

Professional Support

Definition

Professional support is provided by health professionals (e.g., physicians, nurses, lactation consultants, other allied health professionals) to mothers both during pregnancy and after they return home from their hospital stay. Support includes any counseling or behavioral interventions to improve breastfeeding outcomes, such as helping with a lactation crisis or working with other health care providers. The primary focus of support is counseling, encouragement, and managing lactation crises; education is a secondary purpose. Professional support can be rendered in person or over the telephone, in a group or individual setting, or in a clinic or home setting.



Photo by David C. Arendt, courtesy of La Leche League International

Rationale

Women's early experiences with breastfeeding considerably affect whether and how long they continue to breastfeed. Lack of support from professionals has been identified as a major barrier to breastfeeding, especially among African American women.^{47,48} Mothers often identify support received from health care providers as the single most important intervention the health care system could have offered to help them breastfeed.⁴⁵ Short maternity hospital stays have shifted the responsibility for breastfeeding support to health professionals who provide ongoing health care.⁴⁹ Their role is to give consistent and evidence-based advice and support to help mothers effectively initiate and continue breastfeeding.

Evidence of Effectiveness

The U.S. Preventive Services Task Force⁴⁶ found fair evidence that providing ongoing professional support to mothers through in-person visits or telephone contact increased the proportion of women who continue breastfeeding for up to 6 months. The Task Force's meta-analyses of randomized controlled trials examining the impact of in-person or telephone support on breastfeeding practices found that support alone significantly increased breastfeeding duration: by 11% for mothers who breastfed 2 to 4 months (short term) and by 8% for those who breastfed 4 to 6 months (long term).



Combined breastfeeding support and education programs were superior (but not significantly so) to support alone in initiation (mean difference of 6% to 21%) and short-term duration (mean difference of 11% to 37%). A **Cochrane review**⁴¹ indicates that a mostly in-person intervention significantly increases breastfeeding duration, while an intervention using mainly telephone contact does not.

Description and Characteristics

Professional support promotes breastfeeding by helping the mother and baby with **latch** and positioning of the infant, managing different lactation problems, counseling mothers returning to work or school, and addressing any other concerns of mothers and their families. This support can be provided during both the prenatal and **postpartum** periods and can be given by an International Board Certified Lactation Consultant (IBCLC) or other health professional, depending on the mother's needs and the availability of services.

IBCLCs are health care professionals who specialize in the clinical management of breastfeeding. They are certified by the International Board of Lactation Consultant Examiners, which operates under the direction of the U.S. National Commission for Certifying Agencies. IBCLCs work in a variety of health care settings, such as hospitals, private pediatric or other physician offices, public health clinics, and their own private practices.



Photo by Kimberly Cavaliero, courtesy of La Leche League International

Professional support given prenatally can be very helpful for addressing individual women's barriers to breastfeeding. One of the best-detailed strategies to address such barriers is the Best Start Three Step Counseling StrategyTM.⁵⁰ Two of its most appealing strengths are that it can be used by a wide range of health professionals and it is extremely time efficient.

Professional support is particularly critical in the first few weeks after delivery, when lactation is being established.⁵¹ Gross et al. recommend that all breastfeeding mothers have access to lactation support from trained physicians, nurses, lactation consultants, or other trained health care providers, especially during the first days and weeks postpartum.⁵² The content of professional support needs to be tailored to the mother's immediate needs. Although some pregnant women and new mothers may require in-depth support from an IBCLC to address complex breastfeeding issues, others may not require that level of support.

Professional support takes place in many different settings. Some women receive individual in-home visits from health professionals, while others visit breastfeeding clinics at hospitals, health departments, or women's health clinics. Staff at some maternity care facilities routinely follow up with their breastfeeding patients after they are discharged. This follow-up can be done in person, over the telephone, or face-to-face only after the telephone intervention is found insufficient. Staff at some maternity care facilities provide their breastfeeding patients with contact information for those who encounter difficulties. Experience among professionals in breastfeeding is that new mothers rarely make calls in such situations until problems become nearly insurmountable, and that proactive contact from health professionals is more effective.

Currently, many third-party payors in the United States do not reimburse for services rendered by IBCLCs unless they are otherwise eligible for reimbursement as nurses, physicians, or other health professionals. This situation is widely believed to be a barrier for many women seeking professional support because they must often pay out-of-pocket for this support. An additional barrier for many women, regardless of payment status, is not knowing how to get help with breastfeeding from an IBCLC.



Although nurse practitioners, physicians, and otherwise eligible health professionals may be reimbursed for their time spent on some components of support for breastfeeding, the availability of this reimbursement is not widely known in the medical community, and relatively few health professionals are adequately trained and experienced in providing breastfeeding support.⁴⁵

Program Examples

The International Lactation Consultant Association (ILCA) provides an international *Find a Lactation Consultant* directory for mothers and health providers who seek professional lactation support from an IBCLC (<http://gotwww.net/ilca>). This resource can address the problem that some health care professionals do not know about or where to find IBCLC services.

A Reimbursement Toolkit for Lactation Consultants is available for purchase from ILCA. This toolkit guides lactation consultants (IBCLCs) through procedures to establish third-party billing for their services and includes sample items needed to establish such billing, as well as a comprehensive bibliography and other resources.

The Breastfeeding and Follow-Up Clinic of Stormont-Vail HealthCare, Topeka, Kansas, is available to any mother, regardless of where she delivered or the infant's age. Services include assisting with latch and positioning, checking the infant's weight, counseling for mothers returning to work or school, and addressing the mother's breastfeeding concerns. All professional support is free of charge to the patient, but patients are charged minimally for any supplies used. This clinic is supported by the nonprofit Stormont-Vail Foundation, third-party reimbursement of billable services, generous donations, and the sale of unique items that support breastfeeding.

The Harris County Breastfeeding Coalition (in Texas) initiated a hospital-based breastfeeding clinic staffed by paraprofessionals supervised by a lactation specialist at Baylor College of Medicine's Ben Taub General

Hospital. This clinic provides breastfeeding support to high-risk mothers who are referred by hospital staff or are mothers who request this service within 2 weeks of discharge. Mothers receive counseling and hands-on assistance from breastfeeding counselors who have completed the Texas Department of Health's lactation management training program. Complex situations are referred to the clinic manager (an RN, IBCLC). Follow-up visits or telephone contact is arranged when problems are not resolved during the initial visit. Mothers are also referred to other sources of breastfeeding support in the community. The clinic was started with grant funding but has become a formal item in the hospital budget. Support from breastfeeding counselors is provided without charge beyond costs attributed to infant check-ups.



Photo by David C. Arendt, courtesy of La Leche League International

Kaiser Health Plan of Georgia offers its members a variety of lactation support services. Women can bring their babies in for a one-to-one visit with an IBCLC, and mothers can meet with a lactation consultant in an office near their home if they do not wish to travel to their physician's office. For mothers unable to travel to the lactation consultant's office, the health plan offers telephone consultations with IBCLCs who also call all breastfeeding women at 1 and 3 weeks postpartum. For women in special need of support after hospital discharge—including all teen mothers,

women whose infants had surgical (cesarean) births, and other women identified by a physician or nurse-midwife as meeting certain medical criteria—the health plan offers home visits from **perinatal** community nurses who have specialized training in lactation support. In addition, women whose infants are in the **neonatal** intensive care unit (NICU) automatically receive a follow-up phone call from a lactation consultant within 1 week and continuing phone calls as necessary.

Potential Action Steps

- Collaborate with state Medicaid and insurance commissioners to ensure lactation support is included in standard, reimbursable perinatal care services.
- Fund the establishment of sustainable, financially supported, walk-in breastfeeding clinics available to all new mothers in the community staffed by IBCLCs who are reimbursed for all services provided.
- Fund a program in which IBCLCs provide breastfeeding support to pregnant adolescents as part of their parenting education at local schools.
- Develop and disseminate a resource directory of lactation support services locally available to new mothers.
- Integrate lactation support services with home visitation programs to ensure that lactation problems are identified early and that mothers are referred for appropriate help and services.

Resources

International Lactation Consultant Association
Find a Lactation Consultant Directory:
<http://www.ilca.org>

International Lactation Consultant Association
Reimbursement Tool Kit for Lactation Consultants:
<http://www.ilca.org/pubs>

Breastfeeding and Follow-Up Clinic of Stormont-Vail HealthCare
<http://www.stormontvail.org/services/birthplace.html>

Harris County Paraprofessional Breastfeeding Clinic
<http://www.bcm.edu/cnrc/hcbc/index.html>

Kaiser Health Plan of Georgia Maternal/Child Health Lactation Program:
http://www.4woman.gov/owh/pub/breastfeeding/case_stdy4.htm

Medela, Inc., maintains a current list of ICD (International Classification of Diseases) codes applicable to professional breastfeeding support, as well as state-by-state tips for obtaining reimbursement from Medicaid:
http://www.medela.com/NewFiles/reburstmt_pro.html