



# Women, Infant and Children (WIC) Peer Counselor Contact with First Time Breastfeeding Mothers

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## Objective

This study was designed to determine whether singleton women who had not previously breastfed and who had a WIC peer counselor were more likely to initiate breastfeeding than women not exposed to the WIC peer counselor.

The study was approved by the Institutional Review Boards of The University of Tennessee Health Science Center and the Texas Department of State Health Services.

## Sample & Design

The retrospective cross-sectional study used data from the 2009 Texas Department of State Health Services (DSHS) WIC Infant Feeding Practices Survey (IFPS) administered through 73 local WIC agencies. Of the 5,427 responses to the 2009 Texas DSHS WIC IFP Survey, 56.6% (N = 3,070) were included in this study.

## Measures

The Texas DSHS WIC IFPS, a 55-item survey with multiple-choice and two open-ended questions, was used to evaluate breastfeeding beliefs, attitudes, and practices among women receiving WIC services.

## Results

Women who had peer counselor contact during pregnancy, in the hospital, and after delivery were more likely to initiate breastfeeding than women without such contacts, OR = 1.36, 2.06, 1.85, respectively.

## Findings

Table 1. Study Demographics and Breastfeeding of WIC Enrolled Mothers

Factor	Level	Breastfed This Child	
		Yes n (%)	No n (%)
Education	< High School Education	673 (66.9)	332 (33.0)
	High School Education	750 (58.9)	524 (44.1)
	>High School Education	675 (70.3)	285 (29.7)
Race	White	398 (60.0)	265 (40.0)
	Black	200 (47.0)	226 (53.0)
	Hispanic	1,121 (63.7)	640 (36.3)
	Asian	23 (67.6)	11 (32.4)
	Native American	9 (64.3)	5 (35.7)
	Other	11 (84.6)	2 (15.4)

Note. Variations in totals are a result of missing data.

Table 2. WIC Peer Counselor Contact and Breastfeeding

Peer Counselor Contact	N	Breastfed	
		Yes n (%)	No n (%)
During Pregnancy	467	294 (63.0)	173 (37.0)
In Hospital	34	24 (70.6)	10 (29.4)
After Delivery	238	156 (65.5)	82 (34.5)
DP + IH + AD	236	61 (33.6)	175 (61.5)
DP + IH	29	20 (66.7)	9 (30.0)
DP + AD	1,462	966 (66.0)	496 (33.9)
IH + AD	9	8 (88.9)	1 (11.1)
Total	2,475	1530 (61.8)	946 (38.2)

Note. Variations in totals are a result of missing data. DP = during pregnancy; IH = in hospital; AD = after deliver.

Table 3. Adjusted Odds Ratio and 95% Confidence Interval for Women Who Had Peer Counselor Contact and Breastfed

Peer Counselor Contact and Women Who Breastfed	OR	95% CI	Effect of Primiparas Verses Multiparas Who Had Not Breastfed Previous Children	
			OR	95% CI
During Pregnancy	1.36	1.12, 1.66	3.14	2.62, 3.77
In Hospital	2.06	1.54, 2.75	3.46	2.89, 4.14
After Delivery	1.85	1.53, 2.24	3.16	2.63, 3.80
DP + IH	2.07	1.51, 2.84	3.49	2.88, 4.22
DP + AD	1.56	1.30, 1.88	3.16	2.61, 3.81
IH + AD	2.07	1.51, 2.83	3.41	2.82, 4.12
DP + IH + AD	2.00	1.44, 2.76	3.42	2.82, 4.16

Note. Variations in totals are a result of missing data. DP = during pregnancy; IH = in hospital; AD = after delivery.

Tables 1 - 3 adapted from: Campbell, L. A., Wan, J., Speck, P. M., & Hartig, M. T. (2013). Women, Infant, Children (WIC) peer counselor contact with first time breastfeeding mothers. *Public Health Nursing*. doi: 10.1111/phn.12055

## Conclusions & Implications

- Womens decision to initiate breastfeeding is significantly associated with WIC peer counselor contacts.
- Continued WIC peer counselor program services may increase breastfeeding initiation rates among WIC participants.
- Results can be used to support continued funding of WIC Peer Counseling programs.
- Creation of a standardized national breastfeeding survey administered by all WIC agencies could provide rich data to evaluate, improve, and support funding for WIC Peer Counseling programs.

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