Teenage mums’ attitudes to breastfeeding

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NHS Bristol Objectives

- Increase breastfeeding rates amongst young mothers
- Encourage both initiation and continuation past the 6 week check
- Identify relevant barriers and enablers
- To develop an intervention for later launch.
Research Objectives

• Stage 1 International literature review:
  – Investigating current and past breastfeeding rates
  – Identifying attitudes, behaviours and beliefs
  – Examples of interventions

• Stage 2 Primary research:
  – Identifying attitudes, behaviours and beliefs of young mums and mums-to-be in their ‘whole life’ context
  – Investigating feeding decisions and outcomes
  – Exploring social marketing options, using existing campaigns and ideas to prompt discussion

• Stage 3 Primary research:
  Test and amend the creative development material

Methodology – Stage 2 Primary

• Sample young women aged 14-18 at 1st conception; 14-22 at interview (with 2-3 children as teenagers)

• Depth interviews with:
  – 21 young mothers - 5 grandmothers
  – 2 friendship dyads - 1 friendship triad (mums-to-be)
  – 4 professionals - 1 professional dyad
  – 2 partners - 1 mother/granddaughter dyad

• Group interviews with:
  – 3 groups of young mothers/mums-to-be

• We covered the full range of feeding plans, decisions and outcomes across breastfeeding, switching and bottle feeding
SECTION 2

Insights from the research:
Listening to teenagers’ lives

Where is she ‘in her head’?

- Different stages of maturity
- The currency of ‘the teenage world’ keeps impinging
- “They miss their appointments; they say they are in the city... [They are] somewhere else in their heads”
  [Professional]
Other life priorities are more pressing

- Money: particularly if aged up to 16
- Education: school attendance, college plans
- Job: current or planned
- Living arrangements
  - Family relationships and child rearing history
  - Friendship circles
  - Drugs and alcohol: self and/or significant others
Ante and post natal circles of influence

Timeline: Ante- and post-natal
Towards the intervention

SECTION 3
The three roles of social marketing

1. Set the Social Norms
2. Benefits “WIFM?”
3. Offer Support

Influence through family and personal supporters

Focus on benefits of breastfeeding

Build relationships through support services

Early pregnancy
Birth Plan
Labour
Birth
1st Feed
Subsequent feeds in hospital
Go home
1st feeds at home

1st Hour

Feeding: Haven’t decided .... Even now

Low Involvement Decision
The feeding context

- The current social norm-who has the choice?

  "It is up to you what you choose"
  [New mum]

  "Look at their life and encourage them to think about their choices and sometimes make different choices. I am not going to say better choices, because their choice is their choice and they have to go through their own process."
  [non-NHS Professional]

- Family attitudes allow for a new mum choosing

  - So is any communication that may feel like there is only one sensible choice (i.e. breastfeeding) potentially counter-productive?

Benefits: What’s in it for me?

**Possible but weaker**

- Just for the baby?

**The strongest**

- Be practical - support mum’s breastfeeding with incentives that accept her life challenges
- Symbolism of nursing bras

- Build confidence early
- Not alienating bottle feeders
Support

- Early pregnancy
- Feeding: Haven’t fully decided
- Labour
- Birth
- 1st Feed
- Subsequent feeds
- Birth
- Go home
- 1st feeds at home
- At home - peer support/health visitor
- Clinical/Peer supporter

Facilitate: Listen, empathise, gain trust and confidence, then emphasise the benefits

Relationship building: Aim for a tone that balances clinical considerations with the personal needs of this specific audience

Testing and Implementation

SECTION 4
Briefing the creative agency

- Targeted material written and designed for teenagers
- Focus on rational and emotional benefits to mum in the context of her life
- Focus on “convenience”
- Build in practical incentives to draw her in
- Make the decision special
  - Breastfeeding mothers have a different experience of “bonding”
  - Bottle feeders identified missing this experience; switchers regretted their loss
- Avoid alienation and guilt
- Think strategically - a ‘childbearing lifetime’ of opportunity

We tested 8 nursing bras
The launch at end 2010:
Peer supporters/professionals give out –

- During pregnancy - free nursing bra
- At 28 weeks – targeted information pack
- At 48 hours - bronze certificate, a purple ribbon, patterned muslin, small handmade soap, small bag
- At 2 weeks - silver certificate, Day Rider bus ticket
- At 6-8 weeks - gold certificate, bus ticket and free entry to a ‘family day out’ location
- At 6 months - platinum certificate, ‘prize draw’ with 6 one month bus tickets as prizes
The future

• Government Office South West
  – met and briefed the Health Minister
  – has since offered this intervention across the region and beyond

• NHS Bristol will be evaluating the intervention both qualitatively and quantitatively
Thank you

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