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## **NURSE'S ROLE IN SUCCESS FOR BREASTFEEDING: REVIEW OF LITERATURE**

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## ABSTRACT

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**Objective:** To analyze, in the available scientific literature, information on the nurses' promoted interventions towards breastfeeding success.

**Methods:** Review of the Literature with research in electronic databases CINAHL Plus with full text and Medline with full text, at EBSCOhost, using keywords: nurs\*, education and breastfeeding. The final sample included 9 articles.

**Results:** The selected articles showed the need of training to nurses who care for breastfeeding mothers, being their training crucial to breastfeeding outcomes; nurses' training programs appear to be effective in improving breastfeeding rates; the support which midwives and breastfeeding councilors provide is more effective when compared to other professionals' support; in order to obtain success in this practice, it is necessary to invest in mothers' emotional support, provide effective support in breastfeeding and invest in the continuity of this process throughout home visits.

**Conclusions:** The findings show a high aplicability to a quality nursing practice to breastfeeding mothers.

**Descriptors (MeSH):** Nurses; breast feeding; education.

## INTRODUCTION

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The World Health Organization (WHO) advocates exclusive AM up to 6 months and, from this age onwards, the timely introduction of adequate and nutritionally safe complementary foods while continuing to breastfeed for a period of two years or more<sup>(1)</sup>.

Breastfeeding is socially contextualized, being strongly influenced by the approval of the belonging group<sup>(2)</sup>. Both common sense and scientific knowledge play a significant role in women's decisions. Nurses often focus on the biological dimension, taking into account historical, cultural and social aspects, with discourses based on paternalistic and punitive norms. It is observed that health professionals assume a normalizing and regulatory role of breastfeeding practices, being considered authorities for the establishment of the feeding pattern. Postpartum women generally behave according to their experiences or information transmitted to them, adopting practices that are common to the group to which they belong<sup>(3)</sup>.

In the puerperium, the mother's emotional state and other psychological conditions, including her own personality, may lead her to give up breastfeeding and/or to feel less motivated to breastfeed. In this sequence of facts the nurse has a privileged position, in terms of the self-esteem of the puerperas who breastfeed, and can provide emotional, instrumental, informative and social support. However, by providing inadequate, contradictory, and inaccurate information, which is often due to a lack of knowledge about breastfeeding, it can negatively influence the success of breastfeeding<sup>(4)</sup>. In contrast, other authors report that most nurses have up-to-date knowledge and are more evident with regard to the benefits and duration of breastfeeding. In their studies they also observed that the information quality of nurses was superior to that of physicians and that professionals were more effective in theory than in practice<sup>(5-6)</sup>.

The quality of multidisciplinary relations influences the effectiveness of interventions, being more effective when practitioners work in teams, take on the role of facilitators, and share experiences when their relationships are strong<sup>(7)</sup>.

Nurses are an essential resource in breastfeeding and specialized training contributes positively to the acceptance of puerperae in the option of breastfeeding, thus being a recognized resource, and intervention must occur throughout the gestational cycle, delivery and postpartum.

In the same way, for the success of breastfeeding, it must be taken into account that it is during the period of postpartum hospitalization that the parents should be instructed, but this period has been increasingly shortened, thus affecting the intervention of professionals of nursing. At the time of hospital discharge, many parents have feelings of insecurity because the guidelines are numerous, which also leads to these parents having difficulty learning.

In this sense, the objective of this review of the literature consisted in gathering up-to-date and pertinent scientific evidence on the breastfeeding practices promoted by nurses.

## METHODS

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The methodology is the set of methods and techniques that guide the elaboration of the scientific research process<sup>(8)</sup>. To answer the topic under study, the research question was first defined.

The question of research was defined based on the classification PI (C) OD - Participants, Interventions, (Comparisons), Results, Design<sup>(9)</sup>: What are the nursing interventions (I) which promote breastfeeding success (O)?

We then proceeded to search the electronic databases CINAHL Plus with full text and Medline with full text, on the EBSCOhost platform.

The following research expression was introduced, consisting of the descriptors and booleans nurs\* AND education, AND breastfeeding, obtaining 26 results. It was noted that the same article appears repeated in different databases.

Then, as inclusion criteria, articles in the Portuguese and English languages, published between 1998 and 2016, were established in an accessible text that corresponded to the theme outlined. As exclusion criteria, articles were published in languages other than English and Portuguese, published before 1998, which were not available in accessible text and had no correlation with the subject under study.

Thus, a first selection was made attending to the title and summary of the articles, seeking agreement with the subject under study, having been excluded 17 articles. Thus, 9 articles were verified.

Studies were selected whose results describe nursing interventions that promote breastfeeding success and which are qualitative, quantitative or mixed in their design.

## RESULTS

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The analysis of the different scientific articles, included in this literature review, consisted of its objective, method, participants and results (Table 1).

Table 1 - Summary of the sample studies

Studies	Authors (Year), Country	Design, Purpose of the study	Participants	Method, Interventions	Results
E1	Tarkka, Marja-Terttu; Paunonen, Marita; Laippala, Pekka (1998) Finland	Exploratory-descriptive study. To obtain information on the factors that contribute to the success in the establishment of breastfeeding in primiparous mothers during hospitalization in the maternity ward.	n= 326 primiparous mothers	Questionnaire distributed between January and May 1995, to a sample of 326 primiparous mothers who answered the questionnaire on the fifth day after delivery. A logistic regression analysis was applied.	<p>Mothers who had a positive experience of breastfeeding in the maternity ward and who started lactation 2\3 days after delivery coped better with the breastfeeding process than mothers who experienced less positive experiences and who started lactation later.</p> <p>Mothers who received emotional encouragement and concrete support in the breastfeeding process from professional support networks report having handled better the breastfeeding process, unlike those whose support was not so personalized and directed, having negatively impacted the way they dealt with breastfeeding.</p>
E2	Cook, Angel; Hirth, Robin (2014) USA	Program implemented in medical and surgical units of 4 hospitals, where mothers with problems related to childbirth and who demonstrate needs related to breastfeeding.	It is not indicated	Program in which guidelines Baby Friendly Hospital have been implemented. The objective was to fill in and training gap of Nurses who care for these women outside the area of Obstetrics.	<p>Training on the MA was provided to all Emergency and medical-surgical nurses. The implementation included 60-minute PowerPoint presentations directed at 13 Services for one month. The topics covered were related to the MA policy, equipment, safe medication and resources. The results and the evaluation included short- and short-term data - in the short term, data were obtained after the sessions and in the long term the number and type of requests that the nurses made to lactation specialists were evaluated in the future.</p>

Table 1 - Summary of the sample studies

Studies	Authors (Year), Country	Design, Purpose of the study	Participants	Method, Interventions	Results
E3	McKeever, Patricia [et al] (2002) Canada	Experimental study. The objective of this study was to compare the effects of hospital support on breastfeeding and home support in terms of breastfeeding success outcomes and on the satisfaction of mothers of term newborns who experienced highs according to protocol or high preterm infants.	n = 132 women, pregnant of term and near the term (35-37 weeks).	The dyads were divided into 2 groups: control group (received standard and high hospital care according to protocol); experimental group (they received standardized hospital care, with early admissions and with home support provided by nurses advisors in AM). Data collection occurred prior to randomization and stratification after hospital discharge between the 5th and 12th day postpartum.	<p>The main results include breastfeeding rates and the degree of satisfaction of the mothers. A larger number of mothers of term newborn infants in the experimental group breast-fed exclusively at follow-up, compared to those in the control group. There were no significant differences in near-term mothers between the two groups.</p> <p>Apparently home support from counselors in AM appears to allow positive breastfeeding outcomes for mothers of full-term newborns. This model of postpartum care may also be beneficial for mothers of newborns near term, however more research is needed. The findings suggest implications for caregivers and decision-making policies regarding postpartum lactation and health services.</p>

Table 1 - Summary of the sample studies

Studies	Authors (Year), Country	Design, Purpose of the study	Participants	Method, Interventions	Results
E4	Escobar, Gabriel J. [et al] (2001) USA	Randomized, comparative study. Short-term postpartum hospitalization is a common situation. There is little guidance on postpartum dyadic follow-up routines. This study compares two groups of low-risk women / newborns: home visit (experimental group) and hospital group visits (control group).	N=1014	During 17 months, in the 1998-1999 period, 1014 dyads were randomized and enrolled, 506 in the control group and 508 in the experimental group. In the control group 264 dyads had an individual visit, 157 had a group visit to the hospital and 68 had both visits, 17 had no follow-up. During these visits, breastfeeding and symptoms of maternal depression were evaluated. Subsequently, maternal satisfaction was evaluated by telephone after 2 weeks.	With this study, it can be concluded that despite the high costs associated with individualized home visits, mothers who had a postpartum home visit showed a marked degree of satisfaction, as well as greater success in breastfeeding.
E5	Ngai, Fei-Wan; Chan, Sally WC; Holroyd, Eleanor (2011) Hong Kong, Singapore and Australia	Descriptive exploratory study. The objective was to study the factors that affect maternal competence in early motherhood, the sense of competence and satisfaction in the role of mother.	N=26	Participation of 26 primiparous women in a psychoeducational program for childbirth and child well-being, interviews 6 weeks after childbirth.	These women looked at maternal skills such as making a commitment to take care of the child's physical and emotional well-being, cultivating appropriate values in childhood, using personal knowledge and childhood care experiences, and succeeding in breastfeeding. Lack of social support and contradictory information from various sources are the factors that influence more maternal skills. Health professionals can empower women by providing information, support and positive experiences, particularly with regard to breastfeeding by creating a supportive network.

Table 1 - Summary of the sample studies

Studies	Authors (Year), Country	Design, Purpose of the study	Participants	Method, Interventions	Results
E6	Bernaix, Laura W [et al] (2010) USA	Experimental study. The objective was to be the effect of a breastfeeding education program, in order to improve the knowledge of Nurses of Maternity, thus giving better support and support to mothers.	N= 240 nurses from 13 maternity hospitals	An experimental group and a Control group were created. The nurses who attended the program answered two questionnaires, one before the program started and another at the end. In the control group, they also answered 2 questionnaires, also with 4-6 weeks interval, without access to the program.	Findings suggest that educational strategy improves nurses' knowledge of breastfeeding, as well as attitudes, beliefs, and support for breastfeeding mothers. This study module is guided by a staff member trained and resident in the service and can be considered an effective cost-effective strategy to improve Nurses' knowledge about breastfeeding, thus improving breastfeeding education for mothers. Nurses may consider this modality of teaching less intimidating than a classroom structure and more suited to their schedules.
E7	Ekstrom, Anette; Widstrom, Ann-Marie; Nissen, Eva (2006) Sweden	Experimental study. The objective was to study whether mothers attended by midwives or counselors in AM have a better continuity in breastfeeding, emotional control and information about breastfeeding than mothers receiving routine education.	n= 540 Swedish-speaking mothers of healthy term infants from 10 counties	Study conducted in 10 municipalities, in each one there is a prenatal center and another child care center. It consisted in a process of training, counseling and training in breastfeeding before and after delivery in the respective care centers (experimental group). Mothers answered 3 questionnaires at 3 days\3 months\9 months after delivery.	Women who received information from midwives and Nurse Counseling Nurses have significantly more support than mothers who have received routine instruction. Mothers showed more satisfaction, more informational support, and emotional support during the first 9 months of the baby's life. This study focuses on the need to continue monitoring women in the postpartum period, in order to ensure continuity of care, maintenance of knowledge and improvement of mothers' perception of support.



Table 1 - Summary of the sample studies

Studies	Authors (Year), Country	Design, Purpose of the study	Participants	Method, Interventions	Results
E8	Minert, Gina L. (2014) USA	Program implemented in a hospital. The objective was to share results about breastfeeding with other hospital units in order to promote higher levels of exclusive AM.	It is not indicated	<p>In 2011, St. Lukes Medical Center established a multidisciplinary AM committee to increase exclusive breastfeeding rates, through the work developed by this committee, changes were introduced in daily practice based on scientific evidence to promote and ensure exclusive AM such as postponing routine procedures to the newborn, promoting skin-to-skin contact in the first hour of life, and adopting 5 measures of support and encouragement for breastfeeding.</p> <p>All nurses who provide care for the postpartum dyad were trained by this committee, and policies, procedures, and performance standards were maintained to ensure commitment and motivation for the team providing direct care. Couples were trained on the benefits of using LM. This health care unit invested in the acquisition of breastfeeding pads and pump extractors in all wards, which was an asset to breastfeeding mothers. Finally, prenatal classes on breastfeeding were created, as well as support groups that ensure follow-up after hospital discharge.</p>	Within two years the hospital was able to reach and exceed milestones related to exclusive breastfeeding from an effective rate of 34.1% to 85.7%. The results allowed the team to demonstrate evidence of gains in the success of exclusive AM.

Table 1 - Summary of the sample studies

Studies	Authors (Year), Country	Design, Purpose of the study	Participants	Method, Interventions	Results
E9	Vicki; Cragg, Betty (2006) Canada	Description of a prenatal workshop on breastfeeding developed for primiparous women to increase self-efficacy in breastfeeding in the immediate postpartum period. The review shows that self-efficacy in breastfeeding is defined by the mother's self-confidence and ability to breastfeed. The Workshop is based on Bandura Theory and teaches strategies.	It is not indicated	<p>The workshop lasts 2.5 hours in the last trimester of pregnancy, in which only 8 women with partners can participate in the maximum.</p> <p>It includes 5 topics: preparation for breastfeeding, signs of baby satisfaction, positioning of the mother and baby in breastfeeding, how to know the handle is well made and coping tips. Strategies that include Bandura's theory are: breastfeeding simulation and give couples the opportunity to simulate and develop skills, to learn through the experiences of other mothers, to empower through persuasion and to enumerate strategies to reduce the emotional, physical stress of the post- childbirth.</p>	<p>Factors that influence the duration of breastfeeding: statistics indicate that maternal age, level of schooling, economic power, stable marital relationship, will be the duration of breastfeeding, and can not be influenced by the support of the Nurse. In Canada the main reason why women breastfeed less than 6 months is fatigue, difficulty with the technique, lack of information and support. In these cases the health professionals can intervene. The Bandura Theory says that achievement, performance, learning by repetition, verbal persuasion, and a positive physiological state promotes self-efficacy in breastfeeding. This workshop may be important for Nurses and Counselors in AM to improve support for mothers who want to breastfeed.</p>

After reading the selected articles, the content of the studies was analyzed in order to extract the nursing interventions that were intended to answer the research question.

From the analysis of the articles, two categories emerged, one of them being nursing interventions for breastfeeding mothers and the other aimed at the training needs of nurses and other health professionals.

The evidence contained in the articles allowed us to identify as nursing interventions that promote breastfeeding success, emotional stimulation and concrete support in breastfeeding<sup>(10)</sup>. These strategies allow us to deal better with the process, not only when it is referred to hospital support, thus giving focus to home support<sup>(11)</sup>, because there is evidence that those who receive these two types of support have higher satisfaction, as well as higher rates of successful exclusive breastfeeding<sup>(11-12)</sup>. Another nursing intervention in evidence is the Workshop during pregnancy focused on the increase of knowledge and skills of parents in pregnancy, supported in the Theory of Bandura<sup>(13)</sup>, to improve the support of women who intend to breastfeed.

There are also data on the nature of the support that midwives and breastfeeding counselors can provide to mothers, and this support is more effective when compared to support provided by other professionals<sup>(14)</sup>. Emotional support and satisfaction are also greater when support is provided by midwives and counselors.

The postpartum home visit emerges as an important postpartum intervention for the success of breastfeeding<sup>(11-14)</sup>, in order to promote continuity of care.

An important finding is the lack of support and the provision of contradictory information<sup>(15)</sup> that conditions the success of breastfeeding. This finding makes it possible to conclude the need for training of professionals who support mothers in breastfeeding, making it possible to establish a link with the remaining evidence found in the review, which refers to the need for professional training.

Studies that refer to the evaluation of improvement programs in institutions providing care for breastfeeding mothers reveal that they lead to an increase in the rate of exclusive breastfeeding effectiveness and improved outcomes in breastfeeding, respectively<sup>(16-17)</sup>. These programs include professional training and policy updating.

Nursing education emerges as an important intervention to improve the knowledge, attitudes, beliefs and support of breastfeeding mothers<sup>(18)</sup>.

In this way, we can consider:

- There is a need for training of professionals who provide care for breastfeeding mothers;
- Training of caregivers of breastfeeding mothers is crucial for outcomes in breastfeeding;
- Training programs for caregivers of breastfeeding mothers may be effective at rates of breastfeeding effectiveness;
- The support breastfeeding mothers and counselors provide to breastfeeding mothers is more effective when compared to support from other providers;
- Success in breastfeeding requires investing in emotional support for mothers, providing concrete support in breastfeeding, and continuing the process through home visitation.

## CONCLUSIONS

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From the selected studies, the importance of nursing interventions emerged, both in the direct care delivery of the practice and in the care organization, in which the promotion of training provided by breastfeeding counselors (through programs) emerges as an important way to achieve health gains in the promotion and effectiveness of breastfeeding.

At the level of direct care, concrete support, emotional support and home visitation are interventions that can be carried out and that promote the success of breastfeeding. At the level of the management of care, the recognition that training plays an important role in the improvement of the practices of the professionals becomes important, resulting in health gains for women who intend to breastfeed. Breastfeeding counselors seem to offer more effective support to breastfeeding mothers, suggesting investment in training professionals in this area.

The evaluation of programs to improve care practice in this area, namely the updating of policies, leads to an increase in the rate of exclusive breastfeeding effectiveness and improved outcomes in breastfeeding. This data can and should be, like the previous ones, transposed to the practice of the organizations fomenting the improvement of the quality of the care given to the women who breastfeed.

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