

Virtual Healthy Start Grantees' Meeting
Lunch Networking Café: Breastfeeding
Day 2, June 25, 2020

Briana Jackson: Briana

Candice Raines: Candice Raines

Krystal Dauphine: Krystal Dauphine

Janina Daniels: Janina Daniels, Atlanta Healthy Start, Program Manager, Atlanta, GA

Marcela Hernandez: Marcela Hernandez. Case manager. HS in Baton Rouge

Samaris Vega: Samaris O. Vega, PR HSI, supervisor

AUNDRA BROWN-HICKS: Aundra, Magnolia Project, Jacksonville, Fla, Case Manager

Porsha E: Porsha Eden, MPH, Community of Hope, Healthy Start Program Coordinator

Kristal Dail: Kristal Dail, DC Healthy Start Program, Program Manager

Vynette Moore: Vynette Moore, SHIELDS for Families, Los Angeles, Maternal and Child Health Administrator

J. Taylor: Janet Taylor My Baby and me Columbus, OH Program Manager

Dee Mosley: DeJone, Case Manager, Healthy Start Tyler

Melissa Hallenbeck: Melissa H.- Toledo, Ohio Healthy Start, Health Educator

Ashlynn: Ashlynn Wittmann, The Foundation for Delaware County-Chester, PA, Social Worker

Beverly Mountjoy: Bev Mountjoy, RN Case Manager

Theresa Jefferson: Theresa Jefferson, MCH Outreach Worker and Health Educator

Terra Bautista: Terra Bautista, Healthy Babies Healthy Start, Program Coordinator

Erica Little: Erica Little, Healthy Start Robeson, Pembroke, NC, Project Director

Tonya Daniel: Tonya Daniel, NC Baby Love Plus, Project Director

Brooke-Lyn LeMaster: Brooke-Lyn, Healthy Start Initiative Richmond, IN, Community Health Worker

Tia Britton: Tia Britton, Healthy Start SIHF Healthcare, East St. Louis, IL., Program Coordinator

acarbajal: Ana Carbajal, Babies First Program, Home Visitor

Beyla: Beyla- Five Rivers Healthy Start- Dayton

Zachariah Green: Zachariah Green, Missouri Bootheel Healthy Start, Sikeston, Mo. Fatherhood Coordinator

Saydia Hossan: my name is Saydia Hossan and I am Healthy Start case worker. from Bronx New York

Duane L Herron: Duane L. Herron Northwest Ohio Pathways HUB at the Hospital Council of NW OH in Toledo, Ohio; Project Manager

Candice Raines: Candice Raines, Greater Harrisburg Healthy Start, enrollment specialist

Shaniqua Allen: Shaniqua Allen , Florence SC Pee Dee Healthy Start, Case Manager

jbarnett: Jada Toledo Lucas County Healthy Start CHW

Kimberly McGinnis: Kimberly McGinnis, Cincinnati Children's Hospital and Cradle Cincinnati, CHW

ehorwatt: Erica Horwatt-Community Health worker, Pittsburgh PA

Beverly King: Beverly King, CHW Virginia Healthy Start Loving Steps-Crater Health District

Amy Hoskins: Amy Hoskins, Project Manager, University of Arkansas for Medical Sciences

Krystal Dauphine: Krystal Dauphine, The Family Tree Healthy Start Case Manager Supervisor, Lafayette, LA

Eugenia Rodriguez: Eugenia Rodriguez-Greater Harrisburg Healthy Start Case Manager and Breastfeeding Educator and Counselor. CLE, CLC, LCCE

Rachel (She/Her/s): Rachel Riehl, Healthy Start of Southern Oregon, Oregon

Latoyia Sears: Latoyia Healthy Start New Orleans Case Manager Supervisor

Sherllay Castro: SherllayCastro Community Health worker for the Bronx Healthy Start Program

Courtney Rae Pasek: Courtney Pasek, Inter-tribal council of Mi, Curriculum development coordinator

Paula Karoul: Paula Karoul, Care Coordinator, Family Wellness Healthy Start, Hartford CT

Ateisha Cage, MSW, CSW: Ateisha Cage, Family Road GBR, Healthy Start Case Manager

Art Howell: Art Howell, Project Director, Healthy Start Bellies, Babies and Beyond, Orlando, FL

tthao: Tong, Fresno, CA, Case Management

Terra Bautista: Terra Bautista, Kalamazoo Michigan, Health Babies Healthy Start, Program Coordinator

Susan Leib: Susan Leib, Einstein Medical Center Philadelphia Healthy Start

Tracy: Tracy Golden, Family Solutions, Orangeburg, SC Perinatal Manager/Certified Childbirth Educator

rebecca: Hi this is Rebecca Roque, Community Health Worker from Five Rivers Health Centers Healthy Start-Dayton,OH

maria hatch: Maria Hatch- Birmingham Healthy Start Plus Community Health Resource Worker

Briana Jackson: Briana Jackson, Healthy Pregnancy Program, Stoneville, MS, Healthy Pregnancy Coach

Elena Brizuela: Elena Brizuela Community Healthworker II, Centerstone Healthy Start Tennessee

Cynthia Ward: Cynthia Ward, Birmingham Healthy Start Plus, Health Educator

Theresta Thomas: Theresta Thomas, Family Road Healthy Start Program, Case Manager

Polly's iPhone: Polly Jones, Program Coordinator, Crater Healthy Start Loving Steps Program, Petersburg, Virginia

oxenjan: Janice Oxendine, CSAPC, CSAC Health Educator Healthy Start Robeson NC

harrtam: Tammy Harris Healthy Start Robeson Case Manager

Shantel Coach: Shantel Coach, MSW Jasmine Project, Social Worker

Megan Walsh: Megan Walsh, Deputy Project Director, MomsFirst, Cleveland OH

Raquel Llewellyn: Raquel Llewellyn. Community Health Work. Morris Heights Health Center.

LaToya Barnes, APRN, FNP-C: LaToya Barnes, Family Nurse Practitioner, Family Road Healthy Start of Greater Baton Rouge

Dorcas Woody: Dorcas Woody, Program Coordinator, GA Department of Public Health, Columbus, GA

jbarnett: Support

Tia Britton: Many participants think that they should only breastfeed for 6 months. Some also do not want to breastfeed once their babies get teeth.

Marcela Hernandez: Lack of knowledge about the time that breastfeeding should be.

MVargas: work, balance of fast pace life

acarbajal: Returning to work

Ayden: Carrie Sampson, Healthy Start Robeson RN, University of NC at Pembroke in Pembroke, NC

Kristal Dail: People think it's not convenient, myths

Paula Karoul: Returning to work

J. Taylor: Returning to work and introduction of solid foods

Samaris Vega: lack of support and cultural beliefs about lactation

Krystal Dauphine: Work, not enough time

jazmine white: Jazmine Jones, Family Road of Greater Baton Rouge Healthy Start, Case Manager

Shantel Coach: returning to work

Beverly Mountjoy: work

hysmith: Harriett Smith- nurse practitioner in Columbia, SC- Healthy start

Eugenia Rodriguez: Returning to work. We need health providers on board from the very beginning.

Porsha E: not a lot of support around breastfeeding continuity

Brenda Austin: Brenda Austin, Social Worker Case Manager, Birmingham Healthy Start Plus Birmingham, Alabama

Marcela Hernandez: When solids are introduced, breast feeding stops being a priority

Efua Ansah-Eleazu: Hello, Efua Ansah-Eleazu Case Manager Health Start Program Staten Island NY, CLC, Mentor Doula

Tracy: Most stop once they return to work.

Janina Daniels: Returning to work, no supported as needed, too many other factors in work/life balance

Theresta Thomas: Returning to work

Raquel Llewellyn: Returning to work forces them to do so.

hysmith: lack of support- and knowledge

Erica Little: Lack of proper support in the home, work/life balance and caring for other children

Duane L Herron: Work culture doesn't support women breastfeeding/pumping.

Saydia Hossan: Individuals might think it's unethical or wrong to keep breastfeeding that long or introducing to solid foods

jazmine white: Returning to work

tthao: The type of job

LaToyia: other children in the home having to get back to work and get kids to childcare

Efua Ansah-Eleazu: I think its a challenge because of lack of education and support

Theresa Jefferson: Not enough support

acarbajal: Some of my clients returning to work in farm labor and stop breastfeeding to work here in the valley.

Tracy: Alot of jobs are not equip to help mothers to continue to breastfeed

Samaris Vega: Right now we have a problem with the hospitals that don't respect the rights of breastfeeding and this frustrated the moms because they can implement the plan that they ave in mind

Marcela Hernandez: There is not enough information about the importance of continuing breastfeeding for longer time. Is usually recomended only for six months, so people become confused about when is the time to stop breastfeeding.

Polly's iPhone: Returning back to work and not having the support that is needed

Trenelle Dennis: going back to work, pressure from family/society to use formula

Efua Ansah-Eleazu: Lack of Knowledge about benefits of breastfeeding for both mom and child

Shanikqua Allen: lack of knowledge about breastfeeding.

Duane L Herron: Sometimes we contribute to a culture of not breastfeeding; for example-providing mothers with formula through WIC programs.

Cristina Rodriguez: they stop either because of work, school, or the attention of other children in the household especially now during the Pandemic and ALL the kids being in the homes

Janina Daniels: Working in service industries like restaurants or hotels is not breastfeeding friendly

Marcela Hernandez: When solids are introduced, moms change the focus of attention of nutrition.

pmitchellthornton: Supplementing with formula is easy with free formula from WIC.

MVargas: safe place to pump, knowledge of work place laws, confidence to advocate for self at work

Ana: The sexualization of the breast.

Chaunda Cunningham: or when babies are getting teeth

Chaunda Cunningham: that can cause a reduction

Marcela Hernandez: Some people believe that after some time, breastmilk losses vitamins and stops being the best option

maria hatch: Some are not aware of the various Support Groups

Efua Ansah-Eleazu: teething

LaToya Barnes, APRN, FNP-C: As a RN that has worked the floor...I have observed that management lacks the understanding of the importance of breastfeeding for postpartum mothers...not allowing them extended breaks to give them time to pump and store. I feel that management should take more time to understand the needs of mothers who need to breast pump in the workplace!

hlmabi: Our benchmark is 6 mos, not longer than 1 year

Ana: Trauma triggers if mothers have been abused.

MiriamSingley: Miriam Singley Florence, SC Case Manager

Cynthia Ward: Moms thinks they may not produce enough milk after 6 months

acarbajal: Lack of support from the hospital mother delivers. They get discouraged and don't want to reach out for support.

Cristina Rodriguez: some just don't produce enough and they believe the baby is just not getting enough to satisfy their needs

MiriamSingley: stress and the idea of having to return to work

jazmine white: Some people are not aware of work place laws regarding breastfeeding, lack of continued support and encouragement, and life stressors

Marcela Hernandez: Some work places stop facilitating the space to breastfeed or pump

hlmabi: Breastfeeding is and can be very healing for a woman. We are healing generational trauma.

Samaris Vega: NO

Efua Ansah-Eleazu: i will like to share

Beverly Mountjoy: No

Shanikqua Allen: No.

hysmith: no

mpratcher: NO

rebecca: no

Tracy: No not in rural areas.

MiriamSingley: no

ehorwatt: no

Saydia Hossan: no I think it's harder in urban communities where support is limited to none

LaToyia: no. especially in the African American Community. getting fathers on board to understand this is normal.

Tia Britton: No.

Marcela Hernandez: NOT AT ALL! Speacially within the Hispanic community in areas where there is not enough bilingual professionals that are knowldegable about the topic

Polly's iPhone: No

jazmine white: No.

Melissa Hallenbeck: absolutely not, even outside of the workplace there are very few public spaces that have lactation rooms or pods

Cristina Rodriguez: No. i believe some people see it as degrading when they see a woman breast feeding

Erica Little: Our county health department, we are working hard to educate and grow support in our community. It is better than it has been in the past, but still not overall well supported.

hlmabi: No. but breastfeeding is the new black, meaning it is gaining popularity and trending.

Krystal Dauphine: No, I think communities lack education around breast feeding.

MiriamSingley: It appears to be foreign to people and a lot of people don't have the full knowledge surrounding breastfeeding.

hlmabi: It depends on what community you are in.

Melissa Hallenbeck: very few lactation consultants, families may see one for 1-2 visits at the hospital and then maybe if they are on WIC they can receive support but nothing beyond that in our region

Kimberly McGinnis: It could be...Cincinnati has two breastfeeding support groups for African American women, but no many know about these two resource and support groups. Families do not know about the benefits of breastfeeding and cannot support women who want to breastfeed.

MiriamSingley: I wish free Lamaze classes were offer

Duane L Herron: Research is showing that education really has no positive or negative effect on breastfeeding- so it's like going back to the drawing board sometimes.

Marcela Hernandez: There is not enough bilingual services for non-english spoken moms

MVargas: I believe there is however there is also conflicting information. Provider vs. CLC's

LaToyia: we are using an app called COffective and it has helped moms find a support person if the do plan to breastfeed and it helps to get moms educated and how to be prepared.

hlmabi: TONS of conflicting information between providers and CLCs.

Cynthia Ward: promoting peer breast feeding support groups help to increase the positive perception toward breastfeeding

Tracy: Our program started doing breastfeeding zoom classes to help educate women on the importance of breastfeeding. Then offers our LC for support.

Tia Britton: Yes, especially after delivery. If a mom has trouble latching, hospitals are quick to force a bottle and not necessarily work with mom to help.

hlmabi: Most of the families I work with do not support breastfeeding.

Sherllay Castro: I believe providers need more training regarding breastfeeding. Often enough they assume mothers will formula feed.

Synthia Johnson: That is so true!

Efua Ansah-Eleazu: there should be more support with Premie, NICU babies

Melissa Hallenbeck: sounds like the reimbursement rate for a lactation visit is fairly low and why many don't hire enough lactation consultants

Toy Hightower: One of the problems some moms do not get a pump until weeks after the baby comes. A pump should be given before baby comes that will help tremendously

Duane L Herron: Or there is no followup from providers- patient says they will breastfeed and they click a box....

MVargas: support in the golden hour is lost many times

Sherllay Castro: Breastfeeding discussions should take place during children check ups visits

hlmabi: The nurses at the hospitals are not CLCs. They are very ignorant to breastfeeding and latching. They are quick to push formula. They don't believe in skin to skin and the golden hour

hlmabi: YEP!

Efua Ansah-Eleazu: there should be more support groups for the fathers and support system

Marcela Hernandez: Not enough support for non-english spoken moms.

LaToyia: yes, I am a lactation counselor as well as a case manager and we try an catch moms early as possible after delivery.

Synthia Johnson: If immediately after deliver mom starts breastfeeding is much easier than after the first formula bottle feeding.

Ibilyeu: Nurse knowledge of BF depends on the hospital. If they are a Baby Friendly Hospital all nurses have BF training and many are CLC's. These hospitals have IBCLC's also. There are also WIC BF Peers to help moms in most places.

Efua Ansah-Eleazu: women who have had a C-Section should not be told to rest and feed the baby when they get home because "their milk did not come in yet"

Synthia Johnson: Especially for the prenatal moms that are interested in breastfeeding.

Elena Brizuela: there are agencies which provide support but there's lack of transportation that hinders assistance

hlmabi: I think we should find a way to delicately teach about the difference between breastmilk and formula. Formula is linked to SIDS. Poor preparation can stimulate bacteria in the formula.

Cynthia Ward: Have ongoing discussions with Moms, fathers and other support persons before baby is born

hlmabi: I'm so sorry that happened to you <3

hlmabi: THat is so common.

LaToyia: you are not alone that happens a lot thank you for sharing

MiriamSingley: I exclusively breastfeed 3 out of 4 of my children. When I found out I was pregnant with my 4th child my 3rd one was 9 months and I was still fully breast feeding. I was told I had to stop breastfeeding. Why is that?

Eugenia Rodriguez: Agree

Cynthia Ward: Talk with moms about the protective factor of breastfeeding in regards to SIDS

Duane L Herron: **And because they didn't latch they may mark that the woman is not "breastfeeding" and it skews the data.

Efua Ansah-Eleazu: There is not enough support for babies who had Jaundice. Mothers are encouraged to give formula right away. This leads to nipple confusion

Sherllay Castro: I was discouraged from breastfeeding because my son had jaundice

MiriamSingley: With my 4th due to her sugar levels being low, they discouraged breastfeeding.

Janina Daniels: We don't have enough information on milk banks for our mothers.

Tracy: We have to educate them on the benefits of breastfeeding during the pregnancy

Beverly Mountjoy: Their support or lack of support will either encourage mom to continue or stop.

MiriamSingley: Men can support by helping the women decrease their stress level. Helping take on more task at home.

Ibilyeu: Moms should not be pumping during the prenatal period. And there is no need to pump while in the hospital unless the baby is unable to nurse at the breast. Or the mom chooses to pump and bottle feed only. But Mom needs to be educated on how to provide enough milk while only pumping.

Beverly King: They need to be educated along with mothers so they know the importance and can be supportive

hysmith: we need to educate them-

LaToyia: when the fathers are involved we see an increase in the numbers and length of time that moms will be more successful

Efua Ansah-Eleazu: The support is very important

Janina Daniels: Men need more spaces to talk about breastfeeding, we are teaching them with their dad groups on breastfeeding.

MVargas: they feel neglected. don't know how to support. don't have the time to meet and get the information.

dedriej: I am currently working with a mother who was discouraged from breastfeeding because the baby's sugar levels were low. Does anyone know why that is?

jbarnett: We are connected with the Brothers United program which teaches a breastfeeding class for fathers. The fathers seem supportive of breastfeeding

Marcela Hernandez: many dads are not involved from the beginning and they feel there is nothing they can contribute

Zachariah Green: I think men/fathers could be the key element with encouraging moms to keep trying even when the mom can't produce a large amount of milk or if she's tired.

hlmabi: They need to be educated about breastfeeding and they also need to be educated about women's anatomy and sexuality, as do the mothers

Tia Britton: They can serve as advocates for mom and emphasize that they want to breastfeed to the providers after delivery. They are a support system that is needed. We have had dads in our classes have educated moms on breastfeeding which is why they want to breastfeed. We try to encourage

ways that they can support mom while breastfeeding and encourage skin to skin, bathing baby, etc to still bond.

Janina Daniels: Men need to have breastfeeding classes too.

Erica Little: Men can either make or break breastfeeding. We have some moms who have felt supported and others who have been pressured by the Dads to not breastfeed.

Cristina Rodriguez: having them participate more with their partners and we as home visitors need to educate them and invite them to sit in the visit or have them participate in the fatherhood program

Synthia Johnson: I see the impact picking up because men are great influence to their partners. Sometimes the men are very excited for mom to BREASTFEED!

Efua Ansah-Eleazu: the fatherhood component is crucial for a successful breastfeeding journey

MVargas: dad sometimes does not have the right information and influence moms decision. Those who have the information provide support and guidance when she forgets some important information on breastfeeding like latch etc.

Duane L Herron: I am happy HS is starting to be more inclusive fathers and their role with the baby including breastfeeding.

hlmabi: We have an AMAZING Fatherhood Network associate. He is a father and training to be a CLC

dedriej: Men need more education regarding breastfeeding and the importance of it. Men tend to discourage breastfeeding because they feel it is inappropriate or they don't want their significant other's breast to be exposed when a mother feeds outside of the home.

Tia Britton: We incorporate dads into our breastfeeding classes with mom. They have questions and sometimes feel like outsiders. So it's good to educate them together.

Efua Ansah-Eleazu: most of my dads actually want their wives to breastfeed

hlmabi: Culture sexualizes breasts ~ all around the world

jazmine white: Men can play very important roles in supporting the moms and baby. They can get information to understand the ways that they can participate. Men can also assist in making the process work and/or end. Education will help to increase their understanding.

oxenjan: I agree educario

James.Cox@centerstone.org: I work with dad's that enjoy being a part of breastfeeding by bottle feeding from pumping.

oxenjan: I agree education for dads

Efua Ansah-Eleazu: when you talk about how much money dad is saving if the mom breastfeeds, you get their attention

MiriamSingley: With my oldest child, he was attached to only one breast and my other breast would get enlarged. At that time my breast would not react to the artificial pump therefore my husband would had

to manually with his hand help me release the milk and that was very supportive. Some men feel that when the breast are producing milk it has now become tainted.

Synthia Johnson: Sometimes men have learned behavior about breastfeeding and they want to continue the upbringing. They feel it brings mom and the baby much closer. I see the resilience when I discuss the topic with my participants. They be excited!!!

hlmabi: I agree Duane.

hlmabi: Breastfeeding is such a tender time. A time to surrender and be vulnerable ~ both Mama and Papa.

Marcela Hernandez: Another issue is that some dads think that breastfeeding is a matter of women only and are not invited to learn about the importance of their participation and support during the process

hlmabi: Well, the person who birthed the baby makes the milk

Cynthia Ward: Moms should also welcome dads to be a part of the experience

hlmabi: The partner has to learn to support

Patrizia Bernard: They should help support the implementation of laws regarding breastfeeding at work and parental leave

Janina Daniels: work policies where breastfeeding is allowed no matter what the work setting

Patrizia Bernard: One of the reasons why people stop is because they have to go back to work.

Zachariah Green: Yes@ Cynthia Ward

Patrizia Bernard: We know that low wage jobs very often time do not provide the space and time necessary to breastfeed - and often time because they fear losing their jobs, they do not demand what they deserve.

LaToyia: Every mother receives a very good booklet about breastfeeding and asking mom what and how they feel about breastfeeding and using a n app called coffective

Duane L Herron: Good comment Patrizia

jbarnett: Well said @Duane L Herron

Patrizia Bernard: Parental leave

Marcela Hernandez: 1. Allocate more money on education and support to clients, support and education of professionals delivering services. 2. Change the narrative of breastfeeding leng among babies. 3. Develop an employee policy that employeers in general can use to be breastfeeding friendly sites and that way, clients can provide this information to their supervisors/ boses..

hlmabi: regarding back to work, it may be state law for businesses to provide space for breastfeeding. You should check that

Erica Little: Having Breastfeeding support staff (such as CLCs) available. Also focus on leading charges on Breastfeeding friendly movements across all areas (programs, businesses, medical sites, etc.).

Eugenia Rodriguez: I feel every HS should have an IBCL on board that works together with CM to create support plans for initiating breastfeeding

Tracy: We have started contacting our local industries to find out what their breastfeeding policies are for their workers. We will begin to educate them on the laws that support breastfeeding in our state.

Julie Davis: Include doulas and CLCs at EVERY program

Melissa Hallenbeck: There is a federal law for breastfeeding and most worksites have a policy but they may not have a space set up for that and feel intimidated on how to do that

MVargas: get hospital buy in to there for 1st hour at least having a doula on hand or CLC and follow up with case manager

Cynthia Ward: Make employee information on breastfeeding easily accessible and integrated into employee orientation

LaToyia: what is most important is giving the mother a voice and letting her choose if she wants to pump or breastfeed or formula feed, or both our facility is baby friendly and we have a room in our clinic for mother to breastfeed when needed.

Duane L Herron: Our agency created a lactation room for moms.

Julie Davis: making breast pumps accessible

Eugenia Rodriguez: agree

MVargas: more public safe spaces and having them accessible. Some airports have a breastfeeding friendly space but there's one only and far.

Cristina Rodriguez: providing adequate prenatal care, meeting basic health needs such as nutrition, housing, psychosocial support and enabling client empowerment.

Ibilyeu: Partner with WIC in your community. Most should have a Regional WIC BF Coordinator that already is doing community outreach with businesses and corporations.e

maria hatch: Have workplace implement and area just for breastfeeding mom. For example they have a smoking area for smokers why not have a area for breastfeeding mom.

Duane L Herron: Health care delivery systems being more open to breastfeeding including more than a baby latching onto the breast...but also pumping etc.

hlmabi: Breastfeeding spaces in workplaces have to be provided by workplaces. They may pop up as the need arises. Its a law.

Ibilyeu: Work with community partners that are already working with BF. We do not need to reinvent the wheel. And financially most of us do not have the funds for doing it all on our own.

MiriamSingley: The lack of knowledge

hysmith: lack of support by others to encourage breastfeeding- need more education and friendly breastfeeding policies

Efua Ansah-Eleazu: we need more breastfeeding support groups

Efua Ansah-Eleazu: we need to have more women trained as doulas

Greg Rogers: More education , lactation on staff and staff training

Marcela Hernandez: Breastfeeding success continues to be determined by lack of education and support. Yet, there is a lot of people who are supporting and enhancing the matter

Theresa Jefferson: Make sure we educate providers,

MVargas: marketing for breastfeeding support groups, CLCs, IBCLC's doulas

Ateisha Cage, MSW, CSW: Building community partnerships to help educate families

Chaunda Cunningham: engaging fathers so we can educate moms and dads

Efua Ansah-Eleazu: we need more CLC's and IBCLC's

jbarnett: Challenges of moms not being able to breastfeed as long as they had wanted to due to going back to work or not having space/time at work to do so. Also getting dads involved in breastfeeding support.

Cynthia Ward: Welcome and invite fathers into the conversation

acarbajal: Educate men/fathers to be supportive to moms

MVargas: making sure community knows we are here to help and support no matter status or ability to pay

Beverly King: Breastfeeding need to be made a national campaign in advertisement on all news outlets

Efua Ansah-Eleazu: we need to normalize breastfeeding, breastfeeding in public, teaching moms about their rights

Cynthia Ward: educate the entire family about the benefits

MVargas: What are we doing in August post COVID for national breastfeeding month?

Greg Rogers: yes a national campaign!

Efua Ansah-Eleazu: encouraging moms to have a birth plan

hlmabi: We need to create a strong Breastfeeding telehealth program

Tia Britton: More breastfeeding support groups and education on the difference between breastmilk and formula.

hlmabi: Video support has been excellent over CV

Greg Rogers: great job!

MVargas: virtual breastfeeding event <https://biglatchon.org/> they do a big latch in Madison square garden in NYC

dedriej: We are looking at doing a virtual breastfeeding workshop the third week of August, it will be from 9-12.

hlmabi: Video support during the Covid ~ it's not over

Efua Ansah-Eleazu: educating moms and encouraging them after C-section with post partum support

hlmabi: YES!

Candice Raines: our program does breast feeding support groups monthly

Eugenia Rodriguez: More health providers educated on BF management and support.

Efua Ansah-Eleazu: more baby cafe's

Marcela Hernandez: Provide breastfeeding classes in the program

MVargas: father support groups

acarbajal: Listen to our moms in how they choose to provide their breastmilk to their baby

Tonya Daniel: Support on all levels of community is critical

iPad: Promoting pumping as a breastfeeding option

Eugenia Rodriguez: Let's keep sharing strategies that works!

jbarnett: Keep talking, Keep educating and keep supporting

MVargas: bring the whole family in with their concerns about breastfeeding separately and then together as a massive village of support and love

MVargas: keeping in mind trauma and assisting to feed through it all

Efua Ansah-Eleazu: More providers especially Pediatrician should encourage moms to breastfeed

Brenda Austin: If companies or organizations have childcare on site allowing moms who are returning to work the opportunity to breastfeed throughout the day.

jazmine white: More promotion, education for providers and families

Cynthia Ward: create a space for conversation in our professional and personal lives

Candice Raines: we need to continue to educate participants on their choice options and provide the benefits life long in breastfeeding. Involve fathers and educate on the importance of breast feeding and their important role as the father in this process

Efua Ansah-Eleazu: WIC should provide more education rather than providing formula to early

Tia Britton: Encourage beyond 6 months. More education. Incorporate providers, dads, and families. Encourage work places to support and provide them tips on how they can.

MVargas: help mothers who say they want to do both formula and breastmilk by understanding why they want to do that and ways to keep milk supply up in case they change their minds

Chaunda Cunningham: thank you!!

Kelly Edwards: View the different breakout session Zoom links on the agenda on the EPIC website:
<https://www.healthystartepic.org/training-and-events/virtual-grantees-meeting/day-2/>

Synthia Johnson: That we all work together on one accord together and implement the same plan together. Allow participants opportunities to share the GOOD NEWS of BreastFeeding.

LaToyia: Thank you for the hosting this topic

Marcela Hernandez: Thank you!

iPad: Great presentation

Tonya Daniel: Thanks!

Cynthia Ward: thanks

Theresa Jefferson: Thanks you

acarbajal: Thank you :)

jbarnett: Thank you