

THE NURSE'S ROLE IN PROMOTING BREASTFEEDING: INTEGRATIVE REVIEW

O papel do enfermeiro na promoção do aleitamento materno: revisão integrativa

Papel del enfermero en la promoción de la lactancia materna: revisión integradora

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ABSTRACT

Background: nurses have a unique role in protecting, promoting and supporting mothers' breastfeeding, considering interventions to teach, guide and help them in the breastfeeding process. **Objectives:** to analyze the role of nurses in promoting breastfeeding in scientific results. **Methodology:** integrative literature review, in the Psychology & Behavioral Sciences Collection, MEDLINE Complete, CINAHL Complete, MedicLatina, Academic Search Complete and Education Resources Information Center databases. 115 articles were selected and seven were included. **Results:** it was observed that nurses promote educational activities regarding breastfeeding from prenatal care, with greater insistence after delivery. Women appreciate empathetic support and an empowering approach to breastfeeding. The moral discourse, without considering the psychological and emotional needs, are pointed out as negative aspects. **Conclusion:** the analyzed studies show the importance of the nurse's role in promoting breastfeeding, due to the privileged position of acting in direct assistance to women and children, both at the hospital and community level. The need for empathetic communication becomes relevant, based on a model centered on the person and their needs, respecting autonomy and decision-making regarding breastfeeding.

Keywords: breastfeeding; health promotion; the nurse's role.

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RESUMO

Enquadramento: os enfermeiros possuem um papel singular na proteção, promoção e apoio da amamentação das mães, equacionando intervenções para as ensinar, orientar e ajudar no processo de amamentação. **Objetivo:** analisar na produção científica o papel do enfermeiro na promoção do aleitamento materno. **Metodologia:** revisão integrativa da literatura, nas bases de dados Psychology & Behavioral Sciences Collection, MEDLINE Complete, CINAHL Complete, MedicLatina, Academic Search Complete e Education Resources Information Center. Foram selecionados 115 artigos e incluídos sete. **Resultados:** observou-se que os enfermeiros promovem ações educativas sobre aleitamento materno desde o período pré-natal, com mais insistência depois do parto. As mulheres apreciam o apoio empático e uma abordagem empoderadora sobre a capacidade de amamentar. São apontados como aspetos negativos o discurso moral, desconsiderarem as necessidades psicológicas e emocionais. **Conclusão:** os estudos analisados evidenciam a importância do papel dos enfermeiros na promoção do aleitamento materno, pela posição privilegiada de atuarem na assistência direta às mulheres e crianças, tanto a nível hospitalar, quanto comunitário. Torna-se relevante a necessidade de uma comunicação empática, assente no modelo centrado na pessoa e nas suas necessidades, respeitando a autonomia e decisão sobre a amamentação.

Palavras-chave: aleitamento materno; promoção da saúde; papel do enfermeiro.

RESUMEN

Marco contextual: las enfermeras tienen un papel único en la protección, promoción y apoyo a la lactancia materna de las madres, considerando intervenciones para enseñarlas, guiarlas y ayudarlas en el proceso de lactancia materna. **Objetivos:** analizar el papel de los enfermeros en la promoción de la lactancia materna en la producción científica. **Metodología:** revisión integradora de literatura, en las bases de datos Psychology & Behavioral Sciences Collection, MEDLINE Complete, CINAHL Complete, MedicLatina, Academic Search Complete y Education Resources Information Center. Se seleccionaron 115 artículos y se incluyeron siete. **Resultados:** se observó que los enfermeros promueven actividades educativas sobre la lactancia materna desde el prenatal, con mayor insistencia después del parto. Las mujeres aprecian el apoyo empático y un enfoque fortalecedor de la capacidad de amamentar. El discurso moral, sin tener en cuenta las necesidades psicológicas y emocionales, son señalados como aspectos negativos. **Conclusión:** los estudios analizados muestran la importancia del papel del enfermero en la promoción de la lactancia materna, debido a la posición privilegiada de actuar en la asistencia directa a la mujer y al niño, tanto a nivel hospitalario como comunitario. La necesidad de una comunicación empática se vuelve relevante, a partir de un modelo centrado en la persona y sus necesidades, respetando la autonomía y la toma de decisiones sobre la lactancia.

Palabras clave: lactancia materna; promoción de la salud; el papel de la enfermera.

INTRODUCTION

The benefits of breastfeeding for improving the health of children, mothers, families, the environment and society in general are well recognized. For Neto et al. (2015), cited by Galvão et al. (2022, p. 2), “breastfeeding is the strongest single strategy for preventing infant mortality and promoting the physical and mental health of the child and the woman who breastfeeds”. Also Marques et al. (2020) state that breastfeeding is an ancient practice with benefits enjoyed in its entirety when practiced for at least two years and exclusively until the sixth month of the child's life, in which the mother provides her child with all the nutrients necessary for a good physical, mental, emotional and nutritional development. For Eagen-Torkko et al. (2017) breastfeeding is a profound process that brings together several factors unique to each woman and her baby.

In this sense, the World Health Organization and the United Nations Children's Fund (WHO and UNICEF, 1997) recommend exclusive breastfeeding from birth to 6 months, and maintenance of breastfeeding with complementary foods until 2 years of age or more, until mother and baby want to do so. However, the World Health Organization (WHO, 2017) states that what is happening worldwide is that only 40% of children under six months of age are exclusively breastfed and that out of every five babies, three are not breastfed in the first hour of life. In this regard, the General Directorate of Health (2014) and UNICEF (2019) also refer, respectively, that although the importance of breastfeeding and its benefits are indisputable, in Portugal and other developed countries, exclusive breastfeeding up to 6 months of age is far from what is recommended, and that only

two in five children under six months of age are exclusively breastfed, as recommended. Silva et al. (2016, p. 440) state that “Promoting exclusive breastfeeding until the 6th month of life is the single public health intervention that has the greatest potential for reducing childhood mortality”. Therefore, the need to promote breastfeeding becomes evident. In this sense, the WHO (2017) states that support for mothers must be considered to teach, guide and help them in the breastfeeding process. However, Santos et al. (2019, p. 71) warn that for pregnant women to opt for exclusive breastfeeding, it is not enough to be informed about the benefits and advantages of breastfeeding, they need to be “inserted in an environment favorable to breastfeeding and have the support of a qualified health professional to help you”. Also, Rocha et al. (2020), mention that health education, assistance from health professionals and family support are determining factors for adherence, exclusivity and maintenance of breastfeeding. Machado et al. have an identical opinion (2014) when mentioning that “Support from health professionals, as well as that received at home and at work, can help in this process.” (p.985).

Verga and Galvão (2023) are also of the opinion that health professionals have a unique role in protecting, promoting and supporting breastfeeding, requiring a partnership between everyone. Elfgen et al. (2017) also state that differentiated support suited to the specific needs of women during pregnancy and breastfeeding contributes to improving breastfeeding. Lourenço (2018) warns that the actions of health professionals must aim to prepare mothers both for difficulties and concerns and to instruct, train, teach and enable them to breastfeed in order to increase their confidence and overcome any obstacles that may

arise. Still, Dias et al. (2013) mention that health professionals are responsible for addressing doubts, minimizing situations of uncertainty and anguish, which can lead to abandonment of breastfeeding, and contributing to increasing mothers' self-confidence and self-esteem.

Santos et al. (2022) and Barboza et al. (2020) state that nursing professionals occupy a privileged position in promoting breastfeeding by providing direct assistance to women and children, both at hospital and community levels, so they must be prepared to help mothers both in prenatal and postnatal care. postpartum in difficulties related to breastfeeding, promoting safety, informing and minimizing their doubts and anxieties.

Knowing the importance of promoting breastfeeding and the nurse being the health professional who works directly in its promotion (Palheta & Aguiar, 2021), interest arose in this study the objective of which is to analyze in scientific production the role of the nurse in promoting breastfeeding.

METHODOLOGICAL REVIEW PROCEDURES

An integrative literature review was undertaken, from February to June 2023, following the classification of the level of evidence by Melnyk and Fineout-Overholt (2011) and the six steps recommended by Sousa et al. (2017): identification of the theme and guiding question; establishment of inclusion and exclusion criteria/sampling or literature search; definition of information to be extracted from selected studies/categorization of studies; evaluation of studies included in the integrative review; analysis and interpretation of data; presentation of the review/synthesis of knowledge. In the first stage of

developing the research question, the PICO strategy was adopted (Santos et al., 2007), where "P" refers to the Population or Problem, "I" to the intervention or interest, "C" Comparison Intervention or without intervention and "O" outcome (outcomes). Therefore, in the present study P was defined: Women, Men, Children, General population; I: Promotion of breastfeeding; C: Non-intervention; O: Role of the nurse.

According to this strategy, the guiding research question was defined as: what is the role of nurses in promoting breastfeeding?

In the second stage, the inclusion criteria were articles that addressed the role of nurses in promoting breastfeeding, classified as originals of a primary nature, in Portuguese, English or Spanish, freely accessible, made available in full and published between 2019 and 2023. Review articles were excluded. A search for articles was carried out by two researchers, independently, in May 2023, accessing the databases Psychology & Behavioral Sciences Collection, MEDLINE Complete, CINAHL Complete, MedicLatina, Academic Search Complete and Education Resources Information Center (ERIC). The search was carried out in titles and abstracts, using the health descriptors: nurse's role, breastfeeding, health promotion and the Boolean operator "and". In total, 115 articles were retrieved from the databases, and after identification and exclusion, by reading the title and duplicates (93) and abstract (11), 11 articles with full texts were sent for evaluation. At this stage, three (03) were excluded, as they were revisions, and one (01) because it did not meet the objective. Thus, seven articles were included for data extraction (Figure 1).

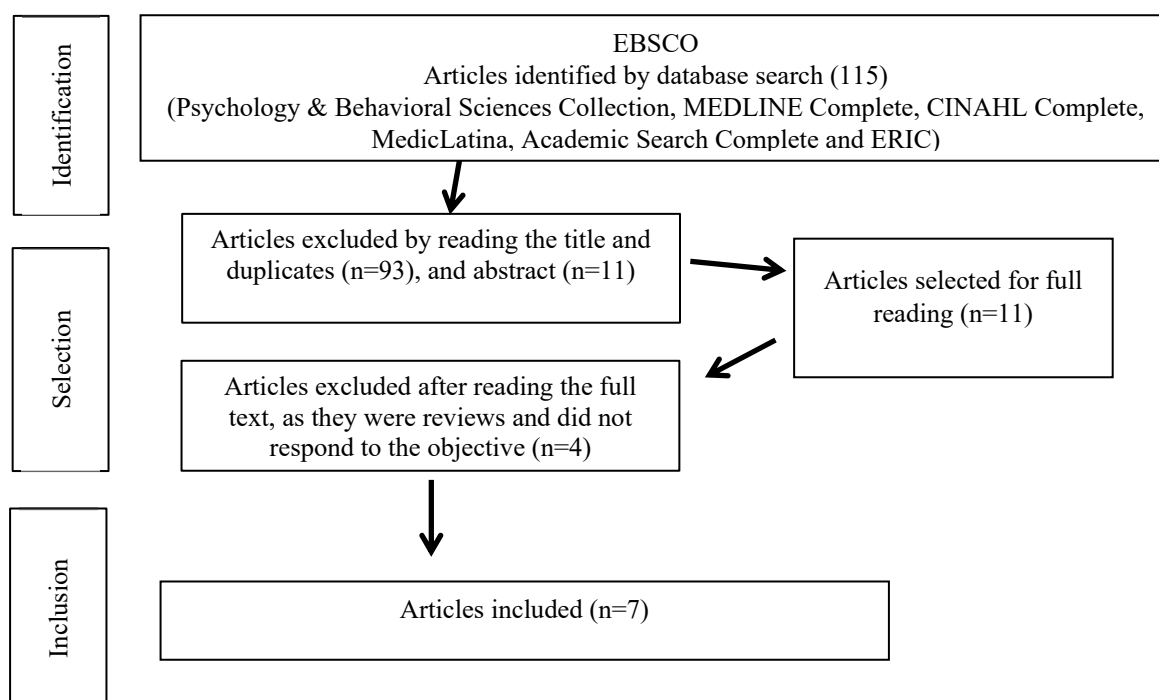


Figure 1

Flowchart of the stages of identification, selection and inclusion of articles.

RESULTS

The results, with a summary of the characteristics of the included studies, are presented in table 1. Four studies were published in English, two in Portuguese and one in Spanish, one in 2019, three in 2020, two in 2021 and one in 2022. There was diversity regarding

the place of publication, in terms of continents and countries, three in Brazil, one in Spain, one in Turkey and two in Australia. Regarding the type of studies, four are qualitative, one quantitative, one mixed and one observational. The level of evidence for all fall into level of evidence VI.

Table 1

Characteristics of included articles (n=7)

Author(es)	Country/ Year of publication	Type of study	Level of evidence	Population/sample under study
Sardinha et al. (2019)	Brazil (2019)	Qualitative/descriptive/experience report	VI	15 pregnant women
Babuç and Avci (2020)	Türkiye (2020)	Quantitative/phenomenological	VI	7 postpartum women who had children less than a year ago and 5 breastfeeding consultants
Silva et al. (2020)	Brazil (2020)	Qualitative/ Descriptive/ exploratory	VI	20 postpartum women who were breastfeeding
Xiao et al. (2020)	Australia (2020)	Qualitative/ exploratory	VI	22 women who were in the first 6 weeks after giving birth
Shahrani et al. (2021)	Australia (2021)	Observational/prospective	VI	Estimated sample size between 133 and 292 and included all postpartum women who had

				complete births of full-term, singleton, healthy newborns who were breastfeeding before discharge. Data were collected before discharge, 2 weeks and 8 weeks postpartum
Van Breevoort et al. (2021)	Australia (2020)	Exploratory/mixed/transversal	VI	194 mothers of children under 24 months of age
Alcázar-París et al. (2022)	Spain (2022)	Quantitative/Descriptive/transverse	VI	Calculated sample that included 340 postpartum women admitted to the Obstetric Unit of the Women's Hospital of the Vall d'Hebron University Hospital in Barcelona

After reading the articles, the most relevant information from each article was grouped (Table 2). Thus, four blocks of analysis were created: report when the breastfeeding promotion is developed by nurses); themes/content provided to mothers during breastfeeding promotion developed by nurses; report of positive experiences with promoting breastfeeding; report of negative experiences with the promotion of breastfeeding.

Table 2

Summary of information provided by the included articles

Available information
Report of breastfeeding promotion moments developed by nurses
After childbirth. (Sardinha et al., 2019; Xiao et al., 2020; Alcázar-París et al., 2022)
Prenatal and postnatal. (Silva et al., 2020; Shahrani et al., 2021; Van Breevoort et al., 2021)
Themes/content offered to mothers when promoting breastfeeding are developed by nurses
Importance of breastfeeding for the baby and mother and its properties. (Sardinha et al., 2019)
Aspects related to the benefits of breastfeeding for the baby, guidance on correct attachment and prevention of problems during breastfeeding. (Silva et al., 2020)
Baby positioning at the breast and health benefits of breastfeeding. (Van Breevoort et al., 2021)
How to put the baby to the breast and identify a good latch, early identification of the baby's hunger, recognize signs of baby satisfaction, number of minimum daily intakes, healthy habits, expressing milk, benefits of breastfeeding, importance of breastfeeding on demand, need for mother-baby rooming-in and information on lactation support groups. (Alcázar-París et al., 2022)
Report of positive experiences with breastfeeding promotion
Health professionals greatly influence mothers' decision-making process regarding infant feeding. (Van Breevoort et al., 2021)
The health professional helped mothers with breastfeeding. (Van Breevoort et al., 2021)
The mothers were influenced by a health professional in the practice of breastfeeding. (Van Breevoort et al., 2021)
Women indicated that nurses strongly influenced breastfeeding practices, playing an important role in women's decisions during pregnancy, childbirth and the first months of a child's life. (Van Breevoort et al., 2021)
Facilitating factors for breastfeeding included mothers who received support during the first feeding, guidance to pregnant women about the benefits of breastfeeding, advice from nurses and support from husbands. (Van Breevoort et al., 2021)

Women's positive perceptions about breastfeeding were one of their biggest motivations for starting breastfeeding. (Xiao et al., 2020)

Report of negative experiences with breastfeeding promotion

Lack of coherence between the discourse and information of health professionals and their breastfeeding experience. (Babuç & Avci, 2020)

Pressure from health professionals regarding breastfeeding advice and support, resulting in alienation from their own breastfeeding experience. (Babuç & Avci, 2020)

Exposure of mothers to moral discourse, acting as inspectors and not as consultants, disregarding psychological and emotional needs, control over their bodies and decisions regarding breastfeeding. (Babuç & Avci, 2020)

Inability to provide women with the breastfeeding guidance and support they needed and to resolve breastfeeding problems that women experienced. (Xiao et al., 2020; Shahrani et al., 2021)

Most of the nurses who carried out the home visit were not breastfeeding specialists. (Xiao et al., 2020)

DISCUSSION

Breastfeeding is a challenging time for most women, even for those who are not breastfeeding for the first time, and the breastfeeding period is a process of adaptation to a new situation that the woman finds herself experiencing, and feelings may arise of insecurity and anxiety (Silva et al., 2020). All countries should make efforts to empower and enable women to breastfeed (UNICEF, 2018). Dias et al. (2018), warn that the prenatal period is the most important time to promote breastfeeding developed by nurses to guide mothers on the practice of breastfeeding. Santos et al. (2019) share this opinion, stating that it is essential that women's monitoring begins during prenatal care due to the existence of several factors that may favor non-adherence to exclusive breastfeeding until the baby reaches six months of age. In this review, we found that the prenatal period is mentioned in studies developed by Silva et al. (2020), Shahrani et al. (2021) and Van Breevoort et al. (2021).

For Santos et al. (2022) although prenatal care is the ideal time to promote breastfeeding, other times should not be neglected. From the perspective of these authors, nurses, a fundamental professional for promoting breastfeeding, must develop actions to promote breastfeeding at any time. Sardinha et al.

(2019), Xiao et al. (2020) and Shahrani et al. (2021) in the studies they developed found, respectively, that participants only received more valid information about breastfeeding after birth during nursing consultations, but that they had already included infusions in the newborn's diet. Although many mothers found it difficult to breastfeed, it was only while they remained in the hospital that they were able to turn to nurses for help and as soon as they were discharged, they became anxious because they were alone in dealing with breastfeeding, and it was only during their stay in hospital that they received advice regarding breastfeeding from nurses/midwives (Xiao et al., 2020).

In the study by Van Breevoort et al. (2021), the authors found that the vast majority of mothers received pre and post-natal care at least once. Silva et al. (2020) state that nurse support is important for identifying difficulties that may arise during breastfeeding, to intervene according to needs and discover with the mother the best way to experience this process. The authors add that during the puerperal visit, the nurse can carry out numerous actions to promote breastfeeding, in addition to offering the necessary support to mothers, given that women are often fragile, requiring the presence of a competent

professional to help them (Silva et al., 2020). A situation observed in the study by Silva et al. (2020) showed women understood the postpartum visit as a tool that provided them with greater security and comfort during breastfeeding.

Galvão (2006) states that it is common for women who breastfeed, especially those who are breastfeeding for the first time, to feel doubts about their abilities and how to breastfeed their children and there are numerous situations related to both the mother and the child, which may be the basis for premature abandonment of breastfeeding. In this sense, Silva et al. (2020) state it is essential that professionals, even during prenatal care, provide guidance and clarification on breastfeeding and its importance for the mother and baby. A situation observed in studies developed by Sardinha et al. (2019), Silva et al. (2020), Van Breevoort et al. (2021) and Alcázar-París et al. (2022). Santos et al. (2022) also show that pre- and post-partum nurses must provide guidance on appropriate latch-on, possible delays in milk let-down in the first hours, demystification of taboos on breastfeeding and seek to resolve possible complications that may arise in the first few days. This situation was corroborated in the study developed by Silva et al. (2020), where they observed that during the puerperal visit, guidance was provided on correct latch-on and prevention of problems during breastfeeding, which from the mothers' perspective provided clarification of doubts and anxieties. The themes/content provided to mothers during breastfeeding promotion developed by nurses were diverse. Van Breevoort et al. (2021) found that mothers received assistance with positioning the baby at the breast and that during interviews and focus group discussions, mothers mentioned having received

assistance from health professionals to start breastfeeding early. Similarly, Alcázar-París et al. (2022) found that mothers were instructed on how to attach the baby to the breast, identify a good latch and about expressing milk. In order to protect, promote and support breastfeeding, the Baby-Friendly Initiative, which advocates the adoption of ten measures for successful breastfeeding, recently divided into two groups - clinical management procedures and key clinical practices. It recommends, among other steps, to inform all pregnant women and their families about the advantages and practice of breastfeeding, to promote immediate and sustained physical contact between mother and baby and to help mothers to start breastfeeding within the first half hour after birth. They also recommend not to give the newborn any food or liquid other than breast milk, unless medically indicated, practice rooming-in and allow mothers and babies to remain together 24 hours a day, and to not give children teats or pacifiers until breastfeeding is well established (Portugal, Ministério da Saúde, Conselho Nacional de Saúde, 2018; United Nations Children's Fund Portugal, Comissão Nacional Iniciativa Amiga dos Bebés, & Organização Mundial da Saúde, s.d.). Early identification of baby hunger, recognizing signs of baby satisfaction, the number of minimum daily intakes, healthy habits, the importance of breastfeeding on demand, the need for mother-baby rooming-in and information on lactation support groups were guidelines also provided to mothers in the study by Alcázar-París et al. (2022).

Reports of positive and negative experiences with breastfeeding promotion emerged from the included articles and constituted two blocks of analysis. For Van Breevoort et al. (2021) and Alcázar-París et al. (2022) health professionals greatly influence the decision-

making process of mothers regarding infant feeding and the breastfeeding process. Bridges et al., (2018) state that, in fact, studies demonstrate that education and support interventions, mainly in-person visits, provided by health professionals can increase the duration and exclusivity of breastfeeding.

Galvão (2011) warns that health professionals who deal with mothers who are breastfeeding must be aware that for breastfeeding to be successful, mothers must receive support and help focused on specific difficulties or their crises of self-confidence, which is why it is essential that they develop a set of communication skills and that the success of breastfeeding depends more on the woman's well-being and how she feels about herself and her life situation. Babuç and Avci (2020) also warn of the need for an empathetic and individualized counseling and support system. This situation is contrary to the study they developed where they observed that mothers perceived pressure and surveillance regarding the breastfeeding advice and support, they received from health professionals. Also, Santos et al. (2022) found that mothers sought out professionals to solve their problems related to breastfeeding, however the professional imposed standards and rules that were not part of the mothers' context. This situation was also observed in the study developed by Babuç and Avci (2020) where they observed that the discourse and medical information about breast milk and breastfeeding presented in the breastfeeding counselling and support practices of health professionals did not completely coincide with the exact picture of mothers' breastfeeding experience.

Barboza et al. (2020) warn that nurses must offer support for breastfeeding, which means providing advice, providing correct information, and using

welcoming, simple, objective and non-judgmental language. However, in the study by Xiao et al. (2020), observed that mothers stated they did not receive much support about breastfeeding from health professionals, so they sought and took advantage of support or responses from friends, social networks and the internet to obtain information, but were confused because the advice was conflicting. Xiao et al. (2020) also mentions that when women did not receive support from health professionals, they sought help from a *kanaishi* (a professional formally trained to offer breast massages or acupressure to promote breast milk production, a massage therapist specialized in increasing the amount of milk maternal). Santos et al. (2019) state that nurses must be sufficiently trained, have knowledge, be qualified and have the necessary sensitivity to be able to develop breastfeeding counseling. It alludes to the need to see breastfeeding as a complex process. However, this view was not observed in the study developed by Xiao et al. (2020) where, although mothers expected the postpartum home visit carried out by nurses to guide them about breastfeeding, most nurses who carried out the home visit were unable to resolve the breastfeeding problems that women experienced, leaving the breastfeeding support provided by nurses far below mothers' expectations.

Santos et al. (2019) state that *"Guiding breastfeeding is a major challenge for healthcare professionals, especially nurses, as they are faced with high demand, requiring sensitivity and skill in their care"* (p.71).

CONCLUSION

Nurses, due to the privileged position they find themselves in when providing direct assistance to

women and children, both at hospital and community levels, play a fundamental role in promoting breastfeeding. They must be prepared to help mothers both in the prenatal period and after birth with their difficulties related to breastfeeding, promoting safety, providing information and minimizing their doubts and anxieties. This integrative literature review allowed us to analyze that nurses promote educational actions about breastfeeding from the prenatal period, with more insistence after birth in the initial phase of breastfeeding, but also the need for long-term breastfeeding support given the challenges later on. Women value educational actions as important times to discuss doubts, myths and fears. They appreciate the empathetic support and an empowering approach to breastfeeding provided by nurses. Negative aspects include moral discourse, acting as inspectors and not as consultants, disregarding psychological and emotional needs, control over their body and decisions regarding breastfeeding.

Breastfeeding is a public health imperative and a contribution to Sustainable Development. It is up to nurses to be closer to mothers to identify their specific needs and difficulties, establish guidance and help strategies focused on identified needs and difficulties and promote empathetic, individualized support free from judgment and pressure. However, the nurse's role in promoting breastfeeding cannot be limited to working with women, knowing the importance of building breastfeeding values from an early age and the influence of family and contexts on the practice of breastfeeding.

As a limitation of this review, the limited number of articles stands out, which confirms the need to carry out more studies on the important role of nurses in promoting breastfeeding.

We highlight the importance of the nurse's role in promoting breastfeeding, which includes the ability to communicate in an empathetic way, based on a model centered on the person and their needs, respecting autonomy and decision-making regarding breastfeeding.

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