ASTHO’s Breastfeeding Learning Community Learning Session #4

Association of State and Territorial Health Officials
May 19, 2015
Welcome and Call Objectives

- Share state health agency leadership’s vision for and perspective on breastfeeding promotion and support work.
- Reflect on states’ key learnings and successes from the project.
- Discuss how to spread and sustain successes from this year moving forward.
- Provide guidance to states on planning for the next phase of their breastfeeding work.
- Outline expectations for the project final report.
Introductions and Greetings from Dover, DE

- ASTHO Team
- Delaware Team
- CDC Team
Call Agenda

- Welcome and Introductions
- Featured State Presentation: Delaware
- State Team Presentations
- All State Discussion
- Planning for Next Steps
- Project Evaluation
- Wrap-up and Next Steps
BREASTFEEDING IN DELAWARE

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Breastfeeding Support Across the Agency

• WIC Peer counseling
• Maternal Child Home visiting programs
• Working with MCH title V funds
Partnering to Improve Breastfeeding

• Breastfeeding Coalition of Delaware (BCD)
• Hospitals (Baby Friendly Hospital Initiative)
• Community partners (Nemours)
• Delaware Coalition for Healthy Eating & Active Living (DE HEAL)
• Delaware Healthy Mothers & Infants Consortium (DHMIC)
Delivering in Delaware? What to Expect.

The Baby-Friendly Hospital Initiative (BFHI) recognizes hospitals that provide the best care to support infant feeding and mother/baby bonding. One Delaware hospital, Beebe Healthcare, has received the "Baby-Friendly Hospital" designation. Four hospitals are working toward designation: Christiana Care Health System, Kent General Hospital, Milford Memorial Hospital and Saint Francis Hospital. What does this mean for you and your baby?

We Promote and Support Breastfeeding

Health care providers recommend only breastfeeding (no formula, food or drinks) as the best way to feed baby. Breast milk gives baby powerful health benefits that formula can't match. It helps to prevent ear infections, lung infections, diabetes, asthma, allergies, obesity and more. Breastfeeding also helps mom lose the baby weight and protects against some types of cancer.

What We Do to Support You

Policy and Training: We have a policy to support all mothers in breastfeeding. All of our staff members are trained in how to best support breastfeeding moms and babies.

Rooming-in: You and baby will share the same room, so you can stay together 24 hours a day. Rooming-in helps you learn baby's signs of hunger, so you can feed on demand, whenever your baby is hungry. Baby will feed a lot—8-12 times a day! This is normal and will help your milk supply increase more quickly.

Skin-to-Skin: Baby will be placed on your chest, skin-to-skin, right after birth until the first breastfeeding is complete. These "magical minutes" are calm and relaxing. The close contact promotes bonding between mom and baby. It keeps your baby warm and helps breastfeeding begin right away.

Formula Use: Exclusive breastfeeding (no other food or drink) is best for you and your baby. Our goal is to build your confidence in your ability to breastfeed. Giving formula can make breastfeeding more difficult for you both. It can increase the risk of allergies and sickness and makes baby's tummy work harder to digest it. We will not give your baby any formula, sugar water, or anything else unless there is a medical need. As your health care providers, it is our job to tell you about the benefits of breastfeeding. After you know the facts, if you prefer to formula feed, we will provide information on safe preparation and feeding of formula.

Pacifiers and Bottles: At our hospitals, babies do not get pacifiers or bottles unless there is a medical need. These plastic nipples may confuse your baby. They should not be used in the early days while you and baby are learning how to breastfeed.
Opportunities for Partnering Outside the Box

• Division of Labor
  – Violations of Delaware Breastfeeding Legislation

• Delaware Business Organizations/Chambers of Commerce
  – Business Case for Breastfeeding
DPH Partnership with the Coalition

• Organic partnership
• 7 out of 33 members are DPH employees
• Chair of the BCD is DPH employee
Lessons Learned Working with the Coalition

- Enables creation of common goals
  - Strategic plan
- Enables coordinated execution of those goals
- Enables consistency of messaging
- Leverages resources
- Reduces duplicative efforts
## Unique Assets

<table>
<thead>
<tr>
<th>DPH</th>
<th>BCD</th>
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<tr>
<td>• Existing funding streams</td>
<td>• Less bureaucracy</td>
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<td>• Existing programs</td>
<td>• Many motivated individuals</td>
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<td>• Existing relationships in the community</td>
<td>• A variety of backgrounds</td>
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<td>• Many organizations at the table</td>
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<td>• Additional dissemination avenues (via partners)</td>
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Nature of BCD/DPH partnership

• Communication
  – Organic
  – Forums
  – Shared staff

• Funding
  – BCD members are all volunteers
  – DPH has funded particular projects
  – Encourages staff participation in BCD

• Data Sharing
Value Working Together

• Various agency/resources working toward common goal
• Shared goal supersedes “turf” issues
• Credit for successes is shared
• Small state necessitates pooling limited resources and man power
Project Evolution

EPIC BEST — Educating Practices in the Community
Breastfeeding Education, Support & Training

- Trained 3 IBCLCs & 3 clinicians to be trainers
- Purchased our supplies and giveaways
- Initiated marketing the training
- 11 practices are scheduled or pending as of today (goal is 24 by project end)
1. *Considering your project, what 2-3 successes would you want to sustain in the next year?*

   – Secure funding to continue training practices
   – Establish a data base of the trained practices and maintain communication with the offices to disseminate new and useful breastfeeding information
   – Evaluate the long term effect of the training on practices. Capture what changes practices made as a result of the training.

2. *Where would you spread these successes to expand your reach (geographical locations, populations, partners etc.)?*

   – Need to continue to reach practices that serve high numbers of low income and racially disparate families
3. How would the state health agency and partners spread these successes?
   - Once we demonstrate results, continue offering the model
   - Continue to partner with the BCD

4. What new partners, communities, hospitals, etc. would you add to expand your reach?
   - Chambers of commerce
   - Division of Labor

5. What are you learning from working with your state breastfeeding coalition on this project?
   - Mutual goals supersede the “turf wars”
   - Representing various organizations facilitates the work
Questions and Answers
Selected State Presentations
Vermont

**Considering your project, what 2-3 successes would you want to sustain in the next year?**

- Continue outreach to employers throughout Vermont to become part of the Breastfeeding Friendly Employer Project
- Recognize employers who joined in the previous year at the annual Worksite Wellness conference.
- Increase contact with District Health Offices in all counties to foster relationships with businesses and schools and lead to increased contacts regarding other health outreach.

**Where would you spread these successes to expand your reach (geographical locations, populations, partners etc.)?**

- ASTHO grantees are located in 9 districts. As part of the State Plan, we will outreach to employers and childcare providers in all 12 districts.
- Fostering relationship between the Health Department and local breastfeeding coalitions to coordinate outreach to employers, childcare providers will improve our reach. We will provide information at community events and health fairs.
Vermont

How would the state health agency and partners spread these successes? Please include specific actions addressing who, what, and how.

- Annual recognition of new employers at the Worksite Wellness conference and recognition of all employers with print ads in local newspapers across the state during World Breastfeeding Month.
- Press release during World Breastfeeding Week.

What new partners, communities, hospitals, etc. would you add to expand your reach? Consider non-traditional partners across all sectors.

- WIC Certifiers (CPAs) and WIC Breastfeeding Peer Counselors can assist Breastfeeding Coalition and Local Health Department to discover which employers are not in compliance and need outreach.
- With our newly trained VDH Staff/Local BF Coalition staff, we plan to target larger employers, often with headquarters in states with less awareness/laws regarding breastfeeding employees. They need targeted outreach and require more follow up as managers work with corporate office to revise worksite policies that include support for nursing moms at work.
- Insurance companies who work with the larger employers in VT could be a partner to expand the Breastfeeding Friendly Employer Project
Vermont

What are you learning from working with your state breastfeeding coalition on this project?

- The Vermont Department of Health continues to do most of the outreach and provides support for breastfeeding projects. We need to grow local breastfeeding coalitions and strengthen the state breastfeeding coalition.
- The Health Department has much credibility - this work is easy to do if State staff have time. Employers are open to receiving information from the Health Department.
List 2-3 successes you want to sustain in the next year:

- Continued participation and collaboration with partnering agencies & hospitals.
- Continued use of data system to collect monthly hospital breastfeeding data.
- Continued review and revision of hospital policies, procedures, and training to align with the “Ten Steps” and Baby-Friendly.
- Continued improvement in initiatives to increase breastfeeding through the work of the Alabama Breastfeeding Committee.

Where would you spread these successes to expand your reach (geographical locations, populations, partners etc.)?

- All Alabama delivering hospitals.
- OB/GYN, pediatric, and family practice providers.
- Faith based organizations.
- Minority and culturally diverse groups.
- Nursing, residency, and schools of public health.
- Medicaid Maternity Care Coordinators.
- WIC Breastfeeding Peer Counselors.
How would the state health agency and partners spread these successes? Who:

- Alabama Hospital Association (AlaHA), Alabama Chapter-American Academy of Pediatrics (AAP), Alabama Academy of Family Physicians (AAFP), March of Dimes (MOD), State Perinatal Advisory Committee, Alabama Medicaid Agency.
- Department web-pages, news releases, annual reports, perinatal coordinators.

What and How:

- AlaHA – continue to engage hospitals in the initiative.
- AAP, AAFP, MOD, and ACOG - conferences to provide information on perinatal health issues.
- Data – complete pre- and post-questionnaire and submit monthly data to establish baseline and to document improvement over time.
- Policies/Training – hospitals update/revise policies and procedures to align with evidence-based recommendations and provide annual competency training for all staff.
- Alabama Breastfeeding Committee – continue work after grant ends.
What new partners, communities, hospitals, etc. would you add to expand your reach? Consider non-traditional partners across all sectors.

- Additional hospitals not currently participating.
- WIC Breastfeeding Peer-counselors statewide.
- Number of CLCs to work with IBCLCs statewide; especially in rural areas.
- Minority and culturally diverse groups.
- Alabama Healthy Child Care Program.
- Alabama Department of Child Abuse and Neglect Prevention.
- Faith based organizations.
- College campuses.
What are you learning from working with your state breastfeeding coalition on this project?

- Partners and collaborators are essential.
- Continued engagement is important.
- Challenges with IBCLCs acknowledging CLCs role as a breastfeeding educator and supporter.
- Understanding that the work we do is all about healthier mother’s, baby’s, and families!
Washington, DC

**Considering your project, what 2-3 successes would you want to sustain in the next year?**

1. Expanding our reach of breastfeeding peer counselors to the clinics and the local birthing hospitals.
2. Connecting new moms to their primary care and WIC appointments.

**Where would you spread these successes to expand your reach (geographical locations, populations, partners etc.)?**

- Incorporate breastfeeding peer counselors services to other birthing hospitals in Washington, DC including Washington Hospital Center, Providence Hospital, The George Washington University Hospital, Sibley Hospital.

**How would the state health agency and partners spread these successes? Please include specific actions addressing who, what, and how.**

- The Department of Health working with the local hospitals in allowing both WIC and non-WIC peer counselors to go into hospitals to reach new moms.
What new partners, communities, hospitals, etc. would you add to expand your reach? Consider non-traditional partners across all sectors.

- Partnering with Federally Qualified Health Centers in Washington, DC to extend peer counselor support services in outpatient health facilities.
- Partnering with Healthy Start to expand peer counselor services to home visitation.

What are you learning from working with your state breastfeeding coalition on this project?

- Collaborating with the DC Breastfeeding Coalition has helped extend the DC Department of Health’s partnerships with community organizations.
LOUISIANA

- **Considering your project, what 2-3 successes would you want to sustain in the next year?**
  - Community Networking/Engagement
  - Regional Collaborative Meetings with hospitals
  - Mentor-Mentee between hospitals

- **Where would you spread these successes to expand your reach (geographical locations, populations, partners etc.)?**
  - Community Networking/Engagement: Other communities who are interested in establishing networks/coalitions
  - Mentor-Mentee: Target hospitals not engaged in other initiatives (i.e. CHAMPS, EMPower)
  - Regional Collaborative Meetings: Continue statewide efforts
LOUISIANA

How would the state health agency and partners spread these successes? Please include specific actions addressing who, what, and how.

- State BF Coalition Meetings: Conduct presentation on the community collaborative meeting model and discuss replication (low hanging fruit)
- Mentor-Mentee/Regional Collaborative Meetings: Continue activities. Target 2 Mentor-Mentee relationships per year. Bureau of Family Health staff will continue meetings.

What new partners, communities, hospitals, etc. would you add to expand your reach? Consider non-traditional partners across all sectors.

- Fatherhood Groups
- Faith-Based
- Other State Agencies/Departments (DCFS)/Programs
- Early Childhood Groups/Programs

What are you learning from working with your state breastfeeding coalition on this project?

- Very engaged- people are ready to get connected. They need the tools; some local coalitions need more help than others. Make it easy for them!
North Dakota

- Considering your project, what 2-3 successes would you want to sustain in the next year?
  - Collaboration with the ND Breastfeeding Coalition in bringing the training to different communities
  - Communication and enthusiasm from the health care facilities and professionals
  - Increased number of trainings and participants across the state

- Where would you spread these successes to expand your reach (geographical locations, populations, partners etc.)?
  - Western part of North Dakota
  - Indian Reservations
North Dakota

How would the state health agency and partners spread these successes?

- Local breastfeeding coalitions and health units would need to support the training by providing a location in their community, promoting the training and providing at least 4 trainers to help with the stations.
- Communication would need to continue via conference calls, emails and maintenance of the state breastfeeding website.
- Freebies: free training, CEUs, resources, and food being provided at the training makes it “worth it”.
North Dakota

- What new partners, communities, hospitals, etc. would you add to expand your reach? Consider non-traditional partners across all sectors.
  - Tribes / IHS
  - WIC
  - Doula groups

- What are you learning from working with your state breastfeeding coalition on this project?
  - Communication and Collaboration is key to making a training like this successful in a community.
  - Hospitals are strapped for time and workers so the coalitions have helped supply the “trainers” for the training.
Illinois

Considering your project, what 2-3 successes would you want to sustain in the next year?

- **Providing support to mother’s beyond the hospital environment through community partnerships**
  
  *Touchette/Community Breastfeeding Collaboration Committee – we would like to meet on a quarterly basis and work together to increase awareness of benefits of breastfeeding and consistent messaging to families. Also provide support to one another with ideas and information sharing.*

- **Breastfeeding peer counselor visits established during hospitalization**
  
  *We would like to continue with WIC Breastfeeding Peer Counselor rounds/patient visits during patient hospitalization supporting breastfeeding and encouraging breastfeeding to all patients.*

- **Quiet/undisturbed time with door signage for breastfeeding mothers**

- **Removal of commercial formula gift packs for patients**

- **Growing the relationship between the Community Health Improvement Center & Macon County Health Department and Decatur Women’s Prison to foster a positive breastfeeding program.**
  
  *Enhancement of the existing Mom’s /Baby’s program with the assistance in providing essential supplies and providing staff education and training opportunities for this vulnerable population of mothers.*
Illinois

Where would you spread these successes to expand your reach (geographical locations, populations, partners etc.)?

- **Share the project information with other hospitals within the Southern Illinois Perinatal Network**

  This would provide information on how to:
  
  1. Educate nursing staff (skills lab, DVDs, online education)
  2. Develop similar community coalitions in their area – WIC, Healthy Start, the local health department, peer counselors, school nurses

- **Expand to include community members throughout the service area focusing on populations with disparities.**

  Reach into business community and other public agencies such as shopping centers grocery stores, insurance companies, community centers, restaurants, churches, entertainment businesses such as movie theaters, and high schools

  Distributing message of the importance of breastfeeding to the African American and Latino Communities utilizing targeted information (ie. – “It’s only natural” “Breastfeeding Heritage & Pride”)
Illinois

How would the state health agency and partners spread these successes? Please include specific actions addressing who, what, and how.

- Agencies could offer the breastfeeding education to their staff – basics of breastfeeding, assisting mothers with any difficulties, scripting for staff to be better able to speak with mothers about breastfeeding, cultural competency for African American mothers.
- Agencies could provide supporting education to Decatur personnel to further assist women in their decision to breastfeed despite incarceration.

What new partners, communities, hospitals, etc. would you add to expand your reach? Consider non-traditional partners across all sectors.

- The Southern Illinois Perinatal Network
- Businesses (Salons, entertainment venues, community centers, day care centers)
- Faith Based Community; including more father involvement

What are you learning from working with your state breastfeeding coalition on this project?

- Many resources available – education/webinars/information sharing between agencies. We are all working on the same goal of improving health of mothers and babies and communication with information and resource sharing assists in closing the gap. Working together as a team instead of independent bodies.
Illinois
Engaging staff through Skills Lab
Thank You!

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For more information, visit [ASTHO’s Breastfeeding Website](mailto:ASTHO’s Breastfeeding Website)!