Impact of Healthcare Worker’s Breastfeeding Knowledge on Breastfeeding Mothers: A Review of the Literature

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What We Learned
We learned that breastfeeding is not taught adequately and that nursing curriculums need to change to accommodate for this lack of knowledge. In order for exclusive breastfeeding rates to increase nurses need to feel more confident in their skills.

Background
- The World Health Organization (WHO) recommends that for the first six months of life infants be breastfed exclusively, which has many positives for both mother and baby.
- Current attitudes: breastfeeding and formula feeding are equally beneficial, however this is not evidence based.

Purpose & Aims
- To review data related to education on breastfeeding and how it impacts exclusive breastfeeding rates.

Sample
- Healthcare workers varying in size from 24 to 260 participants.
  - Healthcare professionals.
  - Students completed maternal/child clinical courses.
  - Cairo, Egypt or the United States.

Methods
- Researched on CINAL, Ebscohost, and Medline.
- Terms searched: breastfeeding, lactation, breastfeeding knowledge, exclusive breastfeeding, breastfeeding rates, competence in breastfeeding, and breastfeeding curriculum.
- Published 2009-2015.
- Three needed to be from nursing journals or written by nurses.

Results
- The relationship between pre-tests, interventions, and post-tests shows how education of healthcare workers, and specifically nurses, is lacking and can be easily fixed.

Discussion
- Exclusive breastfeeding is a secondary result to improved breastfeeding education of nurses.
- Improving breastfeeding knowledge:
  - Implement breastfeeding throughout the curriculum.
  - Reinforce through clinical rotations to bring theoretical knowledge into practice.
- Confidence is a major factor in giving care.

Next Steps
- Use questionnaires with differently formatted questions.
- Researcher should look into the different hospital policies.
- Take variables affecting the studies into consideration.
- Choose only reliable institutions for statistically correct breastfeeding rates to increase precision.

Limitations
- Need a larger sample.
- Exposure to influencing factors which could not be controlled.
- References that met all criteria were limited.

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