



Does Prenatal Breastfeeding Education Increase the Breastfeeding Initiation Rate?

Leslie Goodling, BSN, RN; Ashley Ott, BSN, RN; Brandi Rapp, RN
Women's Health Unit

Results

Article	Methods	Results
Forster D. A. & McLachlan H. L. (2007)	Review of Literature. Reviewed 71 articles regarding breastfeeding initiation.	Practices in the intrapartum and early postpartum period affect breastfeeding initiation. A mother's intentions regarding breastfeeding are a strong predictor of breast feeding initiation. Women decide infant feeding preferences prior to or early on in pregnancy. The earlier that a woman decides to breastfeed the greater the likelihood that breastfeeding will be initiated.
Wen, Simpson, Rissel, & Baur (2012)	Longitudinal data analyzed from 201 first time mothers who participated in the Healthy Beginnings Trial as a control group. Breastfeeding intention was assessed prenatally, breastfeeding duration was assessed at 6 and 12 months postpartum via telephone and face to face interviews	Mothers who were aware of the recommendation to breastfeed were 26% more likely to initiate breastfeeding and 34% less likely to have stopped breastfeeding at 12 months than those who were not aware of the recommendations. Improving mother's awareness of breastfeeding recommendations and strengthening their intention to initiate breastfeeding could lead to increased breastfeeding initiation and duration rates.
Gill S. L., Reifsnider, E., & Lucke, J.F. (2007)	Quasi-Experimental study with a control and intervention group. Statistical analysis was provided using the Bayesian approach. Attempt to increase initiation rates of breastfeeding and the duration of breastfeeding among groups of low income Hispanic women through an intervention program which included prenatal education and home based post-partum support.	The intervention group had twice the odds of breastfeeding as the control group. Providing adequate support and ongoing encouragement for breastfeeding mothers can increase the rates of both initiation and continuation.
Persad M. D. & Mensinger J. L. (2008)	Sample size of 107 primiparas from an inner city hospital. Participants were eligible if they spoke English, were at least 12 weeks of gestation, and were first time mothers. A survey was verbally administered to the participants. The survey included the Iowa Infant Feeding Attitude Scale (IIFAS) and a socio-demographic form.	Women who attended breastfeeding classes showed a significant increase in intent to breastfeed versus women who just received breastfeeding information. Intent to breastfeed was a strong indicator of breastfeeding initiation.
Betzold, Laughlin, & Shi (2007)	Sample size of 33 women, the program distributed handouts at each prenatal and well child visit up to one year. The program's impact on breastfeeding goals, duration, and in hospital exclusivity was evaluated using questionnaires. Duration was assessed using surveys completed during well visits, postal mailings, and phone interviews at 6 months and 1 year.	Results showed that this small pilot educational program may have a significant impact on breastfeeding goals and duration. Post intervention there was a 200% increase from baseline in exclusivity of breastfeeding at 4-6 months and a 160% increase at 6-12 months.

Discussion

The results of the research conducted suggest that prenatal education can have a great impact on the decision to breastfeed as well as actual duration of breastfeeding. Mothers who were aware of the specific recommendations to breastfeed were more likely to initiate breastfeeding. If healthcare providers can provide early breastfeeding education to women in the prenatal period, we may see a significant rise in the number of women who choose to breastfeed versus formula feed.

Conclusions

On the Women's Health Unit, we often see patients who are uneducated on the recommendations and benefits of breastfeeding in the post partum period. When we take time to educate women on our unit, they seem more likely and willing to breastfeed. If we advocate for early breastfeeding education at prenatal visits, women will be admitted to the unit at time of birth ready to initiate breastfeeding with greater duration rates.

References

- Baby-Friendly USA. (2012). The Ten Steps to Successful Breastfeeding. *Baby-Friendly USA*. Retrieved from <http://www.babyfriendlyusa.org/about-us/baby-friendly-hospital-initiative/the-ten-steps>
- Betzold, C. M., Laughlin, K. M., & Shi, C. (2007). A family practice breastfeeding education pilot program: an observational, descriptive study. *International Breastfeeding Journal*, 2(1), 4.
- Centers for Disease Control and Prevention. (2013). Breastfeeding Report Card USA 2013. *National Center for Chronic Disease Prevention and Health Promotion*. Retrieved from <http://www.cdc.gov/breastfeeding/pdf/2013breastfeedingreportcard.pdf>
- Forster, D., & McLachlan, H. (2007). Breastfeeding Initiation And Birth Setting Practices: A Review Of The Literature. *Journal of Midwifery & Women's Health*, 52(3), 273-280. Retrieved from <http://www.medscape.com/viewarticle/558119.print>
- Gill, S. L., Reifsnider, E., & Lucke, J. F. (2007). Effects of Support on the Initiation and Duration of Breastfeeding. *western journal of nursing research*, 29(6), 708-723.
- Persad, M. D., & Mensinger, J. L. (2008). Maternal Breastfeeding Attitudes: Association with Breastfeeding Intent and Socio-demographics Among Urban Primiparas. *J Community Health*, 33(2), 53-60. Retrieved May 6, 2014, from the medscape database.
- Wen, L. M., Simpson, J. M., Rissel, C., & Baur, L. A. (2012). Awareness of Breastfeeding Recommendations and Duration of Breastfeeding: Findings from the Healthy Beginnings Trial. *Breastfeeding Medicine*, 7(4), 223-229.
- United States Breastfeeding Committee (2013, January 1). Healthy People 2020: Breastfeeding Objectives. *Healthy People 2020*. Retrieved May 6, 2014, from <http://www.usbreastfeeding.org/LegislationPolicy/FederalPoliciesInitiatives/HealthyPeople2020BreastfeedingObjectives/tabid/120/Default.aspx>

Introduction

The Healthy People 2020 goal for breastfeeding initiation is 81.9%. In 2013 Pennsylvania's breastfeeding initiation rate was 70.2%. Currently at Penn State Milton Hershey Medical Center our initiation rate is 65%. In the "Ten Steps to Successful Breastfeeding" step three is "Inform all pregnant women about the benefits and management of breastfeeding". The question posed: How does knowledge about breastfeeding (prenatal education vs education on admission vs none) impact a mother's decision to initiate breastfeeding?

PICO Question

Population: Pregnant women.

Intervention: Prenatal breastfeeding education.

Comparison: Formal prenatal breastfeeding education versus informal individual research or no education.

Outcome: Formula feeding versus breastfeeding initiation rate.

Question: How does knowledge about breastfeeding (prenatal education vs education on admission vs none) impact a mother's decision to initiate breastfeeding?

Methods

A literature search was conducted using CINAHL, PubMed, and Medscape databases.

Keywords: *breastfeeding, initiation, education, prenatal education*

Inclusion Criteria: Articles within 10 years, and breastfeeding patients.

The initial search yielded 29 articles, 5 were included for this project.

2 articles were Level I, 1 article was Level III, 1 article was Level IV, and 1 article was Level V.