

Core Competencies in Breastfeeding Care and Services for All Health Professionals

Revised Edition

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About USBC

The United States Breastfeeding Committee (USBC) is an independent nonprofit coalition of more than 40 nationally influential professional, educational, and governmental organizations. Representing over half a million concerned professionals and the families they serve, USBC and its member organizations share a common mission to improve the Nation's health by working collaboratively to protect, promote, and support breastfeeding. For more information on USBC, visit www.usbreastfeeding.org.

Background

Breastfeeding is a basic and cost-effective measure that has a significant positive impact on short- and long-term health outcomes for individuals and populations. The greatest health impact is found with early initiation, exclusive breastfeeding for the first six months of life, and continued breastfeeding with appropriate complementary foods for the first year of life and beyond. Lack of breastfeeding is a significant risk to the public health of our nation and increases health care spending. 3

In order to establish and maintain breastfeeding, women need education and support from a knowledgeable health care community. Evidence-based knowledge, skills, and attitudes are lacking among health professionals in many disciplines. The volume of new information, advances in treatments and technologies, and health care system challenges, combined with the relative paucity of professional training in human lactation and breastfeeding, leave many providers without satisfactory answers for their patients. Evidence-based knowledge, skills, and attitudes are lacking among health care community. The volume of new information, advances in treatments and technologies, and health care system challenges, combined with the relative paucity of professional training in human lactation and breastfeeding, leave many providers without satisfactory answers for their patients.

Purpose

These core competencies in breastfeeding care and services were developed to provide health professionals with a guideline and framework to integrate evidence-based breastfeeding knowledge, skills, and attitudes into their standard health care delivery practices.

The United States Breastfeeding Committee recommends that *all* health professionals possess the core competencies identified in this document in order to integrate breastfeeding care effectively and responsibly into current practice and thus provide effective and comprehensive services to mothers, children, and families.

Effecting Change

Educators are in a unique position to lead the way by incorporating these core competencies into the undergraduate, graduate, and post-graduate curricula of health professionals.^{8 9 10 11} These core competencies provide a structure for educators to respond to the emerging necessity of educating all health care providers regarding breastfeeding and human lactation in the context of findings from the World Health Organization (WHO)¹² and the Agency for Healthcare Research and Quality (AHRQ).¹³

Maternal and child health (MCH) education and practice is based upon a life cycle framework that recognizes that there are pivotal periods in human development that present both risks and opportunities for improving health outcomes for individuals and populations. ¹⁴ In particular, USBC calls upon MCH leaders to emphasize the synergistic value of these breastfeeding core competences to the health of women, children, and families.

Breastfeeding Core Competencies

Competence in the following areas represents the *minimal* knowledge, skills, and attitudes necessary for health professionals from *all* disciplines to provide patient care that protects, promotes, and supports breastfeeding.

At a minimum, every health professional should understand the role of lactation, human milk, and breastfeeding in:

- The optimal feeding of infants and young children³ 15
- Enhancing health and reducing:
 - o long-term morbidities in infants and young children² 15
 - o morbidities in women¹⁵ 16

All health professionals should be able to facilitate the breastfeeding care process by:

- Preparing families for realistic expectations
- Communicating pertinent information to the lactation care team¹⁷
- Following up with the family, when appropriate, in a culturally competent manner after breastfeeding care and services have been provided ¹⁸

USBC proposes to accomplish this by recommending that health professional organizations:

- Understand and act upon the importance of protecting, promoting, and supporting breastfeeding as a public health priority^{2 3 16 19 20}
- Educate their practitioners to:
 - o appreciate the limitations of their breastfeeding care expertise 17 21
 - o know when and how to make a referral to a lactation care professional 17 21
- Regularly examine the care practices of their practitioners and establish core competencies related to breastfeeding care and services²⁰ 22

Knowledge

All health professionals should understand the:

- basic anatomy and physiology of the breast⁸ ²³
- role of breastfeeding and human milk in maintaining health and preventing disease² 15 1.2
- importance of exclusive breastfeeding, and its correlation with optimal health outcomes 15 24 1.3
- impact of pregnancy, birth, and other health care practices on breastfeeding outcomes 19 25
- 1.5 role of behavioral, cultural, social, and environmental factors in infant feeding decisions and practices²⁶ ²⁷
- potentially adverse outcomes for infants and mothers who do not breastfeed²⁸ 1.6
- potential problems associated with the use of human milk substitutes²⁹
- 1.8 few evidence-based contraindications to breastfeeding³⁰ 31
- indications for referral to lactation services¹⁷
- 1.10 resources available to assist mothers seeking breastfeeding and lactation information or services³⁰ 32
- 1.11 effects of marketing of human milk substitutes on the decision to breastfeed and the duration of breastfeeding 1 33 34

Skills	

All health professionals should be able to:

- practice in a manner that protects, promotes, and supports breastfeeding $^{2\ 3\ 16\ 22}$ 2.1
- gather breastfeeding history information sufficient to identify mothers and families who 2.2 would benefit from specific breastfeeding support services³⁵
- seek assistance from and refer to appropriate lactation specialists²² ²⁴ 2.3
- safeguard privacy and confidentiality³⁶ 2.4
- 2.5 effectively use new information technologies to obtain current evidence-based information about breastfeeding and human lactation^{22 37}

Attitudes

All health professionals should:

- value breastfeeding as an important health promotion and disease prevention strategy³⁰ 38
- recognize and respect philosophical, cultural, and ethical perspectives influencing the use 3.2 and delivery of breastfeeding care and services 18 22
- respect the confidential nature of the provision of breastfeeding care and services³⁶ 3.3
- recognize the importance of delivering breastfeeding care and services that are free of commercial conflict of interest or personal bias²² 23 34
- understand the importance of tailoring information and services to the family's culture, 3.5 knowledge, and language level^{18 39}
- seek coordination and collaboration with interdisciplinary teams of health professionals¹⁷ 3.6
- recognize the limitations of their own lactation knowledge and breastfeeding expertise 17
- recognize when personal values and biases may affect or interfere with breastfeeding care and services provided to families⁸
- 3.9 encourage workplace support for breastfeeding⁴⁰
 3.10 support breastfeeding colleagues^{41 42 43}
- 3.11 support family-centered policies at federal, state, and local levels⁹

All health professionals do not need to have the level of competence expected of those practitioners who care for childbearing women, infants, and young children. Health professionals who care for childbearing women, infants, and young children can be further divided into two groups:

- 1. Those that provide **primary care** are front-line practitioners who care for women of childbearing age and/or infants and young children.
- 2. Those that provide **secondary care** may be front-line practitioners or practitioners with enhanced knowledge and skills specifically referable to the use of human milk and breastfeeding.

Those health professionals who provide primary and secondary care for childbearing women, infants, and young children should be able to:

- 4.1 understand the evidence-based Ten Steps to Successful Breastfeeding 25 44
- 4.2 obtain an appropriate breastfeeding history⁴⁵
- 4.3 provide mothers with evidence-based breastfeeding information²⁴
- 4.4 use effective counseling skills¹⁸
- 4.5 offer strategies to address problems and concerns in order to maintain breastfeeding²⁴ 46
- 4.6 know how and when to integrate technology and equipment to support breastfeeding³⁶
- 4.7 collaborate and/or refer for complex breastfeeding situations⁴⁷
- 4.8 provide and encourage use of culturally appropriate education materials³³
- 4.9 share evidence-based knowledge and clinical skills with other health professionals 35 48
- 4.10 preserve breastfeeding under adverse conditions²⁴ 49

In addition, those health professionals who provide secondary or more direct "hands-on" care for childbearing women, infants, and young children should also be able to:

- 5.1 assist in early initiation of breastfeeding⁵⁰
- 5.2 assess the lactating breast⁵¹
- 5.3 perform an infant feeding observation^{37 51}
- 5.4 recognize normal and abnormal infant feeding patterns⁵¹ 52
- 5.5 develop and appropriately communicate a breastfeeding care plan⁵¹ 52

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II C T

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