

BACKGROUND

Breastmilk provides optimal infant nutrition and benefits for mothers. However, there are many barriers to successful breastfeeding. Early in the pandemic, an absence of evidence on SARS-COV-2 transmission between mother-infant dyad informed ambiguous guidelines on postpartum care¹. In some settings, this increased barriers to breastfeeding, such as discouraging skin-to-skin contact, rooming-in or separating mother and infant for long periods of time². We explore the experiences of healthcare providers in Armenia and New York from March 2020 to today to inform the development of further research proposals in this area.

METHODS

- We conducted a literature review of the original guidance in March 2020, at the start of the COVID19 pandemic, and the evidence that supported the revision of these guidelines throughout 2020 and 2021 until today. We also reviewed the evidence on how these new policies impacted breastfeeding practices around the globe.
- We conducted informal open-ended discussions with stakeholders at New York Presbyterian/CUIMC in New York and in Yerevan, Armenia to explore the topic, as a first phase of developing a research proposal.
- We developed health education materials with the most recent guidance on breastfeeding during the COVID19 pandemic and vaccination for lactating individuals, using evidence from our literature review. These are being reviewed by stakeholders who requested them in Armenia.

CURRENT GUIDANCE ON BREASTFEEDING AND COVID19

| | Breastfeeding (BF) Recommended? | Hand Hygiene | Face Covering | Expressed Milk | Isolate outside of BF |
|------------------------------------|--|--------------|--|--|--|
| CDC (as of 6/17/2021) | Yes (with extra precautions) | Yes | Yes | Yes | Yes |
| AAP (as of 3/29/2021) | Yes (Skin to skin also recommended) | Yes | Yes | Yes | Yes, should maintain responsible distance" |
| ACOG (as of 8/4/2021) | Safe to breastfeed baby | Yes | Yes | Yes (healthy caregiver to give it, if possible) | --- |
| WHO (as of 5/7/2021) | Yes (Skin to skin also recommended) | Yes | Yes (if none available, continue to BF) | If mother is too unwell | --- |
| UNICEF (as of 7/29/2021) | Yes (Skin to skin also recommended) | Yes | Yes | If mother is too unwell | --- |

Table 1: Breastfeeding Guidance per US and International Organizations



Figure 1: Breastfeeding guidance for women with suspected or confirmed COVID19

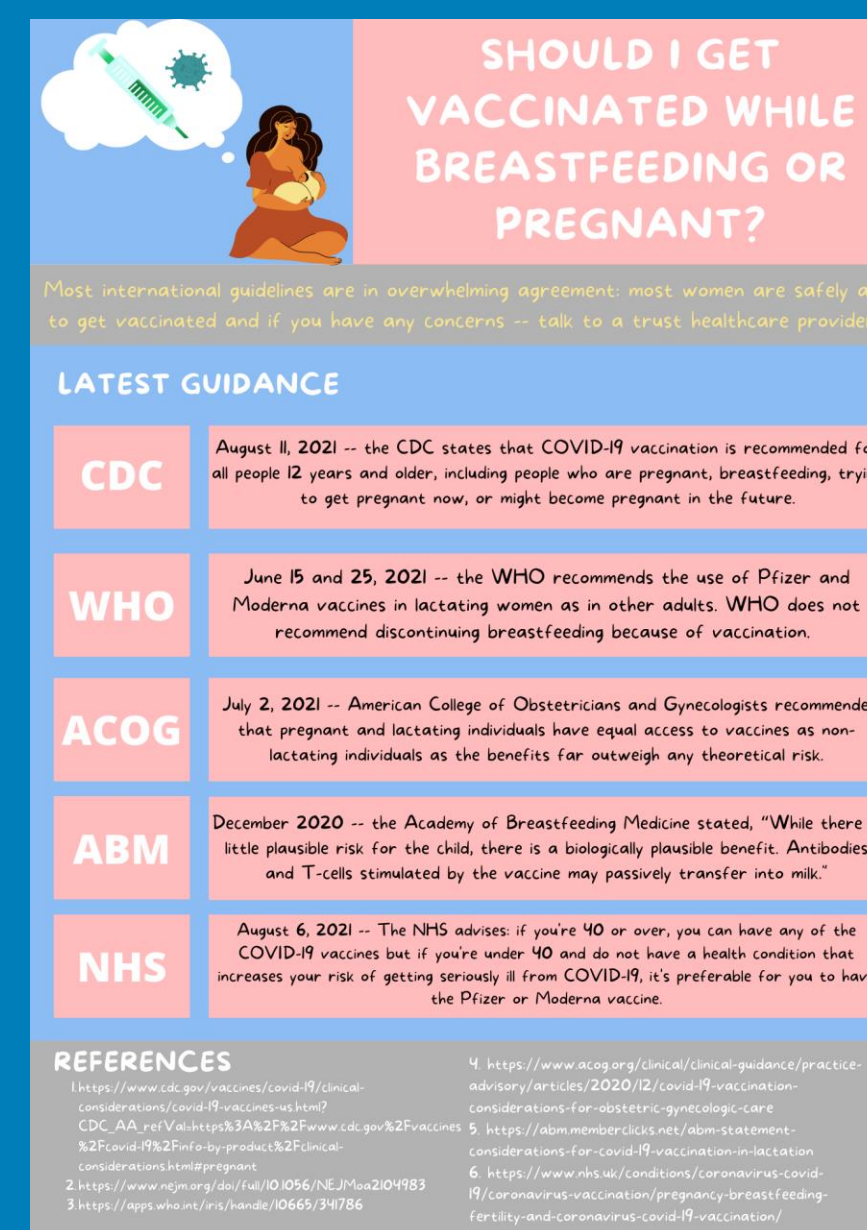


Figure 2: Guidance on breastfeeding and COVID19 vaccination

RESULTS

Review of literature and conversations with stakeholders suggest that breastfeeding rates and duration may have decreased as a result of the COVID19 pandemic due to separation of infant-mother dyads, shorter length of stay, lack of breastfeeding support in hospitals and early confusion about the safety of breastfeeding.³ Stakeholders in Armenia requested health education materials regarding current guidance to support breastfeeding for COVID19 positive mothers and materials to promote vaccination for pregnant and lactating women. (Figures 1 and 2)

FUTURE DIRECTIONS

Health education materials will be translated, pretested and distributed in Armenia. The research proposal is being developed and aims to further explore experiences of Armenian healthcare providers and mothers as they relate to infant feeding practices during the COVID19 pandemic. This research will lead to policy recommendations to improve breastfeeding rates.

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