

Insights

Bringing Breastfeeding Support to More Mothers and Caregivers



No mother should feel alone on her breastfeeding

journey. But for new mothers and caregivers, who are often operating on limited sleep and balancing the needs of their newborn with the demands of their home and work life, breastfeeding can be an overwhelming and sometimes isolating experience. That's what makes breastfeeding support, especially during those early months, so critical.

Lactation consultants, doulas, and breastfeeding support organizations provide mothers with timely and personalized advice to help them reach their breastfeeding goals. They can respond to questions that crop up throughout a caregiver's breastfeeding journey and give needed emotional support and validation.

"It's not always easy for all mothers to get this support though," says NICHQ Chief Health Officer Elizabeth Coté, MD, MPH. "In rural communities, where breastfeeding rates are lower, women have less access to lactation consultants, support groups and often each other. And even in urban settings, it can be difficult for mothers to find the time or money to travel back and forth to hospitals or classes."

These barriers make telelactation support an important approach for increasing breastfeeding rates—especially given that, in an increasingly digital age, there are multiple telelactation

support opportunities. In addition to over the phone, lactation consultants and counselors can support moms through video chats like Skype, via text message, or in online communities.

“We’ve become so digital,” says Rebekka Henriksen, a breastfeeding peer counselor for La Leche League and Mindful Parenting Leader. “It’s not surprising that we’re seeing fewer people attend in-person classes. It’s not only because of access; it’s also because younger generations seem to feel more comfortable talking online or through text than in person.”

Telelactation then is also an important opportunity to connect with this latest generation of mothers, as well as adolescent mothers who are already at risk for [not breastfeeding](#).

Henriksen, who is also a past Mother Faculty and Parent Faculty on the NICHQ-led [New York State Breastfeeding Quality Improvement in Hospitals Initiative](#), has considerable experience providing tele-support to breastfeeding mothers. Below, she offers insight and ideas to help other counselors and consultants make their virtual conversations really count.

Let mothers know *how* they can reach out to you

Whether you’re promoting your services on a website, social media or through local hospitals, be sure to include information on the types of tele-support you offer. For example, Henriksen gives advice to mothers through Facebook messenger, text messages, phone calls, and video conference. More options give mothers more opportunities to reach out, though Henriksen doesn’t rate all modes of communication equally.

“Texts can help get the conversation started and can be a little less daunting for mothers to initiate,” says Henriksen, “but we move to phone calls or video calls nine times out of 10. With text, we can’t hear what’s happening in the background and can’t respond to vocal cues, so it’s important to transition to a call if the mom agrees.”

Facebook messenger is also a valuable option because it encourages more expansive dialogue, perhaps because it uses the internet instead of cell phone data, families may be typing on their computer rather than their phone, or because it just feels more personal. Messenger also makes it easy for counselors and consultants to share links to videos and resources and review together in real-time. Video conferencing, like Skype, also can be done on computer, saving valuable mobile device data.

Make an extra effort to build trust

Without being in the same room with mom, it can be difficult to build the trust and comfort needed to support positive breastfeeding conversations. Henriksen recommends beginning all conversations with an open-ended question, such as “What did your last 24 hours look like?”, which encourages mothers to share what they’ve experienced and what they’re feeling.

“Acknowledging mom’s struggles, affirming her strength and commitment to her baby, reflecting back what we hear—these conversational tactics are important in any breastfeeding conversations, but they need even more emphasis when we aren’t having these conversations in

person,” says Henriksen. “Mothers can’t see the physical cues of your support, like you’re smiling, so remember to put extra effort into telling each mom what a great job she is doing.”

Similarly, since you cannot see mom, let her know what you’re hearing. Phrases like, “You sound stressed, can you tell me what’s going on?” show you’re really listening and interested in what she’s going through.

Consider hosting online meetings and events

According to Henriksen, virtual breastfeeding-support meetings are becoming increasingly attractive to mothers. These events can be created on Facebook, making it easy to spread the word by sharing through social media posts, emails, and list.serves.

At each event, Henriksen recommends providing an opening topic for attendees, such as, “What are your biggest breastfeeding challenges?”. When the event is live, families type their questions into the event feed and counselors and consultants respond with advice and resources. Mothers can scroll through the feed and reach out to one another, encouraging virtual peer-to-peer support.

Know when to ask for more information and when to refer

Many mothers worry that their baby is not getting enough milk. Asking mothers to share a video of them breastfeeding can help lactation counselors and consultants ascertain what’s going on, and provide tips to help the baby latch.

Henriksen stresses though that it is always important to refer mother to her local care provider if there are even small concerns that the baby is not thriving.

“If a baby is not gaining weight, if a baby has lost weight, if a baby is not eliminating or stooling frequently enough—any of these red flags require eyes on baby,” says Henriksen. “I also make sure to ask moms about their history: have they had babies who didn’t thrive in the past, or have they been through any medical complications. It’s really important to understand their background and be ready to refer if you hear anything that could be cause for concern.”

The significant potential of this virtual support reflects a need for continued innovative thinking, says Coté. “Innovative methods like these, which respond to mothers who might otherwise be overlooked on the margins are essential for improvement efforts. The more we do to meet mothers right where they are—medically, psychologically and geographically—to deliver individualized support that works in the context of their lived experience, the healthier our nation’s families will be.”

Interested in learning more about NICHQ’s work to improve breastfeeding rates? Read about this [national initiative](#) to promote safe sleep and healthy breastfeeding or read [this case study](#).