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Philips Mother & Childcare Report – South Africa 2011

Prepared by OneVoice Measurement



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I. Introduction

Philips is a pioneer in developing and bringing to market innovations that shape our healthcare, our lifestyle, and who we are as a society. Doing so means we need to understand the mega-trends in society.

In Africa, Philips is introducing a number of initiatives in the context of reaching the Millennium Development Goals – to improve healthcare throughout Africa. Mothers, the newborn and children represent the well-being of a society and its potential for the future. Consequently, Philips is focusing on addressing the challenges facing the future of women and children’s health in Africa.

This study is one of the initiatives being launched by Philips and is a continuation of the Philips Global Health and Well-Being Index. It focuses on the state of health and well-being among mothers and young children in South Africa. The study will be replicated in six other countries globally.

Key topics that influence the mortality rate of mothers and children were addressed by the survey including:

- Do South African mothers and children regularly visit doctors?
- Is there adequate breastfeeding support available to South African moms at hospital facilities?
- Are South African mothers given access to education on what to expect when having a child?
- Are South African mothers required to return to work soon after giving birth – not having the opportunity to raise their babies?

It is the intention of Philips to continue to conduct this kind of trends research regarding how people in different countries approach health and well-being, and where we are similar and different across the globe. We believe that this understanding will enable us to continue to pioneer products, services and game-changing innovations that will help people, communities, health care systems, governments, and future generations address the critical issues surrounding how we live, how content we are, and our own roles in those dimensions of our lives.

II. Survey Methodology and Results – South Africa

The Overall Approach

The Philips Mother and Childcare research part of a larger survey, the Philips Health and Well-being Index. For the Index, the survey was fielded among a nationally representative sample of 1,021 adult South Africans ages 18-65+ years.

Questions specific to mother and child healthcare were asked of 250 women 18-40 who are pregnant or have one or more children ages zero to five years old (or both).

While the Index survey was nationally representative of South Africa across age, gender and ethnicity. However, among those answering the mother and child questions, there is a greater emphasis on middle-higher income households than corresponds to the national profile of South Africa.

The study was administered via telephone and in person by Braun Research. Fieldwork was conducted from April 17-24, 2011.

In this report, the terms “moms” or “mothers” refer to the sample who qualified for the Mother and Childcare portion of the survey.

**Please note, don’t know/other/no answer categories are generally not shown in this report and percentages are rounded. As a result, do not always add to 100 percent.

Totals*	
	<u>Mothers</u>
Total	250
Gender	
Men	N/A
Women	100%
Age	
18-24	32%
25-34	43%
35-44	24%
45-54	0%
55-64	0%
65+	0%
Region	
Gauteng	28%
KwaZulu-Natal	21%
Eastern Cape	14%
Limpopo	6%
Western Cape	2%
Mpumalanga	11%
Free State	13%
North West	3%
Northern Cape	1%

Table 1

*The sample is large enough to allow for sub-group analysis.

III. Executive Summary and Conclusions

To address the key topics identified as affecting the mortality rate of mothers and children in South Africa, the survey was conducted among mother of young children and expectant mothers, all aged 18-40 years old. The key question areas focused on within the survey were:

- How these moms feel about the state of their current health and well-being, and that of their children?
- How frequently are moms and their children going to the doctor?
- What impact are stress and sleep having on moms' well-being?
- What healthcare facilities are available to moms and what are their expectations and preferences of them at key moments in time such as labor and pregnancy?
- What are South African moms' experiences during pregnancy?
- What are South African moms' experiences during labor?
- What are the major concerns and priorities of moms about parenthood as they look to the future?

Summary Of Key Findings

Overall, South African mothers feel better about their health and well-being than the general population. Nearly all (93%) also consider the health and well-being of their children to be good.

In line with the general population, most South African mothers are proactive about maintaining their overall health and well-being. They visit the doctor at least annually for a general checkup (60%). Additionally, when it comes to their children, 81% have their child go to the doctor for a general check-up at least every six months. However, 40% of mothers are visiting the doctor for a general check-up less than once a year (in some cases not at all). Two-in-ten only take their children for a general check-up once a year or less.

When it comes to general personal care, the primary reason South African mothers do not see doctors more frequently for a general check-up is that they prefer going to the doctor only when they are ill (72%). This demonstrates the focus of Moms on reacting to ill health, rather than prevention. Another barrier is the cost.

Among those Moms that are not going to the doctor regularly (once a year or more), job, income and potentially pressures of looking after older generations (parents and grandparents) could also be driving a lack of focus on their own health: 31% are unemployed and looking for work; 25% are also living in a household of six or more people and; 54% are single and not living with a significant other.

During pregnancy, South African mothers have access to state funded healthcare. However, since specialists like OBGYNs or Pediatricians are only available at a cost, this may influence their health decisions and well-being.

The Mother and Childcare survey also examined South African mothers' satisfaction with their healthcare facilities. South African mothers are mostly satisfied with family planning services and general practitioners, which may be why they seek these resources when they need advice about pregnancy and child healthcare. South African mothers also turn to their own mothers for advice. They do not rely on pediatricians or specialty doctors. Television, books and friends who have children are other commonly used resources.

As far as the pregnancy experience itself, most seek prenatal screenings (e.g. blood pressure readings, sonograms and glucose tests), but they are less likely to seek out birthing classes (51%), childcare classes (49%) or breastfeeding classes (54%). When it comes to labor, those with children are generally pleased with the facilities and equipment at the place where they gave birth, which are all key criteria when choosing where to give birth. That said, nearly seven-in-10 were not confident in the prenatal care they received and more than half felt that the hospital did not provide support for breastfeeding. This is a particular issue given the prevalence of breastfeeding.

This study also examined the role of stress on the lives of South African mothers and its impact on their health and well-being. More than half of mothers in South Africa consider themselves stressed (66%). Issues that often stress them include the economy (74%) and healthcare costs (68%). As first time moms think about and prepare for motherhood, they are particularly stressed, ultimately impacting their sense of well-being. In fact, stress seems to be most *intense* among pregnant first time moms (44% somewhat or a lot stressed) compared to moms with one child already or moms with two kids or more.

Regarding their transition into parenthood, most working South African mothers go back to work normal hours after giving birth. To do this they rely on their family for support and childcare.

Looking Ahead, South African mothers are concerned about influences of the outside world on their children's well-being – including drugs and social media. Given the increasing awareness of drug trafficking in South Africa, mothers fear that their children's lives will be impacted by drugs (78%). The widespread adoption of social media also has also raised concerns for moms as 63 percent worry about the influence social media will have on their children, ranking ahead of such factors as clean water, education, depression or obesity.

IV. Mother and Childcare Survey Findings - South Africa

PART A: South African Mothers' Overall Health and Well-Being

Overall, The General Population Says They Feel Good About The Current State Of Their Health And Well-Being, And Mothers Are Even More Likely To Say They Feel This Way.

Feelings of good health and well-being are strong among South Africans. Four in five South Africans rate their health and well-being as very good or good. The majority of South African women also rate their health as very good or good (79%). Moms tend to feel healthier than the general population of South Africans and

women, with a slightly higher proportion rating their health as very good or good (86%) and fewer stating that their health is only somewhat or not at all good (7% vs. 13% of the general South African population).

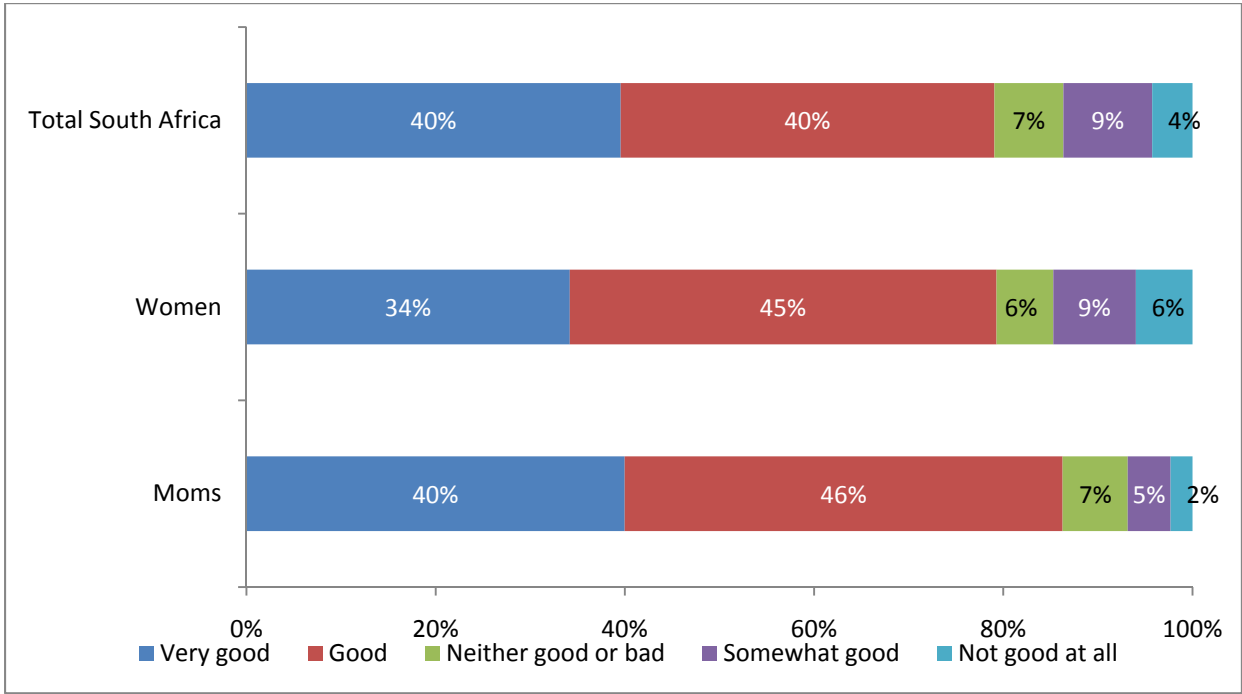


Figure 28 (Q1 / Moms – Q18): How would you rate your overall feeling of health and well-being?

South African Mothers Are Also Less Likely Than The General Population To Say They Feel Their Health Has Got Worse Than Five Years Ago.

Overall, most South Africans feel better or just as good as they did five years ago (86%) and the overall population of women are on par with the general population of South Africans in terms of health and well-being (88%). However, even more, South African mothers feel better or just as good as they did five years ago (95%). This is likely related to the age of this population, which is focused on women during their prime years, and generally speaking, the older a population gets, the more likely they are to say their health has declined over the past five years.

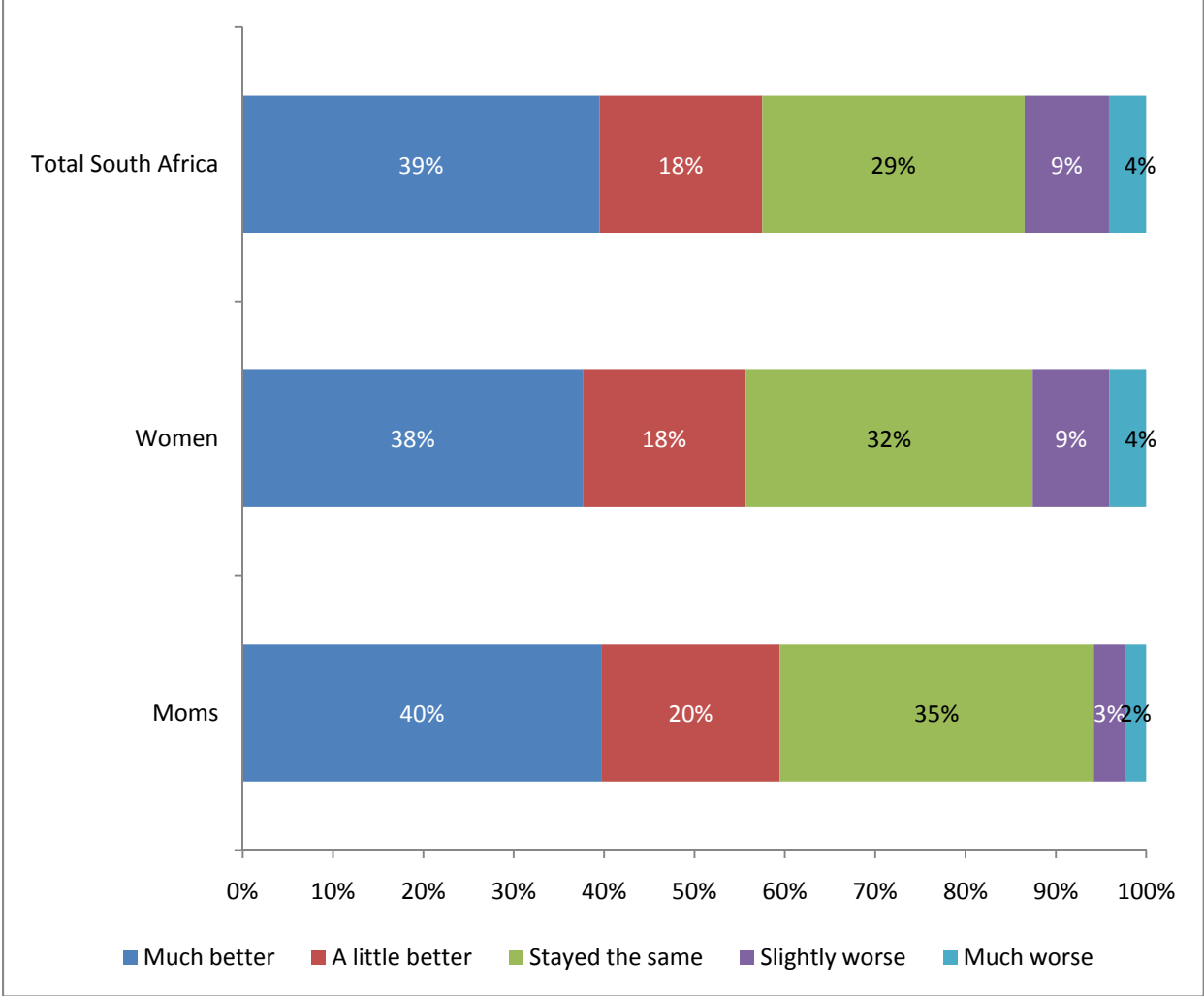


Figure 29 (Q2 / Moms – Q19): Would you say your feeling of health and well-being has gotten much worse, slightly worse, stayed the same, gotten a little better, or gotten much better in the last five years?

PART B: How South African Mothers Take Care of their Health

Personal Health/Medical Care

Many South African Mothers Visit Doctors for General Check-Ups At Least Annually. However, a significant proportion are not proactive about maintain their health.

The majority of South Africans visit their doctor once a year or more (57%). Nevertheless, about one third of South Africans (32%) see their doctor hardly ever or never. Both the overall population of South African women and moms are very much in line with the frequency of visiting the doctor as the general population.

This translates to 40% of Moms going to the doctor for a check-up less frequently than once a year. The frequency of doctor visits by these Moms could potentially be affected by job situation and pressures of looking after other household members.

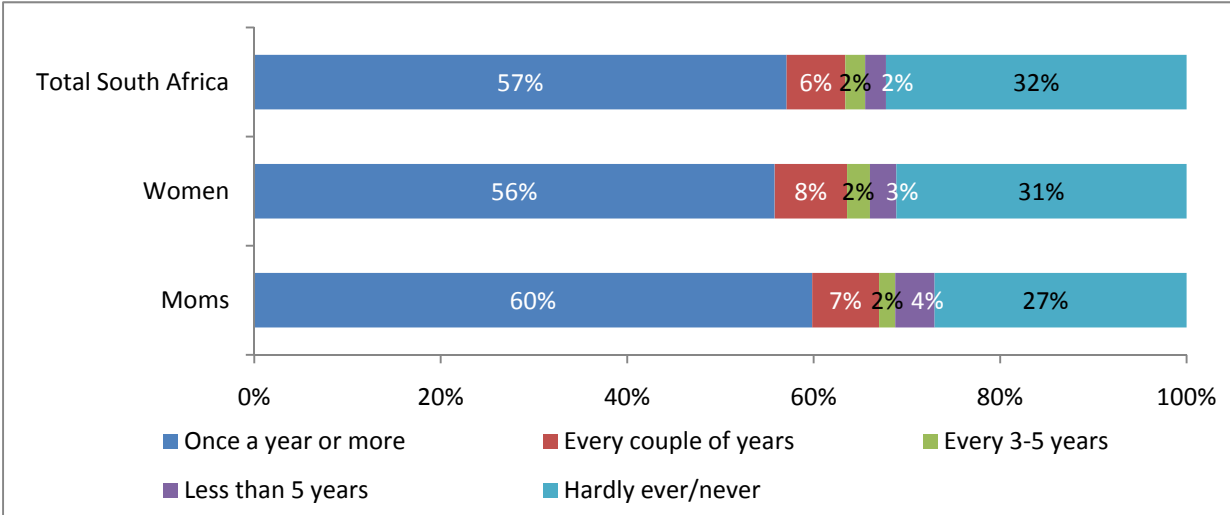


Figure 30 (Q8 / Moms – Q24): How often do you go to the doctor for a general check-up, not related to pregnancy?

	Moms visiting doctor once a year or more	Moms visiting doctor less than once a year
Education completed at or before secondary school	50%	64%
Unemployed and looking for work	18%	31%
Household size of 6+ people	17%	25%
Single, not living with a significant other	49%	54%

However, In line With Other South African Women, Mothers Prefer to Go to the Doctor Only When They are Ill and Consider the Doctor to be Too Expensive

The main reason both mothers and women in general do not visit the doctor more frequently is because they prefer to go only when they are ill. The expense of visiting the doctor is also an issue. One-third of mothers cite cost as the reason they do not go to the doctor more often (32%). Distance, trust, and religious beliefs are not barriers to regular medical check-ups for South African mothers.

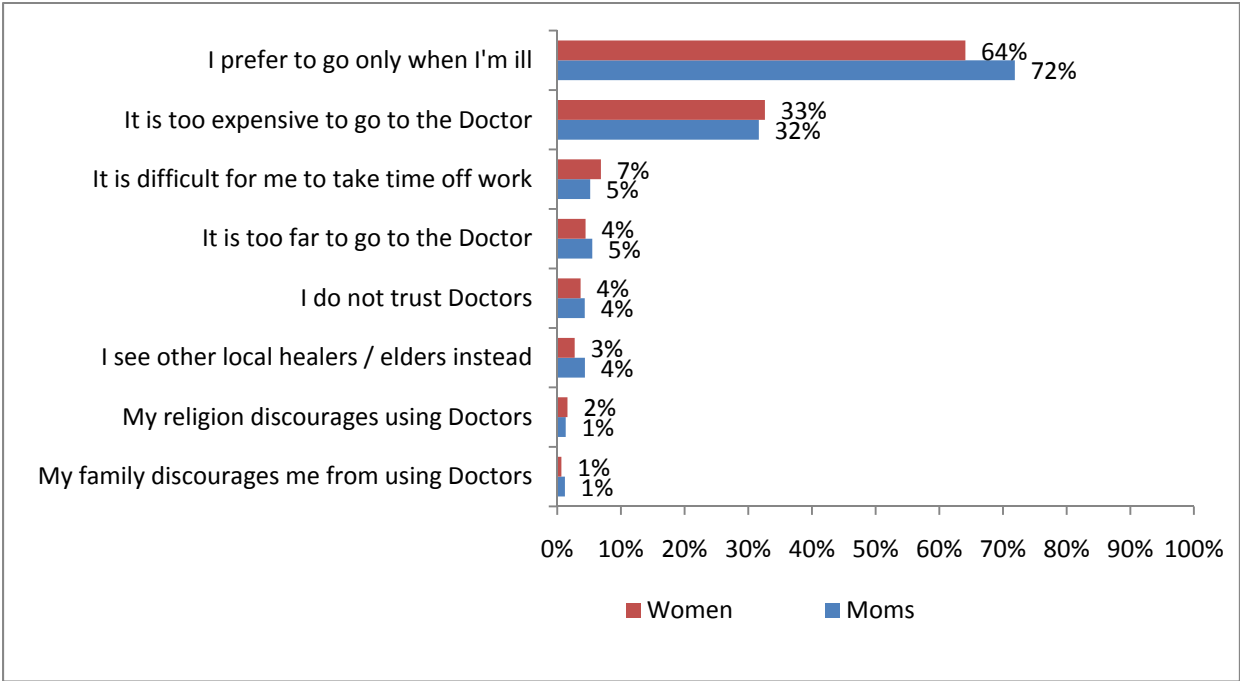


Figure 31 (Women – Q9 / Moms – Q25): For what reason(s) don't you go to a Doctor for a general check-up more frequently?

The Roles of Sleep and Stress

Stress Affects Most South African Moms, Particularly First-Time Moms

One-third of moms overall consider themselves to be very or somewhat stressed (33%). However, there is some differentiation among moms with children and moms without children. Nearly half of pregnant moms with no other children are very or somewhat stressed (44%), potentially due to the anxiety of carrying their first child. On the other hand, seven-in-10 moms with one or more children feel only a little or no stress at all (70%).

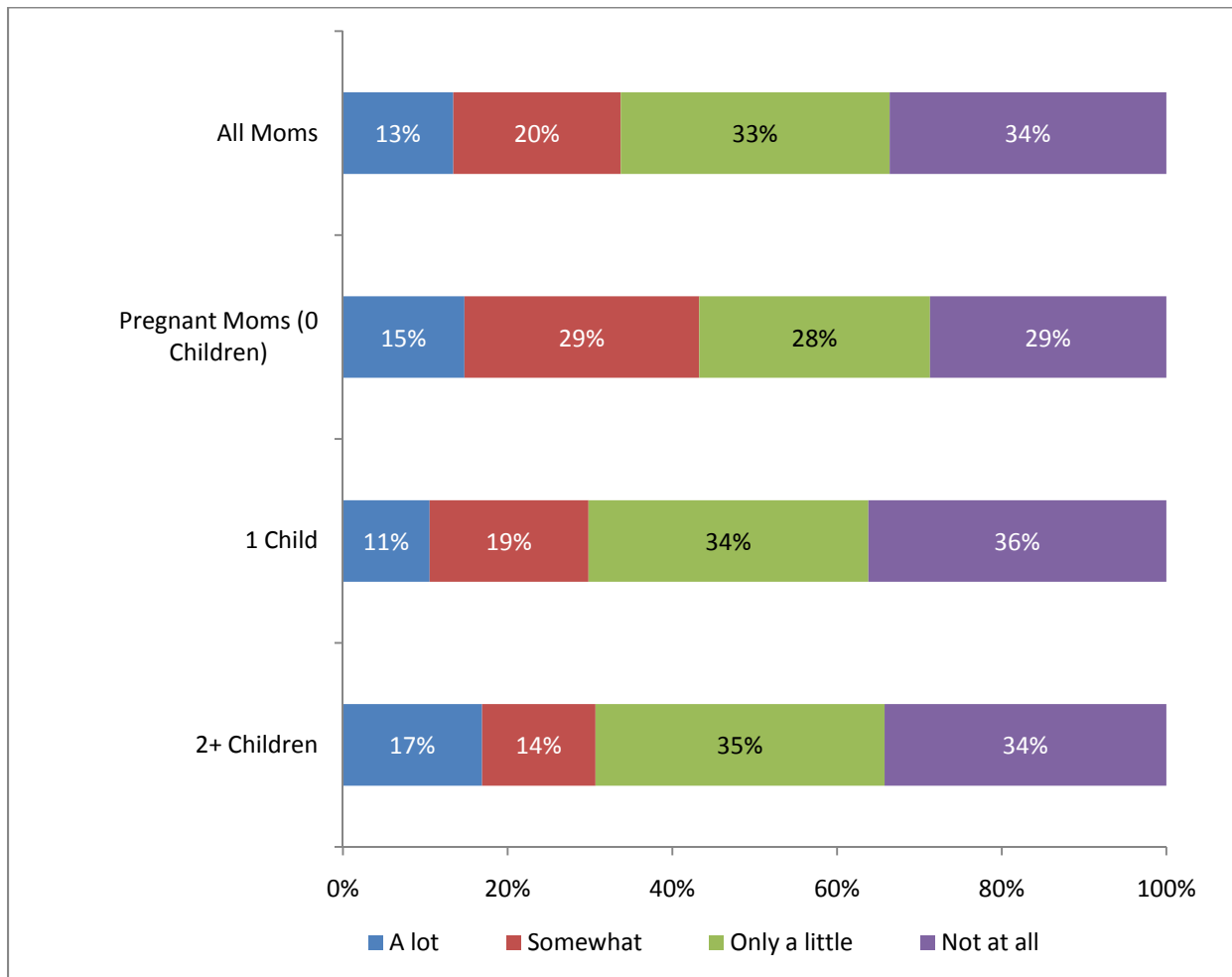


Figure 32 (Moms – Q20): How stressed do you consider yourself to be?

The Economy and Healthcare Costs are Key Sources of Stress. For Those That Consider Themselves Stressed, Worry About Their Parents' Health And Well-Being is Also a Key Stressor

The majority of South African moms say the economy and healthcare costs contribute to their stress. However, Moms with one child tend to be stressed about a wider variety of issues. Additionally, key stressors for these Moms are more likely to be having enough money to pay bills, and crime, alongside the economy.

Interestingly, for two-thirds of Moms (67%), the health and well-being of their parents is a source of stress compared to their child's healthcare being a stressor for just over half of moms (58%). Mothers with one child are the exception and are equally likely to say both are a source of stress.

Pregnant mothers with no children are more likely than other moms to identify their job (57%) or

	All Moms	Pregnant Moms (0 Children)	1 Child	2+ Children	RANK
The economy	74%	72%	72%	82%	1
Healthcare costs	68%	69%	63%	76%	2
The health and well-being of your parents	67%	69%	66%	67%	3
Having enough money to pay your bills	65%	56%	70%	68%	4
Crime that might affect you	64%	57%	72%	60%	5
Being a parent	58%	63%	60%	49%	6
Your kids healthcare	58%	43%	67%	59%	6
Healthcare available to you	55%	55%	57%	50%	7
Balancing work and family	53%	57%	51%	54%	8
Where you live	52%	42%	57%	54%	9
Your spouse/partner	51%	63%	45%	47%	10
Loss of job	48%	47%	52%	43%	11
Your job	47%	57%	43%	42%	12
Your kids education	47%	42%	39%	64%	12
Your boss	33%	30%	34%	33%	13

spouse or partner (63%) as the source of their stress.

Table 5 (Stressed Moms – Q21): To what degree do each of the following contribute to stress you might feel? A LOT/SOMEWHAT

One-Third of Moms Feel Sleep Deprived, and Worry/Stress Keeps These Moms Awake at Night

While, the majority of South African moms claim they get enough sleep at night, one- third feel sleep deprived. For those that don't get enough sleep, worry and stress are top reasons (36%). About a quarter of mothers say that they do not get enough sleep because their children wake-up at night (26%). General health conditions, sleep apnea, and snoring are the least common reasons mothers stay awake at night.

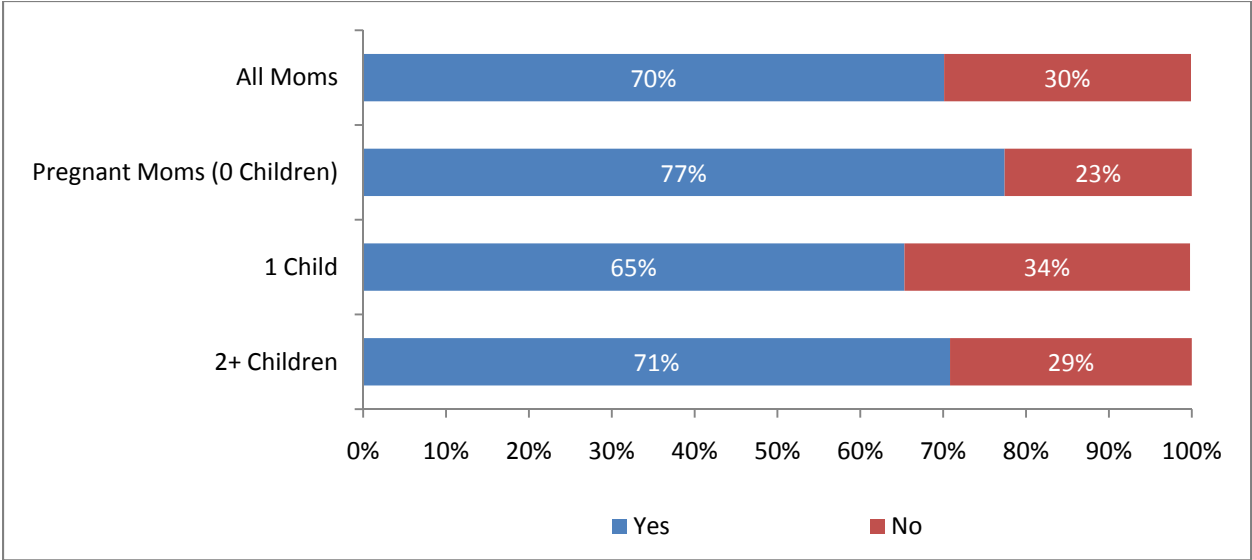


Figure 33 (Moms – Q22): Do you get enough sleep at night?

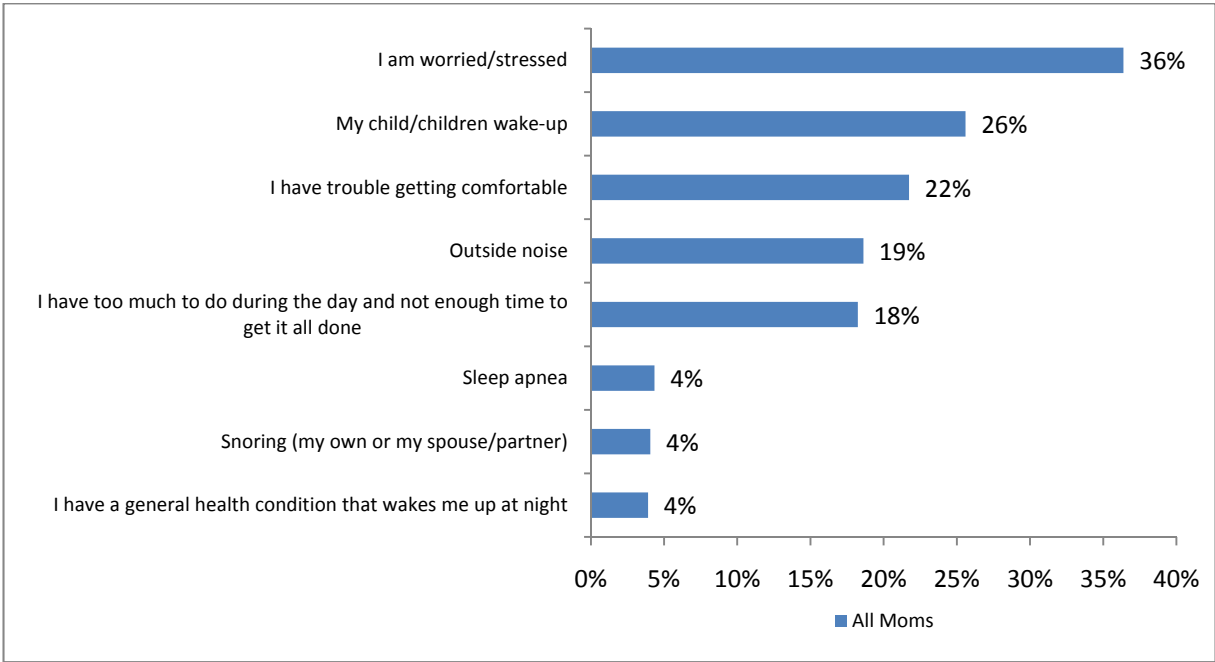


Figure 34 (Moms not getting enough sleep – Q23): What are some reasons you don't get enough sleep at night?

PART C: Children’s Overall Health and Well-Being

South African Moms Consider Their Children to be in Good Health

Nearly all moms consider their children’s health and well-being to be strong (93%). Moms with children 0-2 years old are slightly more likely to consider their children’s health to be fair, or

neither good nor bad. No South African mothers consider their children’s health to be not good at all.

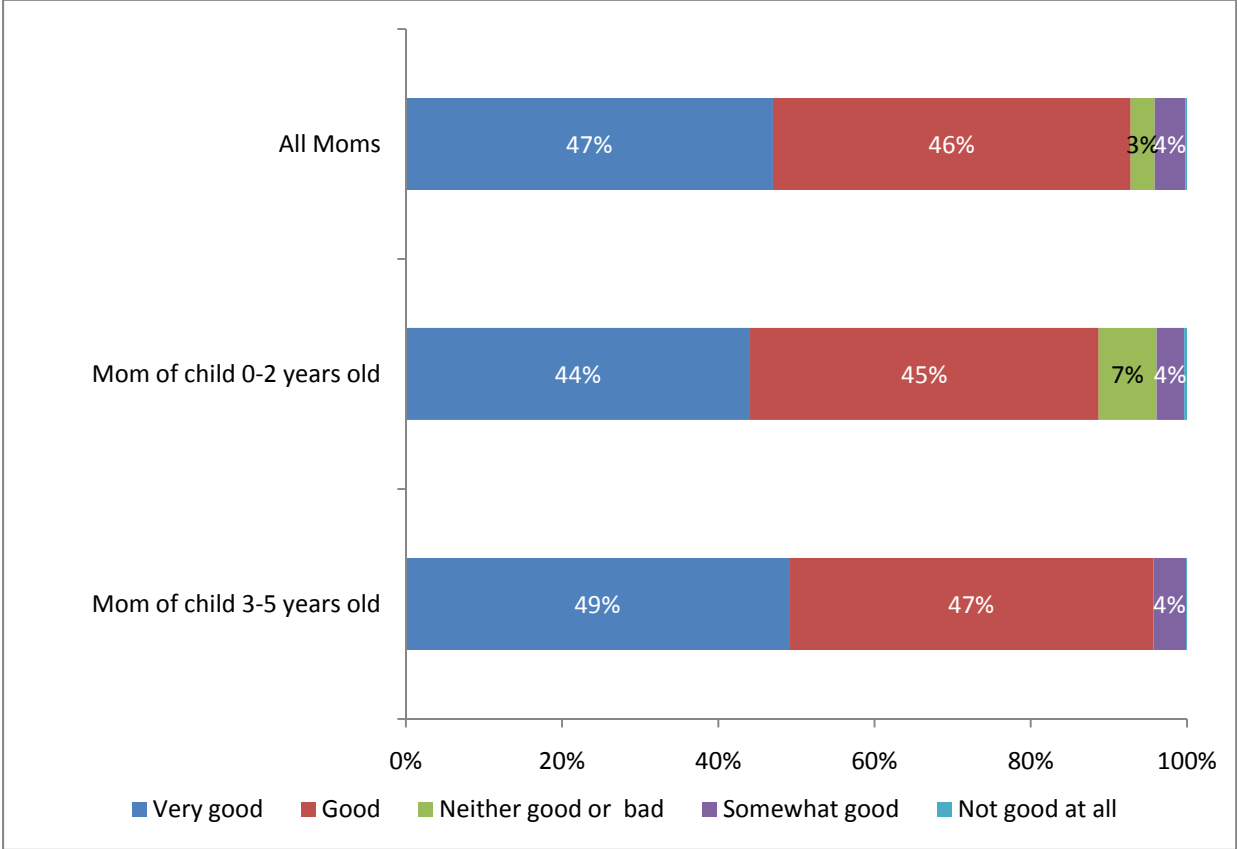


Figure 35 (Moms – Q26): How would you rate the overall feeling of health and well-being of your daughter/son?

South African Children Visit Doctors Regularly for Check-Ups, Contributing to Their Positive Health and Well-Being

The majority of South African moms have their children visit the doctor at least every six months for a check-up (81%). Moms with older children (3-5 years old) take their children to the doctor less frequently than moms of

younger children and the general population of all South African mothers. Additionally, two-in-ten moms say their child goes to the doctor once a year or less.

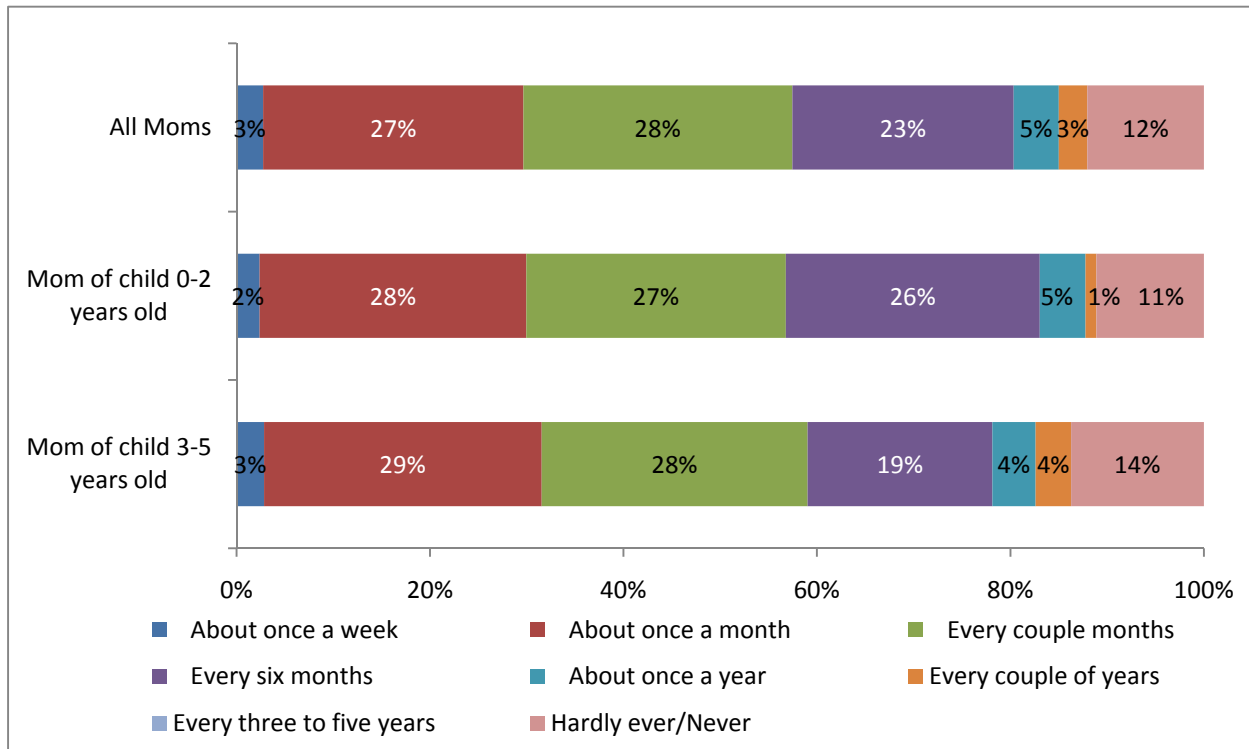


Figure 36 (Moms with children to 0-5 – Q27): How often does your youngest child go to a Doctor for a general check up?

General Practitioners and Pharmacists are the Most Popular Sources for Health and Medical Information Relating to Children Among South African Moms

In South Africa, those with children are using a wide variety of sources for health information for their child/children. However, general practitioners are still a go-to source of advice for many moms. More than one-third of moms indicate that they turn to general practitioners for health information when concerned about illness (38%). Moms with one child are significantly more likely than mothers of multiple children to seek information from general practitioners (45% of moms with one child compared to 22% of mothers with two or more children).

Other common sources of children’s health information include: pharmacists (34%), their mother (30%) and pediatricians (24%). Despite the Internet’s rising popularity, South African traditional media (e.g., T.V., newspapers and books) are preferred sources for medical and health information for moms. Only 2% of mothers use social networking sites for information about their children’s health and just 8% use general internet searches.

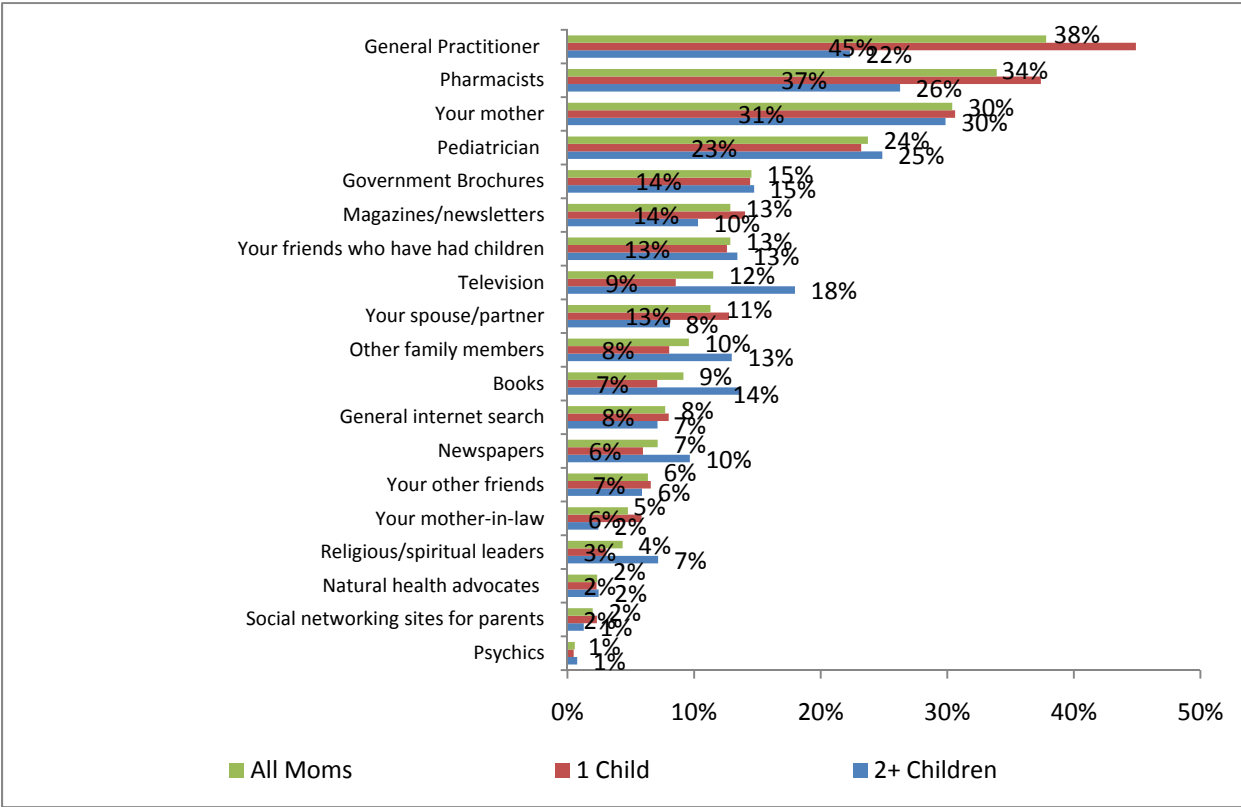


Figure 37 (Moms with children – Q28): Where do you get general medical or health information about the health of your child or children?

PART D: Healthcare Facilities

South Africa Moms Have Easy Access to Generalists and Hospitals, but Not to Specialists like Pediatricians or OBGYNs

The most accessible resources for South African moms are hospitals (93%) and family planning services (92%), which are available through the state. Yet, differences exist as to which services are funded by the state versus available at a cost. About half of South African moms have access to general practitioners (53%) or birthing centers (58%) from the state. Specialist doctors, such as pediatricians and OBGYNs are more

commonly available at a cost.

South African mothers are most satisfied with pediatrician and general practitioner care and family planning services. This could be reflective of frequency of use alongside the cost involved resulting in them choosing a resource best suited to their needs. South African moms are the least satisfied with birthing centers (31%) and midwife/doula services (29%).

	Availability			Satisfaction	
	Total Availability	State	At a cost	SATISFIED	DISSATISFIED
Hospital	93%	74%	19%	69%	28%
Family planning services	92%	76%	16%	76%	17%
General Practitioner	92%	53%	39%	76%	20%
Pediatrician	87%	38%	49%	72%	16%
Birthing center	85%	58%	27%	58%	31%
Midwife/Doula	80%	47%	34%	55%	29%
OBGYN	77%	33%	44%	54%	26%
Lactation consultant	72%	39%	33%	49%	27%
Healthcare support for a safe homebirth	66%	41%	25%	55%	19%

Table 6 (Moms – Q29/30): Which of the following healthcare facilities/experts are available to you in your local community or within easy access? AVAILABLE FROM STATE/AVAILABLE AT A COST How satisfied are you with each of these healthcare facilities/experts? COMPLETELY SATISFIED/SATISFIED

Thinking About Their Experiences During Labor, South African Moms are Generally Pleased with the Hospital Facilities and Doctors, But Do Not Have the Breastfeeding Support they Desire

In terms of hospital facilities during labor, South African mothers agree that hospital facilities and equipment were wonderful (83%), and most say that the equipment could handle complications (77%). While seven-in-10 feel healthcare staff provided excellent support after they gave birth, nearly the same percentage were not confident in the prenatal care they received (68%). In addition, more than half of moms feel hospitals did not provide adequate support to help them breastfeed (55%).

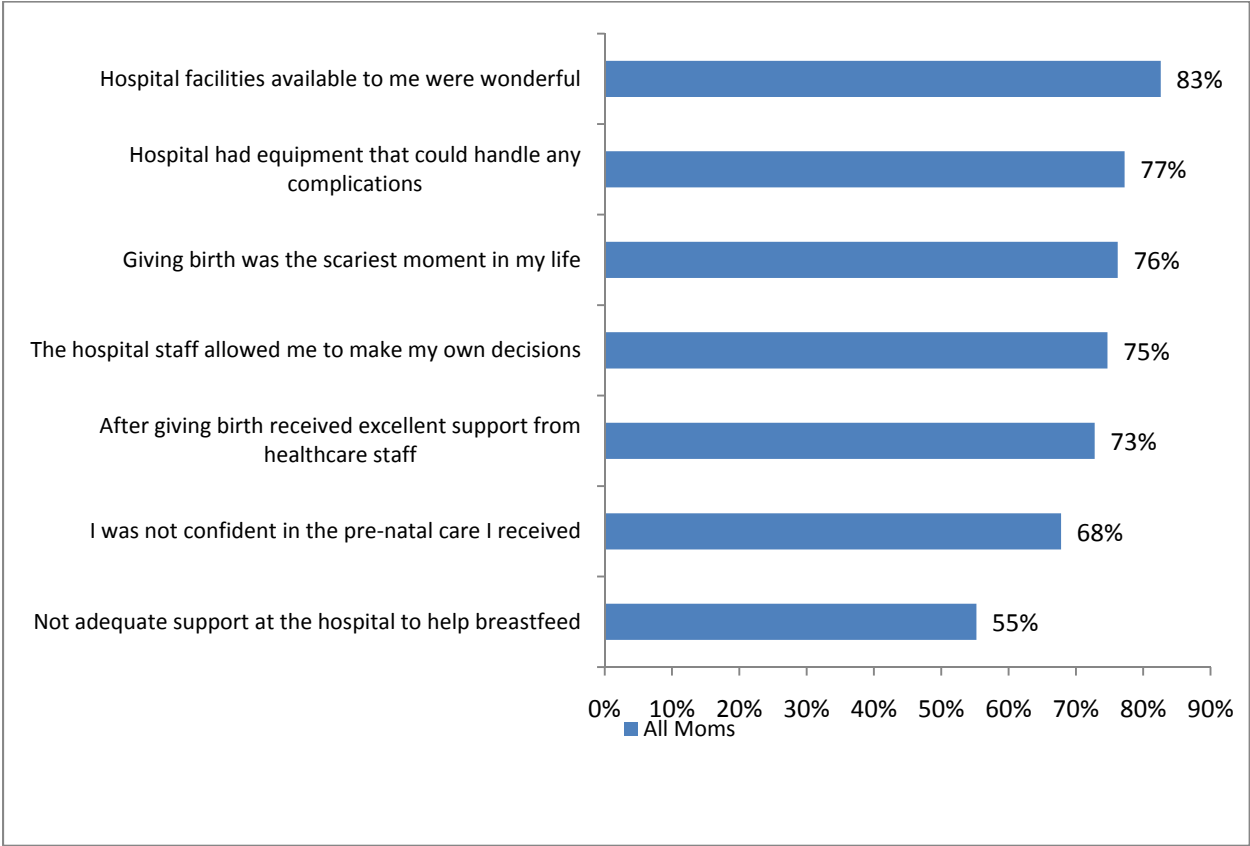


Figure 38 (Moms with children– Q40): Thinking about your experiences during labor for your current or most recent pregnancy, how much do you agree or disagree with the following statements? COMPLETELY AGREE/SOMEWHAT AGREE

When choosing a hospital to give birth, South African moms prioritize doctors, cleanliness, and equipment and facilities as the most important factors in their decision. Ninety-two percent of mothers feel that competent doctors are very or somewhat important. Availability of midwives and lactation consultants are also a priority for the majority of South African moms with seven-in-10 saying that these resources are important.

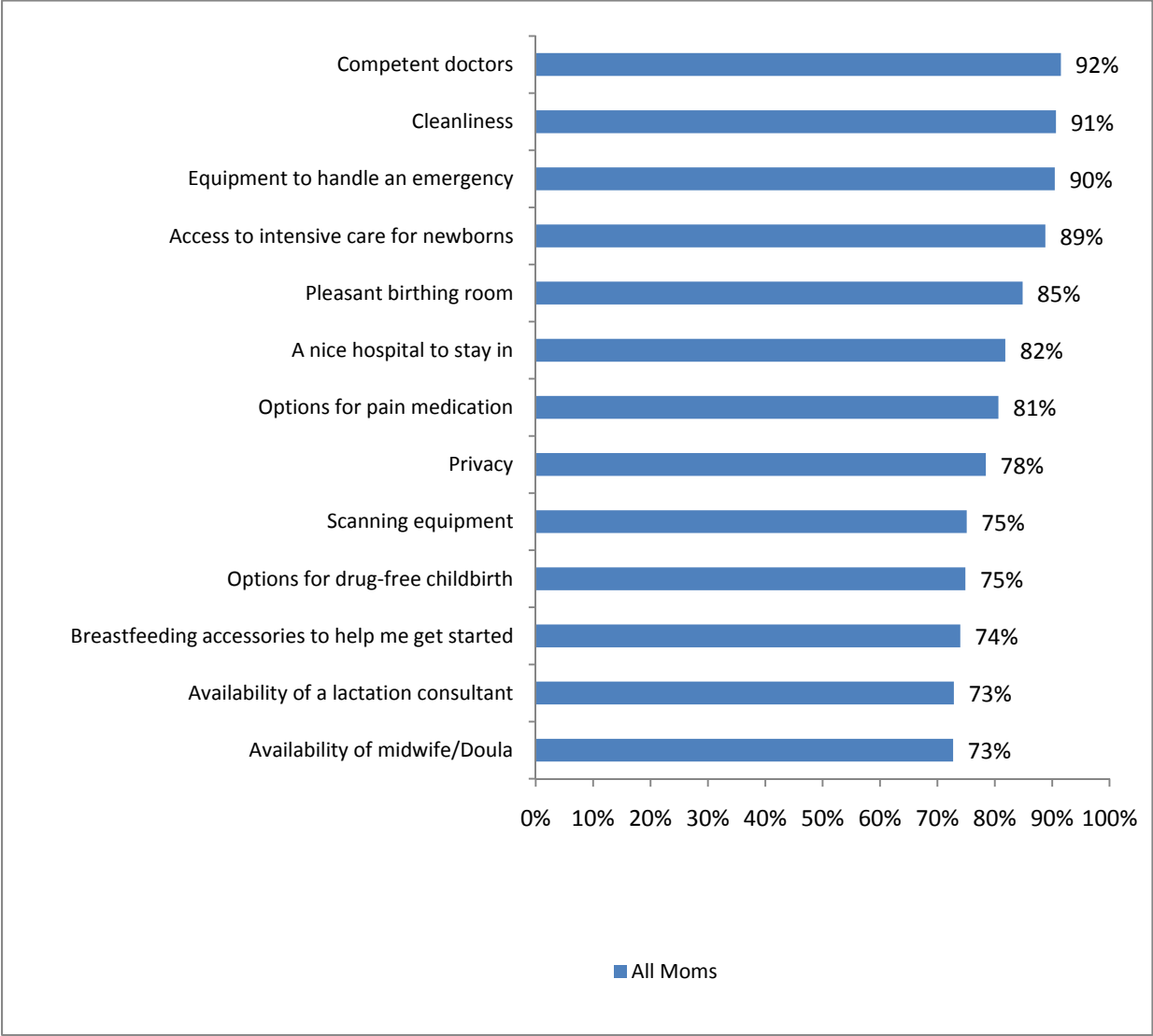


Figure 39 (Moms – Q38): How important were the following to you when choosing the hospital or healthcare facility where you did/will give birth? VERY IMPORTANT/IMPORTANT

PART E: Experiences during Pregnancy

South African Moms Share Pregnancy News with the Father of the Child First, and Seek Medical Advice from General Practitioners

Upon learning of their pregnancy, half of South African moms share the news with the father of the child (52%) first. Nearly one-in-five go straight to the doctor.

In terms of medical advice, South African moms are likely to go to general practitioners first for medical advice rather than a specialist such as an OBGYN. However, 18 percent of moms go to their mother first for medical advice, illustrating the importance of family in South Africa.

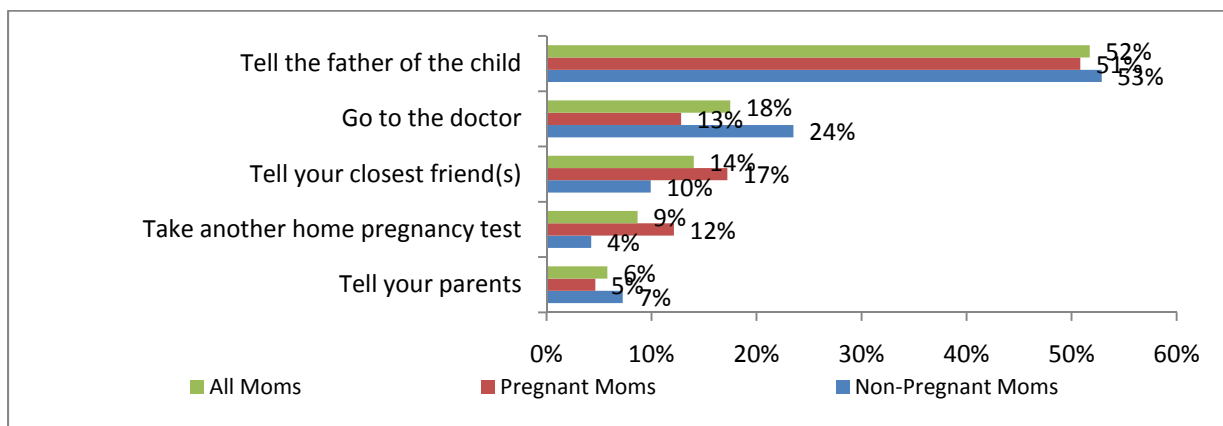


Figure 40 (Moms – Q31): Thinking about your current or most recent pregnancy, when you found out that you were pregnant, what did you do first?

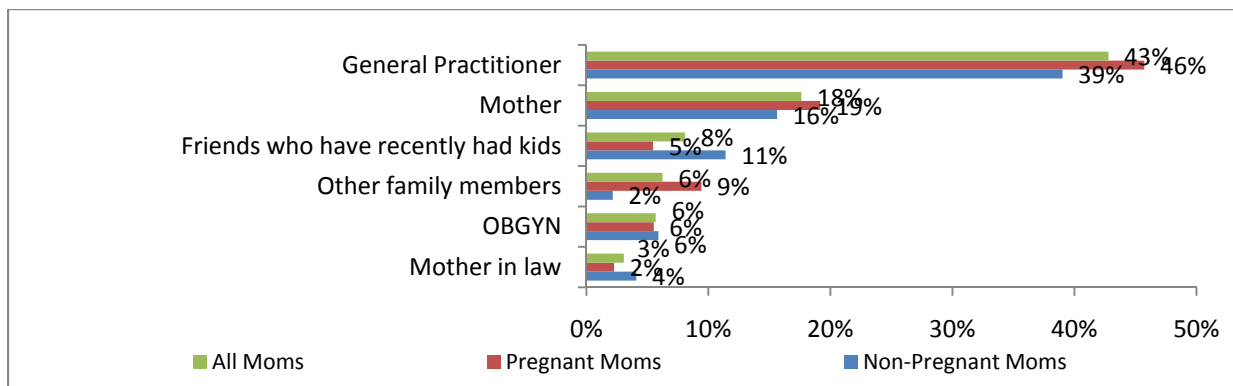


Figure 41 (Moms – Q32): Thinking about your current or most recent pregnancy, when you first found out you were pregnant, where did you seek medical advice FIRST?

Many South African Women receive Pregnancy Advice from General Practitioners and their Mothers, More so than Specialists or Media

In terms of medical advice about their pregnancy, the majority of South African moms turn to general practitioners as their main source of information. Mothers are also an important source of information. One-third of all moms turn to their own mothers (29%). In particular, moms with one child are more likely than other moms to turn to their mothers (38%).

Specialist doctors such as pharmacists and pediatricians are also valued sources of pregnancy and maternity information, one-third and one-fifth of all moms turn to these sources for information, respectively.

Friends are a more common source for first-time moms than other moms. One-fourth of first time moms receive information from friends who have had children compared to 13% of moms with one child and 11% of moms with two or more children.

Again, the Internet is not a very popular source, with only 10% of all moms going online as a resource. New moms with no other children, however, are more likely than moms with children to turn to the Internet (16%).

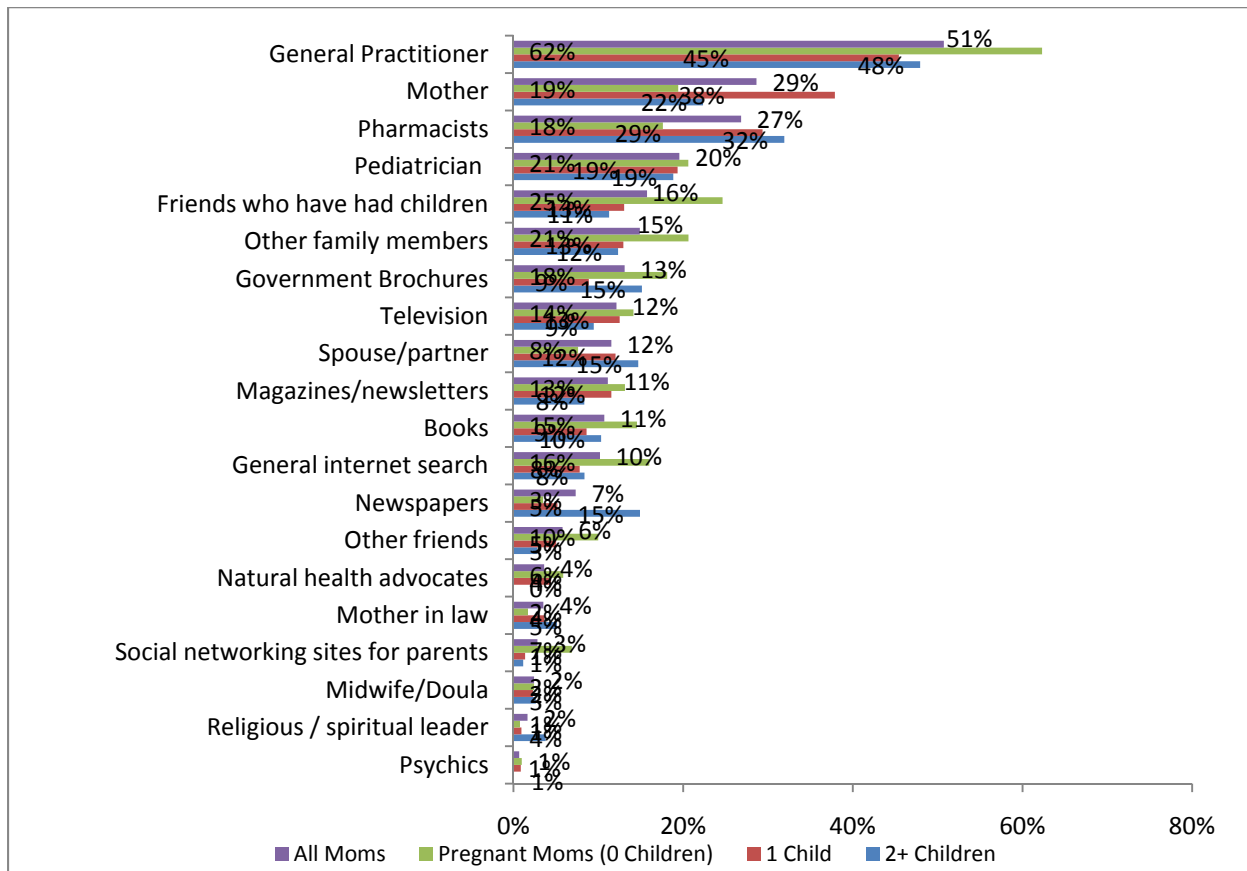


Figure 42 (Moms – Q33): Overall, where do you or did you get medical or health information about your current / most recent pregnancy?

South African Women Make their Own Health Decisions during Pregnancy, But Often Confer with the Child’s Father or a Doctor

Although South African mothers turn to their own mothers and doctors for medical advice, ultimately the mother herself is the key decision maker during their pregnancy (93%). Fathers also play a significant role in the decision making process (75%), as well as, doctors (70%).

Religious leaders and midwives yield relatively low influence, particularly among first time moms. Fewer than one-in-five moms use religious leaders to make decisions during their pregnancy.

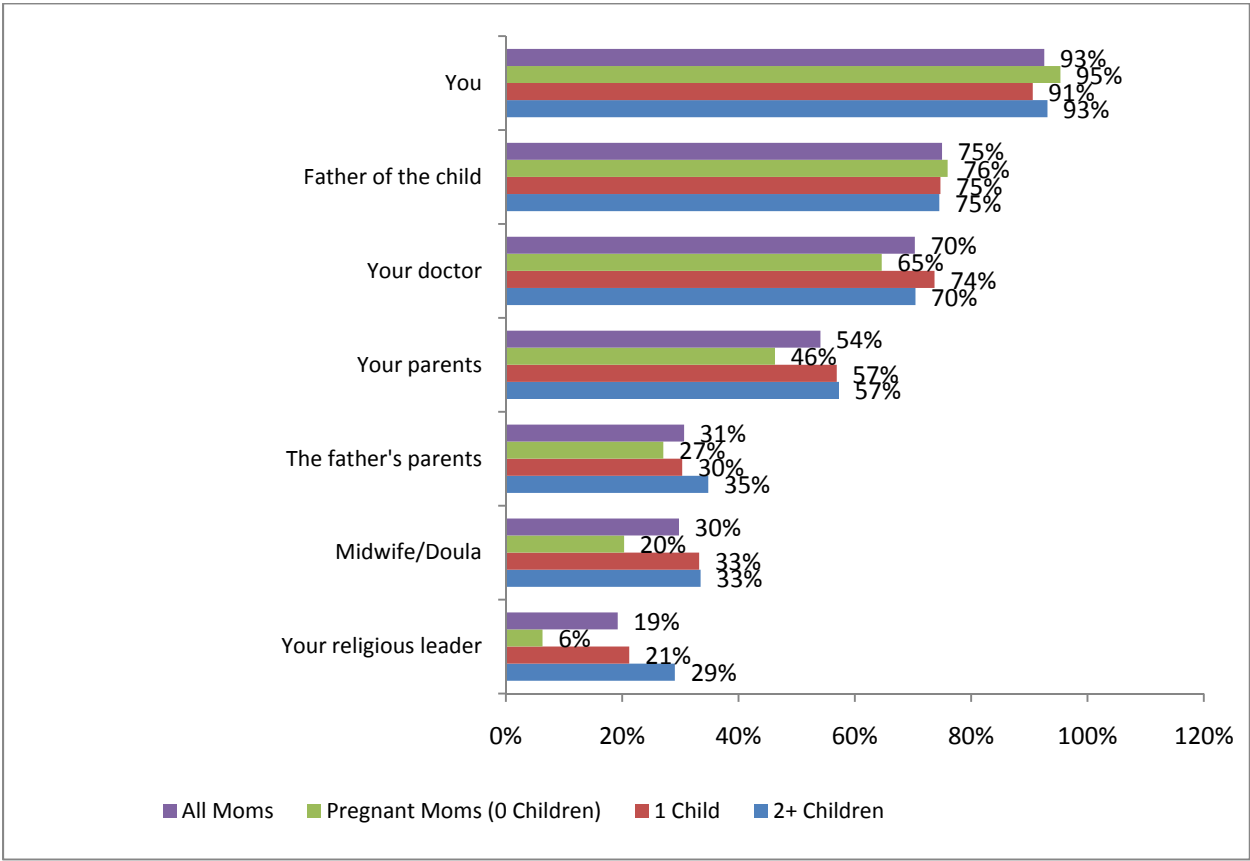


Figure 43 (Moms – Q34): To what degree did each of the following make or made the decisions about your healthcare during your current or most recent pregnancy? A LOT/SOME

South African Moms Visit the Doctor More Often during the Third Trimester of Pregnancy, Especially First-time Moms

During the third trimester of pregnancy, the majority of moms visit the OBGYN/gynecologist at some point (68%). However, a larger percentage of mothers with children never visit their OBGYN during their third trimester compared to first time mothers.

First time mothers visit the OBGYN more frequently, with 78 percent visiting their OBGYN at least every couple months.

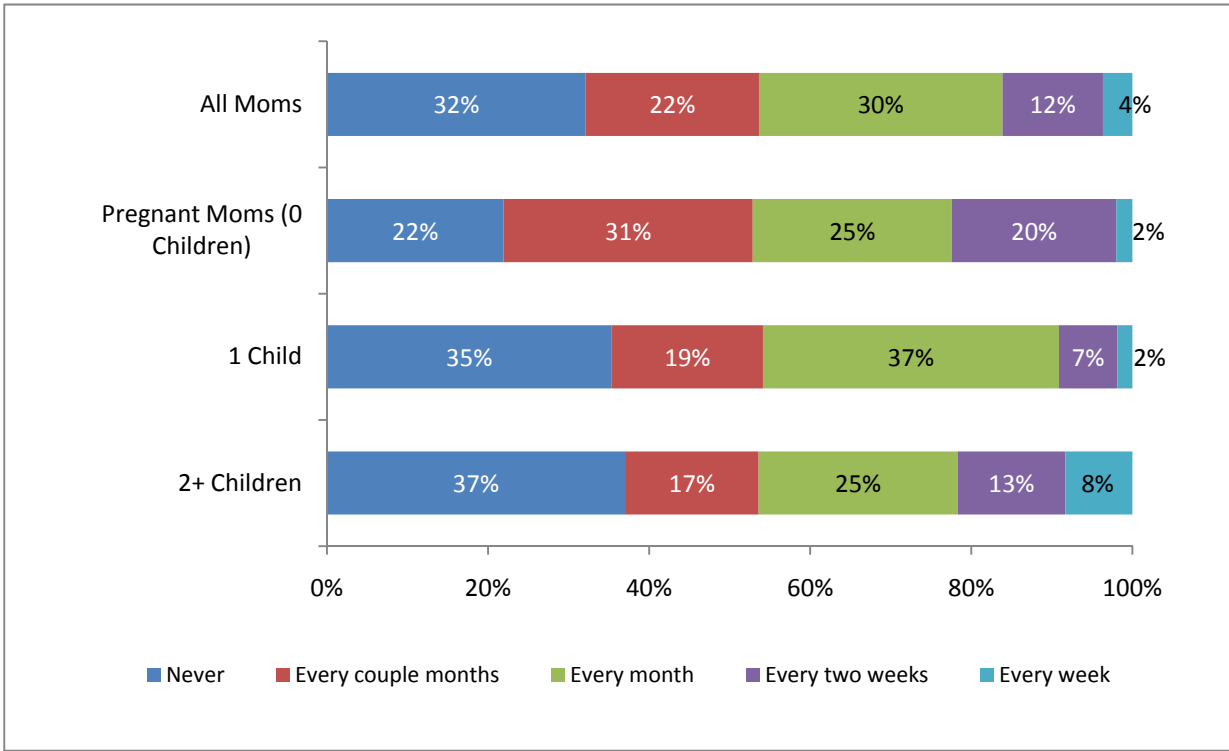


Figure 44 (Moms – Q35): Thinking about the last three months of your current or most recent pregnancy, how often do you or did you go to your OBGYN/gynecologist?

South Africa Moms Complete Proactive Medical Tests and Screening during Pregnancy, But Most Do Not Attend Childcare Classes

During their most recent or current pregnancy, the majority of South African mothers completed tests related to their health such as blood pressure (90%) and glucose/sugar tests (81%). Three-in-four mothers completed regular sonograms (75%).

classes. Pregnant moms are more likely than non-pregnant moms and mothers in general to complete these courses. 61 percent of pregnant moms complete birthing classes and 55 percent complete newborn child-care courses, a much higher completion rate than non-pregnant moms and the general population of moms.

About half of South African mothers do not complete birthing classes or newborn childcare

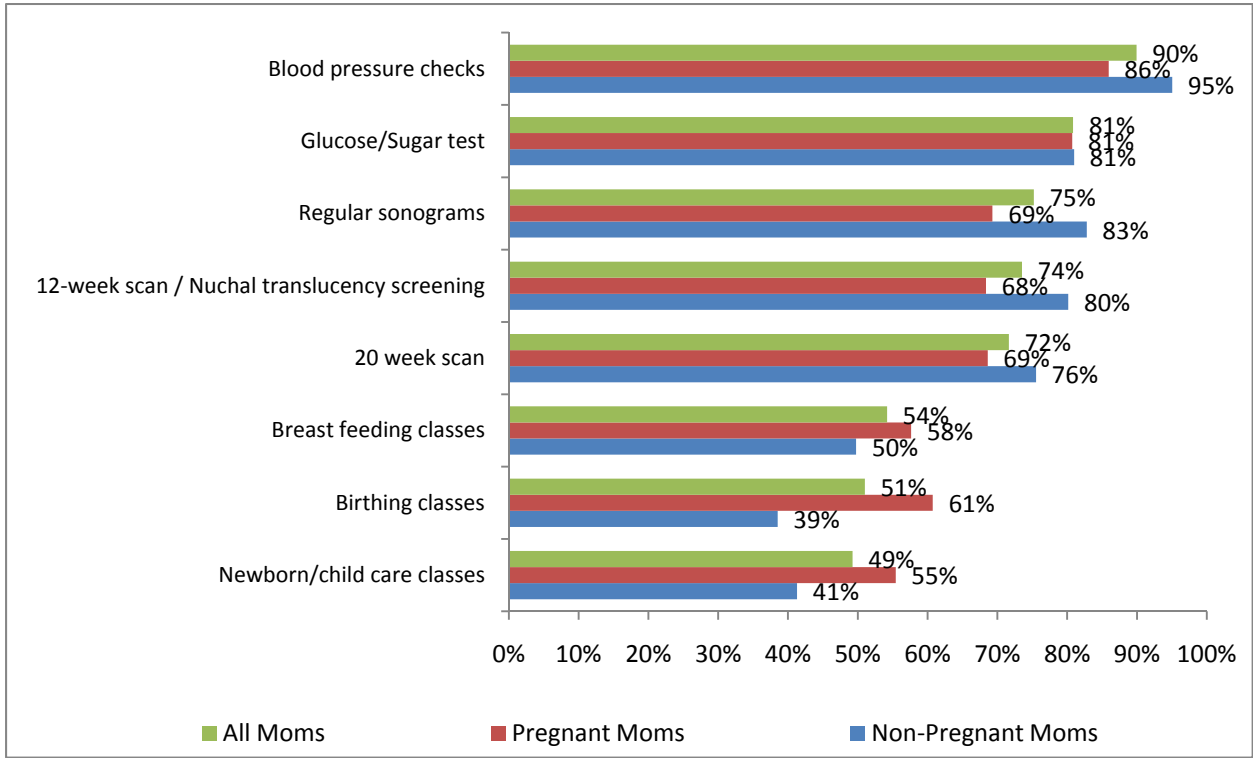


Figure 45 (Moms – Q36): During your current or most recent pregnancy, have you completed/did you complete the following... COMPLETED

During Pregnancy, South African Moms Worry About the Health of their Children First

Many South African moms are very or somewhat worried about the health of their child during pregnancy (62%). Financial stability is also a concern for the majority of mothers (59%), potentially as they think ahead to being off-work immediately after labor, or being able to provide for their children. While their own physical health is a concern for 54% of mothers, other mental and physical issues such as post-

partum depression, weight, and diet are less worrisome. Decisions around breastfeeding are the least of South African mothers' concerns.

Although weight is not concerning for the majority of mothers (55%) during pregnancy, after pregnancy, moms look most look forward to no longer being pregnant (30%) and getting their figure back (24%).

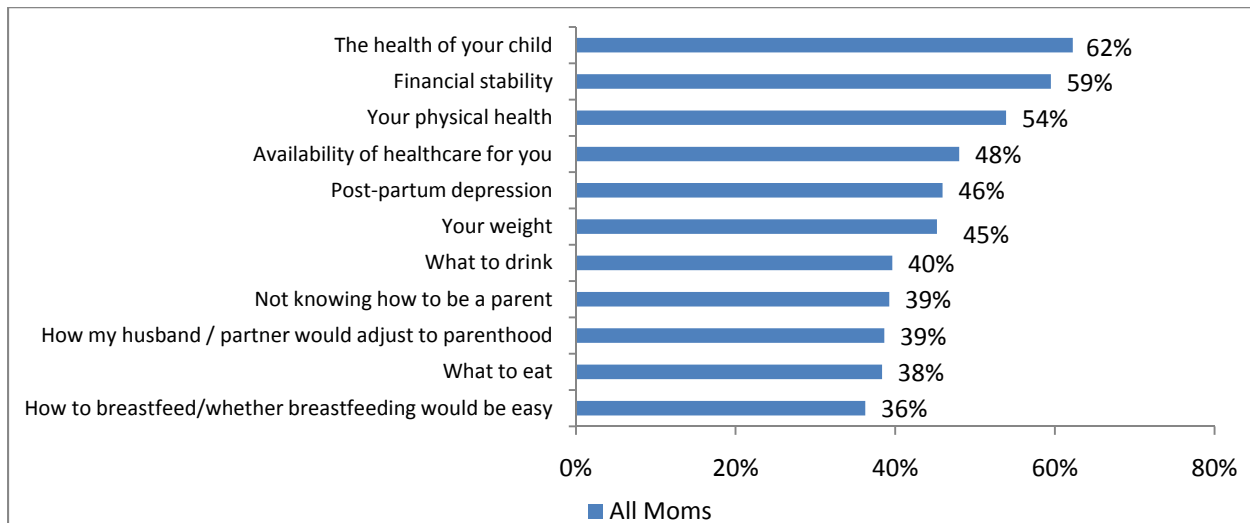


Figure 46 (Moms – Q41): During your current or most recent pregnancy to what extent are/were you worried about the following...VERY WORRIED/WORRIED

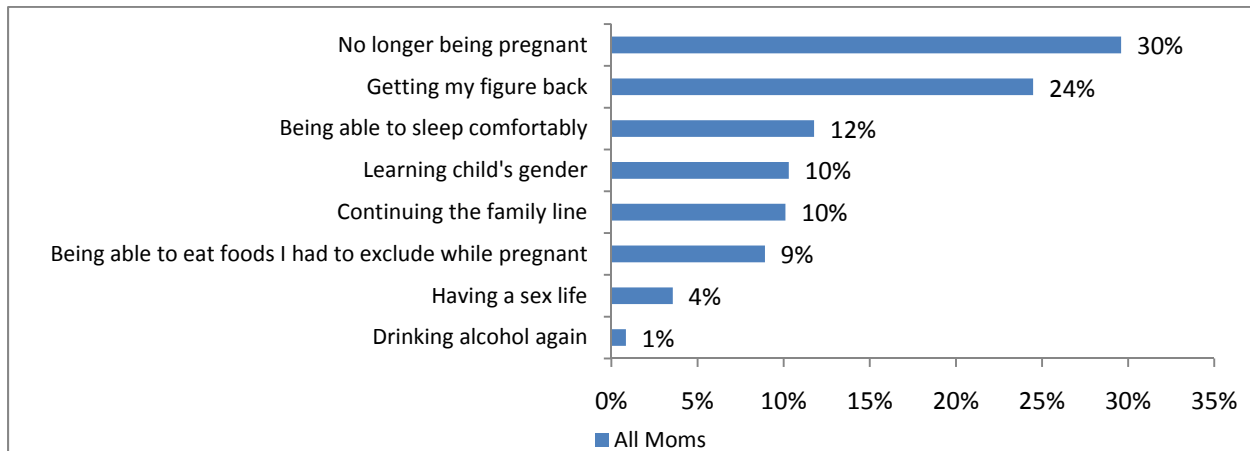


Figure 47 (Moms – Q42): During your current or most recent pregnancy which of the following are/were you most looking forward to at the end of your pregnancy?

PART F: Experiences during Newborn Years (Breastfeeding, Going Back to Work)

Most South African Moms Stop Breastfeeding By The Time Their Child is 18 Months Old. Experienced Mothers with Multiple Children are Less Likely to Breastfeed.

The vast majority of South African moms breastfeed (82%) and many say they would like to breastfeed as long as possible (64%). However, mothers are divided on when they stop breastfeeding their children. Roughly, equal numbers of mothers stop breast feeding after 3 months (22%), 12 months (26%), and 18 months (22%). Mothers of multiple children are less likely to breastfeed than mothers with only one child (30% of mothers with two or more children do not breastfeed compared to 12% of mothers with one child).

The most popular reason for stopping breastfeeding among South African mothers is that the child no longer wanted to nurse (23%). Other, key reasons relate to the practicality of breast feeding and comfort of doing so. “It was difficult to pump during the day” (12%), “the time commitment required to breastfeed” (12%) and the “pain associated with breastfeeding” (10%) were the most common reasons. Mothers with two or more children also are more likely to cite the experience became painful (17%) as a reason for discontinuing breastfeeding than mothers with just one child (9%).

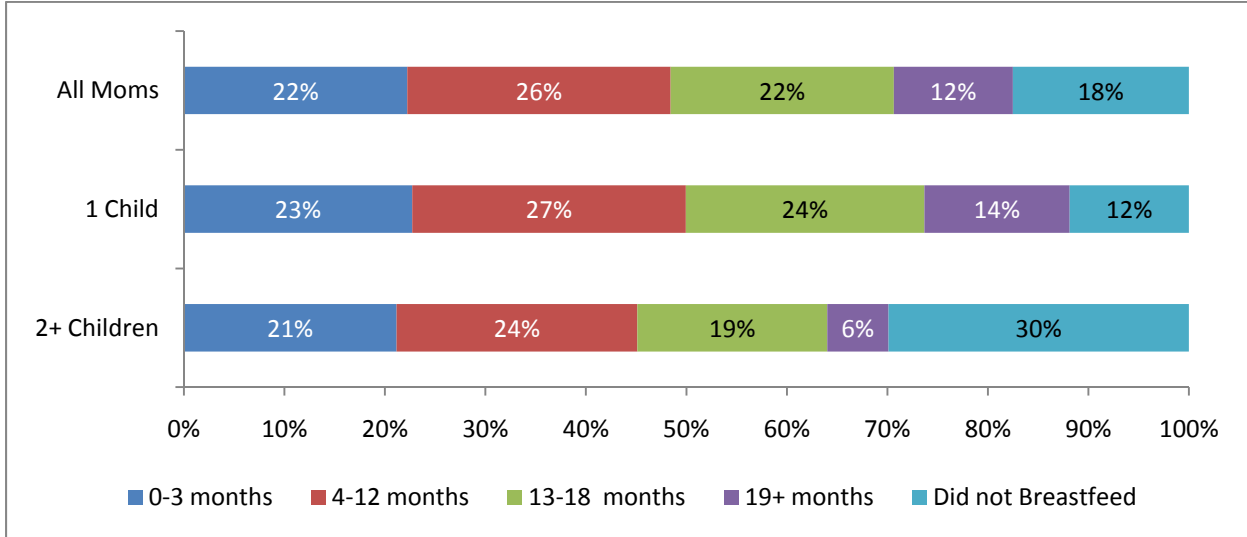


Figure 48 (Moms to ages 0-5 – Q46): Thinking about your youngest child, what was the age of your child when you stopped breastfeeding?

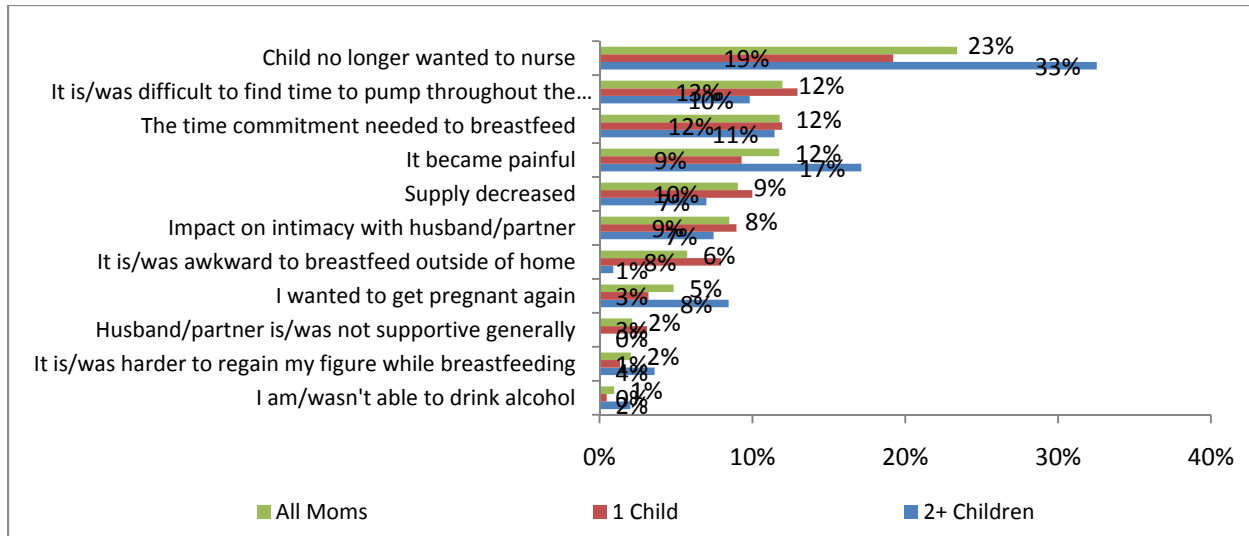


Figure 49 (Moms to ages 0-5 – Q47): Thinking about your youngest child, what will stop/stopped you breastfeeding longer?

Most Working South African Moms Go Back to Working Normal Hours after Pregnancy, but Need Help from Family, Daycare, or Nannies

Nearly two-in-five South African working mothers go back to normal work hours after the birth of their child.

Daycare and grandparents are the most common resources for childcare among South African mothers who go back to work.

In order to go back to work, the majority of South African mothers desire more help from their family (44%) or husband/partner (28%).

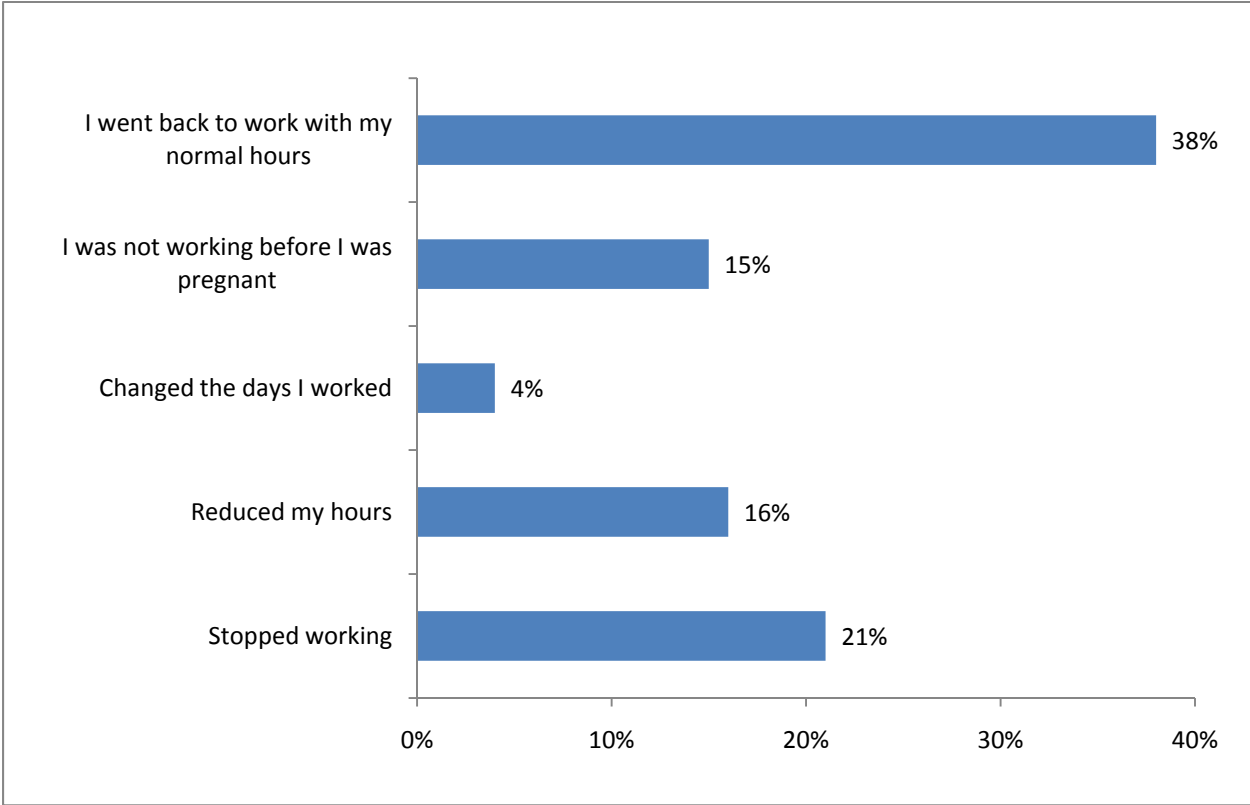


Figure 50 (Working Moms to ages 0-5 – Q50): Thinking about your youngest child, did you change your work schedule after they were born?

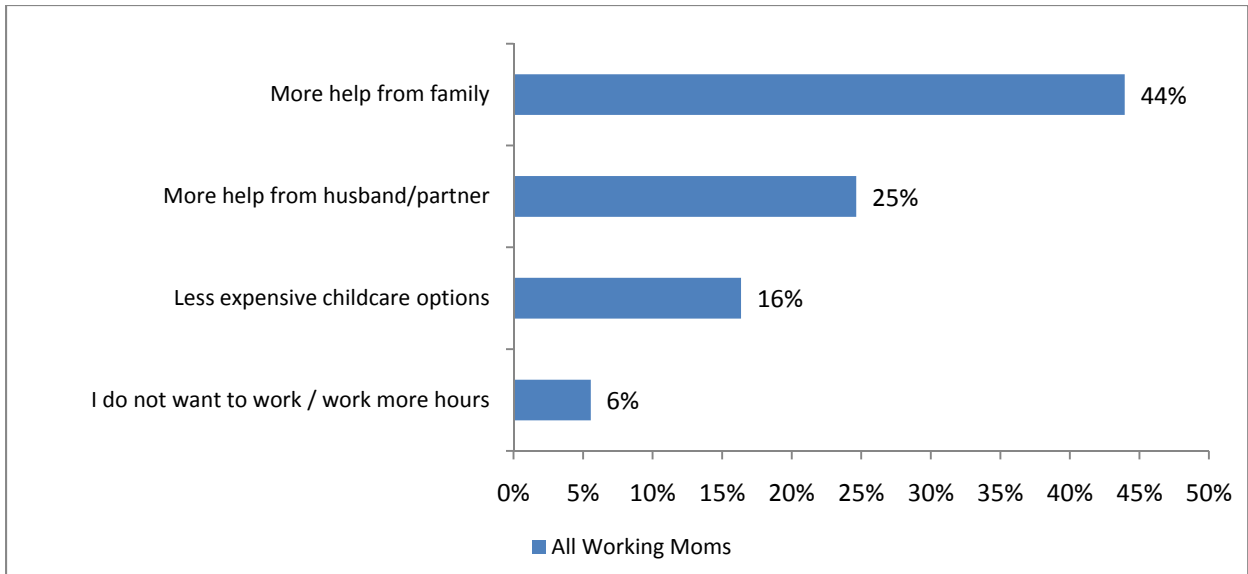


Figure 51 (Working Moms to ages 0-5 - Q51): What would help you to work/continue working?

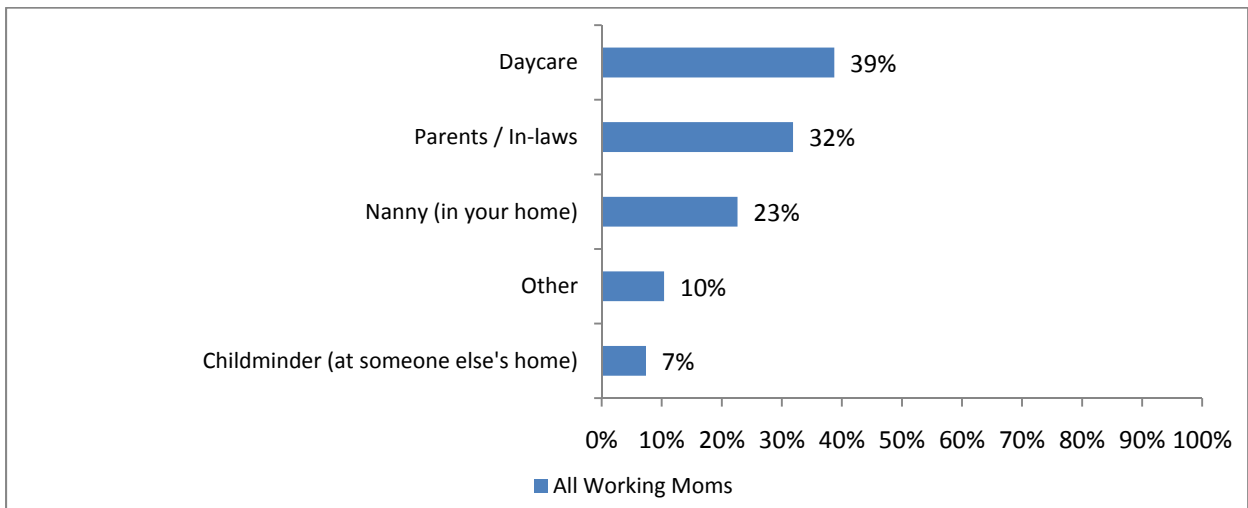


Figure 52 (Working Moms – Q49): Who helps you in taking care of your kids when you are at work?

PART G: Thoughts about the Future

When it Come to Their Children’s Future, Moms in South Africa Worry about Access to Drugs and the State of their Finances to Provide Stability in the Future

Highlighting the prevalence of drug culture in South African communities, more than seven-in-10 mothers fear the influence of drugs on their children (78%). Financial and healthcare concerns are also highly concerning for South African moms. Interestingly, 63 percent of mothers are worried about the influence social media has on their children, which speaks to the growing popularity of Facebook, YouTube and Twitter in South Africa. In contrast, clean water, food, and obesity are of less worrisome for South African moms.

In terms of the challenges moms face as a parent, financial stability and what happens in the event of death are the top concerns for mothers, with two-thirds of moms responding that they are very or somewhat worried. Pregnant moms with no children fear financial stability significantly more than other moms, as eight-in-10 are very or somewhat worried.

Although less common than other concerns, one-third of moms worry that they do not know how to be a good parent.

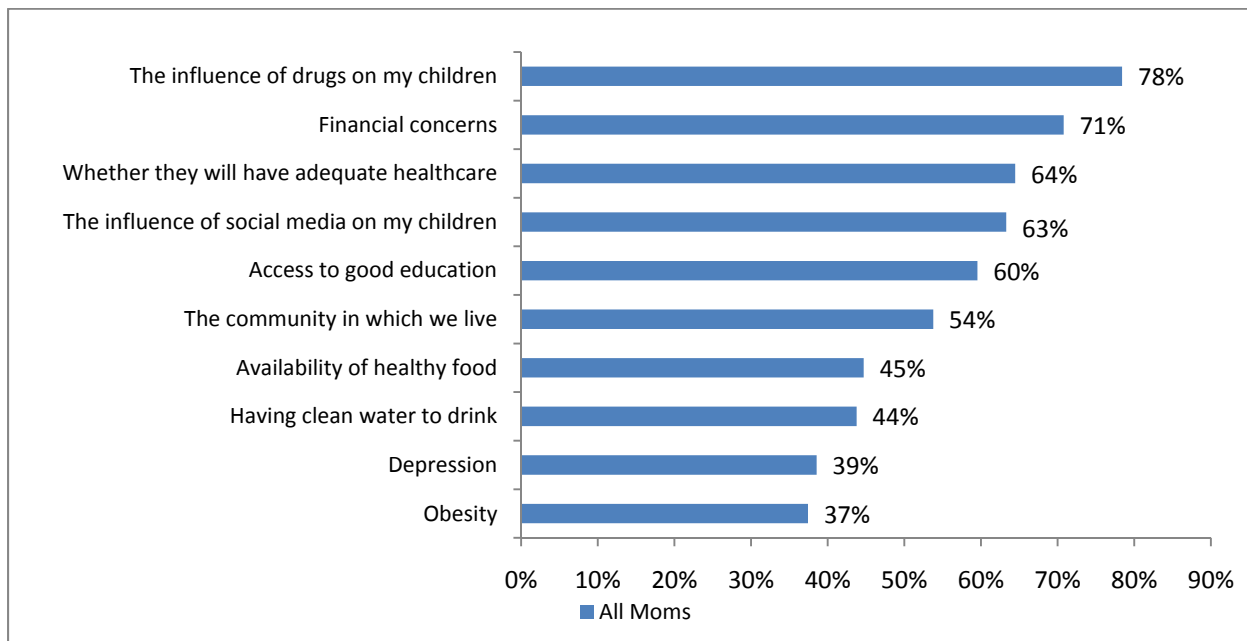


Figure 53 (Moms – Q52): As you think about your children as they get older, how worried are you about the following...VERY WORRIED/WORRIED

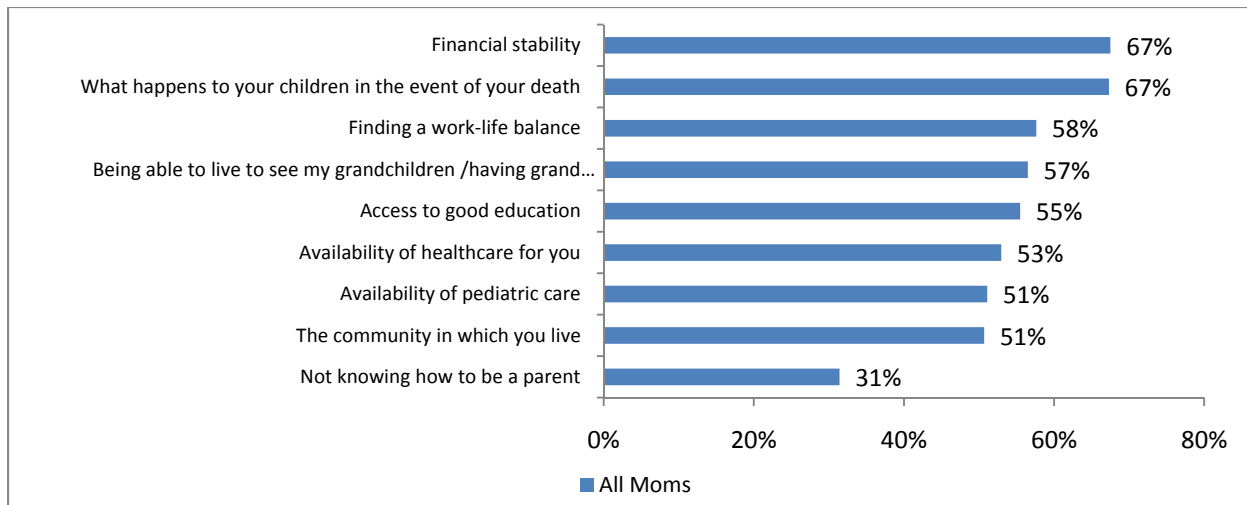


Figure 54 (Moms – Q53): As you think about being a parent over the next few years, how worried are you about the following...VERY WORRIED/WORRIED

V. Summary

- South African moms say their overall feeling of health and well-being is good (86%) and that it has stayed the same or gotten better relative to five years ago (95%).
- More than half of moms (60%) see their doctors annually for check-ups. Yet, more than a quarter hardly ever or never go to the doctor. Barriers to visiting the doctor more often include a preference for to going to the doctor only when they are ill (64%) and the expense of visiting a doctor (33%).
- According to mothers, differences exist in South Africa between state and at a cost healthcare service. At a state level, about half of South African moms have access to general practitioners (53%) or birthing centers (58%). Specialist doctors, such as pediatricians and OBGYNs are more likely to be available at a cost, potentially precluding widespread use of these services.
- During the third trimester, the majority of mothers visit their OBGYN (68%). First time mothers are more likely to visit their OBGYN with 78 percent visiting their OBGYN at least every couple months.
- More than half of South African mothers say that they experience some level of stress. The economy, healthcare costs and the health and well-being of parents are the top issues contributing to stressed Mom's own stress.
- Most South African mothers get enough sleep. However, among those that aren't getting enough sleep, worry and anxiety about their children keeps them awake at night. A child waking up at night is the other main reason why South African mothers lose sleep at night.
- The majority of South African mothers consider their children's health to be very good or good (96%), which may be related to their frequency of visits to the doctor. Most mothers say that their youngest children visit the doctor on a monthly basis, either once a month (27%), every couple of months (28%), or every six months (23%).
- On the whole, most South African mothers rely on general practitioners for information about their children's health. Pharmacists and their own mothers also serve as an important source of knowledge for one-third of South African mothers. They also use traditional media sources (e.g. T.V., books, and magazines) for health information more than the Internet.
- Nearly seven-in-10 of those with kids were not confident in the prenatal care they received (68%) during the experience of labor. In addition, more than half of those with kidsmoms feel hospitals did not provide adequate support to help them breastfeed (55%).
- The vast majority of South African mothers breastfeed (82%), but mothers are divided on when they stop breastfeeding their children. Roughly, equal numbers of mothers stop breast feeding after 3 months (22%), 12 months (26%), and 18 months (22%). The most popular reason for stopping breastfeeding among South African mothers is that the child no longer wanted to nurse (23%).
- Most working mothers go back to normal working hours after the birth of their child. Yet, one-fifth of mothers stopped working. Mothers with more than one child go back to work after their pregnancy (42%) or were not working when they had their youngest child (29%). Daycare and

grandparents are the most common resources for childcare among South African mothers who go back to work.

- When considering their children's future, South African moms fear the influence of drugs on their children is their top concern (78%). In addition, 63% fear the impact of social media on their children and the growing popularity and potential consequences of exposure to YouTube, Facebook, and Twitter.