From the ground up: What we learned about designing & delivering a youth-focused breastfeeding program

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BSRC Community Breastfeeding Showcase
February 17, 2016
Toronto, ON

Acknowledgments

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Special Thanks

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**Thank you to our funders!**

The St. Mary’s Home Breastfeeding program and training package has been prepared with funds provided by the Government of Ontario and the support of the Best Start Resource Centre at Health Nexus.

The information herein reflects the views of the authors and is not officially endorsed by the Government of Ontario or the Best Start Resource Centre.

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**Disclosure**

- Best Start Resource Centre Community Breastfeeding Grant
- No other financial disclosures to declare
Learning Objectives

- To describe the characteristics of a breastfeeding program that are of importance to young mothers
- To describe preliminary results of the breastfeeding program evaluation
- To share “lessons learned” in the development & implementation of this youth-informed breastfeeding program

Background

Rates of exclusive BF at discharge
- <20 years of age (51.2%)
- 30-34 years (65%)

Factors significantly associated with BF
- intention to breastfeed; prenatal classes attendance
- living in a higher income neighbourhood
- having a spontaneous vaginal delivery
- non-smoker; not using substances during pregnancy
- not having any pre-existing health problems or obstetrical complications

Background cont’d

Higher rates of initiation & continuation reported by young mothers who received breastfeeding education & support

Ideal programs/interventions specifically designed for young mothers has yet to be determined
- Prenatal education
- Peer / lay / professional support
- Need to tailor support

St. Mary’s Home


One-Stop Center: Calendar

Project Objective

To use a participatory approach in the design, implementation, and dissemination of an innovative breastfeeding program for young women.
Breastfeeding Program: Three Components

<table>
<thead>
<tr>
<th>Activities</th>
<th>Objective</th>
<th>Outputs</th>
<th>Short Term Goals</th>
<th>Long Term Goals</th>
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</thead>
<tbody>
<tr>
<td>Prenatal Classes</td>
<td>Normalize BF</td>
<td>- Determine &amp; finalize content.</td>
<td>- BF class content aligned with best practice</td>
<td>To increase the intention &amp; duration of breastfeeding in young women ≤ 25 years of age</td>
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<td></td>
<td>Provide evidence - based info re benefits of BF &amp; how to get started</td>
<td>- Review with class facilitators</td>
<td>- Class facilitators feel confident using content &amp; format</td>
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<tr>
<td>Peer Support</td>
<td>Early &amp; ongoing support for BF</td>
<td>- Design BF peer support group</td>
<td>- Key format &amp; components identified</td>
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<td></td>
<td></td>
<td>- Identify program coordinator</td>
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<tr>
<td></td>
<td></td>
<td>- Training to peer mom leaders</td>
<td></td>
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<tr>
<td>Staff training</td>
<td>To create a supportive environment for BF</td>
<td>2 x 2 hour training sessions</td>
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Focus Groups

Recruitment
Data collection
- Focus groups
- Demographic data

Data analysis
- Quantitative data – descriptive statistics
- Qualitative data – directed content analysis

(Hsieh & Shannon, 2005)

Focus Group Demographics n = 16

<table>
<thead>
<tr>
<th>Demographic Variable</th>
<th>n</th>
<th>Range</th>
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<tbody>
<tr>
<td>Maternal age</td>
<td>21 years</td>
<td>Range 20-24</td>
</tr>
<tr>
<td>Pregnant</td>
<td>7</td>
<td>Range 5-36 weeks</td>
</tr>
<tr>
<td>Parenting</td>
<td>11</td>
<td>1-4 children</td>
</tr>
<tr>
<td>Relationship</td>
<td>Single</td>
<td>6</td>
</tr>
<tr>
<td></td>
<td>Coupled</td>
<td>10</td>
</tr>
<tr>
<td>Baby's age (currently BF)</td>
<td>2-11 months</td>
<td></td>
</tr>
<tr>
<td>BF experience-previous</td>
<td>6</td>
<td>Range 2 days to 7 months</td>
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Results: Focus Group Themes

1. Overall knowledgeable about benefits of BF
2. Need for program
3. Information to be included in future programming
4. Feasibility of peer support
5. Prenatal connections
6. Program Format

1- Knowledgeable about the benefits of BF

• Benefits/advantages for mom & baby
• Bonding & connection

“It’s [formula] such a waste of money for something that you produce yourself and honestly like it’s really good for the baby so why not just [breastfeed].”

2- Need for a program

• Critical times for support were identified
• Ongoing support was requested

“Because if it’s just a onetime thing then not everyone could always make it or you don’t always learn the first time or get comfortable with it the first time”
3- Information to be included in future programming

- Troubleshooting breastfeeding difficulties
- Accessing professional support in the community
- Additional topics not covered in prenatal classes
- Breastfeeding in public

"Don't be ashamed, you're feeding your baby, you're lucky you have that bond, continue on, be proud."

4- Feasibility of peer support

- Young women who are available/interested/qualified to be peer supporters
  - Wanted moms who were passionate, educated “and not motivated for the wrong reasons”
- Volunteer vs paid role

"... a mix of mums with experience and a mix of mums who have no clue because … I think it’ll help them out a lot, they won’t feel judged, they won’t feel so alone. They won’t feel like, you know, they’re clueless."

5- Prenatal Connections

- Important to establish a connection/relationship with professionals & peer support before birth of the baby

"It (connection) was already there when I was pregnant so I was able to see the lactation consultant and talk to her personally afterwards because I had already known her … I feel like you need to have some sort of connection with them to really open up and be able to ask questions and get the answers that you need."

Cantin, Peterson & Fleming 2015
6- Program Format

- Face to face
- Mixed group – pregnant & breastfeeding moms
- Lunch included
- 4-6 weeks with set topics each week (interactive; live demonstrations)
- Availability of transportation & childcare
- Ongoing support after the 6 weeks
- Professional leader present

Implementation of Youth-Informed Breastfeeding Program

1. Revised prenatal breastfeeding curriculum
2. New peer support group
3. Staff training

Prenatal Breastfeeding Class

- 2 hours
- Delivered by Ottawa Public Health, PHN
- Content
  - Basic breastfeeding info
  - Case studies
- Evaluation
  - Preliminary breastfeeding self-efficacy scores
  - Pre= 54, range 42-70
  - Post= 60, range 50-70 (min 14, max 70)
Peer Support Program

Peer-Mom Leader Training
• Two 2 hour sessions
• Delivered by Ottawa Public Health, HBHC, PHNs
• Content
  • Basic breastfeeding info
  • Role of peer-mom leaders, program coordinator
• Evaluation

Peer Support Program cont’d
4 week series
Facilitated by:
• 3-2 peer mom leaders
• Program coordinator
Provided:
• Childcare
• Transportation
• Healthy snack & lunch
Debrief after each session

Peer Support Program cont’d
Evaluation
• Participation
• Satisfaction
• Breastfeeding self-efficacy
Staff Training
- Attitudes towards breastfeeding survey (RNAO), n=24
- 2 hour training n=35
- Evaluation n=33

“…. a great way to see how my coworkers would handle certain situations”

“…. information, questions & case studies were relevant to our population”

Lessons Learned
- Time intensive to engage young clients but their input is invaluable
- Public Health Nurses were ideal partners to offer the peer-mom training & staff training
- Police records check a barrier for peer mom leaders
- Clearly identify promotion strategy
- Engage staff earlier in the process

Next Steps
- Maintain & expand BF program
  - Continued recruitment & promotion
  - Additional peer-mom leader training
  - Application for additional funds to roll out program in other centres
  - Continued BF self-efficacy evaluation
References


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