Littlehampton Sure Start:
An Evaluation of the Breastfeeding Peer Support

A Report by the Research Department
National Children’s Bureau

Jinny Briant

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1. Introduction

Breastfeeding is now generally recognised as being the preferred and most healthy option in giving babies the best possible start in life. Sikorski and Remfrew, (1999) demonstrated that mothers who are given extra support for breastfeeding are likely to engage in and continue breastfeeding for longer. Research also demonstrates that peer support initiatives in which advice is given by experienced and trained peers can promote and increase breastfeeding (Thompson, 1998; Wright, 1996). A major advantage of using peer counsellor supporters who come from the same community is that they will have had similar experiences to those to whom they are offering support.

The La Leche League Peer Counsellor’s Programme was started in the United States and was written specifically for low income minority groups. Many Sure Start programmes have adopted the training and invited Mothers who have had an enjoyable breastfeeding experience with at least one child, to undergo the course to promote and support breastfeeding within their peer group. The aims of the programme are to raise awareness of breastfeeding generally in targeted communities; to increase the duration of breastfeeding amongst mothers who choose to breastfeed and, increase the confidence of those mothers who participate in the programme. This is in line with the Government’s Health targets.

1.1 Training the Littlehampton Sure Start Peer Support Counsellors

A Breastfeeding support drop-in was set up in Littlehampton in June 2004 so that breastfeeding mothers could come and seek support and advice. From this, a group of breastfeeding mothers formed ‘MILK’, a parent-led group, whose aim initially was to plan a Breastfeeding Awareness week. Since then, the group has developed and many of the mothers have undergone the training to become peer support counsellors. They have supported the present group of mothers who are now themselves undertaking the training.

The Peer Support Counsellor training is undertaken by a group of practitioners including a nursery nurse, health visitor and midwives. It comprises 12 session two-hour sessions on a variety of relevant topics including the mechanics of milk production, anatomy etc.

1.2 Evaluation Aims and Objectives

The purpose of this evaluation was twofold: to assess the parents’ experience of receiving peer support, and to evaluate their own experience of the training and its adequacy in preparing them in their role in becoming peer supporters.

2. Methodology

2.1 Evaluating Mothers’ experience of Breastfeeding Peer Support

A focus group was used to assess how the parents attending MILK had experienced breastfeeding peer support. The questions were agreed with the Sure Start Midwife and centred around three main areas (see Appendix 1): motivation for seeking breastfeeding support; other sources of help and differences between informal and professional support; personal changes.

Mothers attending MILK and who had received peer support were asked if they would take part in the evaluation by the Sure Start Midwife. After permission had been granted for the National Children’s Bureau evaluator to make contact, the eight participants who had indicated they would be willing to take part were sent a letter explaining about her role, the evaluator, the evaluation purpose and procedure. A written consent form was enclosed assuring confidentiality/anonymity and permission was sought to record the focus group. Parents were rewarded for taking part by being provided with refreshments.
2.2 Evaluating the Breastfeeding Peer Support Counsellors Training

A semi-structured questionnaire (see Appendix 2) was devised to elicit some qualitative data regarding how the Peer Support Counsellors experienced their training. The Sure Start Midwife handed out the questionnaires during a MILK drop-in session to the eight parents who had recently undergone training. The questionnaires were designed to protect anonymity and parents were asked to bring the completed questionnaires to the following session. The questionnaires were collected by the Midwife and sent to the evaluator for analysis.

3. Evaluation Findings (i)

3.1 Mothers’ experience of Breastfeeding Peer Support

3.1.1 Hearing about MILK and the initial visit

Questions were asked about how mothers had first heard of MILK and about how they had experienced their initial visit to the group.

Two of the parents had noticed it advertised in their local paper and subsequently been informed about it through attending Sure Start antenatal classes, as had the majority of mothers who had heard about it. One mother had learnt about the group by her neighbour.

The mothers spoke about the difficulties in joining a group especially for mothers who are tired and anxious: ‘when you join a group you don’t know anyone, it’s quite daunting.’ However, all reported that their experience of their first encounter with MILK had been very positive and they felt that the peer support counsellors had been well trained in receiving new members and making them feel welcome.

“If you observe what happens when a new member joins I often see one of the peer supporters will befriend them and give them the confidence and chat with them and see if they’ve got any problems. I’ve noticed that they all find out your interests and they will then try to sort of integrate you with people that they feel you have something in common with…so they don’t go rushing over which would be overwhelming. They just seem to take it in turns.”

One mother spoke of how daunting she had found the prospect of joining the group but a Peer Supporter had put her at ease on her first visit and this had helped her.

“the peer supporter that helped me, she sort of sat with me and talked to me and she introduced me to everyone and they all sat talking to me and like asked me questions about [my baby] and that’s sort of the easiest subject to talk about! So I wasn’t actually as scared as I thought I would be but I think it would have been if I’d had to in on my own…”

Recognising how difficult is can be for some mothers to walk into a new group, some of the peer supporters had volunteered to fetch the mothers from their homes and this had been greatly appreciated and given them confidence.

“Well I didn’t really ask her to come out. But it was the first time that I’d been to the group so she came to my house and got me and walked to the group with me. …the rest of the time she just met me outside and walked in with me.”
3.1.2 Motivation and perceived purpose of the group

Mothers were asked about their motivation for joining MILK and what they saw as its purpose. Many of the mothers, some of whom are single mothers, had felt isolated and unsupported before joining the group and had joined for reassurance and support:

“None of my family, none of my friend had breastfed so I didn’t realise what I was doing was working or was right, you know. And people would say things like ‘oh, is she getting enough?. Are you doing it the right way?”

Mothers understood the purpose of MILK as providing a ‘supportive, relaxed, enabling environment, which would encourage and support breastfeeding’. It is a group where they feel able to seek advice, information and learn from one another’s experience. They also greatly appreciated the social opportunities and the confidence in breastfeeding, had given them:

“I think it’s a nice environment to feed socially. It’s quite nice perhaps for a first experience, just while you’re getting confident and stuff, and I think that’s really important…and going out with somebody else who’s breastfeeding. It’s definitely helped me when I’ve had hitches and I’ve had some really good advice.”

3.1.3 Mothers’ experience of professional support

Some of the mothers reported on their hospital experience of receiving breastfeeding support. Most mothers were quite negative about their experience of the professional support they had received. One mother spoke about how had been induced and had been distressed in having to have a Caesarian section. She had been told after attempting to breastfeed her baby for thirty-six hours that she ‘should really have got the hang of it [breastfeeding] by now.’

Another mother who had had difficulty in getting her baby to latch onto the breast, reported that she had not received much help at all.

“They never found the breastfeeding co-ordinator for me to try and help me. I mean people really need to be spending time, more than just thirty seconds rushing around you, pushing your baby against you, quickly whipping out your boobs and saying ‘this is how you do it”

Another mother had had her confidence undermined by the lack of support she had received in hospital but, once home, she had received encouragement from the Community Midwife.

“Everybody else was saying ‘give that hungry, poor little [baby] a bottle, they’re starving, and then you could get your life back. I came home from hospital knowing that I couldn’t feed my [child] myself because I hadn’t been given enough of the right support in hospital and then she [the Community Midwife] came round and said ‘you need to be relaxed and just do this because you can do it. And I did”

However, not everyone’s experience had been negative: One mother reported that she had found the hospital staff had been very helpful when she had given birth and had experienced difficulties in getting her baby to feed during the first twenty-four hours.

3.1.4 The perceived difference between the informal support offered at MILK and professional support

Mothers identified ‘time’ as a major difference between professional and informal sources of support. Professionals were perceived as only being available to give advice on more serious matters. Mothers often felt inhibited about seeking advice on trivial problems from their health visitor or doctor: ‘you think, oh I shouldn’t really go and bother the doctor or health visitor for this, it’s not really a major problem.’
The formal setting of GP surgeries/health clinics and the time limits on appointments when seeking professional help often meant that they were unable to relax enough to really voice their feelings and anxieties, whereas MILK offered them a relaxed and caring atmosphere to talk through their problems.

“If you go to the doctor’s or you have the health visitor round for something you feel you’ve got a ten minute slot and you’ve got to get it all out and done you know, in ten minutes whereas at MILK you can spend a couple of hours talking to someone, you’re much more relaxed, you’ve got much more time.”

There was also a perception that sometimes professionals do not appear to be fully committed to breastfeeding and do not always see babies as individuals. They often offer standard textbook advice:

“all of them think we should have babies that feed for ten minutes each side and sleep for four hours…I mean I’ve had a health visitor telling me that. So I went to MILK and said, ”what do you think of that then, girls?” and they said: “you’re having a laugh. Babies don’t feed like that. It sounds like someone is trying to tell you that you should be bottle feeding your baby.”

Mothers identified the difference between professional ‘expertise’ and peer supporters ‘lived experience. Peer supporters are themselves experienced breastfeeders and they are able to give practical advice and demonstrations, latching on, expressing milk etc.

“If you’re talking to someone who’s like professional, sometimes the advice you’re given you sort of think, well is that what they sort of been taught or do they actually know that. Whereas if you’re talking to a peer supporter they’ve been through it and they can tell you have they dealt with it.”

Another difference highlighted by the mothers is the difference in the nature of the relationship: The relationship between the mother and peer supporter is based on friendship rather than objective professionalism. Despite the mothers lack of confidence in professional breastfeeding support however, nearly all agreed that they would always seek professional advice for any serious matters.

3.1.5 What have been the benefits of joining MILK?

Belonging to MILK had meant that the mothers realised that their experience of breastfeeding was not unique and that they were not alone and that they were not the only ones having problems.

“I went along, they had a bit of a party…it was fantastic to find that everyone else was sitting there all night as well, feeding and that I wasn’t the only one. I just thought it was just me up all night you know.’

Parents reported that joining the group had enabled them to received ‘brilliant advice’ from those who had gone through similar experiences to their own. It had given them the opportunity to meet like minded mothers who offered both emotional and social support:

“…networking with people and perhaps going out with somebody else who’s breastfeeding as well. It’s definitely helped me when I’ve had hitches …it’s been very helpful. I’ve had some really good advice.”

Many of the mothers had found that joining MILK had given them confidence, not only in their ability to breastfeed, but in themselves and in the knowledge that what they are doing is the best for their child.

“I always thought I would really like to breastfeed but I always though you had to be really special, really lucky to be able to breastfeed but now that it is only a very small minority who can’t.”
This confidence had given them an inner strength and increased their feelings of ‘womanhood’.

“I mean I ’m more whole, more of a whole person, more confident...if I won’t fight for myself, I certainly would fight for him. It reflects on both of us really.”

Asked about what had changed in their lives since they joined MILK, parents again reported that they had become far more confident in themselves as people. All had found that their attitudes to breastfeeding had changed:

“You need quite a lot of confidence to sit there and feed in public because people judge you. The first could of times I did it (breastfeeding) in public, I did it with some other people from the MILK group. We went together. Now I do it everywhere.”

Some mothers acknowledged that MILK had prevented them from becoming depressed as they no longer felt isolated:

“I think I could have become depressed quite frankly if I’d been at home and there’d been no-one else. I would have gone mad. ‘You need a bit of sanity, not just being with baby all the time, but being with adults as well.’

4. Evaluation Findings (ii)

4.1 The Peer Support Counsellors Training

A total of eight questionnaires were returned from those who had undergone the training as breastfeeding counsellors.

4.1.1 Learning about the course and motivation for attending

All but one of those who responded said they were motivated to take part in the training because of their own experience and wanting to share this by helping others. ‘From my experience of breastfeeding and needing support from a peer counsellor, I felt that I wanted to help others’. They recognised how much they had valued the peer support they had received and wanted to ‘give something back’. One mother, however, had been motivated to join the group and do the training because she was ‘feeling low and wanted to meet other mums and share breastfeeding knowledge proactively.’

The main source of knowledge about the training was through attending MILK or through the Sure Start Midwife who had organised the training.

All those who had volunteered for training had been made aware of the commitment in terms of time and whilst there was a difference in opinion as to whether or not there had been 11 or 12 sessions, all but two had attended every session: one mother had missed one session and another had only managed to attend eight sessions.

4.1.2 The training sessions

In rating the session, the majority thought the length was ‘about right’ but two of the mothers said they would have like them to be longer: ‘I enjoyed it so much I could have stayed all day’. Two mothers thought the course was ‘excellent’ whilst the others rated it as ‘good’; the level of teaching was pitched at about the right level although one mother thought it was ‘too difficult’. All thought that the teaching methods were appropriate.
A few parents singled out their most enjoyable sessions, which included those on ‘feeding adopted babies’, ‘anatomy of the breast’, ‘the barriers to breastfeeding’ and the sessions involving practical activities such as drama and painting. Three mothers had really enjoyed the role-play sessions for a variety of reasons *because it’s an easy way of learning*, they had not felt pressured to speak aloud and the ‘emergency birth’ had been ‘great fun’.

However there was some criticism: One mother had found a couple of sessions difficult especially one session in which they were asked to describe themselves to the group. Another mother had found that there had been too much information to absorb in the session covering ‘special circumstances’. Another mother had felt uncomfortable about a session because she thought that the trainers were talking about her own experience.

Generally, all of the parents felt that the course covered everything they could think of but two parents identified topics which they would have liked included: ‘how to recognise subtle clues that a mum/baby are struggling and therefore they need to refer on.’ And the other gap identified was ‘how to slow down/stop breastfeeding.’

Doing the training had challenged their assumptions about breastfeeding and one mother, who had thought that you had to be ‘special’ to be able to breastfeed had been surprised to learn that most mothers are, in fact, able to breastfeed. Generally, all had learnt about the uniqueness of the breastfeeding experience and that some mother’s find it more difficult than others. They had also learnt about the importance of prolonged breastfeeding:

’I learnt how important breastfeeding is to the health of a baby up until at least two. Before I started going to MILK I thought you stopped at six months’.

Some mothers commented that they had learnt how important ‘patience and listening skills’ are and another had learnt to celebrate her achievement in breastfeeding: ’I’m doing a good job and can pass that on to other mums’.

Overwhelmingly, the most enjoyable aspect of the course for those who attended was that they had had the opportunity to meet socially in a relaxed and friendly environment with like-minded mothers, where they felt valued and with whom they could share their experiences: ‘Being sociable and learning a useful skill feeling that all our experiences and approaches were valued.’

Only two commented on what was, for them, the least enjoyable part of the course: Neither of them had enjoyed the art work or the role plays: ‘Being creative! I hate art’

As far as making any changes to the course, one mother felt that the purpose of doing the group exercises should have been better explained e.g. not talking in too much detail about themselves. The only other comment was about the venue which one mother thought was not appropriate.

### 4.1.3 Personal changes

The mothers were asked if anything had changed for them personally since doing the course. Nearly all mentioned that the course had increased their confidence in some way or other. For some, it was confidence in their own ability to breastfeed which had allowed them to persevere despite the difficulties:

’It made me continue breastfeeding for longer and not listen to others negative opinions about this.”

“I stuck at feeding…when my nipples were sore and everything hurt. I could so easily have given up between weeks 3 and 6 but so glad now I kept going.”
For others it was a general increased self-confidence:

“I have a lot more confidence around people I don’t know and I’m more willing to take part in things I wouldn’t normally do”.

For one mother, it was simply gaining understanding as to the cause of her own breastfeeding problems: ‘The reason I get blocked ducts is mainly from sleeping on my front.’

4.1.4 Fitness of the course for equipping mothers in their role as Breastfeeding Counsellors

Nearly all the mothers felt that the course had given them confidence to become breastfeeding peer supporters:

“I felt less isolated and confident that I can empower other breastfeeding mums.”

“I feel more confident to say to someone: “you’re baby doesn’t need topping up with formula. Just feed them and hold them close.”

“It made me more aware of some of the issues we may come across and how to deal with them’

Although most still felt nervous, there was an acknowledgement that confidence would increase with practice and that they were confident that knew they where to go to seek advice.

All had had a chance to put their training into practice to a limited degree through chatting to other mothers at MILK, or by advising friends. One mother had been able to reassure her friend that her baby was ‘definitely getting enough milk and if she was concerned, she could express it and give it in a bottle.’ None of the mothers had made any approach to breastfeeding mothers in chance encounters.

4.1.5 General comments about the course

The general feedback on the course was very positive. Common comments amongst the mothers regarding the course were that it had been ‘enjoyable’ and ‘fun.’ Some even spoke about their sadness when it came to an end. The course was also perceived as ‘interesting,’ ‘thought provoking’, ‘well-organised’ and ‘empowering.

‘The knowledge I now have is just brilliant. I try not to feel bitter about the bad advice and lack of support I received in hospital and from Health Visitors. I am really glad that I stuck with breastfeeding although without my determination and attending MILK this would not of happened’.

‘Brill, Fun, Interesting

‘Very enjoyable and worthwhile. I would recommend it to others’

‘A fun and enjoyable course with an important message and aim’

‘Great, thought provoking, non-threatening, well organised and run – empowering’.

Excellent, fun and I loved it
5. Conclusion

The aim of this project was to evaluate the peer support counselling offered to mothers at MILK and the training as Peer Support Counsellors. The evidence from this evaluation demonstrates that the support given to mothers by peer support counsellors and the training they themselves have had to become counsellors themselves has been very successful. Those who have attended MILK for support and advice from peers have benefited in terms of confidence in their parenting skills, self-confidence, increased ‘social inclusion’ in terms of contact with other mothers and new friendships. The mothers had found MILK a welcoming supportive group and had found the informal advice they had received at the group greatly superior to the professional advice in hospital.

All the mothers had enjoyed their training as Peer Support Counsellors and although few had had a chance to put their training into practice they felt ‘empowered’ with the knowledge and confidence to support and advise other mothers.
APPENDIX 1

FOCUS GROUP THEMES

Motivation/Purpose for seeking Breastfeeding Peer Support

Prompts:

How did you hear about the service?
Why did you seek help/advice from the service?
How do you feel about the peer support you receive?
What are the good things about peer support?
What are the bad things?
What's the purpose of the Peer Support Group MILK
Why do you like coming to the group?
(Prompt: Information/Problem solving/Emotional/Social)
If you had to choose one thing which make the peer support more successful, what would it be?

Other sources of help - Differences

Prompts:
What breastfeeding support is there available elsewhere?
Do you get support from other professionals?
Is there any difference in the support you receive from other professionals and that which you receive from the peer supporters?

Life changes

Prompts:
If you have already breastfed a baby has there been a difference in your experience of breastfeeding this time around?
What difference has peer support made to you as a person? (confidence/changes in attitude etc.)
Would you use the service again next time round?
Would you like to train to be a supporter yourself?
APPENDIX 2

28th February 2005

Dear Parent

Evaluation of the Breast Feeding Peer Support Service

Thank you for agreeing to take part in the Focus Group on 9th March 2005 concerning the above.

Who Am I?
My name is Jinny Briant and I work for the National Children’s Bureau as an evaluator of services for children and parents. I am not employed by West Sussex Early Years or for Sure Start, which means that I am independent and people can speak honestly to me about their feelings on services they access. I have been asked by the Littlehampton Sure Start to evaluate the Breastfeeding Peer Support Service.

What is a focus group?
I am going to run a Focus Group on Wednesday 9th March which will be held at the Centre in Littlehampton between 1.30 p.m. to 3 p.m. Rachel, the Sure Start Midwife, is inviting about ten mothers to take part in the focus group. A focus group is a set time for a group of people to meet together to discuss a specific topic. The focus group I am running will focus on the Peer Support Service which you have accessed. It will give you all the opportunity to talk to me about your experience of the service – both the good things and the bad things! At the end of the discussion, which will last about an hour, there will be refreshments provided. If you require childcare so that you can come to the group, it will be provided.

Will anyone else outside the group know what I have said?
The discussion which takes place during the focus group will be totally confidential and no-one else outside the room will know what has been said. However, I would like to ask your permission for the discussion to be taped so that I can listen and reflect on what has been said so that I can draw out any important themes which may emerge. When I write up my report, nobody will be mentioned by name and any quotes which I may use from the discussion, will be anonymous.

If you have any further questions you would like to ask me, please feel free to telephone me on 07793846078.

Thank you for agreeing to take part.

Jinny Briant
Research Officer
APPENDIX 3

CONSENT FORM

Evaluation of the Breastfeeding Peer Support Service

I *understand/do not understand the purpose of the Focus Group which is taking place concerning the Peer Support Group and that anything that I say will be treated in strictest confidence.

I *am willing/am not willing to take part

Name: ……………………………………………………………………………………………………………..

Signed: …………………………………………..  Date: ………………………………………………………

Daytime Contact Number: ………………………………………………………………………………………

I *will/will not require childcare between 1.30 p.m.-3 p.m.

I *would like/would not like a copy of the final report

*please delete as appropriate

If you have any concerns about this evaluation you may contact Catherine Shaw, Principal Research Officer, National Children’s Bureau, 8 Wakley Street, London, EC1V 7QE. Telephone Number 0207 843 6000
APPENDIX 4

Questions used in Questionnaire for the Breastfeeding Peer Supporters

1. Can you say what made you decide to do the training?

2. How did you hear about the course?

3. Were you fully aware of the number of sessions you would need to attend before you started?

4. How many sessions did you attend?

5. Were the sessions: (please tick)

   too short
   about the right length
   too long

6. How do you rate the training overall? (please circle)

   Very poor   poor   ok   good   excellent

7. Was the training pitched at the right level for you?

   ok
   too difficult
   too easy

8. Were the teaching methods appropriate for you? *YES/NO

   (If not, please say why)

9. Were there any sessions which you particularly enjoyed? (please could you say why you enjoyed it)

10. Were there any sessions which you did not enjoy? (please say which, and why you did not enjoy it)

11. Were there any other topics you would like to have been included?

12. What was the most important thing you feel you learnt?

13. What did you most enjoy about the course?

14. What did you least enjoy?

15. Is there anything about the training that you would have changed?

16. Did the course change anything for you personally? (please could you say what changed?)

17. Have you had the opportunity to put your training into practice? *YES/NO

   (*please delete as appropriate)

18. Do you feel confident now in your role as a peer supporter?

Could you sum up you feelings about the course in a few words:

Thank you for your feedback!