Considering Breastfeeding? Here’s what you need to know!
Patient Education on the Benefits of Breastfeeding

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Introduction

Breastfeeding is a natural process that has been around since the first baby was born. Breastfeeding not only creates an opportunity for a bonding experience between mother and child, but also decreases the cost of caring for an infant (“Breastfeeding”). The benefits of breastfeeding do not stop here; breastfeeding provides significant health benefits to mother and baby (“Breastfeeding”). The Surgeon General has noted benefits of breastfeeding and has established objectives to increase the rates of breastfeeding across the United States. With all the attention on breastfeeding and plans to increase the rates of breastfeeding, why are so many moms in Mississippi deciding not to breastfeed? I created my project to research if mother’s decision not to breastfeed stemmed from not being exposed to the benefits of breastfeeding by providers. The objective of my project was to determine if mothers in Mississippi are deciding not to breastfeed because of lack of information about the benefits of breastfeeding and to educate expecting mothers about the benefits that breastfeeding provides. My project was conducted at the Jackson Hinds Comprehensive Health Center by surveying participants to understand mother’s perception on breastfeeding, to research the exposure to the benefits of breastfeeding by providers, and to increase the number of mothers that decide to initiate breastfeeding. I was able to accomplish this through the use of surveys and handouts.
The Center of Disease Control and Prevention Immunization Survey collects data on the rate of breastfeeding and uses it to create a breastfeeding report card. Data is collected in several categories including ever breastfed, breastfeeding at 6 months, breastfeeding at 12 months, exclusive breastfeeding at 3 months, exclusive breastfeeding at 6 months, and several other categories. In the categories listed above the rates of breastfeeding for Mississippi mothers ranks 50th in the nation for all categories, except exclusively breastfeeding at 6 months ("Breastfeeding Report Card"). The rate of exclusively breastfeeding at 6 months in Mississippi ranks 49th in the nation, only slightly beating out Tennessee by 1 percentage point. In some categories Mississippi rates of breastfeeding are over 20 percentage points off of the national average ("Breastfeeding Report Card"). There is no other state that ranks low across the board like Mississippi. Others state may be very low in one or two categories, but not all like Mississippi. The rates of breastfeeding for Mississippi and states next closest to Mississippi can be found in Appendix A. Most recent data that has been collected is for births that occurred in 2010.

Healthy People 2020 developed by the surgeon general uses data collected about the rate of breastfeeding from the Centers of Disease Control and Prevention Immunization Survey to create breastfeeding objectives ("Breastfeeding Report Card"). Healthy People 2020 outlines several objectives targeted at increasing the proportion of infants who are breastfed ("Maternal, Infant, and Child Health"). The objectives are to increase the portion of infants who are ever breastfeed as well as infants who are breastfed at 6 months and 1 year ("Maternal, Infant, and Child Health"). There are also objectives that aim to increase exclusive breastfeeding, increase worksite lactation support programs, and decrease formula supplementation within the first 2 days of life for breastfed newborns ("Maternal, Infant, and Child Health").

Healthy People places large emphasis on breastfeeding, because of the serious health benefits that breastfeeding provides. These health benefits are not only to the child, but also to the mother. Breastfeeding has been found to decrease the risk of an infant developing obesity, type 2 diabetes, asthma, necrotizing enterocolitis, and sudden infant death syndrome ("Breastfeeding"). Breastfeeding provides babies with protection
against allergies, helps babies defend against infections and eases digestion with lower rates of diarrhea and constipation ("Breastfeeding"). Breastfeeding has been reported to help mothers return to pre-pregnancy shape and weight faster, but also may lower the risk of developing breast, ovarian and uterine cancer. Breastfeeding also lowers the risk of developing high blood pressure, diabetes, and cardiovascular disease ("Breastfeeding").

**Methodology**
During the first two weeks of my program I worked extensively with Women, Infants, and Children (WIC) providers to create my surveys and handouts that will be provided to patient. I also was able to learn from the WIC providers about the myths regarding breastfeeding that I may encounter when discussing breastfeeding with patients. Near the end of the second week, I began reaching out to lactation consultants and La Leche League Group leaders to learn about the support groups for breastfeeding moms in Mississippi. During the third week, I began surveying moms that visited the WIC office. At this point my handouts about the benefits of breastfeeding were not completed and I was able to refer patients with question to the lactation consultant in the WIC office. My fourth week was spent surveying patients, educating them about the benefits of breastfeeding, and providing patients with handouts. During this time I also started developing an infinity scarf nursing cover to present at my breastfeeding event. The fifth week I was able to complete my surveys as well as give presentations and talk with several expecting moms and moms of infants about the benefits of breastfeeding.

**Tools**
Surveys were administered verbally to expecting mothers and mothers in childbearing years. Sample of surveys can be found in Appendix B.

1. Surveys were administered to expecting mothers:
   a. to gather demographic information
   b. to determine their likelihood to breastfeed
   c. to understand their perception of breastfeeding
d. to learn about their exposure to the benefits of breastfeeding by obstetric providers

2. Surveys were administered to mothers in child bearing years:
   a. to gather demographic information
   b. to examine their record of breastfeeding
   c. to understand their perception about breastfeeding
   d. to learn about their exposure to the benefits of breastfeeding by obstetrics and pediatrics providers.

   Handouts were provided to expecting moms based on their reported likelihood to breastfeed. Moms reporting a likelihood to breastfeed of 8-10 on a 1-10 scale were provided The Congratulations on your Decision to breastfeed handout. Expecting moms reporting a likelihood to breastfeed of 2-7 on a 1-10 scale were provided The Considering breastfeeding? Here’s what you need to know handout. Moms reporting a likelihood to breastfeed of 1 were asked if they would like a handout and provided with The Considering breastfeeding? Here’s what you need to know handout, if they replied yes. Samples of handouts can be found in Appendix C. The handout was reviewed with each participant and any questions they had were answered.

Results

Survey of 34 Expecting Mothers

59% of expecting mothers reported their OB physician never mentioned how breastfeeding benefits mothers. 47% of expecting mothers reported their OB physician never mentioned how breastfeeding benefits babies. 56% of expecting mothers reported their OB physician never mentioned breastfeeding classes of support groups for breastfeeding moms. Complete graphs of results from survey questions are located in Appendix D. Expecting mother’s likelihood to breastfeed graph can be found in Appendix E.

Surveys of 19 Mothers in Childbearing Years

42% of mothers in their child bearing years reported their OB physician never mentioned how breastfeeding benefits mothers. 44% of mothers in their child bearing years reported their OB physician never mentioned how breastfeeding benefits babies.
26% of mothers reported their child’s pediatrician never mentioned the benefits of breastfeeding. 37% of mothers in their child bearing years reported their physician never mentioned breastfeeding classes or support groups for breastfeeding moms. Two mothers reported they would not breastfeed any future children and two mothers reported they may breastfeed future children. Complete graphs of results from survey questions are located in Appendix F.

Discussion

Nearly 3 out of every 5 expecting mothers had not been informed that breastfeeding helps reduce the risk of some cancers and helps return them to pre-pregnancy weight and shape faster. Almost half of expecting mothers reported their OB physician never mentioned that breastfeeding helps decrease the risk for obesity, SIDS, asthma, and diabetes. These percentages closely resemble the number of mothers that decided not to breastfeed as reported by the CDC. Roughly half, 49.5%, of mothers reported never breastfeed, which maybe attributed to the greater than fifty percent of mothers that are never educated by providers on the benefits of breastfeeding.

Numbers of participants never educated on the benefits of breastfeeding decreases slightly when examining mothers in their child bearing years. This can be attributed to a number mothers expecting their first that have not had a large number of prenatal visits. After combining both surveys to create a larger pool of mothers in childbearing years, 21 out of 41 participants reported that providers never mentioned the benefits of breastfeeding. This takes into account that some providers discuss breastfeeding closer to end of the pregnancy, disregarding mothers expecting their first child who have not brought a pregnancy to term. While disregarding first time expecting mothers, over fifty percent of mothers still reported that providers never mentioned the benefits of breastfeeding.

A mother’s likelihood to breastfeed did increase slightly as the number of children the mother already had increased, with the exception of mothers pregnant with their fifth child. This can be attributed to the survey pool being very small for mothers pregnant with their fifth child. There were only two participants in this survey pool. Participants
Further Research Possibilities
Further research possibilities would include surveys of providers about their perception of breastfeeding and its importance. The survey would be targeted to determine if physician feels he or she plays a role in a mother's decision to breastfeed, to understand what providers are doing to promote breastfeeding, and to see what providers know about the importance of breastfeeding. I would also expand the survey for Expecting Mothers and Mothers in Childbearing years. My survey would include questions to gather information on where the participants visited the doctor, to determine more specifically why participants are and are not deciding to breastfeed, and

**Recommendations**

My recommendations for Jackson Hinds Comprehensive Health Center is to become baby friendly. The Mississippi Breastfeeding coalition has presented a 10 steps process for becoming a baby friendly pediatric and obstetric practice adapted from Massachusetts Breastfeeding Coalition (Walker). Becoming baby-friendly means that the facility offers an optimal level of care for infant feeding and mother/baby bonding ("BABY-FRIENDLY HOSPITAL INITIATIVE"). Jackson Hinds is already in the process of completing some of the steps that it takes to become baby friendly. One of those steps involves the creation and implementation of a breastfeeding promotion and support policy. My project would play an integral role in the completion of this step by creating a policy for providing handouts to expecting mothers throughout their pregnancy to explain the benefits of breastfeeding. The development of the newborn classes that promotes breastfeeding as well as provide over vital information to care for newborns and infants, will also be able to fulfill some of the steps needed to become baby friendly.

**Conclusion**

Obstetrics providers are not discussing the benefits of breastfeeding with expecting mothers on a consistent basis. Over 50% of the participants I surveyed reported that their obstetric provider never mentioned the benefits of breastfeeding to them. This lack of patient education maybe directly linked to the low rate of breastfeeding in the state of Mississippi. Discussing the benefits of breastfeeding is not
a top priority for providers, but needs to become one to improve the health of Mississippi.

Reference


Appendix

Appendix A. Table of Breastfeeding Statistics
Appendix B. Surveys
Appendix C. Handouts
Appendix D. Graphs of Results from Surveys of Expecting Mothers (Graph 1-3)
Appendix E. Graph of Results from Surveys of Expecting Mothers Likelihood to Breastfeed (Graph 4)
Appendix F. Graphs of Results from Surveys of Mothers in Child Bearing Years (Graph 5-8)
### Appendix A.

#### Table 1. Breastfeeding statistics

<table>
<thead>
<tr>
<th>State</th>
<th>Ever Breastfed</th>
<th>Breastfeeding At 6 months</th>
<th>Breastfeeding At 12 months</th>
<th>Exclusive breastfeeding at 3 months</th>
<th>Exclusive breastfeeding at 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. National</td>
<td>76.5</td>
<td>49.0</td>
<td>27.0</td>
<td>37.7</td>
<td>16.4</td>
</tr>
<tr>
<td>Mississippi</td>
<td>50.5</td>
<td>19.7</td>
<td>9.1</td>
<td>17.0</td>
<td>5.1</td>
</tr>
<tr>
<td>Kentucky</td>
<td>52.6</td>
<td>32.5</td>
<td>18.9</td>
<td>33.4</td>
<td>14.4</td>
</tr>
<tr>
<td>Arkansas</td>
<td>57.7</td>
<td><strong>24.2</strong></td>
<td>14.4</td>
<td>22.5</td>
<td>9.2</td>
</tr>
<tr>
<td>Georgia</td>
<td>68.2</td>
<td>31.8</td>
<td><strong>12.9</strong></td>
<td>22.2</td>
<td><strong>6.2</strong></td>
</tr>
<tr>
<td>Tennessee</td>
<td>59.6</td>
<td>29.9</td>
<td>16.8</td>
<td><strong>17.9</strong></td>
<td>4.1</td>
</tr>
</tbody>
</table>

Source: Centers for Disease Control and Prevention National Immunization Survey (NIS), Provisional Data, 2010 births. The 2010 provisional rates are based on the landline telephone sample in NIS to maintain comparability with previous years in the decade when only a landline sample was available. Limiting to the landline sample for 2010 births has resulted in a smaller sample size and larger margin of error than previous years. On average, the state specific rates reported here have a margin of error of ±8.4 percentage points, based on a 95% confidence interval.

### Appendix B. Surveys
Survey of Mothers in Child Bearing Years

1. Select your age range:
   a. 15-20   b. 21-25   c. 26-30   d. 31-35   e. 36-40

2. Select your highest level of education:
   a. Did not finish or currently in high school
   b. High school diploma/GED
   c. Some College
   d. College Graduate
   e. Master's degree or Higher

3. How many children do you have and what is/are their age(s)?
   a. 1  b. 2  c. 3  d. 4  e. 5 or more
   Age(s) ________ ________ ________ ________ ________

4. Do you qualify for WIC?
   a. Yes  b. No

5. Did you breastfeed any of your children? – Or – Are currently breastfeeding?
   a. Yes  b. No

6. If you answered #5 was YES, how long did you plan on breastfeeding?
   a. 0-3 months
   b. 4-6 months
   c. 7-9 months
   d. 10-12 months

<table>
<thead>
<tr>
<th></th>
<th>Discussed Frequently</th>
<th>Discussed a few times</th>
<th>Might have mentioned</th>
<th>Never mentioned</th>
<th>I don’t remember</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Did your physician talk to you about breastfeeding classes or support groups for breastfeeding moms?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>8. Did your OB physician explain the benefits that breastfeeding provides to your child?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>9. Did your OB physician explain the benefits that breastfeeding provides to you, the mom?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>10. Did your child’s pediatrician discuss the benefits of breastfeeding with you?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
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11. What do you think is the best nutrition for your baby?
   a. Formula
   b. Breast Milk
   c. Cow’s Milk
   d. Baby Food

12. If you did not breastfeed, would you have changed your mind about breastfeeding if you had more information?
   a. Yes
   b. Maybe
   c. I don’t know
   d. Probably not
   e. I made the right decision

13. Would you consider breastfeeding any future children?
   a. Yes
   b. Maybe
   c. I don’t know
   d. Probably not
   e. No

14. What would be your biggest (resentment or turn off) to breastfeeding?
Survey of Expecting Mothers

1. Select your age range:
   a. 15-20  b. 21-25  c. 26-30  d. 31-35  e. 36-40

2. How far along are you?
   a. 0-12 weeks  b. 13-26 weeks  c. 27-40 weeks

3. Select your highest level of education:
   a. Did not finish or currently in high school
   b. High school diploma/ GED
   c. Some College
   d. College Graduate
   e. Master's degree or Higher

4. How many children do you have and what is/are their age(s)?
   a. 0  b. 1  c. 2  d. 3  e. 4 or more
     Age(s) __________  __________  __________  __________  __________

5. Do you qualify for WIC?
   a. Yes  b. No

6. How likely are you to breastfeed? (Scale of 1 – least likely to 10 – most likely)
   1  2  3  4  5  6  7  8  9  10

7. If you decided to breastfeed, do you feel you would be supported? (Select all that apply)
   a. Family
   b. Job
   c. Child’s Father
   d. Day Care

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11. What do you think is the best nutrition for your baby?
   a. Formula
   b. Breast Milk
   c. Cow’s Milk
   d. Baby Food

12. If you have decided not to breastfeed, would you change your mind if you had more information?
   a. Yes
   b. Maybe
   c. I don’t know
   d. Probably not

13. What is/would be your biggest (resentment or turn off) to breastfeeding?
Appendix C. Handouts

Congratulations on your decision to breastfeed!

How breastfeeding benefits your baby:
- Helps defend against infections by antibodies passing from mom to baby
- Provides protection against allergies, asthma, diabetes, obesity, and Sudden Infant Death Syndrome, SIDS
- Eases digestion with lower rates of diarrhea and constipation

How breastfeeding benefits you:
- Helps mom return to pre-pregnancy shape and weight faster
- Lowers the risk of mom developing breast cancer, high blood pressure, diabetes, and cardiovascular disease
- May decrease mom's risk of uterine and ovarian cancer
- Breastfeeding is FREE!
- Allows mom to work more, having to take less time off to care for a sick child. (Breastfeeding reduces trips to the doctor's office with sick babies.)

How long should you breastfeed?
- The American Academy of Pediatrics (AAP) suggest that you should breastfeed your baby just breast milk for the first six months. Breastfeeding is then encouraged by the AAP until 12 months, longer if baby and mom are willing.

What does WIC do to assist breastfeeding?
- Breastfeeding mothers are able to participate in the WIC program longer than mothers that do not breastfeed. Breastfeeding mothers are also able to receive follow-up support through peer counselors. Mothers that decide to breastfeed can receive breast pumps, breast shells or nursing supplements to help support their decision. Mothers that exclusively breastfeed receive an enhanced food package.

Support Systems—
- La Leche League — This is a group of mothers that share experiences, offer encouragement and support, while also providing suggestions about breastfeeding. These groups may have meetings to discuss the benefits of breastfeeding, avoiding difficulties, bringing your baby home, along with nutrition and weaning.
- Lactation Consultants — These are healthcare professionals that specialize in the clinical management of breastfeeding.

Contact Information—
- Mississippi State Department of Health — (601) 999-0000
- Lactation Consultants —
  - Rochelle Fields — (601) 362-5321 Ext. 1241
  - Kathy Juev — (601) 415-0671
- University of Mississippi Women's Care — (601) 994-BABY

Need more information — Check out these websites:
- http://www.illinoisla.org/fac/
- http://www.ummchealth.com/prenatalclasses/
- http://www.mdh.ms.gov/mdh/site16_statc41/0_144.html

Mississippi Laws about breastfeeding in public — "A mother may breastfeed her child in any location, public or private, where the mother is otherwise authorized to be, without respect to whether the mother’s breast or any part of it is covered during or incidental to the breastfeeding. Breastfeeding mothers may not be discriminated against at the workplace or by law enforcement personnel in any capacity." — Mississippi Breastfeeding Coalition

CONSIDERING BREASTFEEDING? Here's what you need to know!

Why should you breastfeed?
Breastfeeding provides serious health benefits to you and your child. Breastfeeding is also FREE, which allows you to save up to 1000 dollars that would have been spent on buying baby formula.

How breastfeeding benefits your baby?
- Helps defend against infections by antibodies passing from mother to baby
- Provides protection against allergies, asthma, diabetes, obesity, and SIDS (Sudden Infant Death Syndrome)
- Eases digestion with lower rates of diarrhea and constipation

How breastfeeding benefits you?
- Helps mom return to pre-pregnancy shape and weight quicker
- Lowers the risk of mom developing breast cancer, high blood pressure, diabetes, and cardiovascular disease
- May decrease mom’s risk of uterine and ovarian cancer
- Allows mom to work more, having to take less time off to care for a sick child. (Breastfeeding reduces trips to the doctor's office with sick babies.)

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Appendix D. Graphs from Surveys of Expecting Mother

Graph 1
Has your physician talked to you about breastfeeding classes or support groups for breastfeeding moms?

- Never mentioned: 56%
- Might have mentioned: 17%
- Discussed a few times: 15%
- Discussed Frequently: 12%
- I don't remember: 0%

Graph 2
Has your OB physician explained the benefits that breastfeeding provides to your child?

- Never mentioned: 47%
- Might have mentioned: 18%
- Discussed a few times: 15%
- Discussed Frequently: 17%
- I don't remember: 3%

Graph 3
Has your OB physician explained the benefits that breastfeeding provides to you, the mom?

- Never mentioned: 59%
- Might have mentioned: 12%
- Discussed a few times: 15%
- Discussed Frequently: 14%
- I don't remember: 0%

Graph 1-3. Survey results collected from 34 expecting mothers about providers' discussion of breastfeeding with the participant.
Appendix E. Graph of Results from Surveys of Expecting Mothers Likelihood to Breastfeed

Graph 4

Expecting Moms Likelihood to Breastfeed

Graph 4. Survey results collected from 34 expecting mothers about the participants’ likelihood to breastfeed.
Graph 5
Did your OB physician explain the benefits that breastfeeding provides to your child?

- Never Mentioned: 42%
- Discussed Frequently: 32%
- Might have mentioned: 16%
- Discussed a few times: 10%
- I don’t remember: 0%

Graph 6
Did your physician talk to you about breastfeeding classes or support groups for breastfeeding moms?

- Never Mentioned: 37%
- Discussed Frequently: 29%
- Might have mentioned: 16%
- Discussed a few times: 21%
- I don’t remember: 0%

Graph 7
Did your OB physician explained the benefits that breastfeeding provides to you, the mom?

- Never Mentioned: 42%
- Discussed Frequently: 18%
- Might have mentioned: 21%
- Discussed a few times: 21%
- I don’t remember: 0%

Graph 8
Did your child’s pediatrician discuss the benefits of breastfeeding with you?

- Never Mentioned: 26%
- Discussed Frequently: 21%
- Might have mentioned: 26%
- Discussed a few times: 27%
- I don’t remember: 0%

Graph 5-8. Survey results collected from 19 mothers in child bearing years about providers’ discussion of breastfeeding with the participant.