

RESEARCHPOP: ID# 101318

Title:

Development and Evaluation of a Lactation Rotation for a Pediatric Residency Program

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ACCEPTED

Session Title:

Meet the Poster Authors Session

Slot:

PST: Friday, March 27, 2020: 2:30 PM-3:15 PM

Abstract Describes:

Completed Work/Project

Applicable Category:

Clinical, Academic, Leaders

Keywords:

breastfeeding practices, curriculum development and lactation education

Abstract Summary:

Learn about the development and evaluation of a mandatory Lactation Rotation for a pediatric residency program at a tertiary care teaching hospital. Discover how an innovative, comprehensive educational lactation program, for first year pediatric residents', significantly increased their knowledge and clinical confidence related to breastfeeding.

References:

- Academy of Breastfeeding Medicine. (2011). Educational objectives and skills for the physician with respect to breastfeeding. *Breastfeeding Medicine*, 6(2), 99–105. doi:10.1089/ bfm.2011.9994
- Bunik, M., Gao, D., & Moore, L. (2006). An investigation of the field trip model as a method for teaching breastfeeding to pediatric residents. *Journal of Human Lactation*, 22(2), 195–202. doi:10.1177/0890334406286993
- Coreil, J., Bryant, C. A., Westover, B. J., & Bailey, D. (1995). Health professionals and breastfeeding counseling: Client and provider views. *Journal of Human Lactation*, 11(4), 265–271.
- Feldman-Winter, L., Barone, L., Milcarek, B., Hunter, K., Meek, J., Morton, J., . . . Lawrence, R. A. (2010). Residency curriculum improves breastfeeding care. *Pediatrics*, 126(2), 289–297. doi:10.1542/peds.2009-3250
- Freed, G. L., Clark, S. J., Lohr, J. A., & Sorenson, J. R. (1995). Pediatrician involvement in breast-feeding promotion: A national study of residents and practitioners. *Pediatrics*, 96(3), 490–494.

- Hillenbrand, K. M., & Larsen, P. G. (2002). Effect of an educational intervention about breastfeeding on the knowledge, confidence, and behaviors of pediatric resident physicians. *Pediatrics*, 110(5), 1–7.
- Izatt, S. D. (1997). Breastfeeding counseling by health care providers. *Journal of Human Lactation*, 13(2), 109–113.
- Lu, M. C., Lang, L., Slusser, W., Hamilton, J., & Halfon, N. (2001). Provider encouragement of breast-feeding: Evidence from a national survey. *Obstetrics and Gynecology*, 97(2), 290–295.
- Ogburn, T., Espey, E., Leeman, L., & Alvarez, K. (2005). A breastfeeding curriculum for residents and medical students: A multidisciplinary approach. *Journal of Human Lactation*, 2(4), 458–464. doi:10.1177/0890334405280990
- Saenz, R. B. (2000). A lactation management rotation for family medicine residents. *Journal of Human Lactation*, 16(4), 342–345.

Abstract Text:

Purpose: The American Academy of Pediatrics recommends that pediatricians promote and help manage breastfeeding. However, research has shown that they are not adequately prepared. To address this gap, a 2-week mandatory lactation rotation program was developed for first-year pediatric residents. The aim of the study was to provide a lactation education program and to measure the residents' knowledge and perceived confidence regarding breastfeeding.

Methods: This longitudinal self-report pretest/posttest study was conducted with a convenience sample of 45 first-year pediatric residents. Each resident spent a minimum of 50 hours with an International Board-Certified Lactation Consultant. To measure breastfeeding knowledge and clinical confidence, the American Academy of Pediatrics' Breastfeeding Residency Curriculum pretest was used 4 times: first and last day of the rotation and at 6 and 12 months post-rotation.

Results: Test and confidence scores were evaluated. Statistically significant differences in knowledge were found between test 1 when compared with tests 2, 3, and 4 ($p < .001$). No significant differences were found between tests 2, 3, and 4 ($p > .05$). The abilities to "adequately address parents' questions" and to "completely manage common problems" were significant, with confidence increasing in tests 2, 3 and 4 ($p < .001$).

Conclusion: To increase breastfeeding initiation and duration rates, health care providers must fulfill their responsibility to provide appropriate management, counseling, and support for breastfeeding mothers and infants. Evidence-based knowledge is a critical first step in ensuring that residents are adequately prepared for this most important role. The skills and knowledge achieved will help guide them throughout their career. Resident education regarding lactation is a vital component that is lacking in many current residency training programs. As a result of this innovative, comprehensive educational lactation program, the pediatric residents' knowledge and perceived confidence related to breastfeeding significantly increased and were maintained up to 12 months postrotation. Other groups of resident physicians and medical and nursing students could benefit from similar lactation rotations. The focus on breastfeeding curricula must evolve, be studied, and be deemed as preventive medicine.