Health professionals in promoting breastfeeding: integrative review

PROFISSIONAIS DE SAÚDE NA PROMOÇÃO AO ALEITAMENTO MATERNO: REVISÃO INTEGRATIVA
PROFESIONALES DE SALUD EN LA PROMOCIÓN A LA LACTANCIA MATERNA: REVISIÓN INTEGRADORA

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ABSTRACT
Objective: to identify the role of health professionals in promoting breastfeeding. Methods: integrative review aimed at answering the question << What is the role of health professionals in guiding breastfeeding? >> by searching in the databases LILACS and BDENF. The inclusion criteria for the selection of the articles were free articles published in Portuguese in those databases in the last six years. Results: the promotion of breastfeeding occurs through educational interventions that address the importance and benefits of breastfeeding. According to the 11 selected studies, it was observed that the nurse is the main professional responsible for promoting breastfeeding. Conclusion: professionals’ work in the promotion of breastfeeding is characterized by a more passive approach. Descriptors: Health Promotion; Health Professionals; Breastfeeding.

RESUMO
Objetivo: identificar a atuação dos profissionais de saúde na promoção ao aleitamento materno. Métodos: revisão integrativa com vistas a responder à pergunta << Qual a atuação dos profissionais da saúde na orientação ao aleitamento materno? >> e busca feita a partir das Bases de dados LILACS e BDENF. Os critérios de inclusão para a seleção dos artigos foram artigos gratuitos publicados em português nos referidos bancos de dados dos últimos seis anos. Resultados: a promoção ao aleitamento materno ocorre através de intervenções educativas que abordam a importância e as vantagens do aleitamento. Pelos 11 estudos selecionados, observou-se que o principal profissional responsável pela promoção ao aleitamento é o enfermeiro. Conclusão: a atuação dos profissionais na promoção ao aleitamento caracteriza-se por uma abordagem mais passiva. Descriptores: Promoção da Saúde; Profissionais de Saúde; Aleitamento Materno.

RESUMEN
Objetivo: identificar la actuación de los profesionales de salud en la promoción a la lactancia materna. Métodos: revisión integradora para responder a la pregunta << ¿Cuál es la actuación de los profesionales de la salud en la orientación a la lactancia materna? >> y la búsqueda hecha a partir de las Bases de datos de LILACS y BDENF. Los criterios de inclusión para la selección de los artículos fueron artículos gratuitos publicados en portugués en los referidos bancos de datos de los últimos seis años. Resultados: la promoción a la lactancia materna ocurre a través de intervenciones educativas que enfocan la importancia y las ventajas de la lactancia. Por los 11 estudios seleccionados, se observó que el principal profesional responsable por la promoción a la lactancia es el enfermero. Conclusión: la actuación de los profesionales en la promoción a la lactancia se caracteriza por un enfoque más pasiva. Descriptores: Promoción de la Salud; Profesionales de Salud; Lactancia Materna.

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INTRODUCTION

Breast milk is the safest food during the first years of life, and it has several benefits that extend to adulthood. Exclusive breastfeeding is recommended up to six months. After that age, infants start receiving complementary foods in addition to breast milk until the age of two. Breastfeeding has many benefits for infants, among them: it contains nutrients in adequate quantity and quality to meet the child’s needs; it is easily digestible; decreases the chances of the child developing allergies; protects the body against infectious diseases; decreases the risk of obesity in adulthood; prevents malnutrition; as well as strengthens the mother / child relationship.

According to the Brazilian Survey on Democracy and Health (PNDS), the prevalence of breastfeeding in Brazil in 2008 was 67.7% among children younger than 12 months, which, according to the World Health Organization (WHO), is a low rate. To occur an increasing in this rate, it is necessary an active participation of health professionals in guiding mothers about the importance of breastfeeding for the life of their child. Orienting about breastfeeding is a health professionals’ assignment, in which they must encourage breastfeeding through actions that address potential problems and help to overcome the difficulties of mothers related to breastfeeding. The orientation of breastfeeding occurs from the prenatal care to postpartum, also including the delivery. It is noteworthy that these professionals see the guidance on breastfeeding as a challenge, since they are often faced with a demand for which they have not been prepared and that requires skill and sensitivity. And this only reinforces the need for improvements in the care these professionals provide, so that they can work properly in the breastfeeding care.

Breastfeeding infants from the first moment of life is extremely important and necessary, because this act will bring consequences for the child’s entire life. Therefore, professionals need to educate mothers about the benefits of exclusive breastfeeding. It is necessary to ensure these mothers about the benefits this practice will bring to their children. For this purpose, nurses must guide on the proper technique of breastfeeding and encourage exclusive breastfeeding until six months of age, also reporting on weaning and the correct techniques of introduction of complementary foods.

BREASTFEEDING IS A WAY OF ENSURING IMPROVEMENT IN CHILD HEALTH.

Given the above, the objectives of this study are:

- To identify the role of health professionals in promoting breastfeeding;
- To identify which are the professionals involved in this practice.

METHODOLOGY

This is an integrative review that followed the six steps: 1) Development of guiding question that defined which studies would be included in the review; 2) Search or sampling in literature through electronic databases that ensured reliability of results; 3) Data collection that generated a synthesis of data from selected studies in order to minimize the risk of errors and increase the accuracy of the information; 4) Critical analysis of the included studies; 5) Discussion of results, phase in which the data shown in the analysis were compared; 6) Presentation of integrative review.

The guiding question of this integrative review was: what is the role of health professionals in guiding breastfeeding?

To survey the studies, authors searched the literature in LILACS and BDENF databases, through Virtual Health Library (VHL). The following descriptors were used to search for articles: health promotion, health professionals and breastfeeding; and the inclusion criteria for the selection of the articles were: free articles published in Portuguese in those databases in the last six years, which corresponded to the years 2009 to 2014. The selection of studies was conducted by the Boolean operators and, or and not. Repeated publications were exclusion criterion.

The combination of the descriptors “health promotion”, “breastfeeding” and “health professionals” totaled 195 articles. After reading the titles, this number was reduced to 50, and 39 publications remained after exclusion of repeated studies. Authors selected 22 studies for reading the abstracts and the full text, and selected 11 studies to participate in the study, according to Figure 1.
Health professionals in promoting breastfeeding...

Of the 11 publications selected for the study, eight articles were found in LILACS, one in BDENF, one dissertation and one thesis. For data collection, it was used an instrument to give more reliability in the data and to reduce possible errors in the information obtained. This instrument includes identification of the study, home institution of the study, methodological characteristics and assessment of methodological rigor.

In the critical analysis phase of the included studies, the Evidence-Based Practice (EBP) was used to classify the evidence. The EBP is characterized by the clinical care and by the teaching based on knowledge and quality of evidence. This device involves the definition of the clinical problem, the direction of search of studies in the literature to address the clinical problem, the critical analysis of studies, the identification of the applicability of the data found in the studies and their use for the patient.

To choose the best evidence, with a higher degree of validity, the studies were classified according to their strength of evidence: level I) evidence from the meta-analysis of multiple controlled and randomized clinical trials; level II) evidence from individual studies with experimental design; level III) evidence of quasi-experimental studies; level IV) evidence of descriptive (non-experimental) studies or with qualitative approach; level V) evidence from case or experience reports; level VI) evidence based on expert opinions.

The studies were categorized according to the title, author, year of publication, objectives, conclusions and evidence level, as shown in Table 1.

Due to the complexity of knowledge in the health area, it became important to develop devices regarding the scientifically based research to provide for the professionals a better use of evidence contained in the studies whose method into question is the Evidence-Based Practice. Among the studies, 9% (n = 1) refer to the level of evidence II, 73% (n=8) had level of evidence IV, and 18% (n=2) had level III.

<table>
<thead>
<tr>
<th>Title of the article</th>
<th>Authors</th>
<th>Year</th>
<th>Journal</th>
<th>Objectives</th>
<th>Conclusions</th>
<th>Level of evidence</th>
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<tbody>
<tr>
<td>Breastfeeding: knowledge and practice</td>
<td>Fonseca-Machado MO, Haas VJ, Stefanello J, Nakano MAS, Gomes-Sponholz F.</td>
<td>2012</td>
<td>Revista da Escola de Enfermagem da USP</td>
<td>The objectives of this study were to characterize the promotion practices of breastfeeding developed by the Family Health Strategy nurses of Uberaba city, Minas Gerais, and to analyze the correlation between</td>
<td>Most FHS nurses of Uberaba said they often addressed breastfeeding in the activities undertaken. These practices were composed of: meetings with pregnant women in the first trimester; education groups for pregnant and lactating women; home visits in the postpartum period; first home visit after delivery; and continuing education activities. However, the statements of these professionals indicate that the guidelines on breastfeeding were made independently of</td>
<td>Level IV</td>
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<td>Degree of compliance with the Ten Steps of the Initiative Breastfeeding-Friendly Basic Unit and its association with the prevalence of exclusive breastfeeding.</td>
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<td>Rito RVVF, Oliveira MIC, Brito AS.</td>
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<td>Jornal de Pediatria</td>
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<td>To assess the association between the degree of compliance with the Ten Steps of the Initiative Breastfeeding-Friendly Basic Unit (BFPCI) and the prevalence of exclusive breastfeeding (EBF) in children aged under six months of age in the city of Rio de Janeiro.</td>
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<td>The steps with higher compliance were 3) guiding the pregnant women and mothers about their rights and the advantages of breastfeeding, promoting exclusive breastfeeding until six months of age and supplemented until two years of age or older; 4) listening to the concerns, experiences and doubts of pregnant women and mothers about the breastfeeding practice, supporting them and strengthening their self-confidence; and 5) guiding pregnant women about the importance of initiating breastfeeding within one hour of birth and stay with the baby in rooming-in. And the last accomplished step was 1) having a written rule on the promotion, protection and support of breastfeeding that should be routinely communicated to all staff of the health unit. Compliance with these three steps revealed that professionals have been guiding women about the importance of exclusive breastfeeding and with it, the prevalence of exclusive breastfeeding has increased.</td>
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<td>Impact of an educational intervention on knowledge of breastfeeding</td>
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<td>Pereira DV, Grosseman S.</td>
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<td>2013</td>
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<td>Revista da Associação Médica do Rio Grande do Sul</td>
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<td>To assess the impact of a new theoretical and practical teaching-learning program on breastfeeding, compared to the acquisition of knowledge by students before and after this intervention.</td>
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| Medical students were divided into two groups: group 1) students who did not attend classes of the theoretical and practical teaching-learning program on breastfeeding; group 2) students who attend the theoretical and practical teaching-learning program. Comparing the level of knowledge of these two groups, authors found a better performance of the group 1, students who attended the Breastfeeding Course of the Ministry of Health,
even though they had a lower score of initial knowledge compared to the group of students who have not attended the course. This stresses the importance of training professionals on this topic.

The educational intervention consisted of four theoretical and practical workshops lasting eight hours each; it was based on principles of the Critical-Reflexive Education. In two training courses for maternity teams, it resulted in an increase in the number of community health workers with adequate knowledge of breastfeeding and able to work in the promotion and support of breastfeeding. However, this intervention did not result in an active participation of these workers in actions / practices that could lead to an increase in breastfeeding rates in FHSs of Botucatu-SP.

In this study, it was observed that most professionals (doctors and nurses) interviewed did not know or did not
<table>
<thead>
<tr>
<th>Study</th>
<th>Authors</th>
<th>Year</th>
<th>Study type</th>
<th>Findings/Summary</th>
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<tbody>
<tr>
<td>18 Breastfeeding: knowledge and practices in primary health care in 2 municipalities of the Southwestern region of Mato Grosso state</td>
<td>Fujimori M.</td>
<td>2012</td>
<td>Dissertation</td>
<td>The results of this study show that the professionals involved in the research, namely doctors, nurses and community health workers, recognize the importance of breastfeeding. However, they lack more solid knowledge on breastfeeding so they can adequately promote and support this practice.</td>
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<td>19 Collective process for training professionals of a basic health unit in relation to breastfeeding</td>
<td>Lipinski JM.</td>
<td>2010</td>
<td>Doctoral thesis</td>
<td>The study was divided into two stages. The first was carried out through training of seven pre-natal care providers and the second training was extended to the whole of BHU staff. The main topics covered in the training were the need to expand the knowledge of pre-natal care providers and also of the whole BHU team.</td>
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<td>20 Guidance on breastfeeding: the advantage of the Health Family Program in cities of Rio Grande do Sul state with more than 100,000 inhabitants under the PROESF</td>
<td>Cruz SH, Germano JA, Tomasi E, Faccinini LA, Piccini RX, Thumé E.</td>
<td>2010</td>
<td>Revista Brasileira de Epidemiologia</td>
<td>The Family Health Program (PSF) services proved to be more active than the Basic Health Units (BHU) as regards the establishment of guidelines on breastfeeding. A little more than 70% of mothers in the study said they had received information about breastfeeding in the first hours of life, about the benefits of exclusive breastfeeding, the importance of suction and free demand breastfeeding in their respective PSFs.</td>
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<tr>
<td>21 Practices and perceptions on breastfeeding: consensus and SOPs in the Hospital Amigo da Criança</td>
<td>Marques ES, Cotta RMM, Franceschini SCC, Botelho MV, Araújo RMA.</td>
<td>2009</td>
<td>Physis Revista de Saúde Coletiva</td>
<td>To identify the meaning of breastfeeding for professionals who work in the PSF and remember what the Step 4 of Breastfeeding is, nor its importance towards the promotion of breastfeeding. So, one can say that the professionals working in the Hospital Amigo da Criança of Recife did not incorporate the 4th step in their practices, endangering the maintenance of breastfeeding by mothers.</td>
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Of the selected studies, 82% (n = 9) reported the lack of solid knowledge on the subject by the professionals who were involved in the practice of promoting breastfeeding, which can be observed by the low level of breastfeeding in the country.\textsuperscript{16, 9, 20-4}

It was observed that, in 64% (n = 7) of the studies, the professionals were not able to carry out the promotion of breastfeeding correctly, and training these professionals through educational interventions could represent a way to improve the rates of breastfeeding.\textsuperscript{15, 8, 20-1, 23}

Among the selected studies, 45% (n = 5) cited health professionals involved in the promotion of breastfeeding in general, without specifying individually which were inserted in this practice.\textsuperscript{15, 16, 20-1, 23} Of the studies, 18% (n = 2) mentioned nurses as those responsible for promoting breastfeeding\textsuperscript{14, 24} and 9% (n = 1)\textsuperscript{17} mentioned the community workers. Medical students performed guidance in 9% (n=1); 9% (n=1) cited the doctors, nurses and community health workers as the professional responsible for this and 9% (n = 1) cited, in addition to doctors, nurses and community health workers, a nutritionist, a dentist assistant and nursing technicians.\textsuperscript{18, 20, 23}

The nurse was the most cited in articles as the most active professional in the promotion of breastfeeding, since among the selected articles, 36% (n = 4) addressed these professionals as one of the responsible for this practice.\textsuperscript{14, 20, 23-4}

The main techniques used to address breastfeeding, when guidelines were given, were during the prenatal care and postpartum period, through consultations in the health units, educational meetings with pregnant women, as well as home visits.\textsuperscript{14, 5, 17, 9, 20-4}

The main issues addressed in the educational interventions were the importance and benefits of exclusive breastfeeding, correct techniques of breastfeeding, debunking some myths related to breastfeeding.\textsuperscript{14-5, 17, 9, 20-4}

It was observed that in 82% (n = 9) of the studies, the strategic location of the activities to promote breastfeeding was in primary health care.\textsuperscript{14-5, 17, 8, 20-4} And 9% (n = 1) occurred on a baby-friendly hospital and 9% (n = 1) in a public university in Brazil.\textsuperscript{19, 16}

**DISCUSSION**

Breastfeeding is considered a protective practice against mortality and child morbidity, therefore, the promotion of breastfeeding is a priority initiative in the face of public health policies.\textsuperscript{25}

Most health professionals considered themselves favorable to breastfeeding, however, many women were unsatisfied with the type of support received. This may be a
result of discrepancies between what actually is considered support to breastfeeding. Mothers want a more active support, get more accurate information to feel more confident, but the support offered by professionals is usually more passive.26

Most health professionals have a good theoretical knowledge about breastfeeding, but are not able to give these women the proper support they need. Therefore, advising on this practice is a challenge for these professionals.20

As previously mentioned, the promotion of breastfeeding occurs most often in basic health units and so the health professionals most involved in this practice are those that integrate the family health teams, usually doctors, nurses, nursing technicians and community health workers.22

Literature states that there is a lack of studies showing the professional nutritionist as active in promoting this practice.1 This leads us to note that among the studies selected for this survey, only one publication reports the nutritionist as active in promoting breastfeeding.23

Primary care aims to promotion, prevention, treatment, rehabilitation and maintenance of health, both individually and in collective level. 27 Another important objective is the reduction of child mortality and also including breastfeeding promotion actions.20

The Baby Friendly Hospital Initiative is a key action for the promotion of breastfeeding. This strategy makes health professionals to engage more significantly in promotion to result in increased rates of this practice. There is a need of continuous update to improve knowledge about breastfeeding so that this practice becomes more humanized.28

So that professionals are more active in the promotion of breastfeeding, they need to understand what kind of support, information and interaction mothers need and want from them.26

It was found that programs promoting breastfeeding, which include health team training activities, have an important impact on the practice of these professionals, resulting in successful breastfeeding, observed by its increased rates.20

The training of Family Health teams have shown to be effective and inexpensive to raise awareness among professionals involved in this practice, thus ensuring the necessary support for mothers who breastfeed their children.25

The success of breastfeeding can be viewed through health education activities, that provide greater knowledge to professionals, thus increasing the promotion of breastfeeding and consequently the rates of breastfeeding. In this context, the implementation of an educational curriculum program based on breastfeeding should be encouraged in undergraduate courses in all areas of health involved.16

**CONCLUSION**

Usually, the health professionals work in the promotion of breastfeeding is characterized by a more passive approach, without much involvement of these professionals, which highlights their lack of practice.

Among the professionals involved in this practice, nurses, nursing technicians and community health workers stood out, but these professionals are not updated as the knowledge required to act meaningfully and effectively in this practice, thus reinforcing the need to participate in training interventions.

When the guidelines are carried out, the most discussed topics are the advantages that exclusive breastfeeding brings for infants and the correct techniques of breastfeeding.

Health education activities focusing on breastfeeding will result in the increase in their rates, which are still considered low by WHO.

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