



Universal antenatal peer support and postnatal peer support for women who started breastfeeding did not improve breastfeeding rates up to 6 months in this UK population

Peer support for breastfeeding

Background

- This research assessed the effectiveness of a peer support worker (PSW) service on breastfeeding continuation through a cluster randomised controlled trial. The PSW service was provided in pregnancy to increase initiation and in the postnatal period to increase continuation.
- The research took place in a Primary Care Trust in Birmingham which serves a multi-ethnic, socio-economically disadvantaged population. In this setting the breastfeeding initiation rate was 58% in 2005, with continuation rates poorly collected but thought to be lower than the national average.
- 2724 women who had antenatal care at 66 clinics participated in the trial. 1267 women were randomised to the PSW service and 1457 women received usual care. Information about breastfeeding at 10-14 days was available for 94% of the women who gave birth in the study period. 848 women consented to an additional follow-up questionnaire at 6 months.

Turn over to find out more

Findings

- There was no difference in breastfeeding at 10-14 days between PSW intervention and usual care. The proportion of women reporting breastfeeding in the intervention group at 6-weeks was 62.7% and 64.5% in the usual care group; and at 6 months was 34.3% and 38.9% respectively.
- Further to this trial a systematic review to examine the effect of setting, intensity and timing of peer support on continuation of breastfeeding was carried out. The review found that peer support interventions increase breastfeeding continuation in low/middle income countries, especially exclusive breastfeeding. This does not apply in high income countries, especially the UK where breastfeeding advice and support is available in routine postnatal healthcare. Low intensity peer support is not effective.
- Our trial findings are consistent with other trials from the UK, however they are contrary to national guidance and recommendations that peer support should be used to improve breastfeeding rates.

References

Jolly, K., Ingram, L. and Freemantle, N. et al. (2011) Effect of peer support service on breastfeeding continuation: randomised controlled trial. **Midwifery**. <http://www.sciencedirect.com/science/article/pii/S0266613811001197>

Jolly, K., Ingram, L. and Khan, K.S. et al. (2012) Systematic Review of peer support for breastfeeding continuation: a meta-regression analysis of the effect of setting, intensity and timing. **British Medical Journal**. 344:d8287
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Recommendations for practice

“More intensive, earlier postnatal or targeted peer support might be effective. It is essential that any such interventions are properly evaluated including cost-effectiveness, given the evidence provided by this and other trials”

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