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**Integrating Lactation Counseling into
Home Visiting Services to Decrease
Racial and Socioeconomic
Breastfeeding Disparities**

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What is Home Visiting?

- Builds upon decades of scientific research, which shows that home visits by a nurse, social worker, or early childhood educator during pregnancy and in the first years of life improves child and family outcomes.
- Prevents child abuse and neglect, encourages positive parenting, and promotes child development and school readiness.
- Voluntary, free service provided in the home.
- Models can be found at www.homvee.acf.hhs.gov

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Healthy Families of Central Virginia

Serves approximately 150 families/year
and over 400 individuals



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Demographics

27% of children in Lynchburg City live in poverty (higher than national average)

Of women served in Healthy Families:

- 50% are black, 33% white, 11% multiracial, and 6% Hispanic
- 80% are single
- 60% have less than or equal to a high school diploma or GED
- 57% are unemployed
- 60% report income less than \$10,000/year

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Summer of 2012

- Centra Health awarded Best Fed Beginnings funding to work toward Baby-Friendly Hospital designation
- Healthy Families awarded two grants to train and fund a Lactation Counselor to provide free, in-home services
 - Prenatal and postpartum
 - Individual and groups
 - On-call support
 - Strength-based and relationship-based approach

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Strength-Based Approach

Strength-Based Approach	Medical Model
Patient is actively involved	Patient is passive
Trust is based on personal relationship developed over time	Basis of trust is expertise and authority of provider
Provider listens more and talks less	Provider does most of the talking
Patient develops self-confidence	Patient is dependent on health provider to manage problems
Decision-making is patient-centered	Provider dominates as decision-maker
Quality-of-life-centered	Disease-centered
Patient is partner in treatment plan and adheres to plan	Patient complies with treatment (or not)

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Breastfeeding Rates

- Initiation rates of women giving birth at Centra Health rose from **73% in 2010** to **86% in 2014**.
- Initiation rates among black women have also increased but are still significantly lower than white women in Central VA.
- **Initiation rates of women receiving support from Healthy Families prenatally is 92%.**

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Barriers

- Lack of exposure to breastfeeding
- Lack of support
- Domestic violence
- History of sexual abuse
- Age
- Culture
- Lack of access to services
- Substance use
- Mental health and psychotropic meds
- Homelessness
- Schools
- Workplaces
- Lack of access to pumps

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Prenatal Barrier Assessment

- “When you think of breastfeeding, what comes to mind?”
- “What have you heard others say about breastfeeding?”
- “Who have you seen breastfeed?”
- “Who in your life do you feel supported by?”
- “How does your support person feel about breastfeeding?”
- “How do you think their level of support for breastfeeding with affect you?”
- “Are you taking any medication?”
- “Tell me about any mental health issues you may have, such as depression, anxiety, bipolar disorder...”
- “I’ve seen in some women that having a baby and breastfeeding can trigger abuse they may have had in the past. Tell me about your experiences of abuse.”

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Benefits that go beyond...

- Gives women confidence
- Provides structure and time for bonding in the midst of chaos
- Helps moms be in-tune with their babies' cues and needs
- Empowers moms to be advocates for themselves and their babies
- Allows women to be providers even if they cannot financially provide
- Helps women feel needed and emphasizes the importance of being mom
- Helps women view their bodies in a healthy way
- Provides an opportunity for moms to heal from their pasts

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