

## **PRENATAL Breastfeeding Information Sessions**

### A collaborative approach to increasing breastfeeding duration





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Only breastmilk in the last 2 weeks

#### Introduction

Carlington Community Health Centre together with Community Partners: Pinecrest Queensway CHC, The Ottawa Hospital, Mothercraft Ottawa, Centretown CHC, and local primary obstetrical care providers, have been involved in both the promotion and the delivery of over 60 prenatal breastfeeding sessions reaching approximately 400 parents.

#### Population

Clients at risk for experiencing breastfeeding difficulty and early weaning\*

89% had a physician as their primary obstetrical care provider

 $* \, See \, Breast feeding \,\, Matters \,\, prescription \,\, pad$ 

#### Aim

To increase referrals coming from primary obstetrical care providers to prenatal breastfeeding sessions for clients at risk for experiencing difficulty, including all primiparous clients

To increase knowledge of, and referrals to, community breastfeeding resources

To increase clients' confidence to breastfeed and knowledge of the importance of breastfeeding for life long health for both mother and baby

To increase the initiation and duration of immediate skin to skin after delivery

To increase knowledge of how to hand express

To decrease medically unnecessary formula supplementation in hospital

To increase the number of clients reaching out to community breastfeeding resources within first week after discharge

To increase breastfeeding duration and exclusivity at outtake

Of Note: 38% of those who attended the session had a cesarean birth as opposed to 27% of those who were registered but who did not attend. This result may reflect the higher risk nature of the clients in attendance.

#### Method

- A centralized phone line and online registration were set up to simplify referrals
- 2 hr long sessions were developed incorporating four key messages: Skin to skin; Hand expression; Community resources; and early, trained, breastfeeding support postpartum (within the first weeks). These messages were also delivered with WHO BFI messaging around the hazards of commercial formula and participants received both print and web video resources.
- Posters, and educational material for patients to inform them about the free prenatal information sessions, were distributed by partners
- Educational material for primary care providers was created, underscoring their important role in promoting prenatal breastfeeding education to their clients as well as to encourage their clients to establish community resources before they deliver. This included an prescription pad to use as a referral tool with patients prenatally



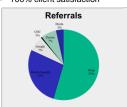
 Sessions were delivered in the community by lactation consultants who also provide regular community lactation support services at local CHCs

#### **Data Collection**

- · Initial data was collected at the time of registration
- Surveys were conducted after each prenatal breastfeeding information session
- Outtake interviews were conducted between 6 and 12 weeks postpartum

#### Results

- 60 sessions/ 367 women registered
- 282 clients came to the sessions and approx. 40% came with partners for a total of 395 participants
- 222 referrals to Ottawa Breastfeeding Buddies\*
- 39 referrals to Mothercraft Birth and Parent Companion Program\*
- Increased direct referral from primary care providers
- 81% reported increased confidence
- 83% reported increased knowledge off community resources and the intention to access them
- 100% client satisfaction



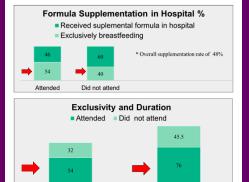
The collaboration with the Ottawa Hospital increased the exposure of the program rapidly and effectively, leading to the majority of referrals.

93% of Phase I referrals were handled through the phone line. Phase II registration is mainly through online registration with the option to contact the phone line for those needing further information and or support.





Those who attended the prenatal breastfeeding sessions were more likely to hand express their own breastmilk and not supplement with commercial formula while in hospital.



#### Conclusion

Only breastmilk since coming home

Attending a *prenatal* breastfeeding session correlated with:

Greater maternal confidence to breastfeed

Longer skin to skin right after birth (in spite of higher cesarean rate)

Lower rates of in hospital supplementation with commercial formula

Greater use of hand expression of breastmilk in hospital

Greater exclusivity of breastfeeding at outtake

Significantly greater duration of breastfeeding at outtake

#### **Acknowledgements**

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\* Referrals were made to community supports at the point of intak