S1. INTERVIEW TOPIC GUIDE

BREASTFEEDING FOR VERY PRETERM BABIES: QUALITATIVE STUDY OF THE MOSAIC PROJECT

Interviewee details

DATE OF INTERVIEW :
NAME :
JOB TITLE :
HOSPITAL :
LOCATION :
ADDRESS :
PHONE :
E-MAIL :
INTERVIEWEE :

Introduction to interview

Thank-you for agreeing to take part in this interview. In this study we are interested in breastfeeding in neonatal units. In the MOSAIC study, we found a large variation in breastfeeding rates for very preterm babies at discharge between the regions and units (show poster). This suggested that European units had different management strategies for breastfeeding. Our aim is thus to identify the strategies used for breastfeeding in European maternity and neonatal units.

We would like to ask you about the routine procedures for women who wish to breastfeed their babies in your neonatal unit (particularly very preterm infants), the support that is available for women who experience difficulties as well as your opinions about the factors which contribute to successful breastfeeding.

I am going to structure the interview around an interview guide. I will ask general questions in chronological order, from arrival of the baby in your unit to discharge. The interview itself will be open ended and I will prompt about items that you do not mention spontaneously.

Your responses are confidential. I would like to tape recording the interview so that I can have an accurate and detailed record of the interview. If anything you say is used in a publication then it will be anonymous. Do you mind if I record this interview?

The interview should take about 2 hours. After the interview I would like to visit your unit and if it possible I will take some pictures of places designated for pumping and feeding.
Section 1: Initiating and maintaining lactation

What are routine practices to feed babies in the unit?

How mothers initiate lactation (in neonatal unit, in maternity ward)? Time, counseling, access to breast pumps...

How do you approach mothers before birth?

What are recommendations given to mothers who pump? Frequency, volume, access to breast pumps

What do you do if mothers don't want to breastfeed? To pump?

What do you do if delayed or decreasing milk supply? If mothers are having problems pumping?

What do you do if mothers want to stop pumping?

What do you do if mothers can't rent/buy a pump?

What types of human milk do you use? Raw milk, frozen milk, pasteurized milk, lactarium

How do you feed babies? Methods (bottle, cup, spoon, finger,...), time to feeding

What kind of support is given to parents?

How do you adapt to the following situations: multiparous mothers, tiredness, infants with health complications, home-unit distance and parent’s difficulties to come to the unit, foreign women

Section 2: Transfer to breast

How do you put babies at breast?

What do you do if mothers don't want to put their babies at breast?

What do you do if baby is not taking the breast?

Section 3: Discharge home

What are feeding criteria for discharge?

What kind of support receives mothers after babies discharge?

Section 4: Education and support for/from health care givers

Are there education session organise for health care givers? Starting year, type, health care givers targeted, content,...
How is work organized between units (neonatal, NICU, maternity unit)? Between teams (day, night, WE)?

**Section 5: General information**

I would like to finish asking you:

What are factors / practices that favors/discourage breastfeeding in your service?

How do you think breastfeeding could be increased in your service?

**Section 6: Updating data on breastfeeding and obtaining information about structural/organizational characteristics of the unit**

We would like to update data on breastfeeding practices if available: breastfeeding rates, pumping rates, delay to initiation of lactation. If no data are collected we will ask the interviewee: Do you think that breastfeeding intention/rates have change since 2003? Increase? Decrease?

We would like to obtain some information about maternity and neonatal units size (number of births, number of very preterm births, number of admissions number, of very preterm admissions), number of lactation consultants, practices that might favour breastfeeding (BFHI, NIDCAP, Kangorou care or skin-to-skin).

**Section 7: Visit of the unit**

We would like to describe the neonatal unit. We will also take pictures and/or draw a floor plan of the unit to enrich the observations.

**Closure of the interview**

We will ask the interviewee if it be alright to contact her/him if we have any more questions.