

COMMUNITY INFLUENCES AND BREASTFEEDING

2005 DASIE Series  Data for Assessment, Surveillance, Indicators, and Evaluation

VALUE OF BREASTFEEDING

Babies who are breastfed receive the most complete form of nutrition available. Human milk provides unique protections and supports for optimal child growth and development. The ideal goal for healthy moms is to breastfeed babies exclusively, using no formula or substitutes, until the infant is 6 months old. Breastfeeding should continue as long as possible through the first year of life. Beyond nutrition, breastfeeding offers a range of positive and desirable benefits to both mother and child.

Breastfeeding is a key contributor to the health of newborns and infants

INFLUENCES AND BREASTFEEDING

There are many different factors that influence whether a new mom will begin to breastfeed and whether she will continue to breastfeed throughout the first year of her baby's life. Influential factors, also called determinants for breastfeeding, include:

Demographic and socioeconomic influences

- Younger age, lower education level, being a single mom, and moms that need to return to work early on may be less likely to begin breastfeeding or continue breastfeeding.

Health status and system influences

- Mothers with serious health conditions, difficulties during labor and birth, or those giving birth in health care facilities that provide early alternatives to breast milk can make the initiation of breastfeeding less likely.

Personal beliefs and family influences

- Less family support, previous difficulties breastfeeding, or having negative feelings about breastfeeding may create an association that does not nurture the initiation or continuation of breastfeeding.

Policy influences

- Short maternity leave, laws around public decency, or mass media marketing of breastmilk substitutes may create an environment that is unsupportive of integrating breastfeeding into everyday life.

And Community Environment influences...

COMMUNITY ENVIRONMENT INFLUENCES

A range of key characteristics, found within communities, impact the "friendliness" of the environment towards breastfeeding. These community characteristics are not related to a mother's desire or ability to breastfeed. However these characteristics can seriously impede the daily routine of breastfeeding moms and limit the length of time an infant is breastfed.

- ✓ Environmental influences include societal attitudes and community perceptions of whether breastfeeding is a natural, normal, and appropriate in public.
- ✓ These influences can also manifest in the presence or absence of essential community-based supports for breastfeeding women.
- ✓ Creating supportive community environments for breastfeeding can be realized by advocating for the elimination of community-imposed barriers.

Community support for breastfeeding should include:

1. A recognition that breastfeeding in public is acceptable and appropriate.
2. A systematic effort to seamlessly integrate breastfeeding and employment for working mothers.
3. The portrayal of breastfeeding as both positive and desirable.

"Employers benefit when their employees breastfeed. Breastfed infants are sick less often; therefore, maternal absenteeism from work is lower in companies with established lactation programs. In addition, employee medical costs are lower and employee productivity is higher"

"Mothers report modifiable sources of stress related to breastfeeding, including lack of protection from harassment and difficulty finding time and an appropriate location to express milk while away from their babies."

"Most (mothers) want to breastfeed but discontinue sooner than they hope, citing lack of societal and workplace support as key factors limiting their ability to breastfeed"

Quotation Source: Washington State Legislature, RCW 43.70.640

How Common is Breastfeeding in Public Places

- About 1 in 3 county adults had seen a woman breastfeeding in a public place in the past month.

1. In the past month, have you seen a woman breastfeeding in a public place such as a restaurant, store, or park?		
Estimates for 2005	% of Thurston County Adults	# of Thurston County Adults
Yes	About 33%	Or 54,600
No	About 67%	Or 109,700

Environmental Supports for Breastfeeding

- About 4 in 5 county adults did not notice a private room or location for breastfeeding available at any public places they visited in the past month.

2. In the past month, have you noticed a <u>private room or location</u> for breastfeeding at any public place in Thurston County?		
Estimates for 2005	% of Thurston County Adults	# of Thurston County Adults
Yes	About 20%	Or 33,100
No	About 80%	Or 129,300

Perception of Breastfeeding at Different Public Places

- About 1 in 3 county adults did not think it was appropriate for a mother to breastfeed in a restaurant. ^

3. Do you think it is appropriate for a mother to breastfeed her infant in a <u>restaurant</u> ?		
Estimates for 2005	% of Thurston County Adults	# of Thurston County Adults
Yes	About 64%	Or 103,200
Depends*	About 16%	Or 26,700
No	About 20%	Or 32,200

- About 1 in 3 county adults did not think it was appropriate for a mother to breastfeed in a shopping mall or store. ^

4. What about in a <u>shopping mall or store</u> , do you think it is appropriate for a mother to breastfeed her infant there?		
Estimates for 2005	% of Thurston County Adults	# of Thurston County Adults
Yes	About 62%	Or 99,400
Depends*	About 17%	Or 26,900
No	About 22%	Or 35,000

- About 1 in 4 county adults did not think it was appropriate for a mother to breastfeed in a park or playground. ^

5. Do you think it is appropriate for a mother to breastfeed in public, at a <u>park or playground</u> ?		
Estimates for 2005	% of Thurston County Adults	# of Thurston County Adults
Yes	About 72%	Or 117,100
Depends*	About 13%	Or 21,700
No	About 15%	Or 24,200

^ Based on a response of depends or no, as they are not a clear affirmation or completely positive response to breastfeeding in public.

* Includes answers of 'maybe' and 'yes, IF the woman was modest or covered'.

Due to rounding, percentage totals may add to 99-101% rather than 100%.

COMFORT WITH BREASTFEEDING

- Nearly 1 in 3 county adults thought it might be best or would be best for a mother to breastfeed in a private place.

6. Do you believe it would be best if mothers breastfeed ONLY in private or at home?		
Estimates for 2005	% of Thurston County Adults	# of Thurston County Adults
Yes or Maybe	About 30%	Or 48,200
No	About 70%	Or 112,300

- Nearly 1 in 10 county adults said they would or might be uncomfortable or embarrassed seeing a mother breastfeeding her infant.

7. Do you find it uncomfortable or embarrassing to see a mother breastfeeding her infant?		
Estimates for 2005	% of Thurston County Adults	# of Thurston County Adults
Yes or Depends	About 12%	Or 20,300
No	About 88%	Or 143,600

Adults who said that they find it uncomfortable or embarrassing to see a mother breastfeeding were asked to share why they felt that way. The reasons given included:

- Modesty:** That in public, being modest or discrete is what makes breastfeeding okay or not okay (more like public nudity).
- Uncommon:** That it is not part of the norm or is unusual, so when it does happen it feels uncomfortable.
- Private:** That breastfeeding is a private experience and should stay that way.
- Experience:** That it was not part of how they were brought up, they are not used to seeing moms breastfeeding.
- Children:** That it creates a concern when children are around, for example having to explain breastfeeding to them or deal with the questions.
- Men:** That it is embarrassing for men to see or is uncomfortable for them to see especially when men are around.
- Infringes:** That breastfeeding should be done in private, that women should plan to do that and find ways to do that when out in the community.

GENDER DIFFERENCES AND PERCEPTION OF BREASTFEEDING IN PUBLIC

Men are more likely than women to think breastfeeding in public is appropriate, when asked about specific places.

- When asked if breastfeeding was appropriate in a restaurant, 69% of men said 'yes' compared to 59% of women (question 3).
- When asked if it was appropriate in a shopping mall or store, 66% of men said 'yes' compared to 58% of women (question 4).
- When asked if breastfeeding was appropriate in a park or playground, 75% of men said 'yes' compared to 69% of women (question 5).

However, men are more likely than women to say they that it might be best or would be best for a mother to breastfeed in a private place (question 6), 34% of men said 'yes or maybe' compared to 27% of women.

WORKPLACE POLICIES AND SUPPORTS

A 2005 survey of Thurston County worksites with 50 or more employees showed that:

- 90% of worksites, who employed more than 20 women of reproductive age, did not have a written policy or guideline that supports breastfeeding.
- 72% of worksites, who employed more than 20 women of reproductive age, did not have a designated room or location (not counting bathroom stalls) for mothers to breastfeed or pump or express their breast milk.
- 91% of worksites, who employed more than 20 women of reproductive age, provide flexible scheduling that allows adequate break time to breastfeed or pump or express their breast milk.

ABOUT THIS DATA

Data on pages 2 and 3 of this report comes from the 2005 Thurston County Perception and Practice: Environmental Factors and Lifestyle Choices survey. This survey is conducted county-wide, via telephone with adults 18 and older by the Thurston County Public Health & Social Services Department. This survey was first conducted in September 2004 and was repeated in late Summer 2005.

The fundamental purpose of the Thurston County Perception and Practice: Environmental Factors and Lifestyle Choices Survey is to:

- ✓ Provide a measure of the county's current perceptions and practices, against which future change can be monitored.
- ✓ Provide an opportunity to learn more from county residents about core topics of interest to the Department, as a means to support future public health prevention efforts and initiatives.

The 2004 version of the survey was intended to serve as a baseline of community awareness for health education projects under development within the Department. Selected questions related to these educational campaigns and questions related to new topics of interest, such as Community Perception of Breastfeeding in Public, were asked in 2005.

Data about employer policies and workplace supports for breastfeeding comes from a 2005 Healthy Worksite Survey conducted by the Washington State Department of Health to supplement the evaluation process in place for the State & Thurston County Steps to a Healthier WA program.

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Data used in this publication was prepared by the Epidemiology, Assessment and Planning Section
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