

Psychosocial factors associated with breastfeeding at discharge and duration of breastfeeding amongst two populations of Australian women

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Women delivering at two hospitals in Perth, Western Australia (n=556) and two hospitals in the Darling Downs, Queensland (n=503), completed a self-administered infant feeding questionnaire whilst in hospital. Those women breastfeeding at discharge were followed by telephone interviews at regular intervals for up to 6 months.

Multivariate logistic regression analysis was employed to control for confounding factors and determine sociodemographic, biomedical and psychosocial factors associated with breastfeeding at discharge. Cox's proportional hazards regression modelling was used to identify those factors associated with the duration of breastfeeding.

In total, 87.7% of mothers attempted to breastfeed whilst in hospital. At discharge 83.1% of participants were breastfeeding and by 6 months this had fallen to 46.4%. In general, psychosocial factors were most strongly associated with both breastfeeding at discharge and duration of breastfeeding.

Table 1 Psychosocial factors associated with breastfeeding^a at discharge and breastfeeding duration

Variable	Odds ratio ^b	(95% CI)	Relative Risk ^c	(95% CI)
Father's preference				
Prefers bottle-feeding or ambivalent	1.00		1.00	
Prefers breast feeding	9.13	(4.83 to 17.26)	0.58	(0.45 to 0.75)
Maternal grandmother's preference				
Prefers bottle-feeding or ambivalent	1.00		NS	
Prefers breast feeding	2.16	(1.15 to 4.03)		
When decided feeding method				
During or after pregnancy	1.00		1.00	
Before pregnancy	3.08	(1.15 to 4.03)	0.58	(0.44 to 0.77)
Intended duration of breast feeding				
≥4 months	Variable not included in regression model		1.00	
Undecided			1.64	(1.21 to 2.23)
<4 months			4.18	(2.81 to 6.22)

^aBreastfeeding defined as 'any' breastfeeding

^bOdds ratio is the likelihood of breastfeeding at discharge

^cRelative risk is the 'hazard' of stopping breastfeeding at any time before 6 months

The literature suggests that successful breast-feeding is dependent on multiple factors relating to the mother, infant and to the supportive environment. These factors can be categorised as non-modifiable and modifiable. At the individual level, non-modifiable factors include maternal ethnicity, years of education, age, income and parity. However, the psychosocial factors identified in this study as being associated with the initiation and duration of breastfeeding are potentially modifiable. Breastfeeding interventions that aim to increase the length of time a woman intends to breastfeed, and highlight the role of the father in successful breastfeeding, have the potential to increase breastfeeding initiation and prolong duration.