

Attitudes, Influencers, Subjective Norms, and Challenges among Breastfeeding Mothers in Baltimore City.

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BACKGROUND

- ❖ Benefits of breastfeeding are well-documented in the literature, yet significant racial and socioeconomic disparities in breastfeeding rates remain
- ❖ Little is known about who and what influences low-income Black mothers to breastfeed

OBJECTIVES

- ❖ Explore attitudes, motivating factors, and systems of support that contribute to successful breastfeeding
- ❖ Understand breastfeeding community norms and barriers faced among low-income Black mothers in Baltimore City

METHODS

- ❖ Breastfeeding mothers recruited through B'more for Healthy Babies' (BHB) community-based breastfeeding groups and word of mouth
- ❖ Mixed-methods approach using Theory of Planned Behavior as underlying framework
- ❖ Qualitative interviews were conducted among 15 mothers
- ❖ Quantitative Likert Scale survey conducted among 14 mothers assessing knowledge, attitudes, and barriers to breastfeeding and formula-feeding

RESULTS

Demographics

- ❖ Mothers between ages 17-39
- ❖ Total of 36 children, 31 breastfed
- ❖ Average breastfeeding length: 10.5 months, range 2-36 months

Intention

- ❖ Intention to breastfeed began prior to or early in pregnancy
- ❖ Significant effort and preparation devoted to breastfeeding journey

Attitude

- ❖ Health benefits of breastfeeding primary driver (e.g. fewer illnesses, stronger academic performance)
- ❖ Negative evaluations of bottle-feeding or formula also strong motivation (e.g. cost, effort, impurities)

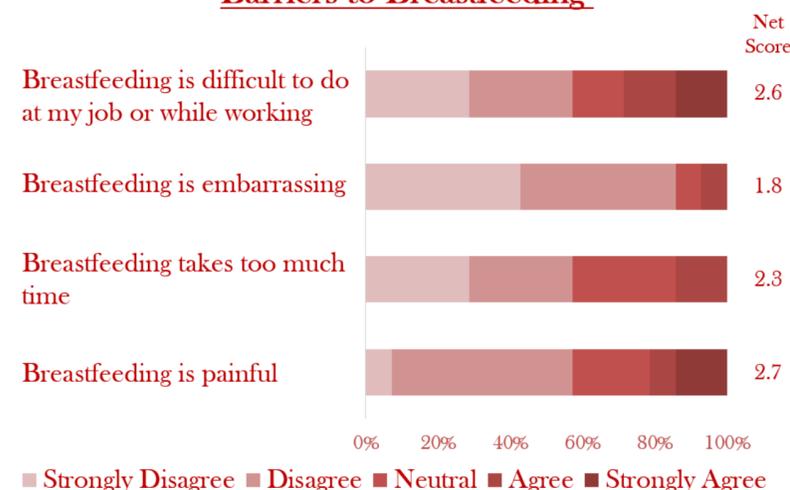
Subjective Norms

- ❖ 60% had a family history of breastfeeding
- ❖ 80% had a supportive partner
- ❖ Breastfeeding perceived as rare in Baltimore City, with few mothers knowing another breastfeeding peer
- ❖ Healthcare and social service providers (e.g. WIC, BHB) were influential in motivating mothers to breastfeed and in assisting with breastfeeding challenges
- ❖ Breastfeeding in public remains strong negative subjective norm

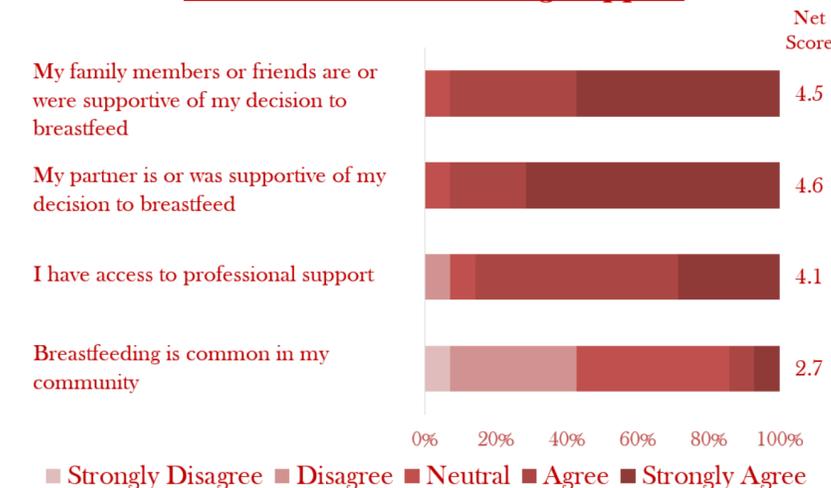
Perceived Control

- ❖ High self-efficacy for breastfeeding
- ❖ Low perceived barriers to breastfeeding such as pain, time and embarrassment

Barriers to Breastfeeding



Sources of Breastfeeding Support



CONCLUSIONS

- ❖ Educating mothers and fathers on the benefits of breastfeeding, providing continued lactation counseling and support, and promoting the behavior may increase and normalize breastfeeding in Baltimore City
- ❖ Peer-support initiatives such as community-based breastfeeding groups can reduce social isolation and create positive subjective norms around breastfeeding