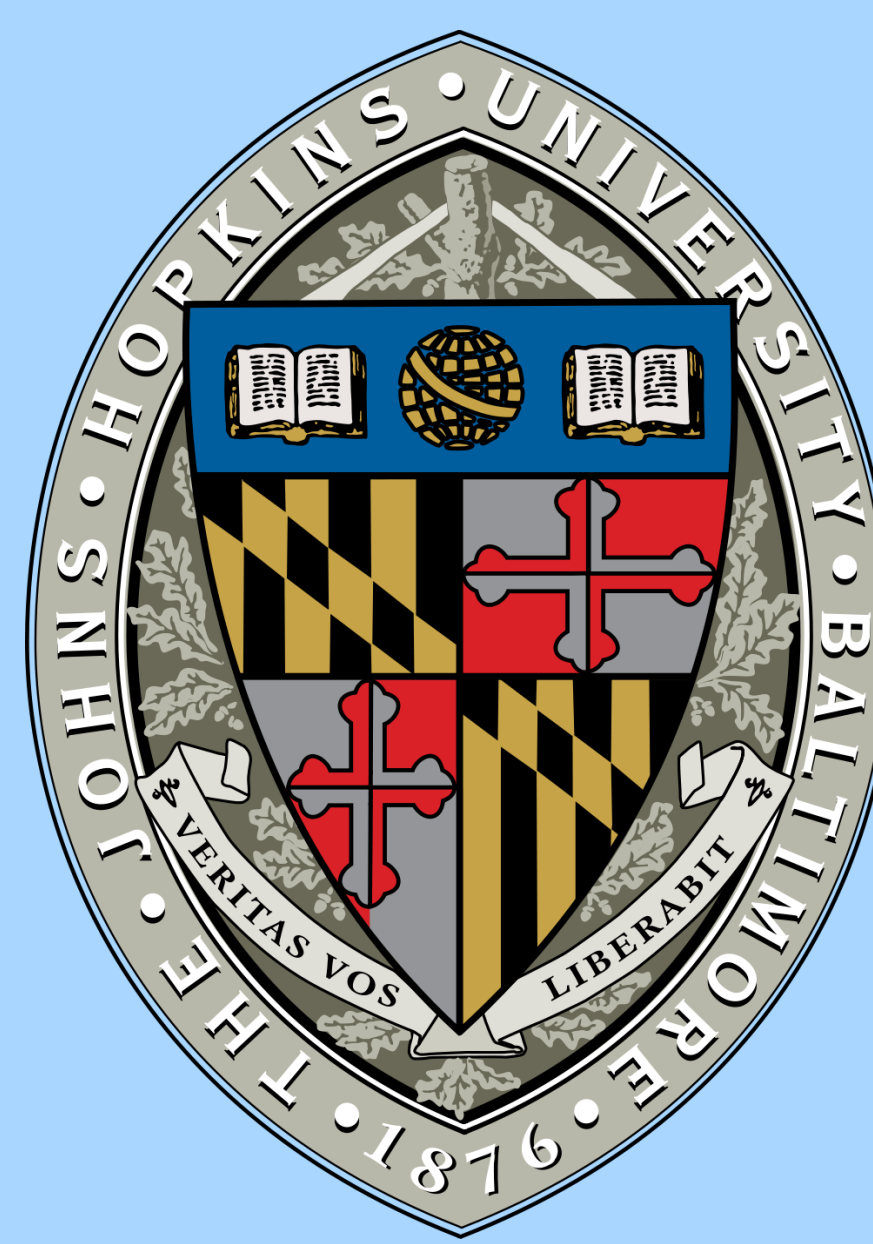


Breastfeeding Promotion Intervention with Professional and Peer Support

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I Background

Breastfeeding Interventions: Successful Strategies to Increase Initiation & Continuation

The research presented in this literature review compares studies and previous systematic reviews to determine the elements of successful interventions. It is hypothesized that a breastfeeding intervention held in a group setting that incorporates the expertise of a professional (e.g., lactation consultant), and the social connection with a peer (e.g., mother with experience breastfeeding) would be optimal in supporting a mother to begin and continue to breastfeed.

Breastfeeding in the United States:

- In 2011, 79% of newborn infants started to breastfeed; 49% of infants born in 2011 were breastfeeding at 6 months; 27% of infants born in 2011 were breastfeeding at 12 months (CDC, 2014, p. 2).
- Barriers to breastfeeding in high-income countries include obesity, returning to work, poor family support, embarrassment about feeding in public, and lack of education (Skouteris et al., 2014, p. 113).

Social Support for Breastfeeding:

- Encouragement of breastfeeding; distribution of breastfeeding information; affirmation of breastfeeding effort facilitate social support (Vari et al., 2000).
- The relative effectiveness of variations in provision of social support for breastfeeding has not been demonstrated consistently (Skouteris et al., 2014; Vari et al., 2000).

Elements of the majority of successful interventions in high-income countries:

- Initiated during postpartum period.
- Support-based with additional home-based and telephone support by lactation experts.
- Continued for a relatively long period (from 3 weeks to 6 month) (Skouteris et al., 2014, p. 123).

Peer groups:

- Groups normalize breastfeeding and help to build confidence in the ability to breastfeed with the support of peers and by observing others breastfeed (Hoddinott et al., 2006; Vari et al., 2000).
- Sikorski concluded from a review study that peer support increased exclusive breastfeeding, but not necessarily its continuation (as cited in Kaunonen et al., 2012).

Professional Support:

- Professional support combined with trained and experienced peers supporters is effective in increasing breastfeeding initiation and continuation (Ahluwalia, Tessaro, Grummer-Strawn, MacGowan, & Benton-Davis, 2000; Demirtas, 2012; Hoddinott et al., 2006).
- According to Ahluwalia et al. (2000), education and support from the lactation consultant, prenatal education, and ongoing postpartum support may be critical in the success of initiating and continuing breastfeeding.

Combined Support:

- Combined support of professional and peer roles was effective in increasing breastfeeding continuation, exclusiveness, satisfaction, and saving in healthcare costs (Kaunonen et al., 2012, p. 1951).

Relevance to Clinical Practice:

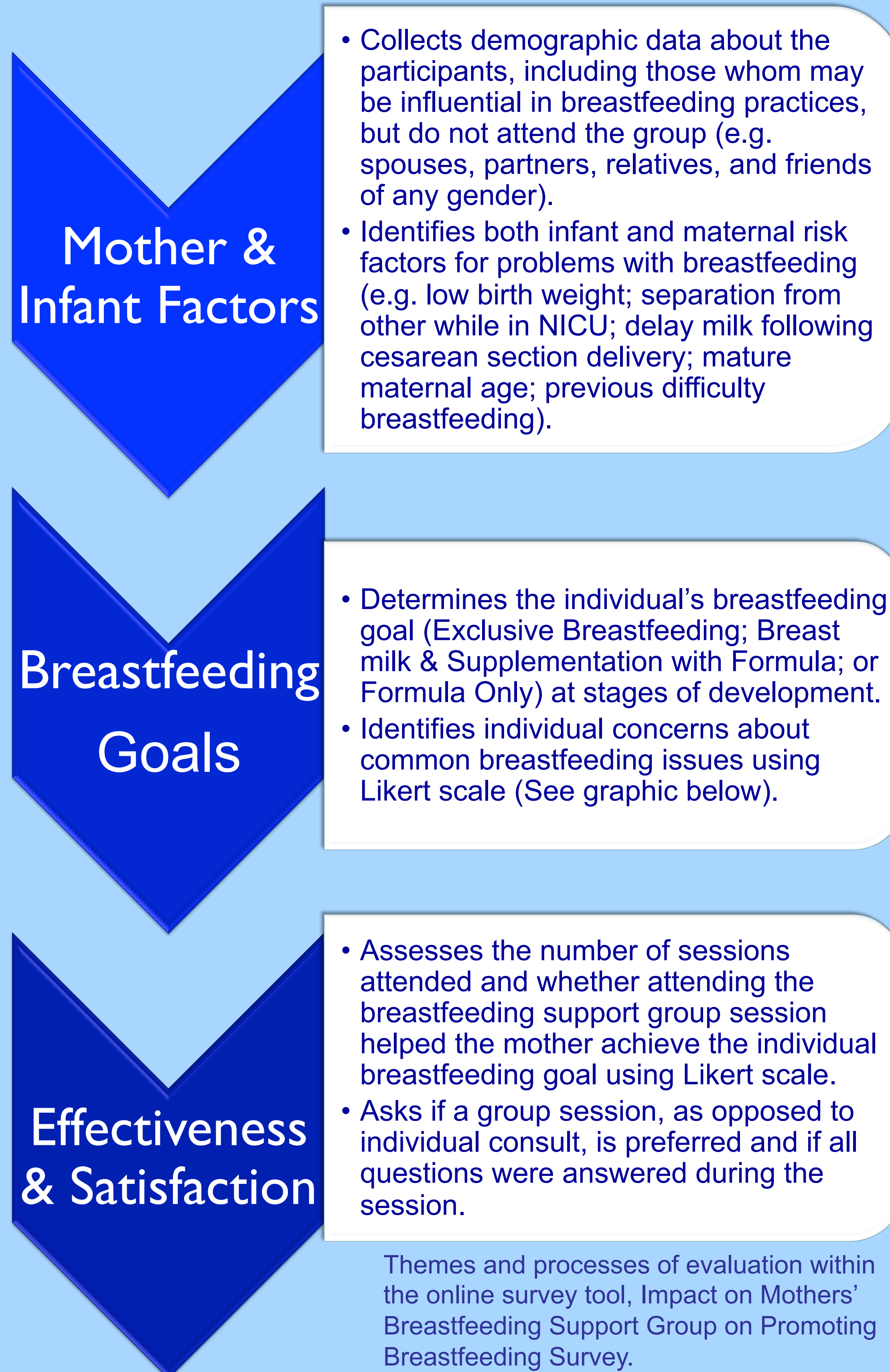
- These findings are clinically relevant because they can help shape strategies and interventions in the clinical practice to increase the initiation, continuation, and exclusivity of breastfeeding.

Considerations for future research:

- Inclusion of all socioeconomic backgrounds in the sample of the population since traditionally several studies focused on low-income women.
- Provision of culturally sensitive care that address various degrees of barriers to mothers within a group.

2 Methods

The postpartum **intervention** is a mothers' breastfeeding support group with lactation consultant **JoAnne Silbert-Flagg, DNP, CRNP, IBCLC**, whom provides expert advice to address breastfeeding concerns of mothers within a shared setting with peers. The sessions are held weekly for about 1.5 hours and are open to women who delivered at Johns Hopkins Hospital. I created an **online survey tool, Impact on Mothers' Breastfeeding Support Group on Promoting Breastfeeding Survey**, using Qualtrics, a Web-based survey software, and formatted for a mobile device for convenience.



3 Results

Observations during the pre-data collection phase of the project for at least 6 sessions of the mothers' breastfeeding support group:

- Mothers felt reassured by measured weight gain after breastfeeding during the session; this reaffirmed that they were feeding the baby sufficiently when they put the baby to their breast.
- Mothers return to the session if they have another concern or need more support for a previous concern (See Common Breastfeeding Concerns graphic).
- Peers share stories that relate to another mother experiencing similar issues.
- Participants establish future plans to attend infant classes together and communicate outside of group.
- The opinion of husbands/fathers of the baby was highly influential in the confidence and self-efficacy of breastfeeding of at least two mothers as evidence by the mothers following the recommendations of husband, instead of the lactation consultant, JoAnne, and/or their opinion, and expressing uncertainty during the next session.

4 Conclusions

- JoAnne Silbert-Flagg, DNP, CRNP, IBCLC possesses the knowledge and skills to provide direct assistance and education that is applicable to the individual mother and infant, or the entire group.
- Peers provide informal tips and create social bonds for support.

Combined professional and peer support increase the probability of success in this postpartum breastfeeding intervention.

5 Future Directions

- Obtain IRB approval for the study.
- Collect data using the online survey following the Mothers' Breastfeeding Support Group sessions.
- JoAnne Silbert-Flagg and I will analyze the results to see whether the group helps to resolve concerns about breastfeeding and promotes its continuation.

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