

## **Executive Summary of Findings Related to the Attitudes, Beliefs, and Behaviors of New Mothers During the H1N1 Flu Season**

Results from this poll address key questions about the attitudes, beliefs, and behaviors of women who have an infant under the age of one (“new mothers”) during the H1N1 flu pandemic. This report summarizes key findings on new mothers’ experiences and behaviors related to H1N1 vaccination and non-pharmaceutical flu prevention behaviors, as well as their information sources and their exposure to messaging about the H1N1 vaccine. Results also explore the experiences of new mothers with H1N1 and treatment, and their beliefs and behaviors related to antiviral medication. This poll was conducted in parallel with a poll of pregnant women.

### **Experiences and Behaviors Related to H1N1 Vaccination**

About three in ten (32%) new mothers received the H1N1 flu vaccine. Among those women, 41% received the H1N1 flu vaccine while they were pregnant, while 59% got it after they were pregnant. Most new mothers got the H1N1 flu vaccine at a health clinic (34%), their primary care doctor’s office (23%) or their obstetrician or midwife’s office (20%). New mothers who have received the seasonal flu vaccine since September 2009 were more likely to have gotten the H1N1 flu vaccine for themselves than those who did not (62% v. 13%).

More than half of new mothers either did not intend to get the H1N1 flu vaccine (39%) or were not sure about getting the H1N1 flu vaccine for themselves by the end of March 2010 (20%). These women most often (42%) cited safety risks to themselves as a “major reason” for their position.

A third (35%) of new mothers who have an infant six months or older have gotten the H1N1 flu vaccine for their baby. Most (84%) of these women got the H1N1 flu vaccine for their baby at a pediatrician or other doctor’s office. Over half of these new mothers either did not intend to get the H1N1 vaccine for their baby (38%) or were not sure about getting it for their baby by the end of March 2010 (17%). A majority cited safety risks to their baby (65%) as a “major reason” for their position.

### **Information Sources and Messaging About the H1N1 Vaccine**

Sources of information that are most important to new mothers about keeping themselves and their baby healthy from H1N1 flu are their baby’s doctor (74% saying “very important” source), and, to a lesser extent, their general doctor (56%), their obstetrician or midwife (54%), their state or local public health department (52%), and the Centers for Disease Control and Prevention (49%).

One in four (25%) new mothers discussed getting the H1N1 flu vaccine while they are breastfeeding with their health care provider. Among those who discussed this with a health care provider, however, two-thirds (67%) were told that they should get it while breastfeeding. In addition, more than half (52%) of new mothers discussed getting the H1N1 flu vaccine for their baby with their health care provider, and three-quarters (74%) of these women were told that they should get it for their baby after she or he is 6 months old.

Most new mothers heard either “a lot” (34%) or “some” (45%) about the H1N1 flu vaccine, and most (73%) knew that the current public health recommendation is for pregnant women to get the H1N1 flu vaccine. However, a third (30%) of new mothers knew that getting the H1N1 flu vaccine provides protection to a pregnant woman’s baby against H1N1, and 14% did not believe that this was true and a majority (55%) said they did not know if the H1N1 flu provides protection to a pregnant woman’s baby against H1N1. Furthermore, close to half (46%) of new mothers knew that pregnant women are more likely than others to become seriously ill from H1N1. However, more than half of new mothers either believed that pregnant women are not more likely than others to get seriously ill from H1N1 (11%) or did not know whether pregnant women are more likely than others to get seriously ill from H1N1 (42%).

About two-thirds (66%) of new mothers said they believe the H1N1 flu vaccine is safe (22% very, 44% somewhat) for children 6 months to 1 year old to take. However, this percentage was less than the percentage of women who said that the *seasonal* flu vaccine is safe for children 6 months to 1 year old to take (75%). Further, when asked about the safety of these vaccines generally, for most people, the same pattern existed. Fewer new mothers said the H1N1 flu vaccine is safe than said the seasonal flu vaccine is safe “generally, for most people to take” (89% v. 80%).

### **Non-Pharmaceutical Flu Prevention Behaviors**

Most new mothers said that, since their baby was born, they have washed or sanitized their hands more frequently (91%) and taken steps to avoid being near someone who has flu-like symptoms (81%) to reduce the chance that their baby would get H1N1. Fewer new mothers avoided bringing their child to places where many people are gathered (53%), avoided bringing their child to daycare for any time (40%), or asked other people to avoid touching their child (40%) since their baby was born to reduce the chance that he or she would get H1N1. About one in five (19%) new mothers did *all* of the listed flu prevention behaviors.

Most new mothers (82%) said that the H1N1 outbreak has had no impact on their consideration of breastfeeding. Only 14% of new mothers said the H1N1 outbreak has made them more likely to consider breastfeeding.

### **Experiences with H1N1 and Treatment**

Seven percent of new mothers have been sick with an illness they believe was H1N1 since their baby was born.

New mothers who have not been sick with H1N1 were given a hypothetical scenario in which they did become sick with H1N1 flu and were asked how they would respond:

- Half (50%) would contact their health care provider right away when they first had flu-like symptoms.
- However, about four in ten (41%) would contact their health care provider after a few days of having flu-like symptoms and 8% would not contact their health care provider at all.

- If they had a fever during this time, 70% of new mothers who are currently breastfeeding and were asked this question said they would take acetaminophen to reduce their fever, while 9% would take no medicine.

### **Beliefs and Behaviors Related to Antiviral Medication**

Close to half (48%) of new mothers said they believe that antiviral medication is either “very” (8%) or “somewhat safe” (40%) for pregnant women who are sick with H1N1. Also, the same percentage (48%) of new mothers viewed antiviral medication as safe (7% very, 41% somewhat) for women who are breastfeeding and sick with H1N1.

When new mothers who have not been sick with H1N1 were asked about a hypothetical scenario in which they did become sick with H1N1:

- 88% said they would take antiviral medication if their health care provider recommended that they do so. However, one in ten (11%) said they would not take antiviral medication, even if their health care provider recommended it.
- Among new mothers who are currently breastfeeding and were asked this question, 87% said they would take antiviral medication if their health care provider recommended it, and 13% say they would not do so.