Prenatal Counseling for Successful Breastfeeding Initiation
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Learning Objectives
- Identify rapport building techniques that establish a positive relationship with pregnant or breastfeeding mothers.
- Demonstrate the ability to use participant-centered techniques (e.g. active listening, reflection, and affirmation) when communicating with or counseling pregnant or breastfeeding mothers.
- Describe breastfeeding anticipatory guidance for pregnant women.
- Explain how support during the first few weeks after delivery is critical to breastfeeding success.

Knowledge Isn’t Always Enough
- People do not always adopt healthy behaviors based on information alone
- Effective counseling principles help mothers explore ways to work breastfeeding into their lives
First Things First: Connection Before Content

“People don’t care what you know until they know you care.” – Anonymous

Tools for Connection: Active Listening Skills

- Use open-ended questions and probes to explore concerns
- Affirm feelings
- Educate to target concerns
- Information comes last

Step One: Open-Ended Questions

- Help mothers feel safe sharing thoughts and feelings
- Avoid making clients feel interrogated
- Have no right or wrong answer
- Build trust and openness
Examples of Open Questions

• WHAT
  • What has your mother told you about breastfeeding?
  • What paperwork did you bring with you today?

• HOW
  • How do you feel about breastfeeding?
  • How is breastfeeding going?

• TELL ME
  • Tell me why you feel you will need formula.
  • Tell me about a typical day at your house.

Open or Closed?

• Do you work?
• How do you feel about that?
• Have you started feeding your baby solid foods yet?
• Are you going back to school?
• What options have you already tried?
• What can you tell me about your pregnancy?
• What has your partner said about breastfeeding?
• How many times a day does the baby feed?
• What’s a good plan for you?

Digging for More Information

• Probes:
  • Extending
  • Clarifying
  • Reflecting
  • Redirecting
Extending Probe

• What else have you heard about that?
• How do you feel about what she said?
• Tell me more about that.

Clarifying Probe

• Do you mean breastfeeding will be painful?
• What part about breastfeeding do you think will be most uncomfortable?
• When you say, “It’s too hard” do you mean it will be too hard to learn how to breastfeed?
• Are you concerned breastfeeding will be embarrassing to you or to someone who might see you?

Reflecting Probe

• So you’re saying you don’t think you can breastfeed.
• You think your mother won’t approve of breastfeeding.
• You feel he is possessive of you and will not like it if you pay more attention to the baby.
Redirecting Probe

- I can see you're worried about your finances, and we're going to give you some names of people who can help before you leave. Other than that concern, what other concerns do you have about breastfeeding?

Step Two:
Affirm Feelings

- Most important part of a successful communication exchange
- Mothers are not ready for information until they feel their opinions have been heard
- Allows mothers to GLOW by drawing attention to what they are doing well

How Affirmation Builds Connection

- Builds confidence and self-respect
- Helps mothers relax and safe, which builds trust in you and your information
- Does not imply agreeing with her choices
Ways to Affirm

• Agree with her
• Show her she's not alone
• Read between the lines
• Shine the spotlight
• Show her how she is a good mother

Practice: Affirming New Mothers

• My breasts are too small. The baby starve.
• I'd be too afraid to breastfeed since I smoke.
• I don't want my dad to see me breastfeed.
• I'm afraid breastfeeding will be too painful.
• I want some formula, too, since I don't think I'm making enough milk.
• She wants to nurse all the time!

Step 3: Education

Adults learn best when you:
• Target info to mother’s concerns
• Feed information in small bites
• Give 2-3 simple options
• Keep it simple
• Reinforce the information
Start with Heart

- Tie messages to what mothers value:
  - Being close to baby
  - Being good mothers
  - Sense of success
  - Happiness
  - Having their children love them

- State WIC Resources
  - [https://health.mo.gov/living/families/wic/breastfeeding/resourcesdata/](https://health.mo.gov/living/families/wic/breastfeeding/resourcesdata/)

How Behavior Decisions Are Made: The Exchange Theory

- Benefits
- Costs

Barriers to Breastfeeding

- Best way to identify barriers: Listen to mothers
- Commonly mentioned barriers:
  - Confidence regarding milk production
  - Time and social constraints
  - Embarrassment
  - Lack of support (Dad, Grandmothers)
  - Fear of pain
- Help mothers identify solutions that work for her
Concerns About Milk Production: Confidence

- Underlies many barriers
- Affirm concerns, what mother is doing well
- Build confidence with anticipatory guidance

Fear of Pain

- Should it hurt?
- Help mothers know what to expect
- Pain means they should call
- Prepare them with contacts/resources during pregnancy

Time and Social Constraints

- How can I fit breastfeeding into my busy life?
- Many assume they cannot breastfeed if they go back to work.
- Many unaware they can express their milk.
Embarrassment

- Concern when in public or family is present
- Fear of exposure; lack of privacy
- Shaped by social norms
- Difficult for some to discuss
- Some may want to keep breastfeeding secret

"You’d have to do what you have to do in front of everybody
and it would just be strange I think."
-WIC Mother, discussing breastfeeding in a focus group

The Right Words at the Right Time

You can help increase the number of women who breastfeed:

- Increase mothers’ awareness
- Increase mothers’ confidence
- Help mothers know what to expect
- Help mothers identify solutions to perceived barriers

Tailoring Messages

- Making your messages mom-specific
- Planting seeds of awareness, growing confidence
- Anticipatory guidance to provide in early, mid and late pregnancy
Early Pregnancy

• Increase awareness
• Explore knowledge and beliefs about breastfeeding
• Identify potential barriers
• Acknowledge concerns
• Refer to Lactation Consultant, Healthcare Provider, WIC Peer Counselor

What have you heard about breastfeeding?

Mid Pregnancy

• Encourage attendance at a breastfeeding class
• Assess questions, support, plans
• Explore solutions for making breastfeeding work

What are your plans after the baby is born?
Who can support you with breastfeeding?

Late Pregnancy

• Assess how mother is preparing to breastfeed
• Develop breastfeeding plan

Tell me about your plans for breastfeeding in the hospital.
What does your mother or the baby’s father think about your decision to breastfeed?
Late Pregnancy:
Having a Breastfeeding Plan
• Getting breastfeeding off to a good start
• Sources of breastfeeding support
• Plans for returning to work or school
• Plans for contacting WIC after the baby is born, if eligible

Anticipatory Guidance:
Late Pregnancy
• How supplementation affects milk production
• How to know her baby is getting enough milk
• Hunger signs that let her know her baby is ready to eat
• Practices for breastfeeding success

Empowering a Mother for Success
• Skin-to-skin with baby
• Avoid separation
• Frequent feedings (8-12 times/day)
• Delay first bath
• Avoid artificial smells
• Delay visitors
Right before Delivery

• Call to see how her pregnancy is going
• Remind her to:
  • Ask the hospital IBCLC to assist her and observe a feeding
  • Come in as soon as possible after delivery to enroll baby on WIC and get breastfeeding help if needed
  • If not WIC eligible, remind her to follow-up with doctor and hospital IBCLC
  • Contact her Peer Counselor as soon as her baby is born

Questions?