

Chinese Mothers Intention to Breastfeed, Actual Achievement and Early Postnatal Experience

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Summary

Thirty Chinese primiparous mothers were asked during the antenatal period their breastfeeding intention and then interviewed at delivery and 6 weeks post delivery.

One mother had no intention to breastfeed. Ten mothers intended exclusive breastfeeding for one month and 19 for 6 weeks or more. At 6 weeks post delivery only 4 mothers were still breastfeeding. A total of 22 (73%) did not achieve their initial intention. For any future pregnancy, 5 chose exclusive breastfeeding, 22 complementary and 3 formula feeding.

Chinese primiparous mothers have high breastfeeding intentions but the majority do not achieve them and their experience has discouraged them from exclusive breastfeeding in future pregnancies.

Key Words: Breastfeeding, Malaysia, Chinese, Primiparous

Introduction

Numerous small surveys carried out in selected Malaysian populations have persistently shown the prevalence of breastfeeding to be lowest amongst the Chinese¹⁻⁵. In the 1996 second National Health and Morbidity Survey the prevalence of breastfeeding in Chinese was 61% compared with 97% for Malays and 83% for Indians⁶. A survey done on 237 Chinese mothers in Ipoh in 1994 showed that while 82% initiated breastfeeding, this declined to 10% still breastfeeding at 8 postnatal weeks⁵. The high rate of initiation of breastfeeding followed by a rapid decline could mean that mothers intended to breastfeed but failed. It is also possible that they did not intend to

breastfeed but initiated breastfeeding due to the influence of health care providers, and stopped as soon as they no longer had contact with the health care giver. A knowledge of their primary breastfeeding intention and their subsequent experience would be helpful in evaluating the factors contributing to this short duration of breastfeeding.

We recruited a group of Chinese primiparous mothers during the antenatal period, determined their breastfeeding intention and followed them up for 6 weeks post delivery to find out the influence of their interactions with the health service on their final breastfeeding practice.

Materials and Methods

Forty-five Chinese primigravida mothers with gestation of 34 weeks or more were recruited from the Ipoh Municipality Maternal and Child Health (MCH) Clinics or Ipoh Hospital antenatal clinic between September and October 1997. They were interviewed at recruitment in the clinic or via phone using a specially designed interview format covering demographic and social data, intended mode and duration of infant feeding, and exposure to breastfeeding information during the antenatal period. Some of the mothers had not made a final decision on their place of delivery so in order to get a complete sample in as short a time as possible we interviewed 45 mothers with the intention of following up only the first 30 who delivered at Ipoh Hospital. The remaining 15 mothers were not followed up. These 30 who delivered in Ipoh Hospital were interviewed in the postnatal ward prior to discharge, using another interview format designed to determine their early postnatal experience of breastfeeding, during hospitalisation. They were also observed during a feed for positioning and attachment to the breast. These mothers were then interviewed by telephone 6 weeks after delivery to determine their actual breastfeeding practice at home, sources of help, any breastfeeding difficulties encountered and reasons given where the antenatal intention had not been met. Mothers were also asked about their choice of feeding for any future pregnancy. Supplementary feeding was defined as any food or drink substituting breastmilk and complementary feeding refers to the giving of foods in addition to breastmilk in infants. Any food or drink given to an infant below 4 - 6 months is a supplement.

The majority of interviews were carried out by the principal investigator in Chinese using the dialect requested by the mother. A few mothers requested the interview in English. Although mothers were told prior to interview that the principal investigator was a nurse, during interviews she wore clothes which did not identify her as a nurse.

Results

The 30 mothers were interviewed at all three stages. Of these 8 (27%) had only primary education and 22 (73%)

had secondary education, and none had tertiary education. The mean age was 28.7 years (SD=4.876). The best reading languages were Mandarin 15 (50%), followed by Malay and Mandarin 7 (23%), Malay, English and Mandarin 7 (23%); English and Mandarin 1 (3%).

Although 26 had visited their GP antenatally, of these 23 received their antenatal care mainly from municipality clinics. Four mothers received their antenatal care entirely from the municipality clinic, three received all antenatal care from their GP. Twenty-seven (90%) were given breastfeeding information by health personnel at the clinic, (one during the first trimester and 26 during the 2nd or 3rd trimester). This information was usually in the form of a group session conducted in the Malay language. Three mothers received no antenatal information on breastfeeding. These three were all interviewed at term. Of the 30 mothers, one of them intended to bottle feed from birth, and 29 of them intended to breastfeed. All intended to breastfeed exclusively initially, 10 for 1 month and 19 for 6 weeks or more. After this they intended to change to formula feeding. None intended to give complementary feeding.

The decision on the type of infant feeding was made preconception in four mothers, in the 1st trimester 14, 2nd trimester 3, and 3rd trimester⁹. For more than half of the mothers breastfeeding information was received only after their feeding practice was determined.

Hospitalisation Experience

All 30 mothers delivered term, singleton liveborns. Twenty-one (70%) were normal vaginal deliveries, 1 forceps delivery, and 8 (27%) caesarian deliveries. Twenty of the 21 mothers with normal deliveries breastfed within the first hour of life. Of the 8 mothers who had caesarian delivery (all emergencies), 2 of their babies were admitted to the special care nursery (SCN). The other 6 of them could not recall with certainty whether they first breastfed before or after 1 hour of recovering from anaesthesia. The remaining mother had a forceps delivery and breastfed her baby after 1 hour of life.

There were 28 infants who roomed in with their mother and all received breast milk as their first feed. Twenty-five of the 28, breastfed exclusively to discharge and 3

continued breastfeeding but supplemented with formula without the knowledge of the nurse on duty. The 22 that delivered vaginally were discharged between 24 and 48 hours after delivery, while the 8 caesarean deliveries were discharged on the 4th postoperative day. The 2 mothers whose infants were admitted to the SCN were not lactating at the time of discharge and did not start breastfeeding once at home. Twenty-one of these 28 (75%) mothers felt they required further assistance with breastfeeding while still in the ward but this was not offered. Of the 28 mothers, 5 stated that they felt forced by nursing staff to breastfeed against their wishes and that they could not discuss this with staff for fear of repercussion.

The 28 mothers who had the baby with them were either observed for positioning and attachment during feeding or were asked to describe the correct technique. They were all able to describe or demonstrate this correctly.

Six Weeks Interview

The intended duration of breastfeeding compared with the actually achieved is summarised in Table I. Of the 10 mothers who intended to breastfeed for 1 month, 6 did not achieve this and of the 19 who intended to breastfeed for 6 weeks or more 16 did not achieve this. Only 4 mothers were still breastfeeding at 6 weeks. Of these 4, 3 had intended to breastfeed for more than 6 weeks and one had intended to give up at 1 month. One other mother breastfed for longer than she initially intended. She was the only mother who did not have any intention to breastfeed but did so for 3 weeks. None of the mothers mixed breast and formula feeding for more than a few days while changing to formula feeding.

Ten started formula feeding at the 1st week (including the 3 who started in hospital), 5 started on each of the 2nd, 3rd, and 4th weeks respectively, and only 1 at 5th weeks (Table II).

The sources of help in infant feeding came mainly from the family; i.e. mother 21, friend 6, husband and confinement lady 2 each. None had home visits by health staff. Although 2 mothers were referred to a breastfeeding support group they were not visited by them, nor had they sought help from them.

When asked six weeks post-natally 24 (80%) mothers felt that the maternity staff had adequate knowledge on breastfeeding to help them. Ten mothers knew that a breastfeeding policy existed in the hospital and all 10 felt, it was too rigid.

Finally, for any future pregnancy, 5 chose exclusive breastfeeding, 22 supplementary and 3 exclusive formula feeding.

Comparison of Mothers Who Achieved Their Intention With Those Who Did Not

The 6 mothers who achieved their intended duration of breastfeeding and the 2 who achieved more than they intended were compared with the 22 who did not achieve their intention for differences in antenatal care, education, the influence of family on their decision and practice, as well as differences in their postnatal experience. There were no significant differences between the 2 groups. However, this does not rule out true differences and may represent a type 2 error as the sample size is very small.

Table I
Mothers Breastfeeding Intention Compared with Actual Achievement

Intention	Number	Achievement		
		Less than Intended	Achieved Intention	More than Intended
1 month	10	6	3	1#
6 weeks or more	19*	16	3	-
None	1	-	-	1
Total	30	22	6	2

Still breastfeeding at interview

* 3 were breastfeeding and hadn't yet reached intended duration

Table II
Time of Intended Supplementation with
Milk Formula Compared with Time of
Actual Supplementation

Time (Weeks)	Intention	Practice
1	1	10
2	-	5
3	-	5
4	10	5
5	-	1
6	-	-
* Still breastfeed	19	4
Total	30	30

* At time of 6 weeks interview

Discussion

This study shows that Chinese primiparous mothers had high intentions to breastfeed but they failed to meet them. Moreover their childbirth and lactation experience discouraged them from intentions to exclusively breastfeed in future pregnancies. Twenty-five of the 30 mothers left hospital exclusively breastfeeding but by 6 weeks all but 4 stopped. Of 19 mothers who intended to breastfeed for more than 6 weeks only 3 were able to achieve this. It is assumed that the majority chose 1 month as their intended duration to breastfeed as this is the duration of the traditional post-delivery confinement period in the Chinese culture.

Having determined their choice of infant feeding prior to antenatal booking, for more than half the mothers antenatal breastfeeding information did not have any influence on them

The majority of mothers initiated breastfeeding while still in the delivery room, including one mother who during the antenatal period expressed an intention to formula feed. While none expressed dissatisfaction with initiating breastfeeding soon after delivery the majority had some dissatisfaction with their experience after admission to the postnatal ward. Most felt they

did not get adequate assistance with breastfeeding while in the ward although they felt staff had the ability to help. Although mothers appeared to understand the correct positioning and attachment their perceived need for further help showed that they were not confident with breastfeeding. In spite of this dissatisfaction exclusive breastfeeding was the norm until discharge. However, mothers expressed a feeling of being coerced or even intimidated.

Between discharge and interview at 6 weeks none of the mothers had any assistance from health staff and all but 4 discontinued breastfeeding. The reasons for this failure are undoubtedly multiple. Mothers did not feed adequately supported by health staff during hospitalisation and they received no follow-up support in the community. Mothers were asked the reasons why they stopped breastfeeding. Nearly, all gave multiple reasons, the average being 4 reasons. Of the reasons given insufficient milk was the commonest reason (22 of 26), followed by inconvenience (18), returning to work (17), and breast engorgement (15). These reasons are similar to those described in other surveys¹⁻⁵.

The BFHI initiative was adopted by all Ministry of Health hospitals in Malaysia by 1997 when the study took place and the hospital where the study took place had been declared by the World Health Organisation to be "Baby Friendly" in January 1996. In the form that is practiced in Malaysia mothers are generally not asked their feeding intention. It is assumed that all will breastfeed. While it can be assumed that Malays who are Muslims in general will breastfeed it cannot be assumed that non-Muslims will breastfeed. Data from this small sample however suggests that Chinese mothers do in fact wish to breastfeed and that they would wish to breastfeed exclusively, supplementing with formula only when they stopped. It is likely that some mothers with strong intentions to formula feed and the resources to pay for private medical care, went to other hospitals in the city which are not baby-friendly. However, breastfeeding is not thought to be a major factor in the choice of health care selected by a mother. This along with the small sample size means that we are unable to accurately assess the proportion of primiparous Chinese mothers who intend to breastfeed.

To gain more confidence professional support after discharge from hospital is required. This study shows that mothers are aware that help is available but do not seek it out and prefer to depend on non-professional advice. A form of professional help acceptable to these mothers needs to be identified and further studies may be required to establish what type of help is best.

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