Strategies to Increase Breastfeeding in your community

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Today’s Agenda
- Introductions
- Review of Breastfeeding Problem Analysis Diagram
- Framing the Issue
- Baby Cues
- Work Place Policies
- Hospital Policies
- Resources on breastfeeding on state web site and FHOP web site
Introduction of Presenters

- Heather Gehlert – Framing the issue of breastfeeding (Berkeley Media Studies)
- Jane Heinig – Baby cues (UC Davis)
- Karen Peters – Workplace lactation accommodation (LA Breastfeeding Task Force)
- Jeanette Panchula – Hospital Policies & Resources on the State’s web site (CA MCAH & WIC)
- Katie Gillespie – Resources on FHOP’s web site (FHOP/UCSF)

Webinar Objectives

1. Use a problem analysis diagram in program planning to understand the influences on breastfeeding in their community
2. Describe the key elements of 3 interventions to increase breast feeding: Baby cues, work place policies, and hospital policies.
3. Locate resources to assist in implementing interventions to increase breastfeeding
Problem Analysis of Breastfeeding

What factors influence breastfeeding in your community?

Rationale for Doing a Formal Problem Analysis?

- To identify effective intervention strategies, it is necessary to understand the complex array of underlying factors that can impact health outcomes and how factors relate to one another.
- Using a multilevel socio-ecological framework ensures that upstream factors are included.
- Relating upstream precursors to downstream outcomes forces us to explore the pathways by which upstream factors operate in a specific situation.
Steps in a Problem Analysis

1. Examine epidemiologic data
2. Examine literature and consult experts
3. Determine extent to which these factors are active in the community
4. Determine relative contribution of each identified factor
5. Identify the interrelationships among factors – causal pathways
6. Determine the most effective points in the causal pathways for intervention
Definitions : Precursors

Factors that have been proven to be associated with the problem

- Causal factor
- Risk factor
- Systems barriers
- Protective factors

Individual Level Precursors

Definition:
Factors that operate on the level of the individual (or for a child it could be the parent) that directly cause the outcome in question (cause/effect should be supported by peer reviewed studies)

OR

Factors that increase the risk of an individual’s likelihood of having the outcome of concern (documented risk)
Upstream Factors
(Social/ Economic/ Policy Level)

Social
- Attitudes/policies
- Classism/racism
- Family policies
- Social welfare policies

Environment
- Toxic exposures
- Air quality
- Physical hazards
- Zoning/land use
- Infrastructure policy

Economy
- Income inequity
- Lack of jobs
- Tax policy
- Regulations
- Occupational Health and Safety
- Corporate practices

Healthcare
- Costs
- Insurance policies
- HC distribution
- Coverage for Mental Health/Substance Abuse
- Health regulations

Education
- Funding
- Class size
- Standards
- College access
- Adult Ed policies

Safety
- Police funding
- Highway safety regulations
- Driving laws
- Criminal laws
- Gun policies

Family/Household and Local Community Precursors

Definition:
Factors that operate at the level of the family or local community or institution(s) that increase an individual’s risk of developing a direct precursor

May include characteristics of local institutions such availability of healthcare provider’s that are often, but not always, associated with the problem or its determinants
Family/Community Factors

<table>
<thead>
<tr>
<th>Family/Household</th>
<th>Community</th>
<th>Workplace</th>
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</thead>
<tbody>
<tr>
<td>Family structure</td>
<td>Extended family</td>
<td>Physical/toxic hazards</td>
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<tr>
<td>Educational level</td>
<td>Close friends</td>
<td>Pay</td>
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<td>Income</td>
<td>Religious affiliation</td>
<td>Job security</td>
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<tr>
<td>Genetics</td>
<td>Social networks</td>
<td>Opportunities for</td>
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<tr>
<td>Parenting style</td>
<td>Social cohesion</td>
<td>advancement</td>
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<tr>
<td>Family connectedness</td>
<td>Blight</td>
<td>Psychological atmosphere</td>
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<td>Behavioral Factors</td>
<td>Transportation</td>
<td>Health insurance</td>
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<tr>
<td>Family Violence</td>
<td>Sources of support</td>
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</table>

<table>
<thead>
<tr>
<th>School</th>
<th>Healthcare/Provider</th>
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<tbody>
<tr>
<td>Physical/toxic hazards</td>
<td>Number of providers</td>
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<tr>
<td>Relationships</td>
<td>Quality of care</td>
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<tr>
<td>Quality of teaching</td>
<td>Location of services</td>
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<td>Educational resources</td>
<td>Willingness to take</td>
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<tr>
<td>Safety</td>
<td>Insurance</td>
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Social/Economic/Policy Level Precursors

Definition:
Factors that are operational at the state or national level such as cultural, health, social, legal or economic factors or policies.
### Individual level

**Inborn Conditions**
- Genetic
- Metabolic
- Biological

**Psychological**
- Anxiety
- Depression
- Resiliency
- Self esteem
- Self efficacy

**Stress**
- Allostatic load

**Cognitive**
- Level of education
- Learning challenges

**Health Behaviors**
- Smoking
- Tobacco use
- Illegal substance use
- Eating disorders
- Sedentary lifestyle

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**A Generic Framework for Health Problem Analysis**

<table>
<thead>
<tr>
<th>Social/Economic/Policy Level</th>
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<tbody>
<tr>
<td>SES</td>
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<td>Culture</td>
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<td>Environment</td>
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<td>Economy</td>
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<td>Psychological Factors</td>
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<tr>
<td>Health Status/Medical Conditions</td>
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<tr>
<td>Cognitive Factors</td>
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<tr>
<td>Health Behaviors</td>
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**Identified Problem**
Breastfeeding Problem Analysis

Social/Economic/Policy Level
- Public's attitude about BF
- Formula Marketing
- Inadequate Curriculum /training @ Med/Nursing School
- Large hospital conglomeration policy
- Hospital Policies
- Lack of BF environments
- Lactation resources info not given to providers

Family/Community/Institutional Level
- Language/cultural barriers
- Breast pumps not available
- Lack of workplace support
- Lack of partner/family support
- Lack of in-hospital education & support for new moms
- No Support Groups

Individual Level
- Birth defects
- Embarrassing to BF in public
- Prematurity
- No rooming-in at hospital
- No/limited access to support resources
- No/limited access to support resources
- Lack of knowledge about BF benefits & techniques
- Poor mothering
- Baby cues
- No/continued Breastfeeding

Work Policies
- Lack of workplace support
- Lack of provider knowledge/poor adherence to best practices
- No Support Groups
- Lactation resources info not given to providers