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Six Months Exclusive Breastfeeding: A Relational Behaviour Influenced by Actual and Virtual Social Networks

A thesis presented in fulfilment of the requirements for the degree

Doctor of philosophy in Midwifery

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Narges Alianmoghaddam

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Abstract

Despite widespread consensus regarding the health benefits of six months exclusive breastfeeding for mothers and infants, the prevalence of six months exclusive breastfeeding is very low in developed countries including New Zealand. This research contributes to the literature nationally and internationally through documenting influencing factors among New Zealand women and their family that relate to the practise of six months exclusive breastfeeding.

This research is a qualitative study involving face to face postpartum interviews with 30 mothers who prior to the birth of their infants were characterised as highly motivated to breastfeed exclusively for six months. The research participants were recruited from the lower North Island of New Zealand. Initial data were collected using a short questionnaire administered before the birth to record demographic information and to establish an antenatal intention to breastfeed exclusively. An initial postpartum face to face interview was conducted at around six weeks. Each participant was then followed via short monthly audio-recorded telephone interviews until giving up exclusive breastfeeding or until six months after the birth. Social constructionism was used as the epistemological framework underpinning the research. A range of social theories, linked to the central theory of social constructionism, were used to highlight the importance of social relationships, social interactions and social support. The theory of “planned behaviour” proposed by Icek Ajzen (1991), the theory of stress, coping strategies and social support proposed by Thoits (1995), theories of “governmentality” and “biopower” developed by Michel Foucault (1972), arguments about the “strength of weak ties” proposed by Mark Granovetter (1973) and theories related to “landscapes of care” suggested by Milligan and Wiles (2010), were used in this thesis to illuminate the findings that resulted from the thematic analysis of the qualitative data. The research was reviewed and approved by the Massey University Human Ethics Committee.

The central finding of this research is that six months exclusive breastfeeding practice is not limited to the intentions or actions of the mother-infant dyad; it is socially constructed by actual and virtual social networks around the mother as well as the other relational influences such as historical, geographic, socioeconomic and social contexts of the mother’s life. Additional findings of this research related to the quality of breastfeeding support through social media such as Facebook, Skype and smartphone apps, makes a significant contribution to the New Zealand and international literature in this area.
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BREASTFEEDING

Best for baby
Reduces incidence of allergies
Economical- no waste
Antibodies-greater immunity to infections
Stool inoffensive-never constipated
Temperature always correct and constant
Fresh milk- never goes sour in the breast
Emotionally bonding
Easy once established
Digested easily within two to three hours
Immediately available
Nutritionally balanced
Gastroenteritis greatly reduced

The WHO Global Health goal by 2025

By 2025, increase to at least 50% the rate of exclusive breastfeeding in the first six months.

Why it matters

Benefits of Breastfeeding

1. Babies who are fed nothing but breastmilk from birth through the first 6 months of life get the best start
2. Exclusive breastfeeding provides babies the perfect nutrition for everything they need for healthy growth and brain development
3. Protection from respiratory infections, diarrhoeal disease, and other life-threatening ailments
4. Protection against obesity and non-communicable diseases such as asthma and diabetes

Recommended actions

Limit Formula Marketing

What?
Significantly limit the marketing of breast milk substitutes

How?
Strengthen the monitoring, enforcement and regulation related to the International Code of Marketing of Breast milk Substitutes

Support Paid Leave

What?
Empower women to exclusively breastfeed

How?
Teach the mother and other caregivers how to support this important and personal decision to breastfeed in the workplace and in public

Strengthen Health Systems

What?
Provide hospital and health facility-based capacity to support exclusive breastfeeding

How?
Ensure that health facilities stock essential breast milk substitutes and other supplies to support breastfeeding

Support Mothers

What?
Provide community-based strategies to support exclusive breastfeeding counseling for pregnant and lactating women

How?
Foster peer and group counseling to improve exclusive breastfeeding practices, including the implementation of communication campaigns tailored to the local context

Scope of the Problem

Globally, only 38% of infants are exclusively breastfed

Suboptimal breastfeeding contributes to 800,000 infant deaths

Glossary of Key Terms

Antenatal
The definition of antenatal or prenatal is the period before the baby is born or before the birth. An example of an antenatal period is the third trimester of a human pregnancy.

Artificial Feeding
The baby has received alternative liquid like formula instead of breast milk with or without solid food in the last 48 hours (World Health Organization, 2003).

Breastfeeding
When a mother breastfeeds her baby, she feeds her baby with milk directly from her breasts rather than with artificial or cow's milk from a bottle.

Breastfeeding Exclusively
The baby has received only breast milk, no water, no formula and no other liquid or solid food (World Health Organization, 2003). In exclusive breastfeeding, the only nourishment the infant receives is mother’s breast milk, which is either suckled by the baby or expressed. In addition, the infant is given Vitamin D and any other prescribed medication the infant might need. According to the WHO definition, exclusive breastfeeding does not include giving water to the infant. In some reports, giving small amounts of water to the baby in addition to breastfeeding is included in the definition of exclusive breastfeeding.

Breastfeeding Support
All types of supports related to breastfeeding-friendly actions both in general and at the individual level. Support includes dissemination of information, psychological support and practical support.

Caesarean Section
A surgical operation for delivering a child by cutting through the wall of the mother's abdomen.

Formal Social Support
Support from registered health professionals for people under their care.

Fully Breastfeeding
The baby has received only breast milk in the last 48 hours (World Health Organization, 2003).
Healthcare Professionals

Or registered health professionals are people who are skilled workers in primary health care and maternity hospitals, including nurses, midwives, public health nurses and physicians who attend to pregnant mothers or young infants and their families.

Informal Social Support

Support from non-health professional sources such as peer support, social media and family support.

Lactation Consultant

A registered health professional who has undergone breastfeeding education and counselling training based on the Baby Friendly Hospital Initiative (BFHI).

Lead Maternity Carer (LMC) Midwife

New Zealand has a unique maternity system, in which women choose a Lead Maternity Carer (LMC) who can be a midwife, general practitioner (GP) or obstetrician during the childbearing period. LMC midwives are funded by the New Zealand Ministry of Health and provide free maternity care for women who are booked with them from the beginning of pregnancy until six weeks postpartum.

Māori

Māori are the indigenous Polynesian people of New Zealand who arrived in New Zealand in several waves of canoe voyages at some time between 1250 and 1300 AD.³

Midwife

Midwife means “with women”. Midwifery care is the provision of knowledge, advice, care and support to women and their families during pregnancy, labour, birth and up to six weeks following birth. Midwives are registered health professionals whose expertise is providing care to women and their babies during pregnancy, labour and birth and the first six weeks after birth (Midwifery Council, 2016).

Multipara

A woman that has had more than one pregnancy resulting in viable offspring.

Multiple Pregnancy

The existence of more than one baby that is carried to viability in a single pregnancy.

Partial Breastfeeding

The baby has received breast milk and formula or other solid food (World Health Organization, 2003).

Peer Social Support

Peer support is a form of interaction based on equality, solidarity, being heard and understood, personal contact and mutual support by persons who have undergone similar life experiences and stages of life. Those taking part in peer support are equals, and they usually both give and receive support. In this context, peer supporter refers to a person giving breastfeeding support, who does not have to be a healthcare professional. The peer supporter can be the mother’s spouse, own mother, relative, friend or another breastfeeding mother.

Plunket Nurse\(^4\)

Plunket is a New Zealand not-for-profit organisation, that is community owned and governed. Plunket nurses practice in the community and they are well child care providers for infants and children under five years. During the home visits they provide full physical assessments of infants, as well as advice about child development, infant feeding and early parenting. Plunket Nurses also provide advice and information related to safe sleeping, immunisation and safety.

Primipara

A first time mother, a woman who has given birth for the first time.

Postpartum

The postpartum period (or postnatal period) is the period beginning immediately after the birth of a child and extending for about six weeks.

Postpartum Depression

Postpartum depression is moderate to severe depression in a woman after she has given birth. It may occur soon after the birth or up to a year later. Most of the time, it occurs within the first three months after the birth.

Social Support

Social support refers to an intentional interactive relationship involving emotional, informational, practical and concrete support as well as support related to decision-making.

Sudden Unexpected Death in Infancy (SUDI)

Is a sudden and unexplained death of an infant (a baby less than one year of age). Diagnosis requires that it remain unexplained even after an autopsy or a detailed death scene investigation. SUDI typically happens during sleep between 12 midnight and 9 am.

Teenage Pregnancy

Pregnancy in women under 20 years of age.

The Baby Friendly Hospital Initiative (BFHI)

An initiative published by WHO and UNICEF in 1991, aimed at improving the implementation of breastfeeding worldwide. The core of the initiative consists of the “Ten Steps to Successful Breastfeeding” [see Table 8.1.], a practical guide aimed to promote and support breastfeeding in maternity wards at hospitals, and in recent years in primary health care and paediatric care as well.

Vaginal Birth

A vaginal birth is the birth of offspring in mammals through the vagina. It is the natural method of birth.

Weaning

The process of gradually introducing an infant to what will be its adult diet and withdrawing the supply of its mother's breast milk.

Well Child/Tamariki Ora

It is a free service for all New Zealand children from birth to five years that is funded by the New Zealand Ministry of Health and provided through contracting agencies. The well-child providers support parents to protect child health and well-being, so children can grow and develop to their full potential.

Whanau

Extended family according to Māori and tribal opinion, but it is more complex than an extended family. The meaning of Whanau includes emotional, physical and spiritual dimensions and it can be multi-layered and dynamic.

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