Katherine Shealy, MPH, IBCLC, RLC
Public Health Advisor
Institute of Medicine
Food and Nutrition Board
April 26, 2011

Updating the USDA National Breastfeeding Campaign:
_Loving Support Makes Breastfeeding Work_

STRATEGIC COMMUNITY-BASED PARTNERSHIPS
“What community partners provide opportunities for FNS collaboration and what role can they play in Loving Support?”
Necessary considerations: “What community partners provide opportunities for FNS collaboration and what role can they play in Loving Support?”

q Primary Loving Support goals

q Primary Loving Support audience

q Primary role of FNS in community partnerships
Necessary considerations: “What community partners provide opportunities for FNS collaboration and what role can they play in Loving Support?”

q **Primary Loving Support goals**
  - Change mothers’ infant feeding decisions
  - Remove barriers that impair mothers’ ability to carry out infant feeding decisions

q **Primary Loving Support audience**
  - Mothers and immediate circle of personal influencers
  - Settings/people/groups that directly influence a mother’s infant feeding decisions

q **Primary role of FNS in community partnerships**
  - Responsive supporter
  - Pro-active initiator
  - Engaged contributor (financial and human resources)
Necessary considerations: “What community partners provide opportunities for FNS collaboration and what role can they play in Loving Support?”

q Primary Loving Support goals
  - Change mothers’ infant feeding decisions
  - Remove barriers that impair mothers’ ability to carry out infant feeding decisions

q Primary Loving Support audience
  - Mothers and immediate circle of personal influencers
  - Settings/people/groups that directly influence a mother’s infant feeding decisions

q Primary role of FNS in community partnerships
  - Responsive supporter
  - Pro-active initiator
  - Engaged contributor (financial and human resources)
National breastfeeding activities recognize strategic partnerships as essential to improving support

- Across Socio-Ecologic model
- Across agencies and programs
- Across program eligibility groups

Sources of Information: Strategic Partners

- NWA National Breastfeeding Strategic Plan
- NWA Six Steps to Achieve Breastfeeding Goals for WIC Clinics
- Surgeon General’s Call to Action to Support Breastfeeding
- White House Task Force on Childhood Obesity Report to the President
- Previous Loving Support activities
- Related Federal activities
  - Business Case for Breastfeeding
  - Let’s Move
  - Partnership for Patients
  - CDC-funded state programs
  - Communities Putting Prevention to Work (CPPW)
- US Breastfeeding Committee
Most mothers in the US want to breastfeed, everyone plays a part in making it easier for them to do so.

Actions for:
- Mothers and their families
- Communities
- Health Care
- Employment
- Research and Surveillance
- Infrastructure
Who is everyone?

♥ Women
♥ Family members and friends
Sources of Information: Strategic Partners

- NWA National Breastfeeding Strategic Plan
- NWA Six Steps to Achieve Breastfeeding Goals for WIC Clinics
- Surgeon General’s Call to Action to Support Breastfeeding
- White House Task Force on Childhood Obesity Report to the President
- Previous Loving Support activities
- Related Federal activities
  - Business Case for Breastfeeding
  - Let’s Move
  - CDC-funded state programs
  - Communities Putting Prevention to Work (CPPW)
- US Breastfeeding Committee

q National breastfeeding activities recognize strategic partnerships as essential to improving support
  - Across Socio-Ecologic model
  - Across agencies and programs
  - Across program eligibility groups

q National activities consistently identify partnerships among particular groups as paramount
  - Local – delivering hospitals and HCPs
  - State – BF coalitions, HC/HCP orgs, health dept
  - Federal – key Fed Agencies with related work
• Clinicians
• Hospitals
• Doctor’s offices
• Health care systems
• Third party payers
• HCP organizations
• Credentialing boards
• Joint Commission
• American Hospital Association
- Local WIC clinics
- State WIC agencies
- Public health entities
- State and local health departments
- Federal health agencies
National breastfeeding activities recognize strategic partnerships as essential to improving support
- Across Socio-Ecologic model
- Across agencies and programs
- Across program eligibility groups

National activities consistently identify partnerships among particular groups as paramount
- Local – delivering hospitals and HCPs
- State – BF coalitions, HC/HCP orgs, health dept
- Federal – key Fed Agencies with related work

Partnerships must reach beyond the ‘choir’ and be strategic
- Novel national/Federal partnerships empower the local ‘choir’ to carry out their work
Who influences WIC moms’ decisions?

- Employers
- Employer organizations
- Chambers of Commerce
- Manufacturers
- Local government
- State government
- Federal government
Universities and Med Schools
Institute of Medicine
Local and state partners
National partners and foundations
Current Partnerships – Federal and National

- **Federal Breastfeeding Workgroup**
  - 10 Federal agencies/offices
  - Federal employees for whom breastfeeding is already a substantive part of their work. (grew out of experience of Federal steering committee for Call to Action)

- **US Breastfeeding Committee**
  - 37 non-profit organizations, 7 Federal agencies/offices, and 2 individual members
  - Independent non-profit org formed 1998 in response to WHO recommendation to establish “multisectoral national breastfeeding committee comprised of representatives from relevant government departments, non-governmental organizations, and health professional associations to coordinate national breastfeeding initiatives.”

- **Breastfeeding Promotion Consortium**
  - 23 non-profit organizations, 13 Federal agencies/offices
  - Established 1990 and co-hosted by FNS and HHS

- **Text4Baby**
  - 138+ outreach partner organizations
  - Unprecedented partnership launched Feb 2010 to get free health information to pregnant women and new mothers in vulnerable populations
  - Currently nearly 500,000 subscribers
Text4baby Partners

Federal Government Partners:
- White House Office on Science and Technology Policy
- U.S. Department of Health & Human Services
- U.S. Department of Defense Military Health System

Implementation Partners:
- BabyCenter
- Danya International
- The George Washington University
- Keynote Systems
- Syniverse Technologies
- WellPoint

Media Partners:
- MTV Networks

Outreach Partners:
- 138 including national, state, and local-level and health plans

Text4baby Mobile Operator Partners

- Alltel
- Assurance Wireless
- AT&T
- Boost Mobile
- Cellular South
- Cellcom
- Centennial Cellular
- Cincinnati Bell
- Cricket
- Metro PCS
- N-Telos
- Sprint Nextel
- T-Mobile
- U.S. Cellular
- Verizon Wireless
- Virgin Mobile USA

Participating mobile operators have agreed to deliver text4baby to their subscribers at no charge. This is the first time this has been done for a mobile health service in the U.S.
Partnership Opportunities

- Outreach Partners are instrumental in getting the word out about text4baby to the women they serve.
- **Informal Partners (no MOU)**
  - Text4baby Tuesday, a weekly e-mail alert providing program updates.
  - Technical assistance through HMHB/Voxiva.
- **Formal Partners (signed MOU)**
  - Access to text4baby logo and Adobe InDesign art files for customization.
  - Recognition on the text4baby website & in select communications.
  - Free promotional materials (posters) while supplies last.
Current Partnerships – State and Local Examples

- **University Medical Center, Jackson, MS**
  - WIC clinic in the hospital, fully collaborates with Postpartum unit, moms certified prior to discharge, assigned Peer Counselor

- **Georgia**
  - Local WIC clinic staff work with leadership at carpet factories in north Georgia employing large numbers of WIC moms to establish workplace support programs

- **New York State WIC and CDC-funded Obesity Program**
  - WIC participates integrally in program planning and activities
  - Strategic partnership ensures consistent messaging across programs and shared utilization of resources

- **North Dakota**
  - WIC provides local support for coalitions, state Business Case for Breastfeeding initiative, and partners closely with CPPW team
q NWA and WIC agencies promote breastfeeding **to other health care organizations and institutions** (Goal 1, Objective 2)

q NWA and WIC agencies promote breastfeeding **within their communities** (Goal 1, Objective 3)

q WIC agencies **educate public health organizations, educational institutions, and community organizations about WIC’s role in breastfeeding promotion and support** (Goal 3, Objective 1)

q WIC management plays a **leadership role in local, state, and national breastfeeding promotion and support efforts** (Goal 3, Objective 2)
• Ensure that maternity care practices throughout the US are fully supportive of Breastfeeding.
  * Accelerate implementation of the Baby-Friendly Hospital Initiative.

• Establish partnerships for integrated and continuous follow-up care after discharge from the hospital.

• Establish and implement policies and programs to ensure that participants in WIC have services in place before discharge from the hospital.

• Ensure access to services provided by International Board Certified Lactation Consultants.

• WIC agencies and NWA will work with the AHA and other stakeholders to increase the number of Baby-Friendly hospitals in the United States.
  * WIC agencies will increase the visibility of and promote the BF Peer Counseling Program within their communities.

• State WIC agencies will partner with the AAP Chapter BF Coordinators and ACOG at the state level to promote consistent bf messages.

• State agencies will collaborate with programs that provide prenatal postpartum, and infant health care at the local agency level to ensure comprehensive bf promotion and support services.
• WIC leadership will empower WIC personnel to actively engage in bf promotion programs and projects at the local, state, and national levels.

• WIC agencies will support and become active members of state, regional, and local breastfeeding coalitions.

• WIC agencies will encourage local agency staff to visit medical staff offices, schools, universities, and community organizations to share information about WIC’s bf services and specific bf programs.
Inconsistent information/support undermines the effectiveness and credibility of everyone

- Responsible parties for care in the critical windows have long-standing turf issues
- Stakes are high in each of the critical windows for support
- Vulnerability of mother/baby is tied to critical windows
- Negative impact of inconsistent support cascades forward
Inconsistent information/support undermines the effectiveness and credibility of everyone

- Responsible parties for care in the critical windows have long-standing turf issues
- Stakes are high in each of the critical windows for support
- Vulnerability of mother/baby is tied to critical windows
- Negative impact of inconsistent support cascades forward

Neutral infant feeding advice from health professionals doesn’t exist

- Mothers perceive HCP attempts at neutrality as implicit support for formula-feeding
How can current and potential partners support FNS efforts in a new *Loving Support* campaign?

1. **Amplify FNS messages**
   - Partnerships provide opportunities to reinforce messages mothers get during existing WIC interactions

2. **Share the load**
   - Disconnected efforts make it harder for WIC staff to be effective, creating unnecessary extra burden and professional awkwardness if WIC is forced to ‘correct’ what a participant learned elsewhere

3. **Lend credibility**
   - WIC’s efforts to rebrand to the public will only be successful if trusted, non-WIC people and organizations echo WIC’s messages prioritizing breastfeeding support
Major potential challenges need to be better recognized and addressed pro-actively.

Potential Challenges:
q Ownership
q Credit/Blame
q Territorialism
q Permission
q Perception of contributed value

Strategies:
q Identify roles
q Ensure partnership is win-win
q Celebrate successes
q Learn from prior experience
Who is missing from the table and/or is essential in a new *Loving Support* campaign?

q **Department of Labor – Federal and State**
   - Eager to partner
   - New legislation requires employers to provide space and time, WIC moms are legitimately afraid to request accommodations

q **Breastfeeding Coalitions – Local and State**
   - Coalitions are the nexus for partnership activities at local and state levels
   - WIC role in coalitions needs to evolve
     - Be better identified
     - Be more pro-active
     - Take fuller advantage of opportunities to engage in the community beyond current activities
Who is missing from the table and/or is essential in a new *Loving Support* campaign?

- **Hospitals** – individual hospitals and state/nat’l orgs
  - WIC staff consistently cite disconnect with hospitals as major barrier to being able to carry out their work
  - Step 10 of the Baby-Friendly Hospital Initiative is to connect patients to post-discharge support in the community
  - Wide range of partnership activity opportunities

- **Health Care Professional Organizations** – AAP, ACOG, etc.
  - Mutual benefit to WIC and to HCPs to establish stronger ties and partnership activities
  - For moms, lack of support from HCPs is a major barrier to bf
OUR BABY FRIENDLY COMMUNITY
Thank you for convening this workshop.

For more information:

Katherine Shealy, MPH IBCLC, RLC
4770 Buford Highway NE, Mailstop K-25, Atlanta, GA 303
Telephone: (770) 488-5449
E-mail: kshealy@cdc.gov Web: http://www.cdc.gov/breastfeeding

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.