# Introduction

- This research was inspired by clinical experience as a nurse intern on a labor and delivery unit.
- Breastfeeding is extremely beneficial for the health of both mothers and babies. Despite this fact, not enough mothers are breastfeeding.

### Purpose

The purpose of this literature review was to determine if the attitude and knowledge hospital staff has about breastfeeding influences how successful mothers are in initiating and continuing breastfeeding.

# **Research Design and Methods**

- A literature review was conducted to analyze what interventions have an influence on breastfeeding success.
- The following search terms were used: "breastfeeding or • breast-feeding or infant feeding or lactation or lactating", "nurses or nursing staff or nurse", "support", "baby friendly hospital initiatives", and "breastfeeding outcomes" using The Cumulative Index of Nursing and Allied Health Literature (CINAHL) and MEDLINE.
- Search results were limited to nursing journals, reviews, and systematic reviews. Search results were also limited to articles published within the last five years.
- The search results produced a total of 36 articles. 22 studies were excluded. 14 studies were determined to be relevant to this research and included in the study.



# **Reflections on Labor and Delivery Internship** Healthcare Influences on Breastfeeding

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	Resu	ults
	<ul> <li>Education</li> <li>It was found that a common deficiency exists in breastfeeding education received by hospital staff.</li> <li>Properly educated staff caused a 14.95% increase in the rate of exclusively breastfed infants.</li> </ul>	<ul> <li>B</li> </ul>
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60.00% 50.00%	53.55%	
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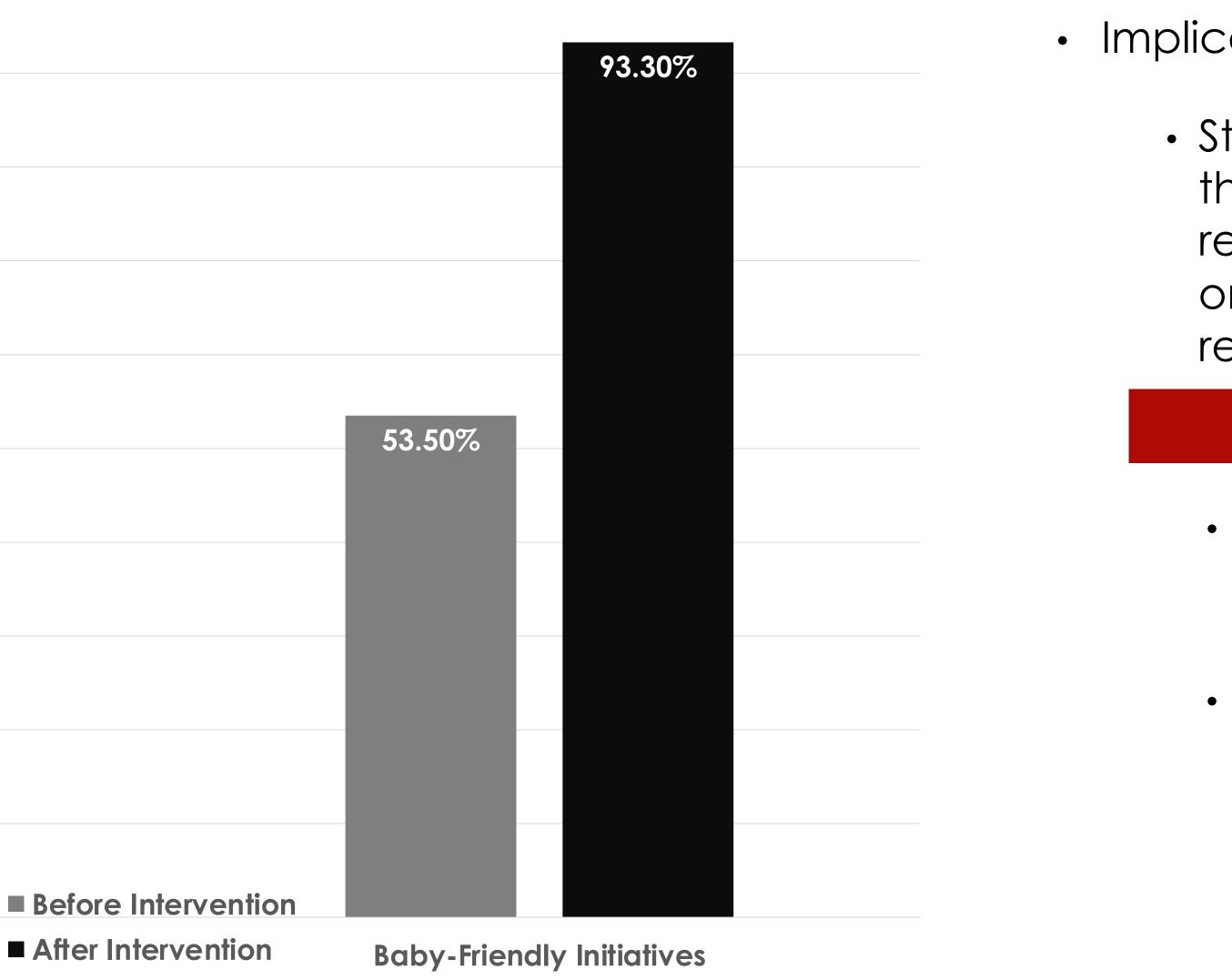


Staff education

This project was completed in collaboration with Dr. Hope Ballentine and Ms. Claire Cole.

- Baby-Friendly Hospital Initiatives
  - Baby-Friendly Hospital Initiatives have a 40% higher rate of exclusive breastfeeding than hospitals without Baby-Friendly accreditation.
- Healthcare Support
  - At least one face-face interaction with a specialized lactation consultant results in better breastfeeding outcomes at 6 months postpartum.

### oreastfeeding



### Figure 1. Rates of Exclusive Breastfeeding

Cassar, L., Bauley, C., Friesen, M., Brannon, M., Brown, L., Cross, T., and Zhou, Q. (2020). The influence of education and specialty certification on nurses' intent to support breastfeeding post-birth. The Journal of Perinatal Education, 29(4), 219-227. doi:10.1891/j-pe-d-19-00039

Wood, N. K., Woods, N. F., Blackburn, S. T., and Sanders, E. A. (2016). Interventions that Enhance BREASTFEEDING Initiation, duration, and exclusivity. MCN, The American Journal of Maternal/Child Nursing, 41(5), 299-307. doi:10.1097/nmc.0000000000000264

Yeh, C., Yang, Y. N., and Lee, B. (2020). The effects of a hospital-based Perinatal breastfeeding program on exclusive breastfeeding in Taiwan: A quasi-experimental study. Australian Journal of Advanced Nursing, 37(3). doi:10.37464/2020.373.81

# Discussion

 It is critical that healthcare staff in the women and infants' field are educated and prepared for the challenges that accompany breastfeeding.

• The Baby-Friendly Hospital Initiative has been particularly successful in increasing rates of breastfeeding.

Limitations

 The individualistic nature of breastfeeding makes it difficult to determine if hospital interventions or home support caused the mothers to continue breastfeeding.

Implications for further research

 Study designs were heterogenous due to the wide range of interventions researched. Future studies should focus on one intervention to obtain more accurate results.

Conclusions

 Both the knowledge and attitude of healthcare staff impact the success of breastfeeding.

 Healthcare professionals should implement supportive

breastfeeding interventions in order to promote the health of women

and infants.

References