

Introduction to a Pilot Study on Infant Feeding eHealth Resource to Assist Expecting Parents to Achieve Desired Goals (iFEED)

Objective

To determine whether targeted interventions help pregnant parents reach their infant feeding goals and improve breastfeeding rates.

Principles

- We aim to respect parents' choices and intentions while providing them with the educational and support resources to make an informed decision.
- We want to ensure that parents are aware of any barriers and struggles other parents have faced and to help them feel more prepared or know where to go if they have a similar experience.

Practice Points

1. Breast milk is the optimum nutrition source for infant development and growth. Benefits of breastfeeding include a reduced risk of infections, sudden infant death syndrome (SIDS), and infant mortality, as well as reduced risks of postpartum hemorrhage, and ovarian and breast cancers in mothers.
2. Early breastfeeding (EBF) to six months is uncommon amongst women in NL and breastfeeding rates remain lower than any other province in Canada.
3. Maternal attitudes towards breastfeeding can be measured through the Iowa Infant Feeding Attitude Scale (IIFAS) and are shown to be a strong predictor of breastfeeding intent, initiation and duration.

Methods (PI: Dr. L. Twells)

1. Design: the pilot study will follow a pre-test post-test single group design to evaluate the feasibility and effect of an eHealth information resource on women's breastfeeding intent, efficacy, and perceived support.

This pilot will precede a larger provincial pragmatic randomized control trial. We have chosen to pilot the intervention group specifically as the control group will consist of usual care.

The eHealth resource was designed by a collaboration between researchers, health care professionals and Perfect Day, a creative branding agency.

2. Participant Recruitment: 50 pregnant parents, aged 18 or older, expecting their first single child will be recruited for the study. Recruitment will take place via social media and posters in local clinics with high traffic of mothers.
3. Intervention: the intervention will consist of an educational animation with the IIFAS embedded into it, and an eHealth resource in the form of a webpage.
4. The webpage will include resources such as education, answers to common questions, and videos to help support a pregnant woman in their infant feeding journey.
5. The intervention begins with a Qualtrics survey that will collect demographics information, a self-efficacy questionnaire, and a perceived social support questionnaire.
6. Participants will then be asked to watch an animation that will guide participants through the IIFAS questions and briefly explain what their response says about their infant feeding preferences, as well as common challenges associated with this feeding method.
7. The challenges have been identified by previous research within the province.
8. Participants will then be directed to resources to help ensure they receive the best information and support to meet their infant feeding goals. They will also be linked to the BabyFriendlyNL website.
9. Data Collection: participants will be given a link to a Qualtrics survey, which will collect demographic information as well as perceived support and self-efficacy.

Support will be measured using the Multidimensional Scale of Perceived Social Support and self-efficacy will be measured using the General Self-Efficacy Scale (GSE).
10. They will also be given access to an animation that has the Iowa Infant Feeding Attitudes Scale (IIFAS) questionnaire embedded within it to assess their infant feeding attitudes.