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Crying babies, tired mothers: Dealing with hurdles in early family health

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Background

- Up to 30% of new parents report problems with infant crying* and more than half of new mothers suffer from tiredness**
- Routine postnatal care lacks effective strategies to reduce the occurrence of these problems and their adverse effects on family health***



Aims of the study

- A) Examine risk factors for early crying problem reported in midwives' postnatal home care
 → CASE CONTROL STUDY
- B) Explore mothers' experiences, perceptions and practice concerning infant crying and maternal tiredness (0-12 wks postpartum) → LONGITUDINAL QUALITATIVE STUDY

Methods

Case Control Study

- **Data set** Administrative-clinical database of 36,821 mother-child pairs who enlisted in postnatal midwifery care in 2007.
- Sample N= 1634 cases of early crying problem N= 6129 controls
- Parity: 57% primiparous, 43% multiparous Matching Cases were matched with 4 controls who had been cared for by the same midwife.

Statistical Analysis multiple logistic regression

Longitudinal qualitative study

Purposive Sample15 mothers with healthy neonatesData collectionparticipant observation & interviews
at 1, 6 and 12 weeks postpartumData analysisInterpretive phenomenology

Results of case control study

A higher risk for early crying problems was associated with

- maternal depression < 10 days postpartum (OR 4.02, CI 2.91-5.56)
- psychological decompensation < 10 days pp (OR 2.59, CI 1.69-3.97)
- immigrant background (OR 1.40, CI 1.16 -1.80)
- planned return to paid work at 15/16 wks pp (OR 1.38, CI 1.07-1.79)
- physical complaints of mother (OR 1.37, CI 1.16-1.61)

A lower risk for early crying problems was associated with

• higher parity (2nd child: OR 0.53, CI 0.45-0.63) ****

Results of qualitative study

Mothers' beliefs about beneficial child care shaped how they combined baby and self care after birth. Getting adequate rest for recovery was especially difficult for mothers who had a fussy newborn and tried to fulfil all their child's needs immediately. They entered into sleep deprivation and exhaustion, unless they could benefit from practical support with child care.

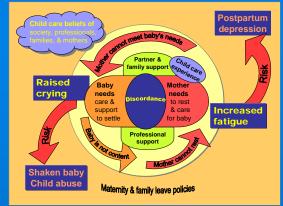


Fig. 1 Vicious circle of infant crying and maternal fatigue, and its' adverse effects

Conclusion

To recover after birth mothers require need-based and stress-reducing care, especially with the first child, or when they show symptoms of overstrain or depression, return early to paid work or have a migrant background.

References

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