



ALCOHOL CONSUMPTION DURING PREGNANCY: KNOWLEDGE, ATTITUDES AND PRACTICES OF PREGNANT WOMEN ATTENDED AT THE JOSÉ MACAMO HEALTH CENTER.

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ABSTRACT

Introduction: Alcohol consumption during pregnancy is a risk for both, baby and mother. May change the normal course of pregnancy and cause cognitive and neurological changes from the fetal period to the growth of the child.

Overall objective: to analyze the knowledge, attitudes and practices of women in relation to alcohol consumption during pregnancy, in the JMHC.

Methodology: quantitative study, with a cross-qualitative and exploratory component. Population - pregnant women and midwives. Assisted 28 consultations.

Results: about maintain the habit of drinking when pregnant, most of the women answered no 58% and 43% yes.

Conclusions: Most pregnant women surveyed are aware that alcohol is bad for the health and pregnancy and associate small amounts with the absence of adverse effects.

KEYWORDS : Alcohol Consumption, Pregnant woman

STATEMENT OF THE PROBLEM:

The consumption of alcohol during pregnancy represents a risk for the baby and the mother, and may cause cognitive and neurological changes from the fetal period to the child's growth and, for the mother, can change the normal course of the pregnancy. Some authors describe as consequences of this consumption: spontaneous abortions, intrauterine fetal deaths, preterm deliveries, small babies for gestational age (SGA), facial changes, central nervous system (CNS) abnormalities or microcephaly and malformations. Others describe an association with behavioral and neuro-cognitive problems, especially when consumption is mild to moderate (Preece and Riley, 2011).

In several countries around the world, the number of alcohol users tends to increase considerably, and according to Goddard (2007) cit. by Preece and Riley (2011, p. 14) there is an apparent increase in the consumption of alcohol by women of 45%, reducing the difference with men. In Mozambique in particular is possible to observe this fact, an apparent increase of the number of consumers and an easy acquisition of alcoholic beverage, with an estimated consumption of 2.3 liters of pure alcohol per person per year in adults with more than 15 years, in 2008 (World Health Organization, 2013).

Regarding the knowledge, the conclusions of the study of Le Roux (2013), which integrated women attending the ante natal services of public and private health centers, show that there is some level of knowledge and awareness about the negative consequences of alcohol exposure during the prenatal period.

In the same study, when the list of substances considered harmful to the fetus was presented, seventy-seven percent (77%) of women attended in the public and 81% of those attended in the private sector pointed out alcohol.

According to the findings of a study in some sub-Saharan African countries, further studies are needed in these countries to obtain reliable information about alcohol consumption during pregnancy, although a significant risk of alcohol consumption has been found among the studied group of women (Culley et al., 2013).

The lack of information and studies about alcohol consumption in Mozambique and its effects on the health of consumers, is a gap in the area of public health, with particular attention to pregnant women. Studying the knowledge, attitudes and practices of a group of pregnant women can serve as a baseline for the design of new approaches and strengthen of the strategies at the Health Sector for the improvement of women and children's health.

OVERALL OBJECTIVE:

To analyze the knowledge, the attitudes and the practices of pregnant women attended at the Health Center of General Hospital José Macamo on alcohol consumption during pregnancy.

METHODOLOGY:

Cross-sectional quantitative study, with a qualitative and exploratory component. Sample of 337 of the 384 expected pregnant women, who were submitted to a questionnaire; interviewed five (5) midwives who served in the Ante-natal Care Unit; and observed 28 consultations using a "checklist" observation script. The type of sampling was systematic. Qualitative: ten (10) women who reported drinking alcohol during pregnancy were intentionally interviewed using the saturation method, using a pre-elaborated interview guide.

The study was carried out in the second half of 2014 at the Health Center of the José Macamo General Hospital, KaMubukwane Municipal District - Maputo City.

LIMITATIONS OF THE STUDY:

Few questions focused on attitudes. The sample size was not reached because some women did not agree to participate in the study and the sampling method led to an extension of the data collection period, however the women who appeared at the following month, many of them were the same, returning to the following consultation. Two variants of the questionnaire were not introduced in the SPSS, because it was not possible to transform them into numerical ones. Few books available addressing the topic and little information on the national situation of alcohol consumption.

RESULTS AND DISCUSSION:

The majority of women (228) answered that they did not consume alcohol, corresponding to 68.26% and 106 answered yes, corresponding to 31.73%. This percentage can be considered high, considering that it is a specific group (women), considering Goddard's (2007) cited by Preece and Riley (2011, p. 14) which indicate an apparent increase, about 45% of women who consume alcohol.

When asked if they keep drinking when they are pregnant, most of the women answered no (58%) and (43%) answered yes (Graph 1). Alcohol consumption is a habit that interferes in the health of people, so in the pre conception period and during pregnancy is crucial to avoid, due to the possible risks that it entails (Freitas et al., 2006).

Durante as gravidezes mantém o hábito de consumir bebidas alcólicas?



Topic: Keep drinking during pregnancy.

Sim= Yes

Nao= No

1. INTERFERENCE OF ALCOHOL DURING PREGNANCY.

"Yes it can hurt, I've heard that, in my first luck the nurse told me not to drink because I had to think about the baby and the drink could cause problems. I do not know if it was because I delayed getting pregnant and then my tummy was a problem, always in the hospital... you see."
 "Maybe it can harm, but I think a glass or a little wine can even do well ... baby gets smart ... (laughs) ...!"

Preece and Riley (2011), describe pregnancy complications related to mild to moderate alcohol consumption, however all women should be advised to stop drinking from the pre-conception phase, due to the risks it may cause regardless of the consumption pattern. They have some knowledge about the possible interference of alcohol on pregnancy. however, there is an established relationship among women between the amount of alcohol consumed and the possibility of a problem for the mother and the baby.

Talking about the attribution of beneficial results to pregnancy when consuming alcohol, such as the transformation of the baby for the better, we can analyze according to NIAAA (2013), saying that people with FASD - Fetal Alcohol Spectrum Disorders, as a result of alcohol consumption, have difficulties in coordination, emotional control, school performance, socialization and employment fixation, and it cannot be characteristic of a "smart baby". A study by Le Roux (2013) identified some misconceptions among the study participants, one of them revealed that alcohol consumption is a necessity of the body and it could remain in the period of pregnancy, although didn't point to the amounts.

When asked about maintaining a habit of drinking alcohol when they are pregnant:

"Well, I still drink with a belly, but little, sometimes two, three weeks without a drink."

"I did not continue, I stayed until I had a baby, because they told me, I was afraid of losing the baby, but in this pregnancy I went back to drinking, but I only took one can of hunter's gold, three times."

According to Anderson and Bauberg (2006) cit. by Preece and Riley (2011, p.14), there are a significant number of women who continue drinking even Graph 1 establishing a relation between "little drinking" and "absence of problems for pregnancy". According to the questionnaire (Q 9 and 9.1), women (43%) maintained a habit of drinking when they became pregnant and 40% drink at all pregnancies.

2. KNOWLEDGE ABOUT A NEGATIVE EFFECTS OF ALCOHOL ON THE BABY WHEN CONSUMED DURING PREGNANCY.

"Hey, I do not know!"

"I know it can have an effect, but I do not know which one."

Women are unaware of the possible effects that alcohol can cause in the baby when consumed during pregnancy, leading to the belief that the knowledge about alcohol interference on the pregnant woman's health is not strong and has no support. This support would be the source of this knowledge, which is expected to be given in the health units during the ante natal consultation, and the counseling for alcohol cessation, should be one of the prenatal interventions (McCormick and Siegel, 1999).

According to a study by Le Roux (2013), there was no significant difference ($p = 0.639$) between the group of women attended in the public and those attended in the private sector, with 55% and 52%, respectively, in relation to the teratogenicity of alcohol and the importance of abstinence during pregnancy.

3. SOURCE OF INFORMATION ON ALCOHOL INTERFERENCE IN THE HEALTH OF PREGNANT WOMEN.

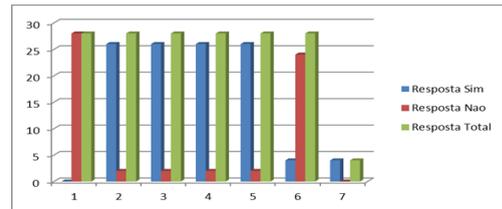
expression #pah'to omission points because there is no translation to English.

"At the hospital, sometime ago."

Information on the harmful effects of alcohol on the baby should be given in preconception consultations, as an ideal phase, or during ante natal consultations.

In assisted ante natal consultations (Graph 2), although nurses

questioned women about consume of some alcoholic beverages, it was possible to note some hesitance in the approach of this topic, so much so that they did not address the issue in the lectures, an opportune time to educate pregnant women to adopt healthy behaviors.



Graph 2: Issues observed during 28 antenatal visits.

- Q1. During the lecture, does the nurse address alcohol consumption during pregnancy and its negative effects?
- Q2. During the ante natal visit, the nurse asks about the consumption of alcohol to women?
- Q3. During the ante natal visit, the nurse asks about the consumption of alcohol in pregnancy?
- Q4. During ante natal counseling, does the nurse address alcohol consumption during pregnancy and its negative effects?
- Q5. Do women ask questions about health issues in pregnancy?
- Q6. Do women question about alcohol consumption during pregnancy?
- Q7. Are questions about alcohol consumption in pregnancy answered by the nurse?

Therefore, this topic is not adequately addressed in ante natal consultations and in health education activities, as a way of educating women to avoid using any type of alcoholic beverage while they are pregnant. According to McCormick and Siegel (1999), ante natal care represents an opportune time to teach and encourage women to change their behaviors and adopt healthy habits.

From the five (5) midwives surveyed, three (3) reported that they know some effects of alcohol on pregnancy and fetal development and when questioned about where they obtained this information, all respondents had learned during their training. It should be noted that between them, one had the basic level, which shows that regardless of the level, aspects on alcohol consumption during pregnancy are addressed during the training of midwives.

CONCLUSIONS:

Most of the pregnant women who cohabiting relationship in the study were aged between 20 and 25, were in "união de facto", resided in the KaMubukwane Municipal District, were not employed, with the basic level of schooling and were in their first pregnancy.

The majority of pregnant women interviewed at the José Macamo Health Center are aware that alcohol is bad for the health in general and for the health of the pregnant woman, however, they are not aware on the risks for the baby. The alcoholic habits prevail when they get pregnant, associating the small amounts of alcohol ingested with the absence of negative effects on the pregnancy.

The information about the negative effects of alcohol on the health of pregnant women was not systematically obtained in prenatal care services, because during prenatal consultations, the only aspect addressed by midwives was about the existence of alcohol consume habit or not, and they have not demonstrated confidence addressing the effects of alcohol on pregnancy, which may be related to poor knowledge on this topic.

The information obtained through this study will serve as a starting point for decision-making and strategies to promote greater dissemination on the harmful effects of alcohol consumption on the fetus.

RECOMMENDATIONS:

For the Ministry of Health to (1) intensify the activities to promote healthy behaviors to mitigate alcoholic habits in the communities; (2) provide training for SMI nurses (midwives) to improve their understanding about the possible effects of alcohol on pregnancy and to include this topic in their daily ante natal counseling activities; (3) Strengthen maternal and child health nursing training plans; and (4) that the present study be presented at scientific events, as a way to

allow its dissemination and demonstration of the importance of the approach of this research topic, and may also create interest for future research.

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