

BREAST FEEDING PATTERNS AMONG MOTHERS WHO RECENTLY GAVE BIRTH TO FULL TERM INFANTS AND BARRIERS TO BREASTFEEDING.

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Background: Gartner et al (2005) highlighted the positive effects of breastfeeding on infants and mothers. Advantages to the infants included nutritional, immunological, cognitive developmental, psychological and social benefits. Research has shown that breastfeeding protects against common childhood illness such as diarrhea, pneumonia, infectious diseases, urinary tract infection as well as later childhood obesity (Armstrong et al 2005). I

Objective- Despite efforts to promote exclusive breastfeeding and prolong its duration, rates remain low and are evident in developing countries. This study sought to examine whether there was a difference in the breastfeeding pattern between private clinics and public clinics and to identify breastfeeding duration rates.

Design- The study utilized a sample size of 150 mothers (75 mothers who visited private clinics and 75 who visited a public health center). The private clinics used in the study were from St. Augustine and the Chaguanas Health Center was used as the public facility. The study design used questionnaires to acquire data about the mothers. One-to-one personal interviews were carried out and the results were analyzed using SPSS version 16.

Results- Partial breastfeeding was the most popular pattern engaged by the mothers (66.7%). Only 4.7% solely bottle fed their infants. More mothers at private clinics 49.3%, breastfed their babies than mothers at the public health center 46%. As much as 81.5% started breastfeeding right after birth. However, 71.5% indicated that they would stop at 6 months or younger. Having to return to work was the main reason why mothers at the private clinic did not breastfeed exclusively or predominantly. Mothers at the public clinic indicated that the infant was not getting enough milk. The pattern of breastfeeding was found to be significantly affected by employment status.

Conclusion- There was a higher breastfeeding rate at private clinics compared to the public clinic, however there was shorter breastfeeding duration rate at the private clinics.