



MATERNAL DETERMINANTS AND COMPETENCES OF MATERNAL ROLE IN THE PRACTICE OF BREASTFEEDING

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ABSTRACT

Introduction. Babies who are breastfed are six times more likely to survive; prevents gastrointestinal and respiratory infections, obesity, diabetes, leukemia, allergies, childhood cancer, high blood pressure, high cholesterol and digestive diseases, strengthens the bond between mother and baby, who develops greater security, self-esteem and high levels of intelligence. **Objective:** To identify modifiable and non-modifiable maternal determinants for the practice of breastfeeding. **Methodology:** the design was correlational descriptive, the study population were postpartum women of the joint housing service, the sampling was for convenience, the period of data collection was October-November, the data was captured and processed through the statistical program StatisticPackage for the Social Science (SPSS) version 20. The descriptive analysis of the variables was carried out through tables, graphs and figures, analysis of centrality and distribution. **Results:** 80% state that they did not smoke during the previous 3 months during their pregnancy, 54% did not drink any alcoholic beverage while 40% said yes and only 6% declared never having ingested alcoholic beverages, when questioning the acceptability of their pregnancy 44% of women say they planned their pregnancy, 84% felt happy and only 12% affirmed that once they had thoughts about abortion, after the birth all the women denied having their babies immediately with them. The type of food of the newborn during their hospital stay was the 50% mixed, while 36% of the women gave exclusive breastfeeding and 14% fed it with formula since it did not produce milk. **Conclusion** Regarding the knowledge about breastfeeding, the results were mostly favorable, but some were unaware of the benefits of breastfeeding. In terms of the depression scale, the responses were positive since in the last days before the birth they said they could see the good side of things with 82%, 80% look at the future with enthusiasm and without having the vague desire to be damaged with 82% and 70% without feeling very sad. **Bibliographic references:** Aguilar Cordero, M. J., Baena García, L., Sánchez López, A. M., Guisado Barrilao, R., Hermoso Rodríguez, E., & Mur Villar, N. (2016). Beneficios inmunológicos de la leche humana para la madre y el niño. *Revisión sistemática. Nutrición Hospitalaria*, 33, 482-493. Recuperado el 17 de 09 de 2017. Baño Pinero, I., Carrillo García, C., Thambidurai, U., & Martínez Roche, M. E. (2015). el concepto del baby café como red internacional de apoyo a la lactancia materna. *cultura de los cuidados*, 19-43. Cerda, M. L. (2011). Lactancia materna y gestión del cuidado. *Revista Cubana de Enfermería*, 27(4), 327-336. Recuperado el 22 de 3 de 2017.

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INTRODUCTION

Babies who are breastfed are six times more likely to survive; prevents gastrointestinal and respiratory infections, obesity, diabetes, leukemia, allergies, childhood cancer, high blood pressure, high cholesterol and digestive diseases, as long as the

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mother is not malnourished or anemic. Breastfeeding strengthens the bond between the mother and the baby, who develops greater security, self-esteem and high levels of intelligence.

The benefits of breastfeeding for women are also many: they recover faster from childbirth, have less risk of bleeding and postpartum depression, return to the original weight in less time, reduce the chances of diseases such as type II diabetes,

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osteoporosis, cancer, hypertension and heart problems. Despite all this, only 1 in 10 working women breastfeed their babies, the rest give artificial formulas.

The widespread consumption of breast milk also supports the family budget because it is free and substantially helps to reduce expenses for medical care and food. For companies, supporting the breastfeeding of their employees reduces health incidences and absenteeism. Ecology also benefits because it reduces waste production, fuel consumption and water.

Objective: To identify modifiable and non-modifiable maternal determinants for the practice of breastfeeding.

METHODOLOGY

The design was descriptive correlational. The study population consisted of postpartum women who were in the joint accommodation service who had not yet been discharged and who could not corroborate the weight loss of the newborn, from a 2nd level hospital in Veracruz, Veracruz; and that they agreed to participate in the research with the signature of informed consent, and the sampling was for convenience.

Those mothers whose children had congenital malformations, women with HIV, drugs, alcohol, diabetes mellitus, multiple births, breast implants, nodules and breast removal were excluded.

For this research, two instruments of the ENSI project were used, of which the first instrument called T-1 Initial Interview "Project Nursing-ENSI" with 94 items which was divided into 7 spheres, the first on the demography of the sample with 10 items, the second sphere "Acceptability of pregnancy" with 4 items on its pregnancy with dichotomous options, the third sphere "Edinburgh Scale" (Depression) with 10 items of Likert scale, the fourth sphere "Quality of the relationship with its close person" (ARI) with 32 items, a fifth sphere called "Infant Feeding Plan / Goal" (IFI) consisting of 5 statements, the sixth area referred to the "Experience and perceptions of breastfeeding" with 7 items and finally the seventh sphere "Knowledge about breastfeeding" "(Knowl) with 26 dichotomous items.

Regarding the second instrument "T-2 Data clinical form or Interview Project Breastfeeding-ENSI", contains of 31 items some with open questions and others with options.

Prior to the data collection, approval was requested from the Research Committee and the Ethics Committee of the Faculty of Nursing of the Universidad Veracruzana. Individuals were selected by convenience sampling. The period was collected in the months of October-November, the estimated time of the survey was 15 minutes.

The data were captured and processed through the statistical program StatisticPackageforthe Social Science (SPSS) version 20. The descriptive analysis of the variables of the maternal determinants and competence of the maternal role in the practice of breastfeeding in women was carried out. The general objective was answered through the descriptive analysis and presented through tables, graphs and figures, analysis of centrality and distribution.

RESULTS

Were studied 50 puerperal women from a 2nd level hospital in Veracruz, Veracruz. The average age is 26.54 ± 4.841 , median 26.50, range 17 (18-35), 95% CI 25.16-27.92. Up to 25% the

age was 23 and up to 75% of 30.25, asymmetry 0.117, kurtosis -0.867. The distribution of the data was not different from the normal distribution, K-S ($p > 0.05$),

Table 1 Characteristics of postpartum women addictions, second level care hospital, Veracruz, Ver., 2017.

| Characteristics | Fr | % |
|------------------|----|----|
| Smoke | | |
| No | 40 | 80 |
| Yes | 5 | 10 |
| Never has smoked | 5 | 10 |
| Alcoholic drinks | | |
| No | 27 | 54 |
| Yes | 20 | 40 |
| Never has drunk | 3 | 6 |

Sources: Direct N=50

Of the puerperal women interviewed, 80% stated that they did not smoke during the previous 3 months during their pregnancy, 54% of the women did not drink any alcoholic beverage during the 3 previous months during their pregnancy, while 40% agreed that yes and only 6% declared never having ingested alcoholic beverages.

Table 2 Characteristics of pregnancy acceptability of postpartum women, second level care hospital, Veracruz, Ver., 2017.

| Characteristics | Yes | % | No | % |
|--------------------|-----|----|----|----|
| Planned | 22 | 44 | 28 | 56 |
| Happyfor pregnancy | 42 | 84 | 8 | 16 |
| Share news | 43 | 86 | 7 | 14 |
| Having an abortion | 6 | 12 | 44 | 88 |

Source: Direct N = 50

When questioning the acceptability of their pregnancy, 44% of women said they had planned their pregnancy, 84% were happy about their pregnancy, 86% were happy to share the news with everyone and only 12% said that they had ever went through their mind having an abortion and 88% said no.

Table 3 Characteristics of skin-to-skin contact immediately after delivery of post-partum women, second-level care hospital, Veracruz, Ver., 2017.

| Characteristics | Fr | % |
|--|----|-----|
| Was the newborn skin to skin immediately after delivery? | | |
| Yes | 0 | 0 |
| No | 50 | 100 |

Source: Direct N = 50

With regard to skin-to-skin contact immediately after delivery, all women denied having their babies immediately with them.

Table 4 Characteristics of the type of feeding of the newborn, puerperal women, hospital of second level of care, Veracruz, Ver., 2017.

| Characteristics | Fr | % |
|-------------------------------------|----|----|
| Type of newborn feeding in hospital | | |
| LM | 18 | 36 |
| Formula | 7 | 14 |
| Mixed | 25 | 50 |

Source: Direct N = 50

The type of food of the newborn during their hospital stay was 50% mixed, while 36% of the women gave exclusive breastfeeding and 14% fed it with formula since they did not produce milk.

DISCUSSION

According to the study conducted by Méndez, García, Reyes & Trujano in 2014, whose objective was to analyze the sociodemographic factors that influence the abandonment of breastfeeding, where the causes of the abandonment of exclusive breastfeeding were that they were under 25 years of age, of urban location, the majority worked and their marital status were free union, regarding the comparison with this research, these two studies coincide in that, for the most part, the level of education, knowledge and age are the factors that favor the early abandonment of exclusive breastfeeding.

According to the study carried out by Borre, Cortina & González in 2014, whose objective was to identify if they knew the benefits and consequences of exclusive breastfeeding where they were found to be over 35 years old, they have adequate knowledge about exclusive breastfeeding, but not the appropriate breastfeeding technique, sharing results with this research as far as knowledge is concerned, but not the knowledge of the appropriate technique.

According to the study conducted by López, Martínez & Zapata in 2013, whose objective was to identify the reasons for early abandonment of exclusive breastfeeding where it was found that the main reasons related are the problems for milk production, rejection of the baby or other activities of the mother, in comparison with this investigation the data coincide, since the main reason for the early abandonment of breastfeeding is generally that they do not produce enough breast milk, that the baby rejects the breast and in some cases that the mother has to go to work.

CONCLUSION

We can affirm that 84% of the women in the study who were in the puerperium period were happy to know that they were pregnant, 56% of pregnancies were not planned, 86% wanted to share with all the news of their pregnancy, however, a very low percentage of 12% thought of having an abortion. Regarding to the scale of depression, the responses were positive because in the last days before the birth they said they could see the good side of things with 82%, 80% look at the future with enthusiasm and without getting a vague desire to hurt themselves with 82% and 70% without feeling very sad.

Regarding the quality of their relationships with the closest or most important people in their life (husband, partner, mother, father, family, friends) it was obtained that their greatest support are these people, who respected and supported their decisions with a 54%, they were encouraged to follow their own interests with 36%, past quality time with them by 54% and 54% considered their point of view. In the plan as to how to feed their babies a very low percentage of 6% ensures that they would be fed with formula, 60% agreed to breastfeed or at least try to do so, 72% agree to feed at least the first month of birth with breast milk, 58% agreed to feed up to 3 months with breast milk and 54% from birth to 6 months.

According to the experiences and perceptions experienced by the mothers, most of them are primiparous with 40%, the first pregnancy of 50% of the mothers interviewed, 66% started their prenatal control from the first trimester with an average of 7 consultations in all your pregnancy, 60% have not breastfed before, but 86% have seen breastfeeding someone in

their family or friends and 96% know that breastfeeding has many benefits for the baby, as well as 64% for mothers, 66% think that there are no benefits for their family, as well as there could be problems or barriers that prevent them from breastfeeding their babies such as low milk production or that he drinks rejects with 18%.

With regard to knowledge about breastfeeding, the results were mostly favorable, but some are unaware of the benefits of breastfeeding, such as: for the mother it is to help the uterus return to normal size with 42%, as well as the benefits for the baby such as: the only complete food that is breast milk and not complement it with anything and do not give them solid before 5 months with 64%.

The weight gain of them from the beginning and end of pregnancy was not significant, 94% had no complications or risks in pregnancy, delivery and postpartum with 96%, with cesarean deliveries predominating with 70%, 62% receiving epidural anesthesia, none were with the newborn from skin to skin after childbirth, were more children than girls with 64%, of good weight, on average, with an average of 38 weeks of gestation and adequate intrauterine growth, on the Apgar scale in the first minute of life a score of 9 is 65% and apgar to five minutes of life of 9 94%. A very low percentage was transferred to neonatology due to problems of prematurity 2% and neonatal sepsis 4%, finally the feeding of the newborn in those puerperium hours was mixed 50% and only 36% had exclusive breastfeeding.

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