



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

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Abstract:

Background: The American Academy of Pediatrics (AAP) 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.

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: As a result of an innovative, comprehensive educational lactation program, the pediatric residents’ knowledge and perceived confidence related to breastfeeding significantly increased.

Research aim:

To provide a lactation education program and to measure the residents’ knowledge and perceived confidence regarding breastfeeding.

Background:

- Human milk is species specific and fosters growth and development of the human infant.
- The AAP policy statement on breastfeeding recommends that pediatricians “promote, support, and protect breastfeeding enthusiastically.”
- A practical understanding of breastfeeding support and management, grounded in solid evidence-based knowledge, is critical to effective breastfeeding promotion.
- There are few known published studies describing residency programs across the United States that have made attempts to improve breastfeeding management training.

Methods:

- *Design* - This was a longitudinal, self-report, pretest/posttest one-group survey.
- *Setting* - Advocate Lutheran General Hospital, a tertiary care teaching center in the Midwestern United States.
- *Sample* – The study consisted of a convenience sample of 45 first-year pediatric residents from 2011-2015.

Intervention:

- At the start of the rotation, each resident was provided with education materials and resources.
- Over the 2-week period, each resident spent a minimum of 50 hours with the International Board Certified Lactation Consultant.
- To measure breastfeeding knowledge and clinical confidence, the AAP’s Breastfeeding Residency Curriculum pretest was used 4 times: first & last day of rotation and at 6 & 12 months postrotation.

Results:

- Statistically significant differences were found in mean test scores between tests 1 & 2 [71.38 (11.938) vs. 87.38 (8.653), $p < .001$], tests 1 & 3 [71.38 (11.938) vs. 89.16 (6.961), $p < .001$], tests 1 & 4 [71.38 (11.938) vs 90.31 (7.058), $p < .001$]. No significant differences were found between tests 2, 3, & 4 ($p > .05$).

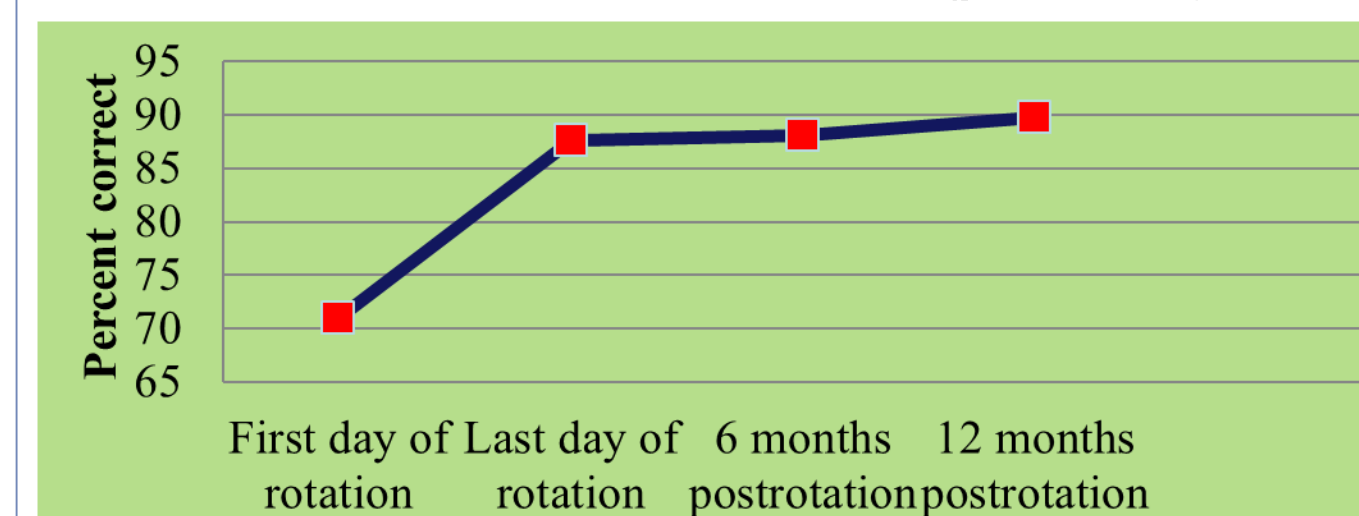


Figure 1. Knowledge test scores

- Statistically significant differences were noted for the ability to “adequately address parents’ questions about breastfeeding” & “completely manage common breastfeeding problems” between tests 1 & 2, 1 & 3, and 1 & 4, with residents’ perceived confidence increasing in tests 2, 3, & 4 ($p < .001$).

Conclusions:

- As a result of this innovative, comprehensive educational lactation program, the residents’ knowledge and perceived confidence related to breastfeeding significantly increased and were maintained up to 12 months postrotation.
- Evidence-based knowledge is a critical first step in ensuring that residents are adequately prepared to manage, counsel, and support breastfeeding mothers and babies.

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