

Implementing a Breastfeeding Protocol to increase the Rate of Breastfeeding in the Black Population

Zita O Iwuoha, DNP, RN, CLC, & Joan Taylor, DNP, FNP-C



Abstract

All over the world, humans have depended on natural food for survival. Breast milk is the natural way mothers feed their babies. Every mother should breastfeed her baby unless in rare situations due to the mother's absence or the baby's illness. Breastfeeding has numerous health benefits for the mother and baby, including immunity for the baby, IQ improvement, body temperature regulation, Asthma prevention, protection from infection, SIDS prevention, prevention of chronic disease, and prevention of obesity syndrome. In the mother, the benefits include breast and ovarian cancer prevention, uterine involution, maternal weight loss, and bonding and relaxation. Exclusive breastfeeding for six months prevents over 820,000 infant deaths and breast cancer in over 20,000 mothers. The United States of America documented the highest infant mortality rate among developed countries, despite the high amount of finance invested in healthcare. In the USA, Black women rank lowest in breastfeeding for several reasons. Implementing a breastfeeding protocol in the black population by trained healthcare providers is critical for improved health outcomes.

Background and Significance

Public health focuses on the dynamic outcomes of a group of people and the group's health outcomes to improve the given population's health (Merrill, 2021). Breastfeeding is a public health concern, and exclusive breastfeeding offers infants long-term protection against chronic conditions such as obesity, diabetes, asthma, sudden infant death syndrome (SIDS), respiratory and gastrointestinal diseases, and childhood cancers (WHO, 2017, CDC.gov). Data affirmed that if 90% of infants were breastfed exclusively for six months, the United States would save \$13 billion annually through reduced healthcare costs. (Radzysinski & Callister, 2019). Awareness education is one of the techniques for increasing breastfeeding practices among women.

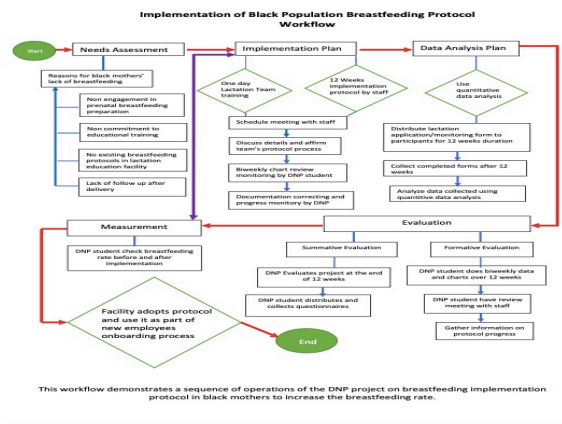
Additionally, exclusive breastfeeding provides better health outcomes for mothers with reduced risks of ovarian and breast cancers. Evidence demonstrates that support from skilled health professionals can positively impact the initiation, duration, and breastfeeding experiences (Saade et al., 2022). The global report on breastfeeding indicates that the United States lags in increasing the number of mothers who breastfeed their babies. It records the highest infant mortality rate in developed countries (WHO, 2017). The decline in breastfeeding is more apparent in the black population, and the reasons for this are multifaceted. These include the lack of education, family support, socioeconomic challenges, racial profiling, and slavery mentality (Speights et al., 2017). Implementing a breastfeeding protocol in this facility that serves black mothers will enhance the number of breastfeeding mothers.

Purpose and Outcomes

The expected project outcomes are to ensure that the staff recognizes the need to support black breastfeeding mothers to achieve their breastfeeding goals, thus increasing the number of healthy babies and the number of mothers who breastfeed their babies in this population.

Project Interventions

This workflow demonstrates a sequence of operations of the DNP project on breastfeeding implementation protocol in black mothers to increase the breastfeeding rate.



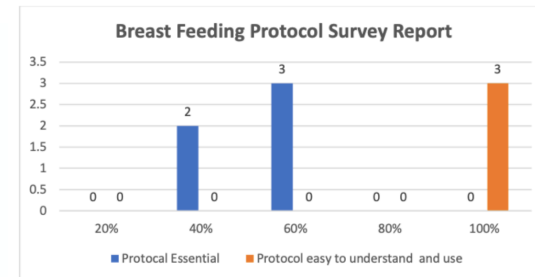
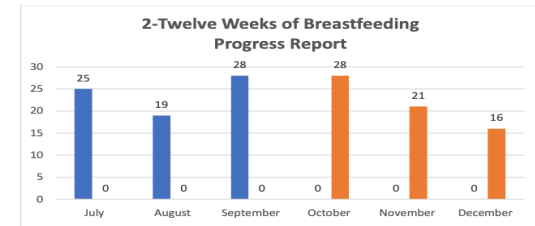
Evaluation

A formative evaluation happened during the project's progress, and the DNP student monitored the progress and effectiveness of the project in achieving the desired outcomes (Elwy et al., 2020). The DNP student also completed biweekly data and charts reviews until twelve weeks. The DNP student completed meetings to review progress with the staff and gathered more information on how they felt about the protocol's progress. The DNP student was flexible with the staff schedule and meeting hours and accommodated multiple feedbacks such as in person, via telephone calls, and through zoom meetings.

The DNP evaluated the project at the end of 12 weeks. The staff received a summative evaluation questionnaire, which was completed and returned. There were five team members, and out of the five, three (60%) strongly agreed that the breastfeeding protocol was essential for breastfeeding mothers and that the protocol was easy to understand (100%) and use (100%). They also agreed (100%) to use it in the future. The other two (40%) were on maternity leave at this time and could not provide feedback. The questionnaire responses helped to know how much the team utilized the protocol and the impact on the data. The DNP student checked the breastfeeding rates before and after the implementation, and there was no increase in the breastfeeding rate. However, there is a limitation to this protocol, and the DNP student observed that, generally, the facility records lower breastfeeding support services during October, November, and December.

Although this was not part of the evaluation, some clients mentioned that they found the instructions more straightforward.

Results



Summary/Implications for Practice

- Staff training on implementation of breastfeeding protocol to increase the number of breastfeeding rates.
- An evidence-based practice training that staff could continue to use as part of onboarding education
- A breastfeeding protocol that is part of annual in-service training for staff
- Mothers can easily understand and adopt the protocol to accomplish their breastfeeding goals and improve health outcomes