


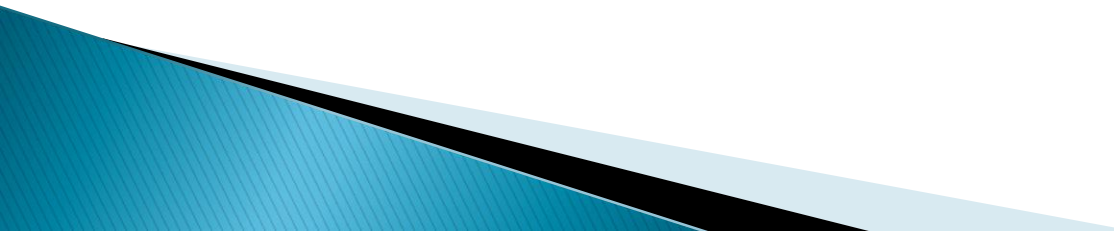
Breastfeeding

The Health Care Providers Role in Improving Breastfeeding Outcomes Among Minority Women

Objectives

- ▶ Participants will be able to identify two barriers to breastfeeding that minority women face.
 - ▶ Participants will be able to discuss current literature on the recommended methodologies for improving breastfeeding rates in minority women.
 - ▶ Participants will be able to identify the educational resources and support needed for Health care providers to feel competent in supporting minority women in their breastfeeding efforts.
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Literature Review

- ▶ Research completed within the past five years.
 - ▶ Compared results from different countries.
 - ▶ Studies published in a variety of specialties:
 - Pediatrics: British and American
 - Nutrition
 - Public Health
 - Pediatric and Perinatal Epidemiology
 - Obstetrics
 - Nurse-Midwifery
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Results are Country Specific

England

Duration of breastfeeding:

61% of white mothers are more likely to stop breastfeeding than non white mothers.

Mean duration of breastfeeding is 27 weeks.

Women more likely to initiate breastfeeding regardless of race:

Women who are not eligible for Government program as such as Healthy Start.

Women who have never worked or work in low level jobs.

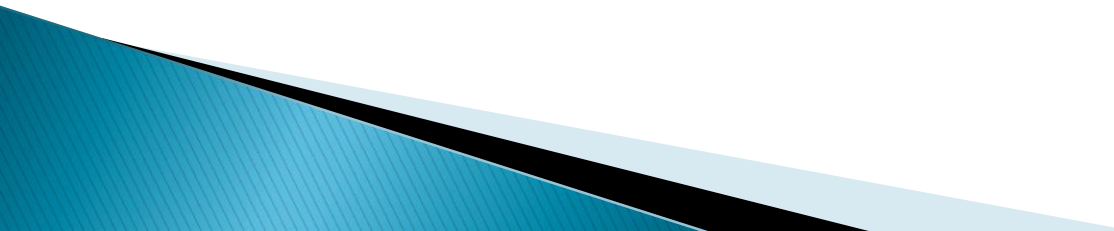
The least likely women to initiate breast feeding:

White women: 70%

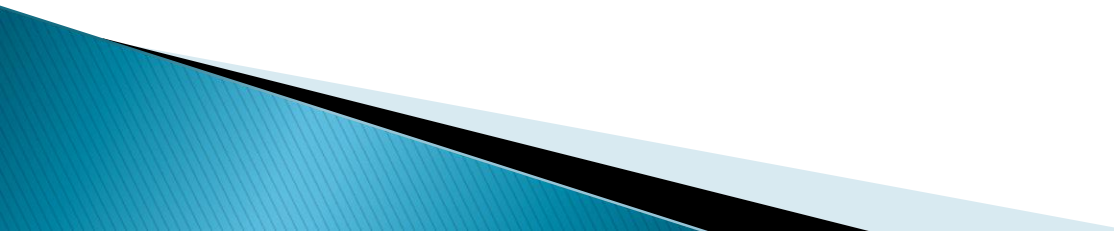
Multiparous women: 69%

Young and/or uneducated mothers: 51%

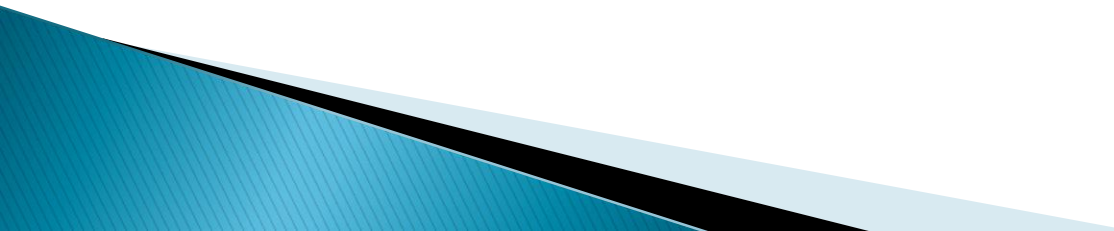
World Wide

- ▶ Breastfeeding rates:
 - ▶ Japan, Switzerland, Luxembourg and Turkey: 90%
 - ▶ Italy, Spain and Greece: 70 to 80%
 - ▶ England: 70%
 - ▶ Scotland: 67%
 - ▶ Northern Ireland: 63:
 - ▶ Canada: 85%
 - ▶ United States: 74%
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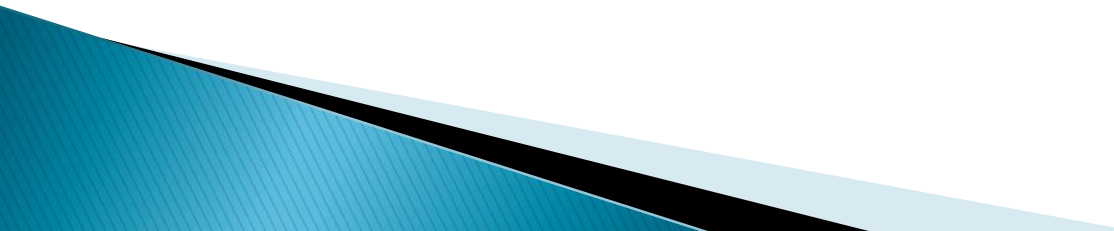
United States

- ▶ The United States has an overall low rate of initiation and duration in breastfeeding.
 - ▶ There is also a significant gap between different ethnic groups with Hispanic and Black women having the highest rate of supplementation at two days of age.
 - ▶ Evidence shows that formal education, financial status and family support in all ethnic groups has a direct correlation to breastfeeding outcomes.
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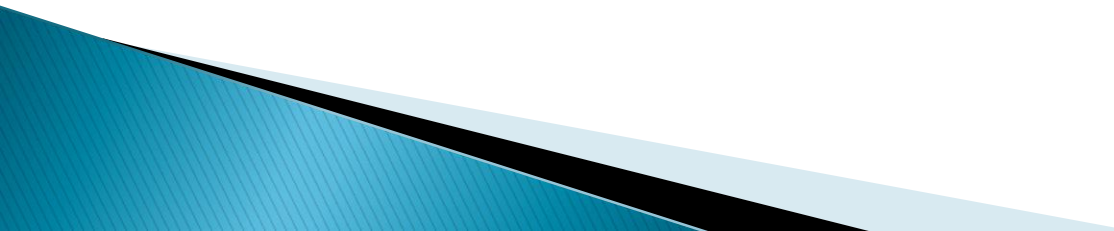
Healthy People 2020 data

- ▶ The goal is to obtain a 81.9% of new mothers initiate breastfeeding.
 - ▶ Breastfeeding initiation is lower in black women when compared with all other ethnic groups.
 - ▶ Hispanic and Asian women are currently meeting the Healthy People 2020 goals
 - ▶ Native American and White women are close to obtaining the goal.
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What About Duration?

- ▶ The widest variation in breastfeeding outcomes by ethnic grouping are reflected in the 6 month post partum breastfeeding rate.
 - ▶ Asian women have the highest rates of breastfeeding duration, where as black women have the lowest.
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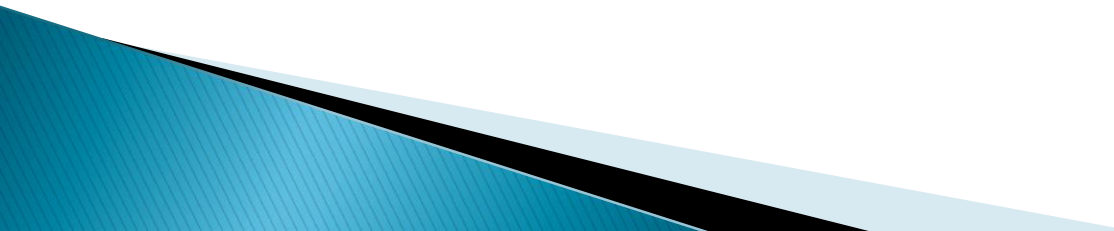
What have we tried?

- ▶ Peer counseling
 - ▶ Professional support
 - ▶ Breastfeeding team (peer and professional)
 - ▶ Breastfeeding specific appointments
 - ▶ Group prenatal education
 - ▶ Enhanced breastfeeding programs
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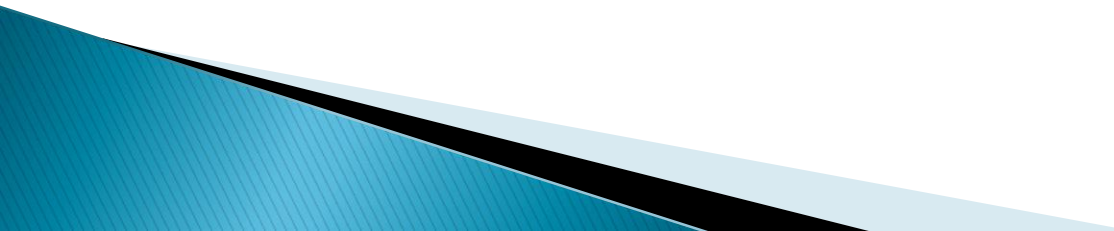
What has Worked

- ▶ Peer Counseling.
- ▶ Group care in the form of Centering Pregnancy.
- ▶ Professional teams.
 - Staff RN and Lactation Consultant

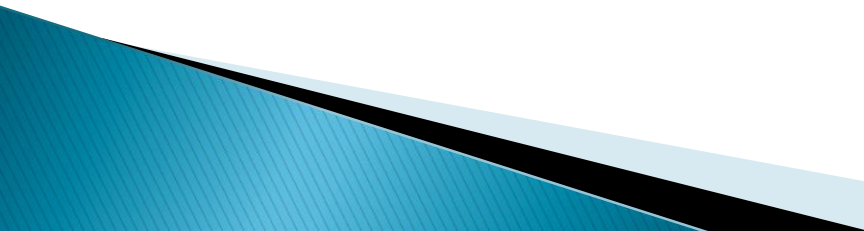
Peer Support

- ▶ Studies demonstrate that peer support has a significant impact on breastfeeding. Women in these groups showed great improvement in exclusive breast feeding at 3 months post partum.
 - ▶ The infants in these groups had considerable reduction in the rates of diarrhea when compared to the non breastfeeding groups.
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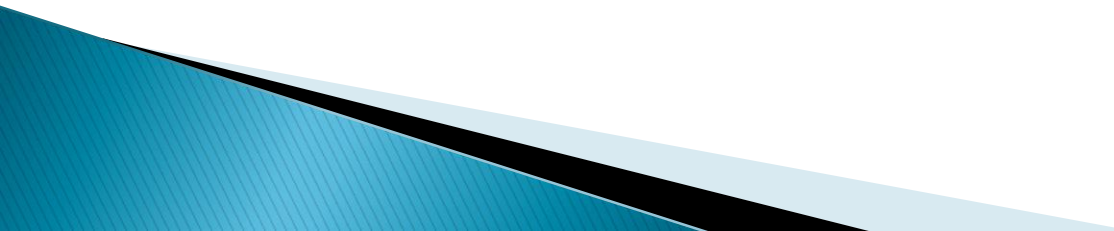
Professional support

- ▶ Teams that consisted of two staff nurses and two lactation consultants showed significantly higher rates of breastfeeding duration through twenty weeks postpartum.
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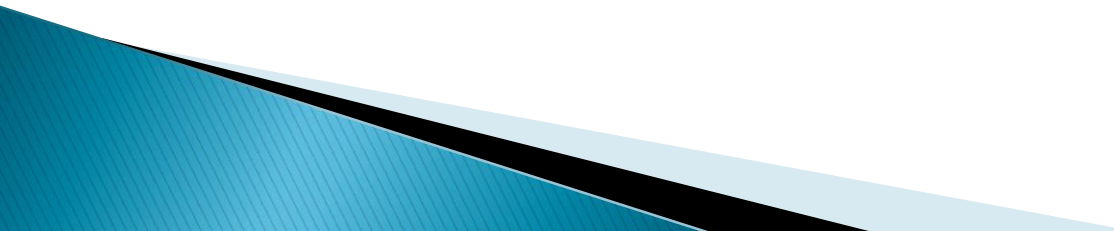
Breastfeeding Teams

- ▶ Studies where a peer counselor and a Lactation consultant teamed up produced mixed results.
 - ▶ In studies with predominantly black populations there was a small increase in breastfeeding duration at 3 months.
 - ▶ When the team was used in a group that was specific in nature such as teen clinics, or group care there was a three fold improvement in duration of breastfeeding.
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Prenatal Education

- ▶ All women assigned to Midwifery led group care, individual breastfeeding education sessions or standard prenatal care demonstrated improvement in breastfeeding initiation.
 - ▶ However only group care demonstrated improvement in both initiation and duration of breast feeding.
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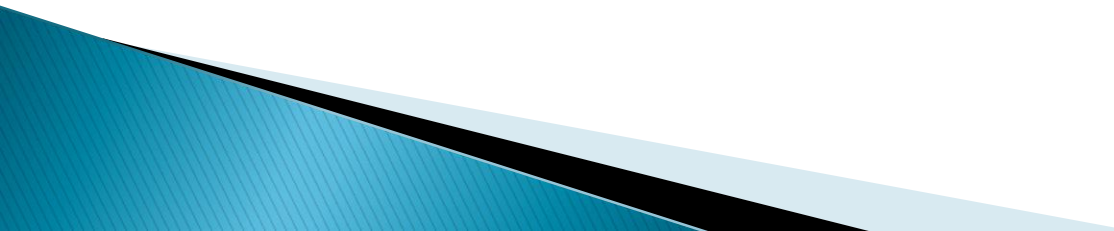
Yale School of Public Health 2012 Study Results

- ▶ The interventions that demonstrated the best improvement were peer counseling and professional support.
 - ▶ The next effective was group prenatal care, followed by specific breastfeeding appointments and enhanced breast feeding programs.
 - ▶ The most ineffective intervention was Postpartum professional support delivered by staff nurses.
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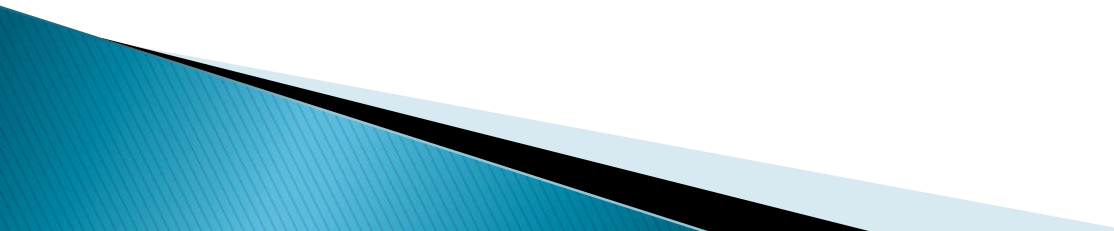
Is There a Role for the Physician



What our Literature Review tells us:

- ▶ The five themes that emerged as primary descriptors of the breast feeding experience:
 - Against all odds.
 - Personal motivation.
 - Support.
 - Attachment.
 - Telling the world.
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Summary

- ▶ The ethnic differences in breastfeeding initiation and duration are specific to each country.
 - ▶ Peer support, Group care and Professional teams can improve breastfeeding initiation, duration, exclusivity and select infant health outcomes.
 - ▶ Does extending group care in to the postpartum period improve duration and exclusivity.?
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- ▶ Do Health care professionals impact the social structure of there environment?
 - ▶ As the Role of the Expert can you instill confidence in women and empower them to breastfeed?
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