

# Positive Messaging

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## Training goal:

Attendees will learn of the power of their words and tone of voice when talking with a new mom. They will learn the LOVE counseling technique and practice using it to address common breastfeeding challenge scenarios.

## Content:

L-O-V-E counseling technique explained:

- **L- Actively listen to our patients.** Pay close attention to key phrases or words that may indicate she is insecure or lacking confidence.
- **O- Observe a feeding/pumping session.** Remember that Baby-Friendly USA requires an assessment of breastfeeding/pumping at least once per shift. Observation is key to assisting the breastfeeding dyad's success. Assessment cannot solely rely on mother's perception as this is not always accurate.
- **V- Validate mother's feelings.** Acknowledge her concerns and fears; reassure her that these feelings are common in the early days after birth and offer solutions or resources to best address concerns.
- **E- Educate, empower, encourage.** Make a commitment to providing the mother with information to make an informed feeding decision. Arm mom with information on the uniqueness of her breastmilk as the best source of nutrition for her baby. Identify her personal breastfeeding goal and help her to plan to meet that goal, encouraging her every step of the way.

## Implementation:

1. Provide a brief description of LOVE using a real-world example.
2. Divide the group into pairs and let them work through the scenarios.
3. Hand out the LOVE cheat sheets (Attachment A) and Scenario cards (Attachment B).
  - a. Allow about three minutes for small group work.
  - b. Reassemble groups and have them report out to the rest of the group about the most helpful/important tip from the "nurse" in the scenario.

## Resources:

- LOVE sheets (Attachment A)
- Scenario cards (Attachment B)

# Attachment A- Yellow Cheat Sheet (LOVE Counseling Technique)

## L – Listen to your patients

Ask open-ended questions to learn more. Pay close attention to her key phrases or words that may indicate she is insecure or lacking confidence.

Active Listening: use phrases like the following to demonstrate that you are paying attention to her.

- You're wondering...
- You've heard...
- You're wanting...
- You feel worried about...

You can also use clarifying statements to ensure you understand her concerns.

- Do you mean...?
- Do I have it right...?
- Are you saying...?

## O – Observe a feeding or pumping session

This will give you a better idea of what is *really* happening. The mother's perception or description is not always accurate. Sometimes the baby is not feeding as well as she thinks. Sometimes the baby is feeding better than she thinks and watching the feeding will allow you to build her confidence by pointing out proper latch, milk transfer, etc. Remember that Baby-Friendly USA (BFUSA) requires that we assess breastfeeding or pumping at least once per shift.

Also observe body language. This will help you identify the real issues. The first question asked by your client may not be what is worrying her the most. Listen for her feelings.

## V – Validate her feelings and concerns

This will show that you value her. Being a new mom (even for the third or fourth time) is overwhelming! Let her know that her concerns and fears are common for new mothers and that she will feel better in the coming days.

All feelings are accepted. Use phrases like:

- Many women feel the same way.
- That's a common concern.
- I am glad you brought that up!

- I've also felt that way.

## E – Empower her with education and encouragement!

As health care providers, we are obligated to provide evidence-based information to our patients so that they can make an informed decision about the health of their families. Remind the mom that breastmilk is the best nutrition for her baby and the benefits it brings to her too! Let her know that this is a nutrition only she can provide. Support her choice to exclusively breastfeed by teaching hand expression.

Help her find her own solutions.

- Provide information to help her make an informed decision.
- List her options
- Provide resources/referrals

Use soft comments to introduce information:

- Many women have found...
- We have information that may help you make a decision.
- Everybody used to do it that way, but we have new information...

When giving information, ask yourself:

- Does this mom need this information?
- How much information does she need?
- Is this the best time?

It is best to give information in small pieces.

Encouragement is very important.

Look for ways to praise mom!

- You're doing a good job!
- You handled that well!
- You're going through a rough period. It will get easier as you and your baby get more experience.

## Attachment B- Scenario Cards (LOVE Counseling Technique)

### Case #1

First-time mother of a 39-week gestation with a vaginal delivery.

Baby is 38 hours old.

Mom reports that baby is “eating all the time” and requests formula to be sure that her baby is getting enough to eat.

Mom also reports that her nipples are sore.

### Case #2

Second-time mother with a 40-week gestation from a vaginal delivery.

Baby is 12 hours old and in the NICU.

Mom reports concern about her milk supply and some nipple tenderness.

### Case #3

Third-time mother with a scheduled 38-week gestation from a cesarean delivery.

Baby is 12 hours old.

Mom is concerned about her milk production because she and her baby did not do skin to skin right after delivery. She is having to wake up the baby for feedings.

Her first baby was a vaginal delivery and was only formula fed.

Her second baby was emergency cesarean section and formula fed only.

### Case #4

First-time mother of an emergency 39-week gestation with a cesarean delivery.

Baby is four hours old.

Mom states that she is unsure that she has enough breast milk because the baby hasn't had any stools yet and has been very sleepy.

### Case #5

Fourth-time mother of a 37-week gestation with a vaginal delivery.

Baby is 10 hours old and has breastfed one time.

Mom states that she and the baby are super sleepy and that they will try to do more breastfeeding later. For now, she just wants to rest and entertain her guests. She is not offering formula.

### Case #6

First-time mother of a 41-week gestation with a vaginal delivery.

Mom states that she is interested in breastfeeding and has been trying. However, the baby's grandmother doesn't want the baby to breastfeed.

### Case #7

Third-time mom of a 42-week gestation with a vaginal delivery.

Baby is 26 hours old. Baby has had no dirty diapers and one wet diaper.

Mom states that she has always breastfed with no problems. She currently does not have any breast soreness or concerns.