# Colorado Breastfeeding Logic Model for Community-Based Change

# What we know...

- → The Centers for Disease Control and Prevention (CDC) has identified strategies with evidence for effectiveness in increasing breastfeeding initiation and duration: Maternity care practices; Worksite interventions; Professional support; Maternal education; Peer counseling; Media
- → Colorado has one "Baby Friendly" Hospital. There are around 80 hospitals/birth centers nationwide that have received the designation. There is a local initiative (the Colorado Can Do 5!) with the ability to promote supportive breastfeeding practices on the way to becoming a "Baby-Friendly" Hospital.
- → Colorado has two laws that protect breastfeeding (public right to breastfeeding§ 25-6-301, workplace accommodation for nursing mothers Colorado Revised Statute article 8-13.5-101-104). There is a need to ensure state wide awareness of and how to comply with these laws. Colorado mothers cite returning to work as one of the major reasons they stop breastfeeding.
- Breastfeeding support services are lacking in most Colorado communities and there are not enough credentialed breastfeeding experts (international board certified lactation consultants - IBCLC), particularly in rural communities. There is a need to provide more opportunities to educate health care providers and to ensure consultative services are a part of normal infant/mother care and are a covered insurance benefit.

# Supporting Literature and Research

- 1. The CDC Guide to Breastfeeding Interventions www.cdc.gov/breastfeeding/resources/guide.htm
- 2. United States Baby Friendly Hospital Initiative www.babyfriendlyusa.org/eng/index.html
- 3. Getting It Right After Delivery: Five Hospital Practices That Support Breastfeeding www.cdphe.state.co.us/ps/mch/gettingitright.pdf
- 4. Colorado breastfeeding legislation information www.leg.state.co.us/Clics/Clics2007A/csl.nsf/directory?openframeset
- 5. CDC Breastfeeding Report Card (IBCLC and support groups per live births) www.cdc.gov/breastfeeding/data/report\_card.htm
- 6. CDC National Survey of Maternity Practices in Infant Nutrition and Care (mPINC) www.cdc.gov/breastfeeding/data/mpinc/
- 7. Surgeon General's Perspective: The 25<sup>th</sup> anniversary of the surgeon general's workshop on breastfeeding and human lactation: The status of breastfeeding today www.publichealthreports.org/userfiles/124\_3/356-358.pdf
- 8. Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries. Evidence Report/ Technology Assessment Number 153. Agency for Healthcare Research and Quality. www.ahrq.gov
- 9. Colorado study: Clark, A, Anderson, J., Adams, E. Baker, S. (2008). Assessing the Knowledge, Attitudes, Behaviors and Training Needs Related to Infant Feeding, Specifically Breastfeeding, of Child Care Providers. Maternal and Child Health Journal, 12:128-135.

## Resources

# A. Breastfeeding Coalitions

- 1. Community Action Kit for Protecting, Promoting, and Supporting Breastfeeding, Texas Department of State Health Services WIC Program www.dshs.state.tx.us/wichd/bf/pdf Community%20Action%20Kit.pdf
- 2. Coalition collaboration through the United States Breastfeeding Committee (USBC) an independent nonprofit coalition of 41 nationally influential professional, educational, and governmental organizations. Representing over half a million concerned professionals and the families they serve, USBC and its member organizations share a common mission to improve the Nation's health by working collaboratively to protect, promote, and support breastfeeding, www.usbreastfeeding.org.

# B. Worksite Interventions

- Colorado Department of Labor workplace law information and support for employers. http://coworkforce.com/lab/nursingmothers.asp
- 2. Colorado Breastfeeding Coalition: Employers page: http://www.cobfc.org/Employers/index.htmlMaternity Care Practices (Law, information, Colorado employer toolkit).
- The Web version of The Business Case for Breastfeeding: http://www.womenshealth.gov/breastfeeding/ programs/business-case/

## Resources

## C. Professional Support

- 1. International Lactation Consultant Association has directory of course providers (approved and accredited courses) www.ilca.org (search "Directory of Course Providers")
- 2. USBC publication pending, "Core Competencies for Breastfeeding Care for all health professionals" education standards.
- 3. Academy of Breastfeeding Medicine Protocols: www.bfmed.org. Guidelines for the care of breastfeeding mothers and infants and do not delineate an exclusive course of treatment or serve as standards of medical care.
- 4. Training

# Online and self-paced training

- a) The AAP Section on Breastfeeding and the Health Resources and Services Administration\*s Maternal and Child Health Bureau Breastfeeding Residency Curriculum Online Resource (tools and resources about breastfeeding including clinical and cultural cases, prepared presentations about breastfeeding management, and evaluation and tracking tools. Curriculum was designed according to the Accreditation Council of Graduate Medical Education Core Competencies to help residents and appeal to program directors www.aap.org/breastfeeding/curriculum
- b) Virginia Department of Health and University of Virginia course designed for healthcare professionals of all types: offers free education units for nurses, dietitians, and physicians: www.breastfeedingtraining.org
- c) Within Reach: The Physician Lactation Collaborative of Washington "Lactation Education for Physicians module set." (\$25) Ten modules designed and tested for physicians. www.breastfeedingwa.org/collaborative
- d) Breastfeeding in the Beginning: A theory based online course for women and family care nurses. Metro State College For more information contact: weddig@mscd.edu
- e) Breastfeeding Basics Academic, non commercial, short course on the fundamentals of breastfeeding geared toward medical practitioner. www.Breastfeedingbasics.org

# Regional / Classroom training

- a) Healthy Children's Center for Breastfeeding Lactation Counselor certificate course www.healthychildren.cc/
- b) Childbirth & Postpartum Professional Association Lactation Educator 20 hours course www.motherjourney.com
- c) Lactation Journal Člub, monthly meeting. Programming is approved for Nursing CEUs (Continuing Education Units) and CERPs (Continuing Education Recognition Points awarded by the International Board of Lactation Consultant Examiners). Health professionals interested in being notified about upcoming meetings call303-377-3016 and visit: www.bestfedbabies.org/IJournal.htm.
- d) The Lactation Program Preceptorship offers individualized clinical rotations for licensed health professionals seeking in-depth experience in the management of lactation. For more information call call call 303-377-3016 and visit: www.bestfedbabies.org/lPreceptorship.htm.
- e) Lactation Exam Review: www.breastfeedingoutlook.com

# D. Mother education

- 1. La Leche League International (www.lalecheleague.org) has many articles on basic breastfeeding, problems that may occur, and links to local support
- 2. ProMom (www.promom.org) covers basic breastfeeding issues and problems that may occur, as well as breastfeeding advocacy
- 3. Breastfeeding Basics (www.breastfeedingbasics.com) has articles about breastfeeding, problems that may occur, working while breastfeeding and frequently asked questions
- 4. American Academy of Pediatrics (www.aap.org/healthtopics/breastfeeding.cfm) gives basic breastfeeding information and discusses problems that may arise
- 5. MedlinePlus (www.nlm.nih.gov/medlineplus/breastfeeding.html) has a guide for African American women, information in Spanish, and easy to read sections.
- 6. Working and pumping www.kellymom.com/bf/pumping/bf-links-pumping.html/

# E. Child Care Providers

- 1. InfaNET Nutrition for Child Care Providers Website www.infanet.cahs.colostate.edu
- 2. Ten Steps to Breastfeeding Friendly Child Care Centers Resource Kit (1/09): http://dhs.wisconsin.gov/health/physicalactivity/pdf\_files/BreastfeedingFriendlyChildCareCenters.pdf. Or to obtain a copy or more information about this publication: visit the Wisconsin Nutrition, Physical Activity and Obesity Program contact: Kate Pederson, Wisconsin Department of Health Services Division of Public Health at kathryn.pederson@wisconsin.gov.
- 3. CDC regarding precautions for handling human milk: www.cdc.gov/breastfeeding/faq/index.htm and exposure to another mother's breast milk www.cdc.gov/breastfeeding/recommendations other\_mothers\_milk.htm
- 4. Caring for Our Children from the National Resource Center http://nrc.uchsc.edu/CFOC/HTMLVersion/TOC.html (search index for "human milk")
- 5. Breastfeeding and Child Care. United States Breastfeeding Committee issue paper. Download at www.usbreastfeeding.org/Workplace/ChildCareFacilities/tabid/107/Default.aspx
- 6. Rules and Regulations Governing the Health and Sanitation of Child Care facilities. Department of Public Health and Environment, Consumer Protection Division. Download at www.cdphe.state.co.us/regulations/consumer/101007childcaresanitarystandards.pdf. (search for "breast milk")



#### Resources

- Local Contributions
- Staffing: Community based project coordinator, program evaluator, volunteers, partnerships (business community, health organizations, local public health)
- Financial resources: locally received grants.
- Support for infrastructure: meeting sites, training sites, means for communication, evaluation resources
- Commitment from employers, hospitals, community advocates
- Financial resources (CDC funding through Colorado Physical Activity and Nutrition Program; LiveWell community grants; Colorado Breastfeeding Coalition pooled resources)
- Supporting literature and research (best practice and evidenced-based practices)
- Breastfeeding data (PRAMS, PedNSS, CDC, Child Health Survey, mPINC, CDC report card)

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#### Activities

## Public Awareness (communication, program planning) Communities form breastfeeding coalitions to:

- Assess existing coalitions for feasibility of addressing breastfeeding
- Pool resources
- Meet regularly, network, communicate
- Build a mission
- Perform strategic planning on local breastfeeding issues
- Assess and prioritize community needs (e.g., survey pregnant and postpartum women, hospital staff, health care providers - pediatricians. family practice, obstetricians; employers, child care providers, local political positions)
- Plan activities considerina kev initiatives below.

## Worksite Intervention/Employer Outreach (education/training) Communities reach out to employers by:

- Hosting regional workshops for employers
- Offering suggestions to Human Resources organizations to provide employers with samples of standard written policies
- Educating about or disseminating the toolkit "Business Care for Breastfeeding"
- Identifying model programs and highlight to media and other employers Recognizing and/or awarding local breastfeeding friendly workplaces.

## Maternity Care Practices (education/training)

Communities support their local hospital/birth centers by:

- Hosting the *Colorado Can Do 5!* presentation at the hospital/birth center if presentation has yet been given.
- Offering technical assistance to hospitals (such as disseminating model policies, clinical protocols, sharing best practice information)

## Professional Support (education/training/communication)

Communities provide training opportunities for local health care providers

- Assessing types of training required focusing on needs based on provider level of promotion and intervention and maternal population served (prenatally, early postpartum, later postpartum)
- Researching provider preferred training methods (on-line, self paced,
- Offering and / or recommending lactation trainings and breastfeeding curricula available in Colorado and surrounding states.
- Selecting and offering trainings to make better progress toward ensuring sufficient numbers of language and cultural competencies among providers. (e.g., ensure that Spanish speaking staff receive training)

## Community Support (resources/training)

Communities develop breastfeeding resources for its members by:

- Disseminating clinical protocols with providers regarding recommended follow-up for the breastfeeding newborn.
- Organizing a support group(s) for breastfeeding mothers.
- Developing community breastfeeding resource lists that include where to get help, purchase breastfeeding supplies, who to call with questions.
- Investigating current resources for breast pumps rentals and evaluate whether all income levels have access.
- Investigating ways to provide breastfeeding support services (e.g., electric pumps rentals) through unique settings (e.g., health care providers)
- Providing training to child care providers on appropriate infant feeding, and why be and how to be a baby friendly child care center

#### Outputs

#### Public Awareness

- Number of coalition members representing the following entities: primary health care providers, hospitals, lactation experts, businesses, WIC. midwives, doulas, mothers, fathers, grandparents, charity organizations, schools (head start) child care providers food banks, churches, synagogues, recreation and cultural centers OR
- Name of an existing maternal/child health- focused group (e.g., early childhood council) adopts advancing breastfeeding issues as a part of their mission.
- Coalition name, mission and annual strategic plan established.
- Annual list of target activities created.
- Number of coalition meetings and meeting minutes

#### Worksite/Employer Outreach

- Number of workshops held for community employers.
- Number of workshop participants and names collected.
- Number and names of employers receiving packets of information (police samples, toolkit) on how to support breastfeeding employees.
- Number and names of local employers receiving an award and/or media attention for being baby friendly.

#### Maternity Care Practices

- Number and name of hospitals who have received the Colorado Can Do 5! presentation in community.
- Number of hospitals who have received technical assistance.
- Number of hours and type(s) of technical assistance provided.

#### Professional Support

- Report of summary of training needs by provider type completed.
- Training resources evaluated based on content, method, and price.
- Number of trainings offered; and number and type (job type) of participants at each training collected.

## Community Support

- Name and number of providers receiving clinical protocols.
- Name of group leaders and number of support aroups established.
- Resource list created and distributed. List and number of recipients maintained.
- List of situations where mothers are unable to access breastfeeding support and services.
- Number of child care trainings provided and number and names of participants collected.

## Short-term Outcomes

## Alliances created among public and private to:

- Share evidenced-based useful information on breastfeeding
- Improve communication among entities Remove stereotyping & preconceptions
- Improve breastfeeding support practice
- Reduce duplication of efforts
- Raise political clout on breastfeeding awareness among policy decision makers.

## Employers know:

- Colorado laws
- Benefits of breastfeeding to businesses
- Where to get help
- They are supported and recognized by organization and community

## Hospitals and birth centers have:

- Breastfeeding friendly maternity care infant feeding practices
- Staff who know how to support the breastfeeding dyad
- Administration who highlights baby friendly initiatives
- Staff who receive annual breastfeeding trainina Culturally and linguistically appropriate

breastfeeding support services.

- Outpatient clinics and lactation program exist
- Lactation consultation is affordable
- Breastfeeding support services are affordable
- Providers are able to support breastfeeding problems and concerns
- Community lactation experts are working toward becoming International Board Certified Lactation Consultants
- Culturally and linguistically appropriate breastfeeding support services.
- Community wide effort results in informed health care providers and community organizations of local sources for breastfeeding support.
- Child care providers know how to support the breastfed infant and welcome the breastfed infant.

## Long-term Outcomes

Breastfeeding respectively).

- 75% of hospitals achieving the Colorado Can Do 5! by 2015.
- community has site(s) with skilled support available for early, exclusive and continued breastfeeding.
- By 2015 communities have at least one designated lactation expert (preferably an IBCLC) for each 1.000 live births.

- duration rates at 6 and 12 months achieve HP2010 goals (50%, 25%,
- Exclusive breastfeeding rates at 3 and 6 months achieve HP2010 goals (40%, 17%, respectively).
- By 2015 access to referral

# Goals

- ★ Breastfeeding is practiced and accepted as the normal way to feed infants and is a part of health care to families.
- ★ Community partnerships with resources to protect breastfeeding.
- ★ Reduced adversity in the childhood experience by providing the best start through breastfeeding.
- ★ Lower acute and chronic diseases for mothers and infants.
- ★ Employers optimally accommodate nursing mothers/employer.
- ★ Hospitals practice (institutionalize) baby friendly breastfeeding supportive practices.
- ★ Families receive balanced information and consistent messages about infant feeding.
- ★ Families have resources in the community for lactation support
- ★ Health care providers attain core competencies to promote exclusive breastfeedina to women prenatally.
- ★ Health care providers attain core competencies to support exclusive breastfeeding to women in the early postpartum period.
- ★ All health facilities are designated baby friendly and actively support exclusive breastfeeding (0-6 months)
- \* Child care providers are supportive of breastfeeding.