.7	37.8	55.6
5. Formula -fed babies are more likely to be overfed than breastfed babies	37.8	42.2	20
*6. Formula feeding is the better choice if mother plans to work outside the home	20	40	40
7. Mothers who formula feed miss one of the joys of motherhood	28.9	26.7	44.4
8. Women should not breastfeed in public places such as restaurants	31.1	31.1	37.8
9. Breast fed babies are healthier than formula fed babies	44.4	40	15.6
10. Breast fed babies are more likely to be overfed than formula fed babies	11.1	33.3	55.6
*11. Father feels left out if mother breast feeds	44.4	40	15.6
12. Breastmilk is the ideal food for infants	64.4	28.9	6.7
13. Breastmilk is more easily digested than formula	51	46	2.2
*14. Formula is as healthy for an infant as breastmilk	28.9	48.9	22.2
15. Breastfeeding is more convenient than formula feeding	24.4	44.4	31.2
16. Breast feeding is less expensive than formula	71.1	8.9	20
*17. A mother who occasionally drinks alcohol should not breastfeed her baby	57.8	22.2	20

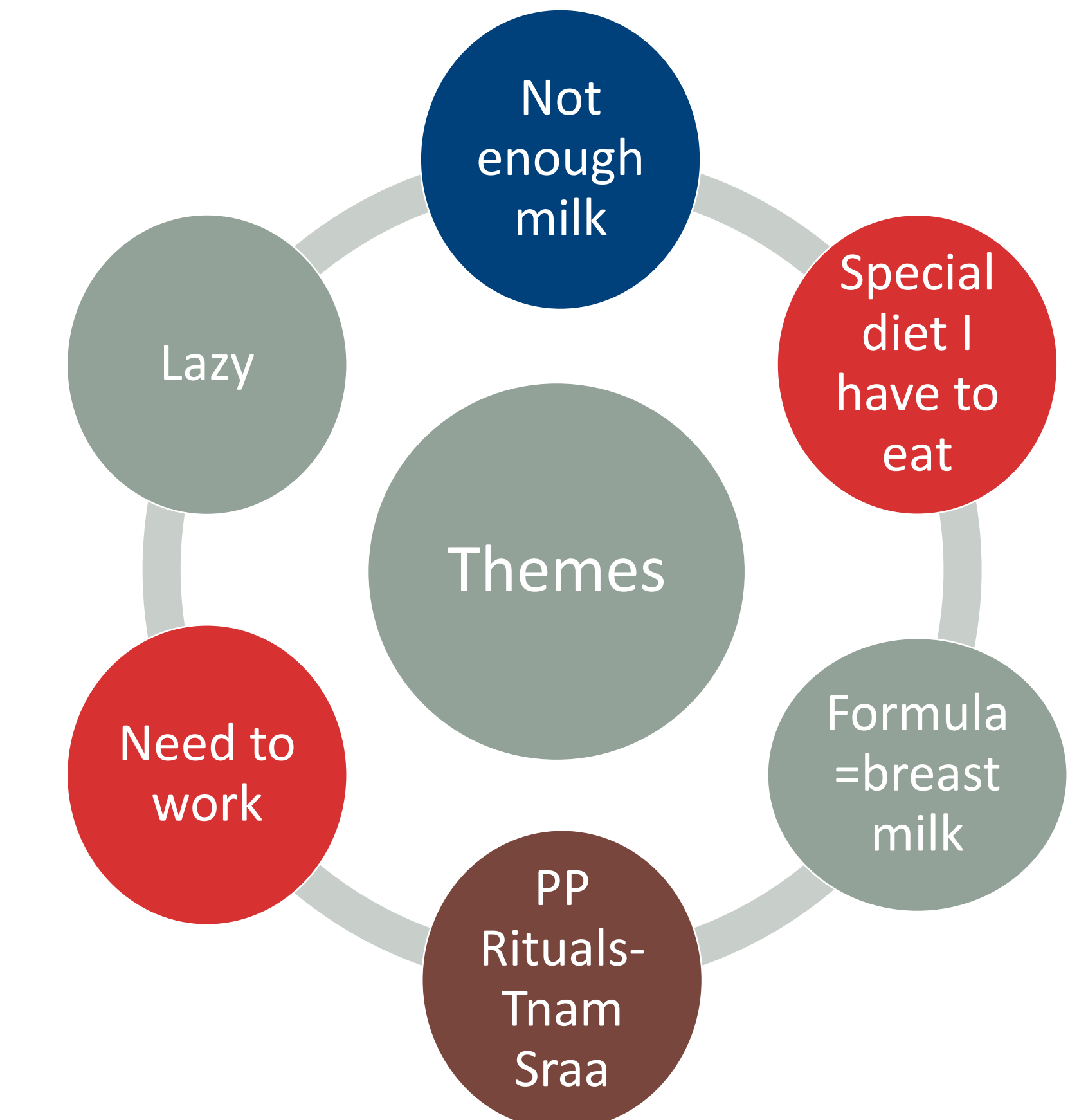
*Note: The items 1, 2, 4, 6, 8, 10, 11, 14, and 17 were reversed when calculating the score

[†] Disagree includes 'strongly disagree' and 'disagree'

[‡] Agree includes 'strongly agree' and 'agree'

THREE FOCUS GROUP THEMES

Benefits, Barriers, Asian Traditions



CONCLUSIONS

- Overall attitudes for infant feeding were neutral; neither favorable for breastfeeding or formula feeding
- Identified barriers included the Asian tradition of Tnam Sraa and instructions to follow a special diet as well as a perceived low milk production and the need to return to work
- Much of the rationale behind providing formula within the first two days of life stemmed from the Asian traditions of Tnam Sraa and the perception that formula and breastmilk are nutritionally equal

IMPLICATIONS FOR PRACTICE

- Understanding cultural influences and barriers to breastfeeding will allow potential interventions to be utilized that can enhance both initiation and exclusivity rates amongst Cambodian and Vietnamese women in the Greater Lowell Area
- Successful introduction of culturally-based interventions can decrease the disparities for this population of infants and potentially improve health outcomes in the Asian Communities of Greater Lowell

REFERENCES

Upon request