Answering the Call: Coalitions Moving Into Action

Fourth National Conference of State/Territorial/Tribal Breastfeeding Coalitions
August 4-6, 2012 - Arlington, VA

Saturday

Welcome Address by Larry Grummer-Strawn from the CDC
- Coalitions charged to lobby for funding and institute strategic planning - identify problems and goals
- Video of Surgeon General discussing her Call to Action to Support Breastfeeding. (I was unable to link to this site on my work computer - but it is available on youtube).

Regional Meetings Mountain Plains - Iowa, Colorado, Kansas, Missouri, Montana, Nebraska, North Dakota, South Dakota, Utah, Wyoming
- Colorado and Montana have milk banks and are in our region, which means they are represented in the bi-monthly US calls.

Sunday

The Power and Potential of Collective Impact - Liz Weaver, VP Tamarack Institute in Canada
- Not necessarily geared toward breastfeeding; her experience in Canada was with various outreach organizations working to fight poverty. She talked about the importance of a organizations combining with toward common agenda, rather than independent factions of sporadic isolated efforts.

- Gather various philanthropic, government, and corporate sectors: CCR&R, Headstart, higher education, churches, media, legislators, hospitals and healthcare administrators, social workers, obesity prevention, mental health, and other intervention agencies. Go outside the community you typically interface with - within the realm of breastfeeding or not to broaden scope and dissolve issues of “turf”.
- As important as a shared agenda is a shared measurement. Each group can determine success markers.
- Put your goals on your company’s (or coalition’s) webpage.
- Have a presence in places where people gather - and not just where like-minded people interact. (Women’s expos e.g.)
- Ask: what existing assets can we leverage in our community? (financial)

Childcare Initiatives
Let’s Move Child Care  [http://www.healthykidshealthyfuture.org/welcome.html](http://www.healthykidshealthyfuture.org/welcome.html)

Jessica Allen, CDC

- Health Department program for childcare centers. One of the five basic tenets focuses on improving infant nutrition, with the first stated goal to provide breastmilk to infants. This is essentially an incentive program from the CDC to promote healthy childcare centers. There are tools and resources on the webpage for centers. Similar to the TOP Star obesity prevention program from the Utah Department of Health - [http://health.utah.gov/obesity/top-star-training.php](http://health.utah.gov/obesity/top-star-training.php)

- Importance of training daycare staff: show videos of breastfeeding baby, also a video of what a bottlefeeding looks like with a breastfed baby, talk to staff about how breastfed babies really eat.

- Encourage centers to have a posted breastfeeding/infant feeding policy and a posted/communicated procedure for the safe handling of human milk.

- It’s not about just one thing or a checklist, but a culture of breastfeeding support in centers

  - Go in by asking “What do you need from us?” to initiate interest

  - Develop a feeding plan form for providers

  - If they are hesitant or feel like it doesn’t apply to their center frame the discussion as one of infant feeding and include safe and effective feeding of formula as well.


- Breastfeeding Coalitions are welcome to listen in on CDC’s monthly childcare calls. If interested send an email to ixm4@cdc.gov

“We Care for Breastfed Babies”

Tina Cardarelli, Indiana State Breastfeeding Coalition

- Model after 10 Steps for Hospitals

- Childcare providers have a high level of direct contact with parents - twice a day - and form a trusting relationship. Providers are in an unique position to offer parenting solutions - feeding and otherwise.

  - In Indiana, Tina started with surveys to centers, the breastfeeding community has a presence at their State Childcare Conference whether it is a booth or they present

  - Talk w/ centers about the CACFP guidelines: breastmilk is reimbursable as a meal when administered by the childcare provider, with nothing to buy. [http://www.schools.utah.gov/cnp/Child-and-Adult-Care-Food-Program.aspx](http://www.schools.utah.gov/cnp/Child-and-Adult-Care-Food-Program.aspx)

- Indiana Perinatal Network has a breadth of resources on their website including Powerpoints with teaching notes. Access it here: [http://www.indianaperinatal.org/sections/M&F_breastfeeding.php](http://www.indianaperinatal.org/sections/M&F_breastfeeding.php)

- Daycares can become armed with information and be centers of information for breastfeeding parents.

- In Utah we can talk with the State Child Care Licensure and the Child Care Resource and Referral agency. (CCR&R)

Using Technology to Enhance Grassroots Social Change
Ashley Boyd from MomsRising, ashley@momsrising.org, www.facebook.com/momsrising.org

www.Bethkanter.org - expert on social media for nonprofits

<table>
<thead>
<tr>
<th>Blogs</th>
<th>Facebook</th>
<th>Twitter</th>
<th>Pinterest</th>
<th>Listserv &amp; LinkedIn</th>
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<tbody>
<tr>
<td>● Create and share content quickly</td>
<td>● Have a separate Facebook page for work and personal</td>
<td>● Life of a tweet is very short</td>
<td>● Highly visual medium</td>
<td>● Mentioned, but not discussed</td>
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<td>● Specific target groups</td>
<td>● Don’t use it to “push out content” but to connect - engage in dialogue</td>
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<td>● Predominantly used by women</td>
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<td>● Invite community members to submit stories/photos</td>
<td>● Should have a personal feel</td>
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<td>● Host a “Blog Carnival” to encourage cross-posting</td>
<td>● If you have a post you think will spark controversy or negative comments log out as your business personal and login to your personal account and make the first comment yourself - this can set the tone for the rest of the remarks.</td>
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Engaging Pharmacists in Supporting Breastfeeding
- Roger Edwards
  - If interested in materials contact RO.Edwards@neu.edu
  - http://www.youtube.com/watch?v=GuQorsbKmu4 - he has his pharmacy students create these videos
  - 90-99% of mothers will see a pharmacist within a week of delivery. This is an excellent placement for first line postpartum health promotion and education.
  - 64% of pharmacists are women
  - Engage the state of Utah pharmacy association/organization and ask to implement/endorse AAP policy
  - Half of surveyed pharmacists reported receiving inquiries from lactating mothers
  - Pharmacists can educate the public on the use of baby formula as an over-the-counter supplement. They can know the dangers (aka side effects) of formula and pass these to customers.
  - Pharmacists and technicians ought to know who to refer breastfeeding women to in their communities.

Monday

Overcoming Barriers: Breastfeeding in the Workplace
Genevieve Thomas Colvin and Robbie Gonzales-Dow

- Affordable Care Act
- Filing a Claim: [http://www.eeoc.gov/employees/charge.cfm](http://www.eeoc.gov/employees/charge.cfm)
- Online visit Breastfeeding Taskforce of Greater Los Angeles for information on worksite accomodations
  - Review case: DFEH vs. Acostas Tacos
  - Resources including toolkits available to email @ [http://breastfeedingworks.org/self-advocacy](http://breastfeedingworks.org/self-advocacy)
- Document: Why do employed mothers need pumping breaks? Sometimes the organization just needs that education
  - Provide window screens for cars or trucks
  - Consider sexual harassment/discrimination risk management (Title IX)
  - Will have to go through Human Resources most often
  - Help businesses create, implement, and communicate policy including information on time, space, pumps (whether or not offered), and support
  - More resources at [www.ChooseHealthLA.org](http://www.ChooseHealthLA.org) (Go to Eat Healthy > Healthy Kids)
  - Find out if your community or state has a commission on women and seek their aid

More information on the conference is available at [www.usbreastfeeding.org](http://www.usbreastfeeding.org)