Promoting breastfeeding-friendly hospital practices:
A Washington State Learning Collaborative case study

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**Background:** Breastfeeding is the best method of infant feeding. Formula-fed infants are at higher risk for both acute and chronic illness throughout the lifespan. Hospital breastfeeding support practices can impact breastfeeding outcomes. Learning Collaboratives are an increasingly common strategy to improve practices in healthcare, and have been applied to breastfeeding in many cases. This case study looks at the Evidence-Based Hospital Breastfeeding Support (EBBS) Learning Collaborative (LC), an initiative designed to promote the adoption of evidence-based breastfeeding friendly practices in Washington State hospitals.

**Objectives:** The aims of this study of the EBBS LC were to describe the perceptions of participants regarding the process and effectiveness of EBBS, describe perceived barriers and facilitators to implementing the Ten Steps to Successful Breastfeeding, and to identify additional actions and resources needed in future Learning Collaboratives.

**Methods:** This case study employs a descriptive, exploratory qualitative methods approach. This research was approved by the Washington State Institutional Review Board. Qualitative, semi-structured telephone interviews were conducted with 13 key staff that represented 16 of the 18 participating hospitals. These interviews were coded in Atlas.ti, and select interviews were double-coded to confirm inter-coder agreement.

**Results:** The EBBS LC was perceived positively by participants, meeting the expectations of nine, and exceeding the expectations of four persons interviewed. The most beneficial aspect of the program was its collaborative nature, and the most difficult aspect was the time required to participate, as well as technological difficulties. The key barriers were staff time, staff changes, cost, and the difficulty of changing the existing practices of hospitals and communities. The key facilitating factors were supportive management, participation in multiple breastfeeding quality improvement projects, collecting data on breastfeeding outcomes, tangible resources regarding the 10 Steps, and positive community response. EBBS participants stated that they would like to see the creation of a resource-rich, centralized source of information for participants.

**Conclusions:** Learning Collaboratives are perceived as a helpful way for state-level public health and breastfeeding support practitioners to improve breastfeeding policies, practices and outcomes in hospital settings. The lessons that were learned in this initiative can be applied in other states and public health settings.

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