This pilot quality improvement project aims to understand the contributing factors of early cessation of exclusive breastfeeding at a small community hospital in Southern California. Breastfeeding cessation earlier than desired is a common challenge in the United States, with many mothers claiming to have much longer breastfeeding goals than they are actually able to achieve. As of 2019, the Center for Disease Control (CDC) reported that only 45.3% of infants were exclusively breastfed at 3 months old, and at 6 months old only 24.9% of infants were exclusively breastfed (CDC, 2019). Multiple barriers to breastfeeding success have been identified including lack of provider support, racial and ethnic disparities, difficulties with lactation, the effort associated with breastfeeding and pumping, maternal concern for infant nutritional status, as well as social and cultural influences (Sriraman, 2016; Odom et al., 2013; Louis-Jacques, 2017; Onat & Karakoc, 2020). In this project, mothers were offered voluntary participation in the project regardless of delivery method or breastfeeding exclusivity at their two-to-three-week post-delivery follow-up clinic appointment. Anonymous surveys were distributed to 60 participants and data such as age of the infant, breastfeeding exclusivity, initial breastfeeding goals during pregnancy, method and location of delivery, breastfeeding status at time of survey, reasons for beginning formula supplementation, and age of the infant when formula supplementation began. Results of the survey were analyzed using correlational and descriptive statistics. Analysis of the data showed that 50% of mothers did not receive breastfeeding support despite available resources and formula was started typically within the first four days of life despite almost 90% of mothers claiming a desire to breastfeed for one year or more.

Keywords: breastfeeding, breastfeeding exclusivity, lactation, lactation support