



RESEARCH

INFORMATION

Feasibility Study of a Planning Card to Promote Duration of Exclusive Breastfeeding



AIMS

1. To assess the desirability and feasibility of delivering a breastfeeding planning card (see next page for screenshot) as part of standard antenatal care.
2. To pilot test delivery of the planning card in a randomised controlled trial
3. To test the validity of a breastfeeding self-efficacy scale short form adapted for use in a Scottish sample.



KEY FINDINGS

- Health professionals – midwives and health visitors – considered it desirable and feasible to deliver the planning card.
- Currently breastfeeding parents considered it desirable and feasible that the planning card be delivered as a standard part of antenatal care.
- The pilot randomised controlled trial was successfully embedded as part of care as usual in NHS Lothian.
- The pilot randomised controlled trial successfully recruited 126 participants.
- The pilot randomised controlled trial showed higher rates of exclusive breastfeeding in the treatment group (44%) compared to the control group (32%)
- Qualitative feedback from the midwives delivering the randomised controlled trial endorsed scaling up the randomised controlled trial.
- The adapted breastfeeding self-efficacy short form was demonstrated to be valid in a Scottish sample. The self-efficacy scores delivered by patients at 5 days postpartum predicted who would be exclusively breastfeeding at 6-8 weeks post-partum.





WHAT DID THE STUDY INVOLVE?

We conducted two focus groups. One was of 8 health professionals – midwives and health visitors – working in NHS Lothian. The second was of 7 currently breastfeeding parents, who received their medical care in NHS Lothian. Both groups were asked whether it was desirable and feasible to deliver our breastfeeding planning card as part of standard antenatal care.

We then ran a Randomized Controlled Trial (randomised controlled trial) of card delivery in 11 health clinics in NHS Lothian. We worked with midwives to devise procedures to consent pregnant women into the study and to allocate certain women the breastfeeding planning card in accordance with random assignment.



WHAT WERE THE RESULTS AND WHAT DO THEY MEAN?

The focus groups delivered feedback on the design of the planning card. They suggested including a QR code that links to support services; the phone number of the breastfeeding helpline and tweaking the language e.g. renaming the card a “Breastfeeding Toolkit”. We amended the breastfeeding planning card to take account of that feedback. (see figure on left below)

The randomised controlled trial delivered encouraging results on breastfeeding self-efficacy and on breastfeeding rates. (see figures on right)

BREASTFEEDING TOOLKIT



QR code links to <https://services.nhs.uk/scot/feedingyourbaby/breastfeeding-help/>

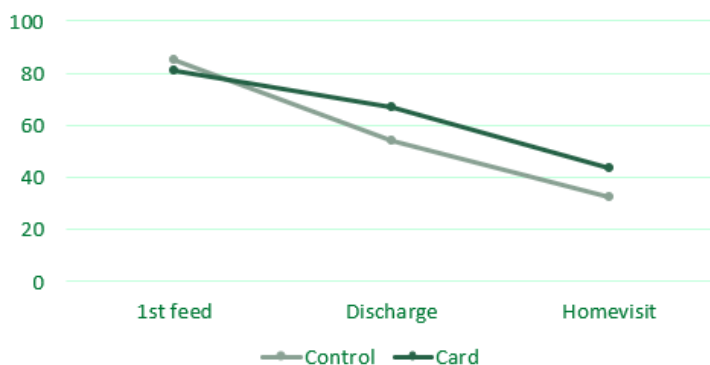
When I have my baby, I hope to breastfeed for (months/weeks/days).

National breastfeeding support helpline (9.30am – 9.30pm): 0300 100 0212

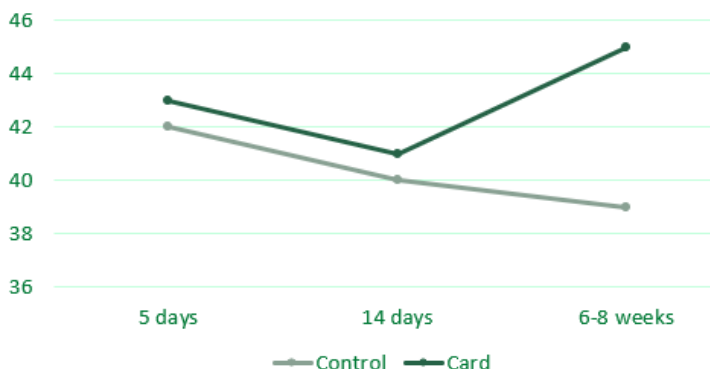
Many women report that they would like to have breastfed for longer – here's what to expect and how to prepare

What to expect	How to prepare
It can feel like the baby is not getting enough milk	New babies need very small amounts to nourish them. Reassuring signs your baby is getting enough milk are frequent wet and dirty nappies and a gradually changing poo. A satisfied baby will settle after a feed, but don't worry if this is only on you - babies like to be close to their mum.
Feeding happens at various times of day and night	The first 3 months are often called the “fourth trimester” as your baby still feels they are a part of your body. Feeding is unpredictable in these early weeks. Try to be flexible and accept routines will come eventually.
Others want to feed the baby	Your new family is now a team. Loved ones can bond with baby in ways other than feeding e.g. winding, bathing, putting baby to bed and giving baby attention and skin-to-skin contact.
Breastfeeding can be uncomfortable at first	Breastfeeding is a new skill that can take time for you and your baby to master. Ask your midwife or health visitor to observe a feed or find a support group using the phone number or QR code overleaf.

Exclusive breastfeeding rates ($n = 102$)



Breastfeeding self-efficacy: Score out of 60





WHAT IMPACT COULD THE FINDINGS HAVE?

- The card has immediate potential to be scaled across the NHS: The results suggest this would:
- increase breastfeeding rates, thereby improving maternal and infant health
- increase mothers' breastfeeding self-efficacy, thereby improving their subjective experience of early parenthood
- Aid health professionals in communication around breastfeeding, saving them time and effort



HOW WILL THE OUTCOMES BE DISSEMINATED?

We are writing up the results of the focus groups for publication.

The card is already in use as part of a Quality Improvement process in NHS Grampian.

NHS Dumfries and Galloway are keen to disseminate the card as part of standard antenatal care and will work with us on the larger scale randomised controlled trial .

We are applying to scale up the randomised controlled trial as part of the NIHR scheme. Community midwives and infant feeding specialists in Wales and England are working with us as part of that scaled up randomised controlled trial .



CONCLUSION

The breastfeeding planning card shows promise as a scalable intervention that improves population health at low cost.

The results of the pilot randomised controlled trial are encouraging. The card can be delivered as part of care as usual.

It receives the endorsement of health professionals and currently breastfeeding parents.

The card shows promise as a means of increasing breastfeeding self-efficacy and, crucially, exclusive breastfeeding.



RESEARCH TEAM & CONTACT

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Additional Information

The study ran from September 2023 to March 2024 and was funded £158,000 by the Chief Scientist Office.

