

Hispanic birthing parents' experiences with lactation support received in the hospital: a qualitative needs assessment

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ABSTRACT

Background: Chestfeeding/breastfeeding has well-documented benefits for both infants and birthing parents, but there are documented disparities between white and Hispanic populations during post-birth recovery in Lucile Packard Children's Hospital at Stanford Medicine.

Objective: This qualitative needs assessment captured Hispanic birthing parents' experiences with lactation support during post-birth recovery in the hospital, in order to identify barriers and facilitators to, in part, inform the institution's effort toward Baby-Friendly Hospital Designation.

Methods: We conducted in-hospital observations and semi-structured interviews with 17 Hispanic birthing parents (eight English-language-preferring and nine Spanish-language-preferring) and five pediatricians during the spring of 2022. Data were analyzed using rapid analytical procedures and thematic analysis was mapped onto two levels of the socioecological model (SEM).

Results: During post-birth recovery in the hospital, opportunities for growth at the interpersonal level included: trust-building, communication with clinicians at night, and cross-language understanding. In particular, Spanish-language-preferring parents reported not seeking support, citing a lack of established trust with their care team and frustration when the care team disregarded their concerns. At the hospital level, opportunities for growth revolved around more supportive maternity care practices, specifically regarding interpretation services, lactation staff availability, and prenatal education and expectation setting. Moreover, patient education practices were reportedly inconsistent, with the frequency and type of education varying widely between clinicians.

Conclusions: Disparities in breast milk feeding during post-birth recovery period may be addressed through improved patient-clinician relationships. Specifically, this includes trust-building, cross-language support, education standardization, and expansion of collaboration between the hospital, community clinics, and community-based organizations.