Pierce County Breastfeeding Community Conversations

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September 25, 2019

What we want to learn

• What influences a mother’s decision of how to feed her baby?
• What are feeding challenges? How are mothers supported?
• How can health professionals and employers support increasing breastfeeding initiation and duration rates in Pierce County?
Breastfeeding initiation and duration (2015)

- 12 months
- 6 months (exclusive)
- 6 months
- Initiated

Source: CDC National Immunization Survey (NIS) 2016-2017

Breastfeeding initiation racial disparities (2011-15)

- White/Caucasion
- Asian
- AIAN
- Black/African American
- NHOPI
- Hispanic

Pierce County

WA State

Research methods

Recruiting
• Public flyers.
• Snow-ball sampling.

Incentives
• $50 for moms.
• $25 for providers.

Data Collection
• Focus groups (90 minutes).
• Survey for demographics.

Data Analysis
• Transcription.
• Open and axial coding.

Research Methods

Analysis Criteria
• Three or more participants in one group (>30%) mentioned the same topic.
• The topic was discussed in more than one focus group forum.
• The topic was discussed with much enthusiasm (emotion) and at length by multiple participants.
What we learned

1. A decision to breastfeed or bottle feed is mostly influenced by:
   • Knowledge of benefits (for both mother and baby).
   • Family/cultural norms.
   • Healthcare providers’ supply and promotion of formula.

   “I felt like I was fighting for the right to breastfeed my child. Immediately they gave him formula.”

What we learned

2. The most common challenges for continuing to breastfeed are:
   • Social stigma and shaming.
   • Physical challenges (tongue tie, low milk supply).
   • Returning to work or school.

   “I took my baby to church and I was in the baby’s room to breastfeed and somebody came and put this heavy blanket over us... even though I was in the baby’s room.”
What we learned

3. Mothers need quality prenatal breastfeeding education and peer support/counseling.

“I think the best that (our medical community) can support us is listen and if we say...‘this is how I feel’ to support us. Not say, ‘...you shouldn’t do that’ or ‘you should stop breastfeeding because your child’s too old.’ Support me.”

What we learned

4. Community organizations could better support breastfeeding by providing:
   • Consistent education for healthcare professionals.
   • Culturally informed peer counseling programs.
   • Better data collection and analysis.

“I went to a lot of breastfeeding support groups in Pierce County and I never saw a person of color in any of these meetings, ever.”
What we learned

5. Employers would like more education, resources (training) and recognition for compliance (e.g. breastfeeding-friendly workplace).

What should we do?

• Increase capacity for—and access to—community lactation support.
• Help hospitals and clinics obtain breastfeeding-friendly designation.
• Support employers in creating breastfeeding-friendly worksites.
• Improve initiation and duration data collection in Pierce County.
• Implement a social marketing campaign to reduce stigma around breastfeeding.
Questions?

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