

THE PRACTICE OF BREASTFEEDING OF TEEN MOTHERS IN THE FIRST SIX MONTHS OF LIFE OF THE CHILD

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ABSTRACT

Teen pregnancy has been an important issue in public health. At this time, breastfeeding presents challenges to assist the nursing mother/adolescent and his child. The aim of this study was to analyze breastfeeding of adolescent mothers in the first six months of the child's life. This is a quantitative, descriptive and longitudinal study conducted with 165 adolescent mothers living in a municipality in the countryside of the state of São Paulo. The data collection was conducted through a questionnaire in the household during the period of June 2008 to June 2009. In the data analysis was used the Friedman Test. The results indicated the first ten days of postpartum as the greatest difficulty with breastfeeding, especially in the management and the perception of insufficient breast milk production. Of the teenage mothers, 8,7% were exclusively breastfed (EBF) at the end of the 6th month and offering artificial milk occurred since the early postpartum. It was concluded that mothers / adolescents had a successful start of the EBF, but the maintenance has not materialized. It became evident the need to watch teen nurse in a holistic and humane way, understanding their difficulties peculiar to each moment of the puerperal period.

Keywords: Pregnancy in Adolescence. Postpartum Period. Breast Feeding.

INTRODUCTION

Teen pregnancy has been an important issue in public health. Involves aspects related to their own adolescence and sexual and reproductive health of young people, requiring adjustments intrapsychic, interpersonal and social adaptation to motherhood ⁽¹⁾.

Found in the literature are divergent views on the impact of pregnancy/maternity for teens. For some, the teenager shows lack of emotional competence and maturity of personality to take on motherhood. Pregnancy also currently presents biological and socioeconomic risks that can bring health problems in pregnancy and childbirth and late studies ^(2,3,4). Research reveals some of these diseases as the practice of abortion, failure to perform or delay in the start of prenatal care, rejection of the newborn, increased poverty, delinquency, crime and violence, among others ⁽⁵⁾.

The ability underestimated to care for your child is a characteristic of adolescent mothers reported by study ⁽⁶⁾. Many teens want to be a mother, with this role as an affirmation of sexual

maturity and change in social status, being necessary to understand the social position of adolescents in society ^(1,7).

And breastfeeding? How does this process with teenage mothers? Does your ability to breastfeed is also underestimated? This research shows that teenage mothers had coherent knowledge about the importance of breastfeeding for the child's growth and development ⁽⁸⁾.

Comparative studies between adolescent and adult mothers showed that prevalence of breastfeeding at six months was greater in adult than in adolescent mothers (77,4% and 71,3% respectively) ⁽²⁾. But a comparative cohort study also concluded that breastfeeding duration and pattern were similar between children of adolescent mothers and adult mothers ⁽⁹⁾. Another study found that in both comparative groups was both early and late introduction of liquid foods considered healthy and unhealthy in the first year of life ⁽¹⁰⁾.

Thus, the literature shows no major differences between adolescent and adult mothers, which is an important information to demystify the relationship between literatures

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considered unfavorable for teens/breastfeeding/feeding. It is evident that several studies show the importance of health education and assistance is family and/or health professionals^(2,13).

Therefore, breastfeeding of teenagers urges family support and health professionals, these actors requiring technical skills and communication to promote the bond and assist the mother/teen to overcome obstacles. In order to monitor the process of breastfeeding for teenage mothers, this study aimed to analyze the practice of breastfeeding adolescent mothers during the first six months of the child's life.

The knowledge gained from this study will contribute to improving the quality of care nursing mothers and adolescent family, recognizing that motherhood in this age group has peculiarities that make it a special object of care.

METHODOLOGY

It was adopted a methodology of descriptive, longitudinal research of quantitative approach focusing on breastfeeding in adolescence. It was a part of the project "Adolescence and Parenting", MCT/CNPq/MS-Health nº 022/2007. The site chosen for the project was the development of Motherhood D. Francisca Silva Cintra of São Carlos/São Paulo and addresses of adolescents⁽¹¹⁾. The age range used was 10 to 19 years old, according to the World Health Organization (WHO)⁽¹²⁾.

The research was approved by the Ethics Committee of the Federal University of São Carlos (UFSCar) and maternity municipality (CAAE 4136.0.000.135 07, Opinion 027/2008). The term informed consent was signed by the head of adolescent research participant, which started after acceptance of both.

The data were collected through a questionnaire with closed questions regarding postpartum (imprint socioeconomic, personal and health) and the newborn, with varied themes within the aspects of the puerperium, such as hygienic care of the infant and with the mother, feeding, resting and sexual activity, diet and physical activity in postpartum, and breastfeeding issues. Considering the objectives

of this study, we used part of the information in this questionnaire.

The period of data collection took place from 30/06/2008 until 30/06/2009. The same was done in four stages, the first time in 7 to 10 days postpartum, the second at 30 days postpartum, and the third and fourth time 90 days with 180 days postpartum. The inclusion criteria for the participants were: being aged bounded adolescence (10-19 years), residing in the urban area and take part in the research. The questionnaire was addressed to teenage mothers, but sometimes the family participated in the dialogue, however, for this study these data were not used.

The setting of the study was the households of the mothers, located in various districts of the city. The initial contact occurred in motherhood, which were scheduled subsequent meetings. This questionnaire has been previously validated by a pilot project.

This study included only adolescents who had their children in maternity cited by the Unified Health System (SUS), not inclusive of teenage mothers in the rural area of the municipality, which was configured as a major drawback to the methodology employed.

For this study did not use a sample calculation, having been initially established that all teenagers would be covered at all times. However, in the course of data collection, were occurring variables that have prevented this goal. Several teenage mothers changed their city; some withdrew from the study, other discontinued breastfeeding, interfering to reach the initial goal. Once it has reached the number of 165 adolescent mothers who participated in all stages of research and quantitative calculations were performed.

For data analysis we used the Friedman Test and the consolidation of statistical data, the Statistical Programme BioEstat. The Friedman Test is a kind of analysis of variance with two criteria of variation for sample data linked. The response of the test depends on which factors are placed in the columns of a data table with k columns and n rows. Thus, the organization of the data table is very important, since the interpretation of the test result depends on it. The main factor compared must be placed in the

columns, and the data will be entered in the line of tables⁽¹³⁾.

The Friedman test does not use numerical data directly, but the posts occupied by them after sorting by ascending values of such data. The numerical ordering is done separately on each sample, and not together. Hypotheses to be studied: H_0 (Null Hypothesis): There is no significant difference between the meetings regarding the responses, ie, they are statistically equal. (p - value ≥ 0.05 , do not reject H_0) and H_1 (Alternative Hypothesis): at least one meeting differs from the other, regarding the responses. (p value < 0.05 ; reject H_0) . The " p - value" is the probability of committing a Type I error (rejecting H_0 when it is true), with data from a specific sample. If the p - value is less than the chosen significance level we reject H_0 , otherwise is accepted H_0 ⁽¹³⁾.

For complete results, we used a significance level of 5% which is the most usual in the polls.

However, the issues that have not reached this level of significance brought relevant data.

RESULTS AND DISCUSSION

During the period of data collection were found 3,270 records of births in maternity study, 419 adolescents aged 10-19. Given these data, it can be said that the incidence of births in adolescence in this period was 12,8%. For this study, was used a total of 165 adolescent mothers who have gone through all the steps provided.

Most adolescents in this study were in the age group 16-19, especially those living in concubinage, followed by single. Referring to education, both in school, and in high school / technical, most teenagers fits the incomplete classification.

The following are the results graphically. Figure 1 provides: "How do you assess the degree of difficulty with breastfeeding?".

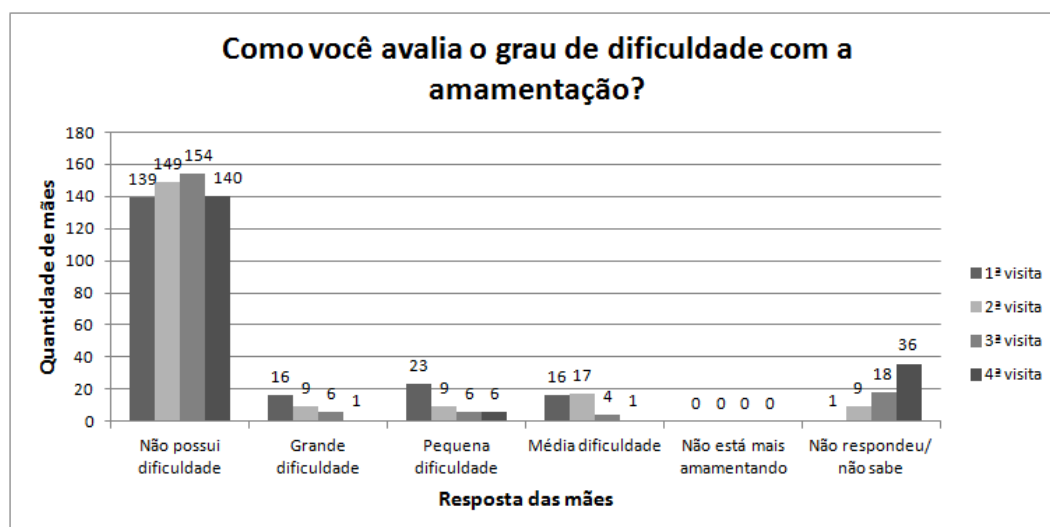


Figure 1. distribution of adolescents according to difficulties with breastfeeding, São Carlos/SP, 2008/2009.

The Friedman Test obtained a frequency (Fr) = 1.5500, $p = 0.6708$. This showed that, with respect to the degree of difficulty with breastfeeding, there was no significant difference in the responses during the four meetings (p value > 0.05), ie, most mothers reported no difficulties with breastfeeding in the period of 6 months of life of the newborn.

Can be identified in the first meeting, seven days after delivery , there was difficulty with

breastfeeding (55 teenage mothers) and this difficulty decreased over the meetings , and the second meeting were 35 mothers, 16 mothers at the third and last meeting with six months of baby's life, only 8 adolescent mothers reported having difficulties with breastfeeding. This demonstrated that the immediate postpartum period is the period in which the difficulties with breastfeeding are most significant at the beginning of this process of breastfeeding and

with the passage of time and with learning to be a mother nurse difficulties were mostly resolved.

After finding that there were some difficulties with breastfeeding, it was asked specifically which aspects of breastfeeding were these difficulties. The question asked was "If you have any difficulty then answer that?". The Friedman Test showed an $R_f = 14.9727$, $p = 0.0018$. Regarding the mothers who answered "yes" to the fact of having some difficulty breastfeeding, there was a significant difference in the responses during the four meetings (p value < 0.05).

During the first meeting there were several types of complaints, including: the baby does not take the breast (11 mothers), baby do not take a side (5 mothers), mothers who felt they had no milk (6 mothers), pain breast (29 mothers), the baby does not get right (8 mothers), difficulty positioning the baby to suckle (7 mothers). In the second meeting, we can say that the greatest difficulties were not having milk (10 mothers), crying baby (seven mothers), baby does not get the chest (7 mothers) and breast pain (7 mothers). In the third and fourth meetings, the greatest difficulty was the fact that they feel that they had no milk (8-4 mothers respectively). However, in general during the four sessions was visualized that difficulties decreased.

The first few days after birth are crucial for successful breastfeeding, because it is during this period that lactation is established, as well as being a period of intense learning and adaptation to the mother of the newborn. Hence the importance of intensive monitoring postpartum through home visits after discharge, as several questions and problems can arise and make the woman vulnerable and insecure⁽¹⁴⁾.

The difficulties experienced by adolescent mothers in this study between 7 to 10 days after birth were related to breastfeeding management such as picks and positioning of the newborn for feeding. Another aspect was heavily reported the perception of insufficient milk. Other authors also found similar results, since the belief "weak milk" was also reported by adolescent mothers, which meant that these mothers initiate supplementation with formula milk⁽¹⁵⁾. This study identified that specifically with breastfeeding difficulties were related to

attachment, cracks and presence of pain during breastfeeding⁽¹⁾.

In order to identify specifically what type of food that the baby received was questioned mothers about feeding the baby the day before. Figure 2 is based on the following question: "What the baby ate and drank yesterday?". The analysis of Friedman's test showed an $R_f = 2.9400$ ($p = 0.4010$). It was found that there was no significant difference in the responses of mothers during the four meetings (p value > 0.05).

However, one can see, from Figure 2 that most mothers gave breast milk to their babies the day before, but in different proportions during the meetings. At the first meeting 170 mothers offered milk, 120 mothers in the second, third and fourth 87 mothers, only 17 mothers offered only breast milk to their children. These data show that exclusive breastfeeding is achieved by a minority, 8,7% (17 mothers). During the meetings it became clear that mothers supplement breast milk with other sources of nutrition, as verified in the fourth meeting, which 126 mothers offered beyond the breast, tea, juices, solid foods and formula.

In addition to identifying that exclusive breastfeeding (EBF) was not achieved for most teenage mothers, as can be seen in the graph, the artificial milk was provided by mothers from the first encounter, ie, 7-10 days after delivery and extended up to 6 months of baby's life, this offer being most frequent in the third meeting, with 3 months of a baby's life (29 mothers).

Another study also found that teenage mothers do not materialize exclusive breastfeeding until 6 months of baby's life. The "mother's age" showed that being young mother showed statistical significance with the likelihood of stopping the EBF regardless of all other conditions, compared to those in the age group between 18-34 years (16). Similar results are noted in the study, which interviewed 80 adolescent mothers, 100% were exclusively breastfed at discharge, 88 % in the query postpartum (10-15 days after birth) and 84,4 % in the search after 1 month old⁽¹⁷⁾.

It was also investigated, as shown in Figure 3, the bottle-feeding by mothers, thus being asked: "You're giving a bottle for the baby?". The Friedman test identified a (Fr) = 0.9000, (p)

0.8254. To this question, there was no significant difference in the responses of mothers during the four meetings ($p > 0,05$). Despite the significance level found not to be significant, Figure 3 shows that the use of the

bottle becomes frequent in the course of the meetings. At the first meeting, 24 mothers offered the bottle, the second 69 mothers, 79 mothers in the third and fourth the number was raised to 109 mothers.

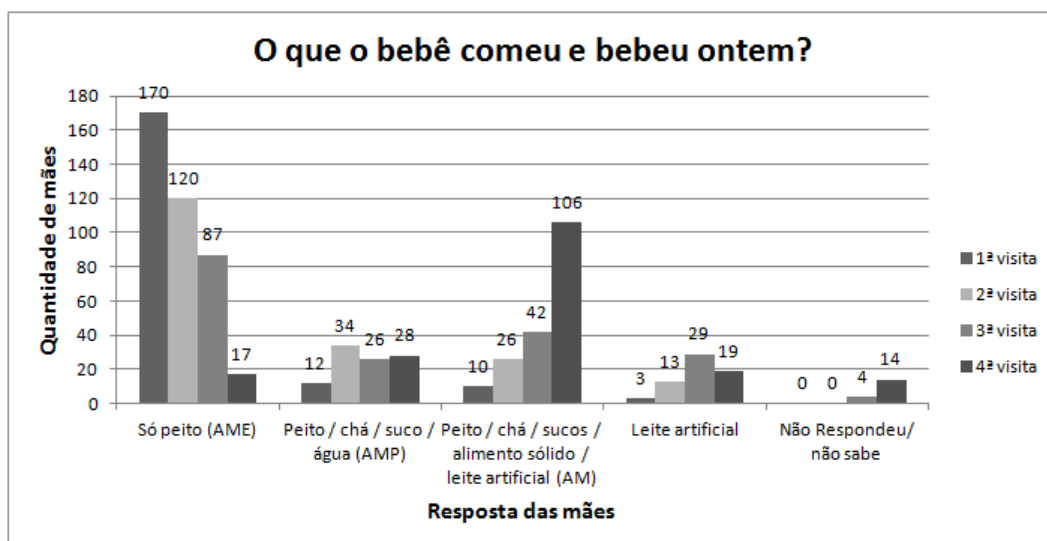


Figure 2. distribution of adolescents according to the child's feeding, São Carlos/SP, 2008/2009.

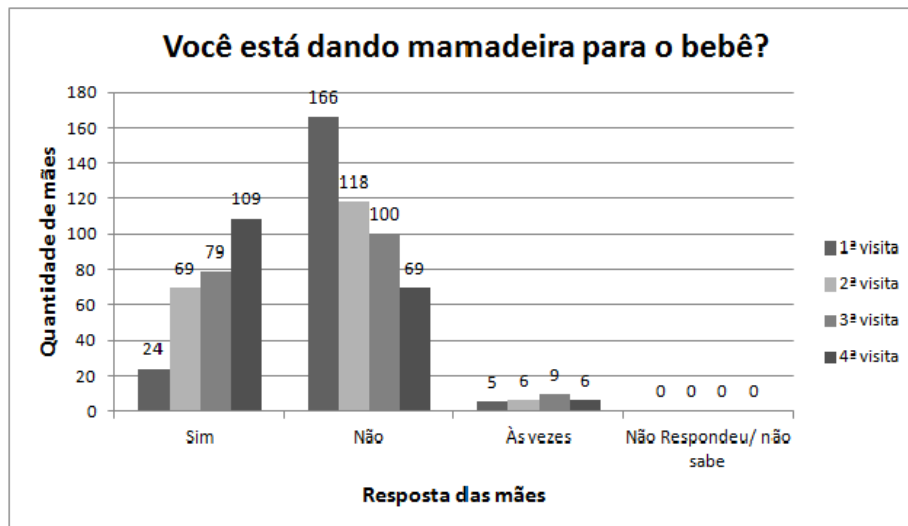


Figure 3. distribution of adolescents according to prevalence of use of bottle-feeding, São Carlos/SP, 2008/2009.

In the present study, the provision of artificial milk was present from the first meeting, with the highest prevalence in the third meeting. The cited research identified the offering of liquids by bottle feeding at half past seven days postpartum and concluded that artificial milk was offered from the start of the postpartum

period, increasing its offer over the same. Likewise behaved use the bottle for teenage mothers, she was used as early as seven days postpartum increasing prevalence during the postpartum period. Furthermore, it was identified that young age was one of the

variables that had a significant association with the use of the bottle⁽¹⁸⁾.

FINAL CONSIDERATIONS

Breastfeeding in adolescence is a challenge in health care. The results showed that there are difficulties with breastfeeding, which are more prevalent in the first ten days of the baby's life compared to subsequent stages postpartum.

Despite the difficulty with breastfeeding postpartum decrease over, the results of this study revealed that teenage mothers do not adopt the EBF until 6 months of age babies. Conversely the EBF, the supply of artificial milk increased, along with the use of the bottle. The reduction of the difficulties, the decreased prevalence of EBF and the option of teenagers by the use of artificial milk bottle and suggest the need for further studies to understand the relationship between these variables.

Although the results suggest a relationship between EBF and unfavorable parent/teen,

cannot be concluded that the fact of being a teenager was decisive in this process, given that breastfeeding involves a complexity of factors that need to be made, they show only the tip of iceberg that the association adolescence, pregnancy and breastfeeding raises. However, it is possible to conclude that the first 10 days postpartum are crucial for the establishment of breastfeeding, whether or not the adolescent mother.

You cannot deny the importance of family support, the preparation of the health team to support this fortress/adolescent and proper management of breastfeeding difficulties, among other things, in order to assist the mother/teen in addressing the barriers to new adjustments defendants with motherhood and breastfeeding. The fortress/adolescents and their families call on the need for comprehensive care, humanized and contextualized to understand their difficulties peculiar to each moment of the postpartum period.

A PRÁTICA DA AMAMENTAÇÃO DE MÃES ADOLESCENTES NOS PRIMEIROS SEIS MESES DE VIDA DO FILHO

RESUMO

A gravidez na adolescência tem sido uma importante temática na saúde pública. Neste momento, o aleitamento materno imprime desafios à assistência à nutriz/adolescente e seu filho. O objetivo deste estudo foi analisar a prática da amamentação de mães adolescentes nos primeiros seis meses de vida do filho. Tratou-se de um estudo quantitativo, descritivo e longitudinal realizado com 165 puérperas adolescentes residentes em um município do interior do estado de São Paulo. A coleta dos dados foi realizada por meio da aplicação de um questionário no domicílio no período de junho de 2008 a junho de 2009. Na análise dos dados foi utilizado o Teste de Friedman. Os resultados indicaram os primeiros dez dias de pós-parto como de maior dificuldade com a amamentação, destacando-se o manejo e a percepção de produção insuficiente de leite materno. Das mães adolescentes, 8,7% estavam em aleitamento materno exclusivo (AME) ao final do 6º mês e o oferecimento de leite artificial ocorreu desde o início do puerpério. Concluiu-se que as mães/adolescentes tiveram um início bem sucedido do AME, contudo a manutenção não se concretizou. Foi evidenciada a necessidade de assistir a nutriz adolescente de forma holística e humanizada, compreendendo as dificuldades peculiares de cada momento do período puerperal.

Palavras-chave: Gravidez na Adolescência. Período Pós-parto. Aleitamento Materno.

LA PRÁCTICA DE LA LACTANCIA DE MADRES ADOLESCENTES EN LOS PRIMEROS SEIS MESES DE VIDA DEL HIJO

RESUMEN

El embarazo en la adolescencia ha sido un importante problema de salud pública. En este momento, la lactancia materna es un desafío para la asistencia madre/adolescente y su hijo. El objetivo de este estudio fue analizar la lactancia de madres adolescentes en los primeros seis meses de vida del niño. Se trata de un estudio cuantitativo, descriptivo y longitudinal realizado con 165 madres adolescentes que viven en un municipio en la provincia de São Paulo. La recogida de datos se realizó a través de un cuestionario en el hogar durante el período de junio 2008 a junio 2009. En el análisis de los datos se utilizó la prueba de Friedman. Los resultados indicaron los primeros diez días de post-parto como el período de mayor dificultad con la amamentación, en especial la técnica de amamantar y la percepción de producción insuficiente de leche materna. 8,7% de las madres adolescentes amamantaron en forma exclusiva (LME) al final del sexto mes y el ofrecimiento de leche artificial ocurrió desde los primeros días de puerperio. Concluyese que las adolescentes tuvieron un comienzo

exitoso de LME, pero el mantenimiento no se ha materializado. Es necesario ver la madre adolescente de una manera holística y humana, comprendiendo las dificultades de cada momento del período puerperal.

Palabras clave: Embarazo en Adolescencia. Período de Postparto. Lactancia Materna.

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