



BACKGROUND

The American Academy of Pediatrics (AAP) policy statement on breastfeeding places the responsibility of patient education and support of breastfeeding heavily on physicians. The 2018 AAP “Physician Education and Training on Breastfeeding Action Plan” emphasizes that physician training must include clinical skills in basic breastfeeding assessment, diagnosis and management of breastfeeding complications for pediatric residents through direct patient care and simulation. Our curriculum aims to formalize breastfeeding education and fill this gap.



Picture A.
MacKenzie, PGY-2, with her daughter!



Picture B.
PGY-3, with her 3 boys!

METHODS

- Curriculum offered to pediatric residents as a 1 to 4 week elective.
- Developed with the following components:
 - AAP Breastfeeding Residency Curriculum
 - Clinical time with lactation experts
 - Observation of community organizations
 - Reflective writing
 - Relevant podcasts, documentaries and articles
- Evaluated by post-rotation survey and content analysis of reflective writing.

RESULTS

Figure 1

Self-Reported Confidence Ratings

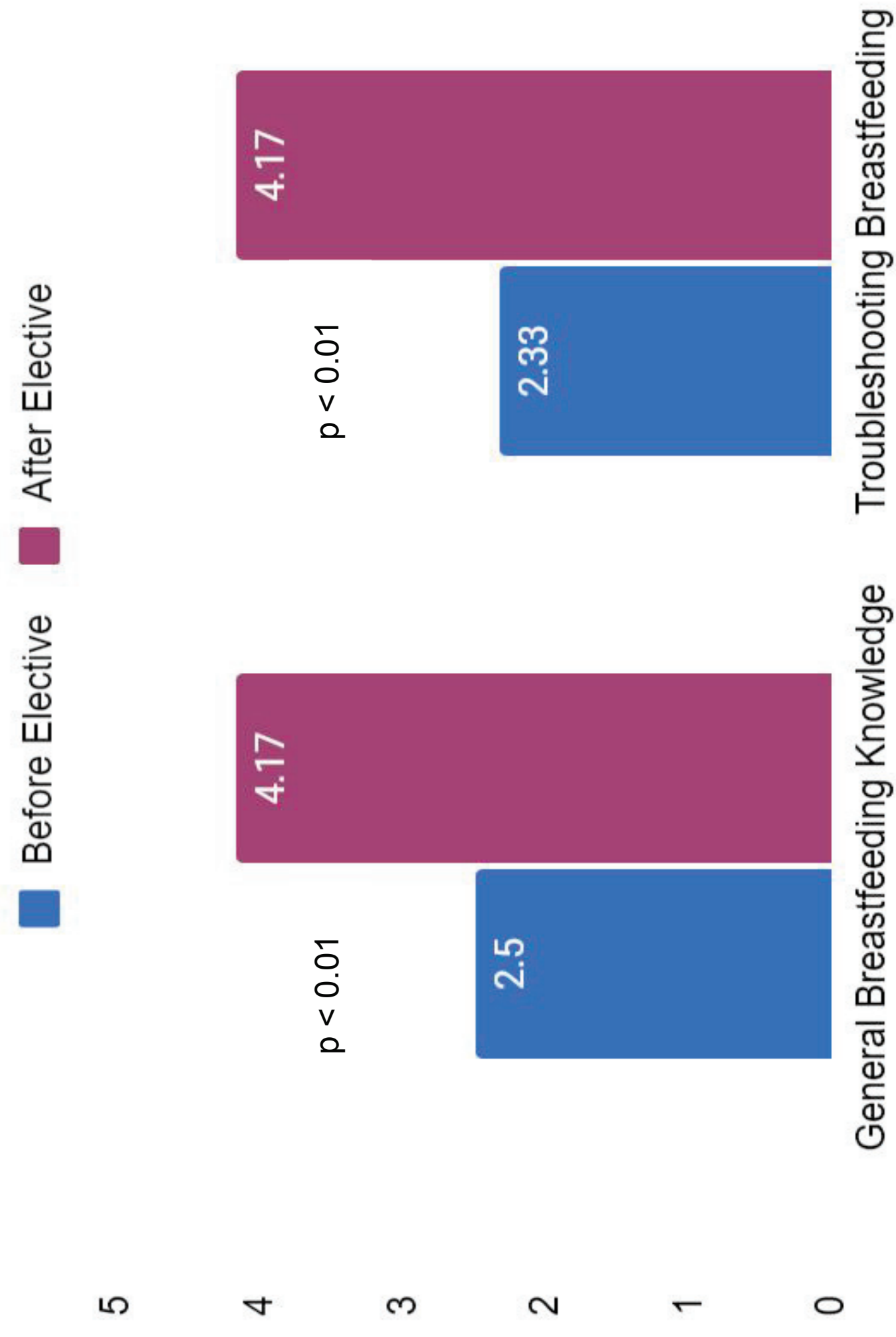


Figure 2

Length of Parent Leave

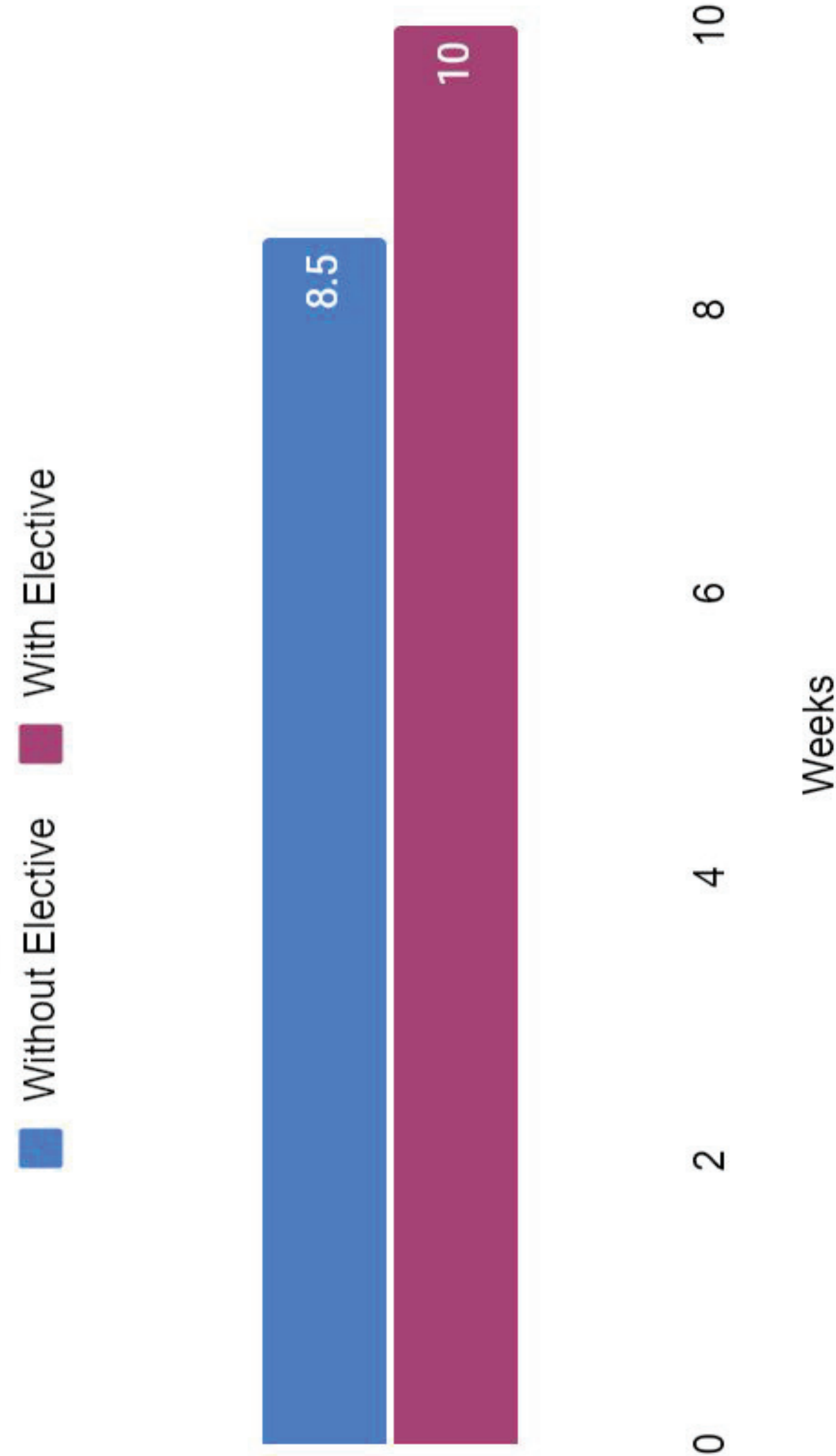


Figure 3

Major Themes and Illustrative Quotation Representative of Breastfeeding Medicine Elective

Importance of Direct Clinical Educational Experiences	<i>Prior to this elective, I would have fumbled answering all of her questions, but after this elective, I was able to confidently navigate the anticipatory guidance.</i>
Recognition of Mainstream Breastfeeding Misinformation	<i>I think it is helpful to emphasize the small volumes of breastmilk that babies receive in the early days – this can help normalize the process when it is all so new and supply is a concern.</i>
Challenges/Barriers of Breastfeeding	<i>I didn't know that 80% of moms reported breast feeding problems. That's an incredibly large number and makes me think we need more [lactation support].</i> <i>One big reason why moms stop breastfeeding is because they feel their child isn't getting enough milk... weight checks at your pediatrician's office can be an important tool to show parents that breast feeding is indeed going well.</i>
Advocating/Supporting Working Breastfeeding People	<i>It's a really interesting idea that breastfeeding which everyone likes to say is "free" is really not free at all. It requires a lot of time and sacrifice on the mother's part</i> <i>Only 20% of moms are actually able to exclusively breastfeed the AAP recommended 6 months... in part due to most women returning to non-breastfeeding friendly work environments usually within 2 weeks after birth</i>

CONCLUSIONS

- Successfully developed, implemented and evaluated a breastfeeding medicine curriculum using multiple educational strategies.
- Unique curriculum geared toward trainees and can be completed during a variable rotation length and with asynchronous flexibility
- Current areas of improvement:
 - Increasing scheduling availability for clinical experiences
 - Encouraging interns to enroll
 - Working with ACGME to provide a similar elective to other residency specialties to support paid parental leave for all residents.

Picture C.

The twins of PGY-3, Ariana!



Picture D.

Daughters of PGY-2s, Kenzie and Sarah!



IMPLICATIONS

- Increases physician confidence ratings on breastfeeding knowledge and aligns with AAP policy statements on breastfeeding education (Figure 1).
- Increases flexibility for new parents to spend time with their newborn while earning credits toward graduation (Figure 2).