



Cultural Case Studies

These cultural cases are designed to help the residents understand cultural effectiveness as it relates to breastfeeding. You can use them during grand rounds, noon lecture, journal club, or 1-on-1 with residents.

To facilitate discussion, begin by reading the case to the residents. Then either share the mother's concerns or ask the residents what they think they might be.

Once you think the case is well understood by the residents, use the probing questions to get them to think about the possible solutions and courses of treatment.

If you do not have the opportunity for a live interaction or a resident is not able to participate, consider giving a case to him or her and request a written report, presentation, or poster about how she or he would approach the case. Role-playing is another way to explore these cases.

You (or the residents) can also create your own cases as you become more familiar with what breastfeeding issues you see in your hospital.

Mrs Rust — African American

Mrs Rust is a 20-year-old African American G₁P₁. You are seeing her 4 days postpartum after an uncomplicated C-Section for FTP. The mother has a BMI >95%, and had uncontrollable gestational diabetes. Her baby is breastfeeding well but she has not yet experienced her milk “coming in.” The baby is 6% below birth weight.

Mother’s concerns:

- Her ability to make milk due to “sugar”
- Her husband’s belief that breastfeeding is not worth it and his desire to help feed the baby
- Her desire to lose weight while breastfeeding
- Her inability to drink milk affecting her ability to produce milk

Probing questions:

- How would you introduce the discussion about breastfeeding with the mother?
- How would you discuss milk supply with the mother?
- The baby has been supplemented with formula and the mother asks if she should continue to do that when they return home. How would you respond?

Ms Martinez — Hispanic

Ms Martinez is a 23-year-old Hispanic mother who is 3-days postpartum after delivering an 8 lb 6 oz baby boy via vacuum assisted vaginal delivery. The mother has a large perineal tear and is complaining of pain. The baby only breastfed 4 times during the first 48 hours, and has received at least two 2-oz bottles of formula per day since birth. Since being discharged at 48 hours the baby has breastfed 5 times and bottle-fed with formula 3 times. The supplements were given initially because the nurses noted the mother was in pain, and she was given pain medication. Ms Martinez has been living in this country for the past 6 months. She came from Mexico to live with her older sister who has been here for the past 5 years. Her sister is present during the visit. The mother does not speak English and an interpreter is in the room to assist.

Mother's concerns:

- Unsure about how breastfeeding is going, her breasts seem full, but the baby wants to feed often
- Nervous to breastfeed while taking pain medication
- Going back to work in 3 weeks but wants to continue breastfeeding
- Cracked and bleeding nipples

Probing questions:

- How would you introduce the discussion about breastfeeding with the mother?
- How would you describe to mother how she can know if the baby is getting enough milk?
- How would you counsel the mother about breastfeeding and returning to work?
- How would you counsel the mother about cracked and bleeding nipples?

Ms Nguyen — Vietnamese Teenager

Ms Nguyen is an 18-year-old female G₁P₁ who recently emigrated from Vietnam along with her parents. She does not have contact with the baby's father. Her English is limited, but she is able to talk conversationally. You are seeing her on the second postpartum day just before discharge to home. The baby was 6 lb at birth and delivered by SVD with good APGAR scores and is "breastfeeding well" according to the nursing notes. There was a bilirubin level drawn on the day of discharge at 48 hours of age. The result was 11.0 mg/dL. The grandmother and aunt of the baby are present during the examination. The grandmother and aunt speak English fluently.

Other Information

You notice an infant bag with a bottle containing light brown fluid. The baby roots and latches immediately but tires out after 5 minutes of suckling. The baby is visibly jaundiced. The baby has lost 7% of birth weight. You also notice that the mother is thin. You calculate her BMI and it is 5% for her age.

Mother's concerns:

- Baby is not getting enough milk (supplementing with green tea)
- Grandmother is concerned that the mother is too thin and not eating enough

Probing questions:

- How do you address the family members with regard to your visit?
- How do you proceed with the exam if you are a male doctor? A female doctor?
- What is the best method to greet the family and Ms. Nguyen?
- How do you position yourself in the room respecting the Vietnamese culture?
- What does her culture say about teen pregnancy and single parenting?
- How do you ask about feeding?
- What is the best method to proceed given her language barrier?
- How will you ensure follow-up?
- When would you like to see this dyad back in your office?

Ms Weeks — African American Teenager

You are seeing Ms Weeks, a 16-year-old African American G₁P₁ mother, several hours after delivery. Her female infant was born at 37 weeks via SVD after a short labor, under epidural anesthesia, and stadol. APGAR scores were 7 and 10. She has not really made a decision on how she wants to feed her baby, but thought she would just formula feed because that is what her friend chose when she had her baby. The infant has already received one feed with 2 oz of infant formula. The mother has a past medical history of asthma and frequent otitis media as a child. One year ago she was admitted to the ICU with meningococcal meningitis. Despite severe necrosis of her left upper extremity, and residual neuropathy lasting several months, she has made a full recovery. She lives with her mother, and 2 older siblings. She is in the 10th grade and receives good grades. She is on the cheerleading squad at school, and works at the local mall on the weekends.

Other Information

You notice during your interview that Ms Weeks seems to be psychologically immature. She seems interested in breastfeeding but looks ambivalent about parenting and seems afraid to hold the baby.

Mother's concerns:

- Nervous about parenting; many responsibilities seem to be that of the grandmother
- Breastfeeding and school
- Her friends chose formula feeding
- Mother has inadequate diet
- Child care for when she returns to work

Probing questions:

- How would you open the discussion about infant feeding with this mother?
- How will you address the involvement of the grandmother?
- How will you talk about breastfeeding and school?