Becoming **Baby-Friendly** and Transforming Maternity Care in a Safety-Net Hospital on the Texas-Mexico Border

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The movement of childbirth from home to hospital occurred during a period of rapid social change and resulted in improved maternal safety. Over time, dissatisfaction developed with the maternity practices that had evolved. Breastfeeding became a lost art and a scientific enigma. Eventually, a renaissance occurred regarding the importance of natural childbirth and lactation for nurturing babies (Shannon, O'Donnell, & Skinner, 2007; W. K. Kellogg Foundation, 2013). In 1991, the World Health Organization and United Nations Children's Fund initiated an international program to foster breastfeeding (World Health Organization & United Nations Children's Fund, 2009). This program became the Baby-Friendly Hospital Initiative (BFHI), with a U.S. branch that provides recognition for maternity facilities that create an optimal environment for infant feeding and maternal–newborn care. In recent years, the BFHI concepts were embraced and incorporated into the position statements of multiple professional organizations in nursing, pediatrics, obstetrics, midwifery, childbirth education, and nutrition (World Health Organization & United Nations Children's Fund, 2009).

The requirements for achieving BFHI designation are daunting and often require a complete revision of many deeply ingrained practices of nurses and physicians. Helping clinicians relinquish these practices and their beliefs about them can be similar to working through the grief process. It takes time, attention, and patience.

Abstract: Nurse leaders used the Centers for Disease Control and Prevention's survey on Maternity Practices in Infant Nutrition and Care, as well as Baby-Friendly Hospital Initiative guidelines, to transform maternity care in a safety-net hospital with more than 3,500 births annually. Implementing evidence-based guidelines to support breastfeeding was essential for a vulnerable population characterized by minimal prenatal care and high rates of diabetes, hypertension, obesity, and poverty. Research showing the importance of breastfeeding in protecting against these factors guided extensive changes in our maternity care model. The nursing and medical teams changed long-held practices that separated women from their newborns and observed substantial improvements in breastfeeding initiation and exclusive breastfeeding rates at discharge. http://dx.doi.org/10.1016/j.nwh.2016.07.005

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