

Insights

Mother Partners: Promoting Patient-Centered Policies to Support Breastfeeding

To improve breastfeeding rates, hospitals throughout New York State are implementing the Ten Steps to Successful Breastfeeding, which include evidence-based practices such as skin-to-skin contact between mother and baby immediately after birth and a baby staying in a mother's hospital room instead of a nursery (referred to as rooming-in). But to ensure that these best practices are being implemented in a way that truly benefit the mom-baby couplet, hospitals are tapping moms to be part of their change implementation teams.

[National rates of exclusive breastfeeding](#) for infants at 6 and 12 months remain as low as 40.7 percent and 18.8 percent respectively, despite the known benefits of breastfeeding for both infants and mothers. Mother partners and hospital teams work together in the New York State Breastfeeding Quality Improvement in Hospitals ([BQIH](#)) Collaborative to create better patient experiences so moms are empowered to make their own breastfeeding decision and remain committed long after they leave the hospital.

Mother partners play a key role in guiding how initiatives are communicated to new mothers and offering insight into the social context and individual obstacles that families carry with them into the delivery room. Specifically, mother partners have been influential in preparing training scripts for nurses about how to handle requests for formula from mothers with empathy and an educational focus.

“Staff attitudes can make or break breastfeeding success,” says Rebekka Henriksen, the mother partner faculty for the BQIH Collaborative. “It’s up to the hospital staff to skillfully communicate infant feeding options so that mothers don’t end up feeling shamed or judged, which can lead to resentment and rejection of breastfeeding.”

Presentations from mother partners about their personal breastfeeding journeys and lessons learned help staff understand how families interpret hospital policies. Julia Irvine, the mother partner for Crouse Hospital in Syracuse, recently gave a presentation about the profound impact healthcare providers’ own education and behavior can have on a mother’s decision to breastfeed and how long she continues to do so. For Irvine, having an exceptionally supportive provider after her second daughter was born with a congenital condition was the key to her breastfeeding success.

“The hospital should be both safe for mothers who have high-risk deliveries and supportive of setting up a breastfeeding relationship early on,” says Irvine.

Prenatal Education and Postpartum Support

In addition to efforts to address communication in the hospitals, mother partners have been instrumental in noting gaps in prenatal education. Irvine observes that “there is room for improvement for mothers who weren’t given a lot of information about breastfeeding prenatally.” Disseminating adequate information on hospital policy adjusts how families think about their stay.

“When they’re informed about new policies and their benefits, families come into the facility expecting skin-to-skin, 24-hour rooming in, and no pacifiers, rather than having that be sprung on them,” Henriksen says.

While hospitals are working to improve communication with moms who are pregnant or plan to become pregnant in the near future, they’ve also used this opportunity to improve postpartum practices for new moms. Breastfeeding support groups are being used to help fill that gap and educate mothers after they’ve been discharged.

“Peer sharing can really resonate more with families than hearing it from staff members,” Henriksen comments.

Henriksen has seen a “rippling out effect” of change in breastfeeding support because of the collaborative. Policy changes have trickled down as far as the emergency room, where breastfeeding resources, contact sheets, and referrals to lactation consultants are much more readily available than pacifiers or formula. Mother partners have played a key role in the successes of the collaborative thus far and will continue to provide feedback and share their stories until, as Henriksen envisions, “all facilities are putting the patient experience at the center of their care and staff is fully trained to support families in meeting their breastfeeding goals.”