THE AIM

In 7 states, teams of public health nutritionists sought to establish new policies or practices that address social and ecological barriers to breastfeeding. These teams supported state Title V programs to promote breastfeeding through collaborative learning and quality improvement practices.

Arkansas California Iowa Louisiana Nevada North Dakota Wisconsin

Workstream Drivers

1 Capabilities-Building for Health Equity

Needs Identification
Analyze the role of health departments in addressing breastfeeding disparities
Conduct an environmental scan of breastfeeding support
Develop a community survey to gauge beliefs and practices

Coalition Development
Build statewide collaborative efforts among partners and coalitions to create community-driven programs
Strengthen cross-sector agency collaborations
Expand communication among lactation support providers

Number of Teams That Worked on These Drivers

2 Technical Assistance and Training on Policies and Practices

Workplace Support
Identify and distribute a resource and referral guide
Conduct train-the-trainer events
Educate on employee breastfeeding laws

Maternity Care Practices
Identify culturally congruent breastfeeding education for healthcare professionals
Provide technical assistance on breastfeeding policy development
Support access to lactation support services and supplies

Continuity of Care
Create a resource and referral guide of culturally congruent peer and provider lactation support
Incorporate standardized breastfeeding education and support
Increase the number of providers with advanced breastfeeding training

Number of Teams That Worked on These Drivers

3 Normalize Breastfeeding by establishing Breastfeeding Friendly Communities

Family Support
Create breastfeeding-related social media campaigns focused on mothers, partners and families

Health, Social, Community and Civic Linkages
Integrate breastfeeding services into civic and local initiatives

Number of Teams That Worked on These Drivers

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