

Oregon’s 2021-2025 MACH Title V Priorities, strategies, local activities, measures, and resources

Women’s and Infant Health Priority: Chest/Breastfeeding Performance measure (NPM): A) Percent of infants who are ever breastfed; B) Percent of infants breastfed exclusively through 6 months State lead: Robin Stanton		
Breastfeeding – Strategy #1: Promote & support laws and policies for pregnant & lactating people in the workplace. Focus on populations with additional barriers. Foundational area: Policy and Systems State lead: Robin Stanton		
Related Foundational Priorities: <input checked="" type="checkbox"/> SDOH-E <input checked="" type="checkbox"/> Toxic stress/trauma/ACEs <input checked="" type="checkbox"/> CLAS		
Local Level Activities	Local measures	Resources
1. Increase awareness at individual or community level of current laws that protect against discrimination during pregnancy and support lactation.	a. Percent of clients/individuals who received education b. Number of partners engaged c. Number of educational events/activities conducted	Evidence: MCH Evidence Tools – Breastfeeding . Strategies on Family Leave, Workplace Policies, State Laws Healthy People 2030 Infants—Evidence Base Resources: Laws: Pregnancy, Breastfeeding and Lactation —*Updated Webpage; links to Oregon and Federal resources The Continuity of Care in Breastfeeding Support – Focus of resource is community strategies to support lactation
2. Engage workplace leaders to develop and implement workforce policies that promote a workplace culture of support for lactating people.	a. Number of employers who receive information and technical assistance on lactation support policies b. Number of partners engaged to promote workplace c. lactation friendly policies	Evidence: MCH Evidence Tools – Breastfeeding . Strategies on Family Leave, Workplace Policies, State Laws MCH Evidence Tools – Breastfeeding . Strategies on Workplace Supports for Breastfeeding Resources: Return to Work or School , Public Health Division Breastfeeding webpage Laws: Pregnancy, Breastfeeding and Lactation —*Updated Webpage; links to Oregon and Federal resources

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		The Continuity of Care in Breastfeeding Support – Focus of resource is community strategies to support lactation
3. Facilitate development of chest/breastfeeding policies with local childcare providers.	<p>a. Number of childcare providers partnered with</p> <p>b. Number of childcare providers that adopt chest/breastfeeding friendly policies</p>	<p>Evidence:</p> <p>MCH Evidence Tools – Breastfeeding. Strategies for On-site Child Care</p> <p>Healthy People 2030 Infants—Evidence Base</p> <p>Breastfeeding and Early Care and Education, CDC</p> <p>Resources:</p> <p>Childcare and Lactation, Public Health Division Breastfeeding webpage</p> <p>The Continuity of Care in Breastfeeding Support – Focus of resource is community strategies to support lactation</p>
4. Provide training to local childcare providers about how to support chest/breastfeeding families and employees.	a. Number of local childcare providers trained	<p>Evidence:</p> <p>Healthy People 2030 Infants—Evidence Base</p> <p>Breastfeeding and Early Care and Education, CDC</p> <p>Resources:</p> <p>Childcare and Lactation, Public Health Division Breastfeeding webpage</p> <p>The Continuity of Care in Breastfeeding Support – Focus of resource is community strategies to support lactation</p>

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Breastfeeding – Strategy #2: Support advanced training, coaching and quality improvement activities for home visitors related to chest/breastfeeding. Foundational area: Workforce Related foundational priorities: State lead: Robin Stanton		
Related Foundational Priorities: <input checked="" type="checkbox"/> SDOH-E <input checked="" type="checkbox"/> Toxic stress/trauma/ACEs <input checked="" type="checkbox"/> CLAS		
Local Level Activities	Local measures	Resources
1. Provide or sponsor home Visiting staff to attend advanced training, receive mentorship or coaching, and/or participate in quality improvement activities to promote and support chest/breastfeeding best practices	a. Percent of home visiting staff who received education about best-practices for supporting chest/breastfeeding among new parents	Evidence: MCH Evidence Tools – Breastfeeding . Strategies on Home Visitor Training and Education MCH Evidence Tools – Breastfeeding . Strategies on Provider Training Resources: <ul style="list-style-type: none"> • Lactation Support Provider (LSP) Descriptors • Pathways to Become a Lactation Support Provider • Lactation Support Toolkit for Home Visitors—*NEW Resource found in Workforce Development for Home Visitors Training options included in Toolkit • Staff Training, Public Health Division Breastfeeding webpage • Lactation Education Resources • Healthy Children Project, Center for Breastfeeding • Portland State University, Human Lactation Certificate program Supports Pathway 2 for IBCLC and student earns college credits as well as being provided mentorship to practice; mentorship opportunities are increasing throughout Oregon • Institute for the Advancement of Breastfeeding & Lactation Education • GOLD Lactation online conference • iLactation • Nurturely • The B.L.A.C.K. Course

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Breastfeeding – Strategy #3: Ensure that providers who serve tribal members have training in culturally specific approaches to promotion and support of lactation.
Foundational area: Workforce capacity & effectiveness
State lead: Robin Stanton

Related Foundational Priorities:
 SDOH-E Toxic stress/trauma/ACEs CLAS

Local Level Activities	Local measures	Resources
<p>1. Assess infant feeding knowledge and practices, including lactation, among providers who serve Tribal members to identify gaps and training needs.</p>	<p>a. Number of providers assessed</p>	<p>Resources: Foods and Drinks for 6 to 24 Month Olds, Centers for Disease Control and Prevention *Population-based recommendations, not specific to indigenous populations</p>
<p>2. Provide training on culturally specific approaches to providers (including home visitors) who serve Tribal members (providers includes members of indigenous communities).</p>	<p>a. Number of providers trained</p>	<p>Resources: Indian Health Service Breastfeeding Promotion and Support Northwest Portland Area Indian Health Board Oregon Intertribal Breastfeeding Coalition Indigenous Breastfeeding Counselor Training; Decolonizing Breastfeeding Education *Training available only to members of indigenous groups The Continuity of Care in Breastfeeding Support – Focus of resource is community strategies to support lactation</p>

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<p>Breastfeeding – Strategy # 4: Ensure access to culturally responsive preventive clinical care, especially for low income and undocumented individuals Foundational area: Community, individual & family capacity Related foundational priorities: State lead: Robin Stanton</p>		
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p>Related Foundational Priorities:</p> <p><input checked="" type="checkbox"/>SDOH-E <input checked="" type="checkbox"/> Toxic stress/trauma/ACEs <input checked="" type="checkbox"/>CLAS</p> </div>		
Local Level Activities	Local measures	Resources
<p>1. Implement and expand access to culturally specific chest/breastfeeding peer support services</p>	<p>a. Percent of pregnant and postpartum clients served by chest/breastfeeding peer counselors</p>	<p>Evidence: MCH Evidence Tools – Breastfeeding. Strategies on Peer Counselors MCH Evidence Tools – Breastfeeding. Strategies on Community Health Workers</p> <p>Resources to support culturally specific lactation care: Lactation Support Toolkit for Home Visitors—*NEW Resource found in Workforce Development for Home Visitors</p> <p>Nurturely</p> <p>The B.L.A.C.K. Course</p> <p>ROSE Reaching Our Sisters Everywhere</p> <p>HealthConnect One Community birth worker training</p>
<p>2. Create formalized linkages (i.e. agreements, MOUs, referral pathways) between health care settings & community-based health initiatives and programs (e.g. CHIPs, early learning /parent HUBs) to support access to lactation services.</p>	<p>a. Number of linkages or agreements formalized</p>	<p>Evidence: Strategies for Providing Lactation Services, An Evidence-Based Guide for CCOs</p> <p>Resources: Lactation Support Toolkit for Home Visitors—*NEW Resource found in Workforce Development for Home Visitors</p> <p>The Continuity of Care in Breastfeeding Support – Focus of resource is community strategies to support lactation</p>

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Breastfeeding – Strategy #5: Establish community based perinatal, women's and infant health advisory groups to share best practices, strategize and impact policy change. Engage affected communities including people of color in leadership.
Foundational area: Community, individual & family capacity
Related foundational priorities:
State lead: Robin Stanton

Related Foundational Priorities:
SDOH-E Toxic stress/trauma/ACEs CLAS

Local Level Activities	Local measures	Resources
1. Convene or participate in a local community based perinatal, women’s and infant health advisory group.	a. Number of partners convened b. Number of advisory group meetings attended	Resources: The Continuity of Care in Breastfeeding Support – Focus of resource is community strategies to support lactation Community Action Kit for Protecting, Promoting and Supporting Breastfeeding
2. Engage and pay community members to participate in and lead community based advisory groups.	a. Percent of advisory group consisting of community members b. Number of community members financially supported to participate in advisory groups c. Number of community members supported through training or tools to participate in advisory groups	Resources: Lactation Support Toolkit for Home Visitors —*NEW Resource found in Workforce Development for Home Visitors The Continuity of Care in Breastfeeding Support – Focus of resource is community strategies to support lactation Tamarack Institute—Community Engagement Family Engagement