Systematic & Organizational Barriers to Breastfeeding

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Reducing Racial and Ethnic Disparities in Breastfeeding, Oklahoma February 2015
Breastfeeding Trends

The only place to go from here is UP!
Exclusivity Rates

Chart Title

- National
- Oklahoma

Centers for Disease Control, 2014 Breastfeeding Report Card and the 2011 NIS Survey
Breastfeeding Initiation and Duration of 8 weeks or More by Maternal Race

Oklahoma PRAMS 2009-2010
Leading Cause of Death among Native Americans

**Infants**
1. Birth Defects
2. SIDS
3. Born too small
4. Born too early
5. Unintentional Injuries

**Adults**
1. Cancer
2. Heart Disease
3. Unintentional Injuries
4. Diabetes
5. Chronic Liver Disease
6. Chronic Lower Respiratory Disease
7. Stroke
8. Suicide
9. Nephritis
10. Influenza Pneumonia
Barriers to Breastfeeding

- Return to work/childcare
- Lack of education
- Poor family and social support
- Embarrassment
- Lactation problems
- Not seen as the “cultural norm”
Definitions

- Systemic: of or relating to a system, especially as opposed to a particular part

- Organizational: of or relating to an organization

- Barriers:
  1. A fence or other obstacle that prevents movement or access.
  2. A circumstance or obstacle that prevents communication or that keeps people or things apart.

- Synonyms: obstacle ~ hurdle ~ hindrance ~ obstruction
Systems and Organizations

**Education**
- New Parents
- Lactation Consultants

**Support Groups**
- La Leche League
- Drop-in Groups

**WIC**
- Lactation services
- Food packages
- Peer Counselors

**IBCLCs**
- Diversity
- Access
- Clinical Skills
Education

New Parents

- Limited offerings
- Can be costly
- Mother-Father oriented
- Primarily in English
- Time of day offered

Lactation Consultants

- White Centered
- Expensive
- Distant
- Lack cultural competence
Mother + Breastfeeding
Black + Mother + Breastfeeding
Native American + Mother + Breastfeeding
Lactation Books
Lactation Books
What are we learning from these teachings?
What are we learning from these images?

White People:

- White women breastfeed and women of color don’t.

- The breasts of white women are the standard/norm and all breasts should be compared to them.

- Inadequately serve WOC

People of Color:

- White women breastfeed and we don’t.

- To “serve” white women.

- How not to serve their own populations.
Support Groups

Mother to Mother Drop-in Groups
Types of Support Groups Available

La Leche League
- Mother to mother support group
- Monthly meetings
- Phone support
- Home Visits
- FREE!!!

Drop-in Groups
- Typically lead by an IBCLC
- Weekly
- Not meant to be a 1-1 visit
- Cheap (usually $10 or less)
King County Breastfeeding Support

98118
“The Most Diverse Zip Code in the Country”
Women, Infants and Children

Disclaimer: I LOVE LOVE LOVE WIC
The Elephant in the Room

CDC, National Immunization Survey (NIS)
WIC has come a long way! There is still work to be done...

- Food Packages
- Clinical Training/Skills
- LC visits
- Peer Counselors
Food Packages

Fully Breastfed Baby at 6 months

1-2 Year Old
“WIC has IBCLCs.”

- WIC largely has RDs and nurses that are also IBCLCs
- Variable clinical training
- The story of two clinical experiences…
- Does not provide equitable services
## Typical Visit with and IBCLC

<table>
<thead>
<tr>
<th>Private Practice</th>
<th>WIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.5-2.5 hours</td>
<td>No more than 1 hour (typically much less)</td>
</tr>
<tr>
<td>Full, holistic assessment of both mom and baby</td>
<td>Must complete other items for the day</td>
</tr>
<tr>
<td>Make recommendations</td>
<td>Random appointments</td>
</tr>
<tr>
<td>Detailed Infant feeding plan with recommendations as appropriate</td>
<td>Document visit</td>
</tr>
<tr>
<td>Notes to PCP</td>
<td>PCP communication is not standard practice</td>
</tr>
</tbody>
</table>
Talking about, counseling about and teaching about breastfeeding are not clinical skills.

- This is mostly an IBCLE issue however we could make hiring experienced IBCLCs with strong clinical skills to serve as a proctor to WIC staff a priority.
- Clinical supervision with hands on training is a must.
Model

- Peer Counselors... but
  - Reasonable case load
  - Practice their skills
  - Learn
  - Livable wage/benefits
  - Reasonable hours
So what can we do?
THANK YOU!

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