POSTER ID#: 25783 www.thewellproject.org

UPDATED INFANT FEEDING RECOMMENDATIONS FOR US PARENTS LIVING WITH HIV: Empowering Patient/Provider Partnership & Communication



Authors: Ciarra Covin, Olivia G. Ford, Krista Martel, Heather O'Connor

BACKGROUND

Shared, informed decision-making is a support strategy recommended in the US Department of Health and Human Services (HHS)'s Perinatal HIV Clinical Guidelines for navigating conversations with women and other people living with HIV. The approach requires healthy communication between patients and healthcare providers, which can build trust in this vital partnership.

This strategy is at the heart of significant updates made in January 2023 to the "Infant Feeding for Individuals with HIV in the United States" section of the guidelines, which now reflects current evidence about the less than 1% chance of HIV transmission through breast milk when the lactating parent is taking HIV medications and has an undetectable viral load. The American Academy of Pediatrics (AAP) followed HHS in May 2024, releasing updated guidance on infant feeding in the context of HIV in the journal Pediatrics. Both sets of guidelines now recommend that healthcare providers discuss the full range of infant-feeding options with parents living with HIV.

METHODS

In late 2021, The Well Project launched BEEEBAH (Building Equity, Ethics, and Education on Breastfeeding and HIV) - a comprehensive, multi-tiered project that expands upon the organization's work around breast/chestfeeding and HIV, funded by ViiV Healthcare.

Through this programming, The Well Project conducted a survey to help measure stakeholder knowledge and attitudes, as well as the impact of the HHS guidelines update. The survey, launched approximately two years into the initial three-year project, is a follow-up to a baseline knowledge survey disseminated in fall 2022 (prior to any guideline updates). Recruitment of survey participants began February 20, 2024, and continued through March 30, 2024. The total number of complete surveys received was 226. Healthcare providers (n=117) made up 52% of the survey respondents

LANGUAGE MATTERS

At The Well Project, we use "breastfeeding" and "breast/chestfeeding." The Well Project focuses on women across the gender spectrum and strives to be inclusive of trans men, nonbinary individuals, and all others living with and vulnerable to HIV who wish to explore these options.

FINDINGS

SURVEY RESPONDENTS' ROLES

(Knowing that people in the HIV community often play multiple roles, survey respondents were asked to indicate all the roles they identify with)

52%

Healthcare provider

Medical

(40%)

HEALTHCARE PROVIDERS'

PROFESSIONS

Other professions included nurse practitioner,

lactation specialist, physician assistant, doula, pharmacist

(22%)

Nursing

professionals

(21%)

Work in an organization that supports people living with HIV

Social workers/

therapists

(17%)

27% **Public Health**

professional

Infectious disease

(57%)

Primary care/general practitioner

(32%)

CLINICAL ROLE OF MEDICAL PROVIDERS

(respondents could check multiple roles)

Pediatrician

(34%)

Person living with HIV

OB/GYN

(23%)

Other

(9%)

22%

Before After lostly/very supportive 15% Somewhat supportive A little supportive Not at all supportive

Healthcare Provider Support Before and After

the 2023 Guideline Updates*

"The guidelines are a large first step. Additional work is needed to provide tools to support patient-provider communication and infant feeding decisions." – 2024 survey respondent

Dramatic Shift in Healthcare Provider Support of Breast/Chestfeeding after the 2023 updates to the US Perinatal HIV Clinical Guidelines

Among the healthcare providers, 74% indicated that they had heard about the 2023 updates to the infant-feeding guidance in the US Perinatal HIV Clinical Guidelines

in healthcare providers being after the 2023 guideline updates

> "Before the USDHHS [sic] Guidelines changed, it was 'stickier.' Conversations were more often 'off record.' Now, there is clear support/guidance." – 2024 survey responder

50% increase

mostly/very supportive

of breast/chestfeeding

Top 3 Ways Healthcare Providers Say They Can Support the Infant-Feeding Decisions of Women and Other Birthing Parents Living with HIV

nitiating non-judgmental discussion(s

around infant-feeding options

rovide evidence-based informatio on HIV transmission for all infant-feeding options

Ensure the parent and infant's entire care team (OB/GYN, ID, diatrician, lactation consultant, dou idwife, etc.) is supporting the woman' decision on how to feed her child

"I think we are long past the time where we should tell parents living with HIV how to feed their children. As providers we should ensure that they are aware of risks and benefits, just like with all other decisions, and support them to make the best choice for their families." - 2024 survey respondent

Top 3 Obstacles Healthcare Providers Face When Considering Infant-Feeding Decisions with Women and Other Birthing Parents Living with HIV

_ack of culturally responsive educationa resources for women with HIV

Lack of support from others on the care team

Lack of explicit policies in my nstitution/organization that support breast/chestfeeding

"It will be crucial for providers to put this decision-making power back in the patient's hands, which means providers must be thoroughly educated on the topic to avoid further stigma and misinformation." - 2024 survey respondent

CONCLUSIONS

The 2023 updates to the infant-feeding guidance in the US Perinatal HIV Clinical Guidelines dramatically increased healthcare providers' support for their patients living with HIV who may desire to breast/chestfeed.

While strides have been made in disseminating updated guidelines, gaps in awareness of these changes remain. Continued rigorous efforts are needed to increase knowledge among healthcare providers, women and other people living with HIV, and other key stakeholders and allies - including non-HIV specialists - to support parents in knowing their options and making optimal decisions for themselves and their families. Community-focused innovations in the guidelines, such as discouraging harmful

calls to CPS or similar agencies in response to infant-feeding inquiries, may also increase engagement in care and strengthen patient-provider communications.

Updated infant-feeding guidelines are already proving to be powerful tools to support shared, informed decision-making. Listening to the needs and desires of parents living with HIV and supporting them with evidence-based practice facilitatesprovider relationships that honor the whole person and ultimately improve the health and well-being of parents living with HIV and their children.



BEEEBAH (Building Equity, Ethics, and Education on Breastfeeding and HIV) is supported by POSITIVE ACTION

