

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

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CHEO

CHAMPLAIN MATERNAL NEWBORN REGIONAL PROGRAM
PROGRAMME RÉGIONAL DES SOINS À LA MÈRE
ET AU NOUVEAU-NÉ DE CHAMPLAIN

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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

(Best Start Resource Centre, 2015; Dodgson, et al., 2003; Fleming et al., 2012; 2013; Leclair, et al., 2015; Lizarraga, et al., 1992; Misra, & James, 2000; Mossman, et al., 2008; Nelson, & Sethi, 2005; Ottawa Public Health, 2014; Park, et al., 2003; Pierre et al., 1999; Sipsma et al., 2013; Spear, 2006; Tucker, et al., 2011; Volpe, & Bear 2000; Wambach & Cole, 2000)

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

(Dyson et al., 2005; Lumbiganon et al., 2012; Renfrew et al., 2012)

Breastfeeding Program: Three Components				
Activities	Objective	Outputs	Short Term Goals	Long Term Goals
Prenatal Classes	<i>Normalize BF</i> <i>Provide evidence-based info re benefits of BF & how to get started</i>	-Determine & finalize content. -Review with class facilitators -Relevant portions printed	-BF class content aligned with best practice -Class facilitators feel confident using content & format	To increase the intention & duration of breastfeeding in young women ≤ 25 years of age
Peer Support	<i>Early & ongoing support for BF</i>	-Design BF peer support group - Identify program coordinator - Training to peer mom leaders	-Key format & components identified	
Staff training	<i>To create a supportive environment for BF</i>	2 x 2 hour training sessions	-80% report increase in knowledge	

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

Maternal age	21 years	Range 20-24
Pregnant	7	Range 5-36 weeks
Parenting	11	1-4 children
Relationship	Single	6
	Coupled	10
Baby's age (currently BF)	2-11 months	
BF experience-previous	6	Range 2 days to 7 months

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."

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
(Dennis, Heaman, & Mossman, 2011)
 - 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:

- 1-2 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

"... information, questions & case studies were relevant to our population"

"... a great way to see how my coworkers would handle certain situations"

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

Thank you!!!



Questions?

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