

**The Kind of Support that Matters to Exclusive Breastfeeding: Quality Improvement**

Chelsea Grubb

Lakeview College of Nursing

Dr. Ariel Wright

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Quality improvement refers to concerted and continuous efforts of all healthcare stakeholders to effect changes that contribute to better patient outcomes, enhanced system efficiency, and better professional learning (Batalden & Davidoff, 2018). Quality improvement is among QSEN's pre-licensure competencies for nurses. According to the QSEN Institute (2020), quality improvement comprises systematic and unceasing actions that bring measurable improvement to health status and health care services of targeted patient groups. Therefore, quality improvement is an ongoing process for increasing the quality and safety of health care services.

QSEN recommends using data to evaluate outcomes of care processes and utilization of improvement strategies to develop and measure changes to enhance the safety and quality of health care systems (*Organization for Associate Degree Nursing, 2020*). The knowledge aspect of infusing quality improvement into clinical education, according to QSEN, involves nursing educators and students seeking information about QI programs in the care setting and identifying the potential impact of such projects on patient outcomes. The skills aspect consists of students comparing the evidence base to observed practice. Finally, the attitudes aspects of QI, according to QSEN, consist of students embracing the value of continuous quality improvement in their professional compacity while also allowing monitoring of performance by patients, relatives, and other members of the health care system. Thus, the QSEN institute requires evidence of quality improvement competencies as one of the pre-license requirements for nurses.

The nursing-specific/impact nursing practice topic selected is Exclusive Breastfeeding (EBF). WHO defines EBF as giving an infant no other food or drink except breast milk (WHO, 2018). While this definition does include water, it nevertheless allows for giving oral rehydration salts, syrups, and drops. *Breast milk* is a complete food that enables healthy infant growth and development while preventing morbidities associated with early feeding of babies (before six months), such as acute respiratory diseases and diarrhea (Theodorah & Mc'Deline, 2021). Therefore, all practitioners must know that EBF is a crucial nursing practice topic. During the initiation of EBF, only the support from nurses may be necessary since the understanding needed is mainly professional. However, the maintenance of EBF requires many people's input since the new mother also needs moral, social, economic, and medical support. Also, one must learn to deal with first-time breastfeeding mothers and experienced ones. Thus, EBF requires both professional and social support systems to be effective.

This paper addresses the support needed by mothers during the initiation of EBF, which occurs within a few hours of birth. It also explains the EBF maintenance in which the mother must maintain EBF for the next six months. This article on a qualitative study demonstrates the sensitivity of first-time breastfeeding mothers. EBF is a critical component of nursing care since it significantly impacts infants' growth and development and mothers' health (WHO, 2018). Therefore, this paper focuses on exclusive breastfeeding as an essential quality improvement for nurses.

## **Article Summary**

### **Introduction**

In the article "*The kind of support that matters to exclusive breastfeeding*," a qualitative study by Theodorah & Mc'Deline (2021) examines the forms and quality of EBF support to first-

time mothers in Buffalo City Metro, South Africa. The article is linked to the selected nursing-specific/impact nursing practice topic because it focuses on the challenges, empowerment, support, and resilience experienced by study participants during their first six months postpartum. In this regard, the study illustrates how nurses, fellow mothers, families, and community members act as enablers and distractors of this all-important topic of reproductive health. Therefore, the article's primary purpose was to explore the EBF support provided to first-time mothers in the BCM area, South Africa.

The research article relates to the nursing-specific/impact nursing practice topic selected in several ways. First, it conducted an experiment that showed the prevalence of exclusive breastfeeding among new mothers in the first six months postpartum is 41% worldwide. Further, the article established that only 12% of infants in the BCM area of South Africa are exclusively breastfeeding during their first six months of life despite the 90% initiation rate of EBF (Theodorah & Mc'Deline, 2021). This statistic represents an excellent opportunity for quality improvement among health care stakeholders-mothers, nurses, other health professionals, family members, and community members. This article also explains that nurses support first-time by offering information about EBF practice during prenatal care and EBF practical support during labor to assist mothers in initiating it. Furthermore, the article illustrates the challenges, empowerment, support, and resilience experienced by new mothers during the initiation and maintenance of breastfeeding. Thus, the selected article related to EBF by providing relevant statistics, information on EBF support, and the challenges, support, and resilience reported by first-time mothers in South Africa.

## **Overview**

The research article relates to the QSEN competency quality improvement because it demonstrates the knowledge, skills, and attitudes used to promote EBF. QSEN requires the use of data to compare evidence-based practice and interventions to practice outcomes. The article shows how implementing breastfeeding support programs in health care settings and the community leads to better EBF initiation and maintenance. Thus, the article relates to QSEN competency regarding quality improvements by discussing the subject's knowledge, skills, and attitudes as reported by study participants.

### **Quality Improvement**

According to the information from the research article, a quality improvement effort to increase the rate of EBF among first-time mothers can be in various settings, including antenatal care, labor, follow-up clinics, and community contexts (Adda et al., 2020). Some of the resources that need to be available during the pre, intra, and post-implementation stages include nurses, peer breastfeeding supporters, information resources, family, and personalized support under all components of the House theoretical framework for the initiation of EBF, and community members (Theodorah & Mc'Deline, 2021). Therefore, some of the resources that the institution needs to implement such a program include human, policy, and informational resources.

The suggested change could impact the institution in several ways. First, the project would force the institution to hire more nurses to offer informational and practice EBF support or to engage breastfeeding supporters to avoid overloading available nurses with additional responsibilities. However, such a quality improvement project would lead to a measurable increase in patient satisfaction, as evidenced by a reduction in inadequate breastfeeding techniques and improved confidence in breastfeeding. Additionally, the project can positively impact patient safety by helping prevent morbidities among infants, such as diarrhea, choking,

and acute respiratory diseases. Therefore, such a quality improvement initiative has financial, safety, and quality implications.

## **Application to Nursing**

### **Practice**

Inadequate breastfeeding or early use of formula feeding is associated with an increased risk of asthma, childhood leukemia, obesity, atopic dermatitis, and type I and II diabetes during early childhood and adolescence. Breastfeeding must be the chief feeding method during the first year of life to realize these health benefits for infants. The American Association of Pediatrics recommends exclusive breastfeeding for the first six months, followed by gradually introducing other foods for the next six months (*Massachusetts Department of Public Health Bureau of Family Health and Nutrition*, 2018). Therefore, EBF is crucial to the health and well-being of an infant and an important competence area for nurses.

The foremost EBF best practice for nurses is breastfeeding promotion. Promotion activities include establishing a breastfeeding-friendly environment, providing breastfeeding education, and counseling to expectant mothers and their families (*American Academy of Pediatrics*, 2018). It also entails the creation of a hospital environment where mother and child are together constantly, avoiding non-essential breast milk supplements and artificial nipples, documentation, monitoring feeding practices, and avoiding early interruption of feedings (Batalden & Davidoff, 2018). Thus, a significant aspect of nursing practices involves the promotion of breastfeeding, especially in the first six months of a baby's life.

### **Education**

The current guidelines for educating staff about patient care or nursing practice related to EBF include promoting breastfeeding through patient education and display posters.

Breastfeeding education and counseling must be delivered long before the baby's delivery (McFadden et al., 2019). The guideline advises health care institutions to avoid displaying promotional material, posters, and patient education literature that encourages the use of formula on the success of breastfeeding education (*Massachusetts Department of Public Health Bureau of Family Health and Nutrition*, 2019). Therefore, education and counseling play a crucial role in promoting exclusive breastfeeding.

### **Research**

Future research should focus on three key areas: promotion, support, and how formula feeding impacts health (Institute of Medicine (US), 2018). Regarding breastfeeding promotion, future studies could focus on the content, delivery, promotion, and implementation of food packages targeting EBF. Concerning EBF support, additional research allows readers to understand the training, availability, skills, and cost-effectiveness of peer counselors and lactation consultants. Therefore, additional research is required to examine the promotion and support necessary for initiating and maintaining exclusive breastfeeding and the health impact of EBF and formula feeding (Catunda et al., 2018).

### **Conclusion**

Quality improvement aims to promote systematic, continuous enhancement of care, quality, and safety through evaluating and monitoring change projects. QSEN recommends supporting quality improvement programs with data. For successful quality improvement, nurses need to appreciate the essential role in this process, understand the impact of such projects on patient outcomes, compare the evidence to observed practice, and appreciate vigilance and monitoring. Thus, quality improvement is a deliberate effort of all health stakeholders to improve care outcomes and system performance.

*Exclusive breastfeeding* is an infant feeding method that provides no other food except the mother's milk. Exclusive breastfeeding for the first six months of an infant's life is associated with a reduced risk of chronic diseases like asthma, diabetes, and obesity, in addition to better maternal health. In this regard, EBF is linked to reduced child mortality and morbidities and promotes this at all times. In conclusion, exclusive breastfeeding represents an excellent opportunity for nursing care to impact the health of new mothers and their babies positively.

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