

A Qualitative Analysis on the Impact of COVID-19 on Infant Feeding Supports: the Experience of Healthcare Professionals Working in Ireland

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Aim

To investigate how the changes in the operations of maternity, neonatal, paediatric and community healthcare and the delivery of care by health care professionals (HCP) during the COVID-19 pandemic affected infant feeding support services, based on the experiences of healthcare professionals.

Introduction

- Optimised nutrition during the first 1000 days of life, from conception up to two years of age, for an infant, is essential for the maintenance of support during critical periods of growth and development.⁽¹⁾
- Adequate timely and appropriate support of infant and young child feeding in emergencies, protects the health and development of children, saves lives, protects nutrition and benefits mothers.⁽²⁾
- New mothers often rely on HCPs for support with breastfeeding especially in Ireland where there is not a big culture of breastfeeding.⁽³⁾
- The rapid increasing infection rates of COVID-19 resulted in many policy changes and restrictions put in place especially in the healthcare setting.
- There was an increase in uncertainty for HCPs as restrictions and protocols were constantly changing.
- Currently, Ireland has no such plan in place to protect and support adequate infant feeding in an emergency.

Methodology

Study Design/data collection

- Qualitative study analysis
- Semi structured interviews, open ended questions
- Questions based on IYCF practises & supports available

Population

- HCPs, over 18 years of age who provide IYCF supports in Ireland

Data Analysis

- Braun and Clarke's 'Six step Thematic Analysis Framework' was used
- Themes developed from codes using NVivo pro 12

Results

"all the community face-to-face support stopped... community lactation consultants stopped visiting mothers, public health nurses stopped visiting mothers so there was a big challenge there" P9

"If you were to look at Irish women that breastfeed, they would generally be highly educated and from higher socioeconomic groupings. And a lot of those would probably have private health care" P8

"in some ways, it was it was quieter... partners were only allowed in for an hour in the evening and to visit... there were positives in that the ward wasn't overly busy, there was a lot of privacy for the woman, and to be able to try to breastfeed, but in another way, like, there was a lot of loneliness, lack of support," P4

"there was a massive lack of support. There was a lot of sickness from staff, so staff are all where a lot of stress leave for staff... so yeah, not like not a lot of people on the ground to help." P4

Theme 1: Provision of infant feeding support services was changed, stopped or had restricted access during the pandemic

- Services stopped/restricted
 - Use of online services
 - Additional barriers for vulnerable groups

Theme 2: Isolation felt by mothers due to restrictions put in place

- Visitor restrictions causing separation
- Emotional strain restrictions had on mothers impacted their experience

Theme 3: Issues faced by HCPs which impacted supports they could provide

- Staff shortages
- More of a 'hands off' approach

"her mother could not figure out how to use a phone camera... and oh my gosh, you just want to reach through the screen And just you know, adjust" P3

"COVID has made it even trickier, I think in terms of, you know, again, we recently had parents who are who are deaf, and getting interpreters, you know, it's very difficult for the parents you really do feel for them," P7

"They struggle with their mental health. They struggle with their feeding, and especially since COVID, we're seeing these women really, really affected..." P8

"Again I think the fact that we all had to be in full PPE talking to mothers would have added an additional barrier to provide support but other than that by in large I think that the support remained the same" P9

Discussion

- The change to services impacted the quality-of-care HCPs were able to provide to mothers.
- The HCPs reported struggling with helping mothers with latching and positioning issues when using online platforms.
- Translation and interpreter services were reported to be more difficult to avail of during the pandemic - many of these services were delivered online or over the phone, creating disparities in care.
- Not having partner present for extra emotional and physical support when initiating breastfeeding has been found to impact the mothers experience with infant feeding⁽⁴⁾.

Conclusion

- One of the first studies in Ireland investigating the effect of COVID-19 on infant feeding supports for mothers from the perspective of HCPs working in the area.
- The HCPs interviewed were all working in the greater Dublin area, thus our findings may not be reflective of all HCPs in Ireland that support infant feeding.
- Future research is needed to look at the impact that the changes to services during COVID-19 had on the infant feeding supports.
- Further recommendations should be put in place to ensure that there is an action plan for IYCF supports in emergency situations in Ireland.

References

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