

## MIBFN BLUEPRINT FOR

# BREASTFEEDING EDUCATION

This document outlines the ways MIBFN provides education to advance breastfeeding outcomes.



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As we aim to build an inclusive movement to #ChangeTheSystem and to improve breastfeeding outcomes, we want our partners to know what they are getting behind when they join in our mission to lead the statewide collaborative actions for advocacy, education, and coalition-building to create a supportive breastfeeding culture. The aim of this document is to provide everyone who considers herself or himself a part of our network with clarity about why and how we are committed to #ChangeTheSystem to make Michigan Breastfeeding Network's (MIBFN's) vision into a reality, that all Michigan families will live and work in a breastfeeding-friendly environment.

## WHY BREASTFEEDING SYSTEMS CHANGE

**Positive breastfeeding outcomes benefit everyone - mothers, babies, society, and the environment.** Recent estimates show that over 800,000 child lives worldwide and 20,000 maternal lives could be saved each year if every child were exclusively breastfed for the first six months of life.<sup>1</sup>

**Michigan mothers are already doing their part.** The American Academy of Pediatrics (AAP) recommends six months of exclusive breastfeeding and the World Health Organization (WHO) recommends continued breastfeeding to two years of age and beyond.<sup>2,3</sup> 85 % of moms in Michigan initiate breastfeeding.<sup>4</sup> However, mothers must navigate systems that were not built to support their long-term breastfeeding success. By six months of age the breastfeeding rate drops to 55.6 % with exclusive breastfeeding through six months dropping even lower to 23.9 %.<sup>5</sup>

**Systemic roadblocks, including unsupportive and oftentimes hostile environments, drastically reduce breastfeeding exclusivity and duration rates.** Currently, the workplace, child care centers, courts, maternity care facilities, and other systems are not designed for breastfeeding success and stand in the way of positive health outcomes.

**Michigan families deserve better, and mothers should no longer shoulder the burden of breastfeeding without systemic infrastructure in place - it is time to change the system.** To enact permanent change and advance breastfeeding outcomes, inclusive planning and work across multidisciplinary systems is necessary. All spaces and places, from the delivery room to the courtroom, must provide equitable access for positive breastfeeding outcomes.

**The mission of Michigan Breastfeeding Network is education, advocacy, and coalition-building.** We envision a landscape in which all families can live and work in a breastfeeding-friendly environment. We are working to cultivate woman-centered, equitably-designed systems that make breastfeeding success feasible for every family in Michigan.

**Education is essential for creating a breastfeeding-supportive culture across Michigan.**

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## MICHIGAN BREASTFEEDING RATES BY THE NUMBERS

### 2015 MICHIGAN PRAMS DATA TABLES<sup>6</sup>

Breastfeeding Initiation Rate	85 %
White, non-Hispanic	87.4 %
Black, non-Hispanic	75.1 %

### 2018 CDC REPORT CARD MICHIGAN DATA (BABIES BORN IN 2015)<sup>7</sup>

Infants ever breastfed	77.7 %
Infants breastfed at six months	55.6 %
Infants breastfed at 12 months	34.6 %
Exclusive breastfeeding through three months	44.1 %
Exclusive breastfeeding through six months	23.9 %



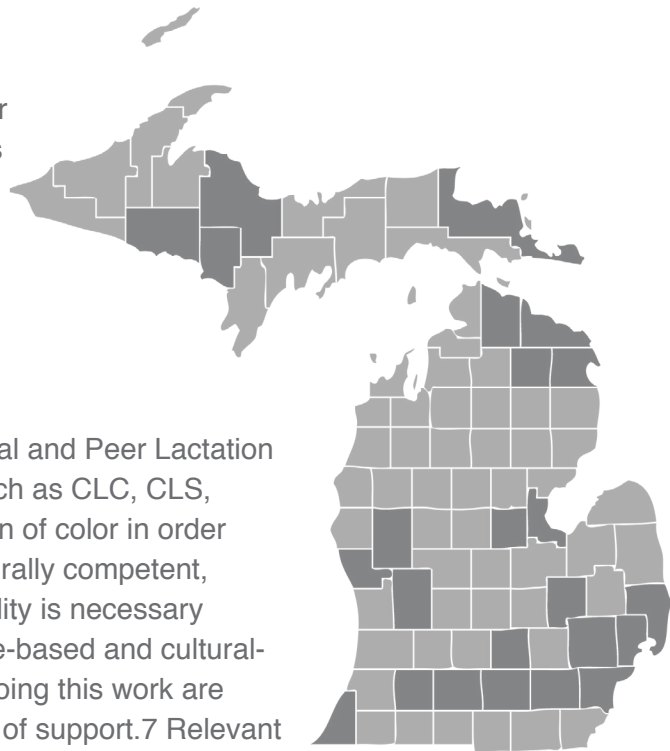
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## WE KNOW THERE IS WORK TO DO

Education is crucial in normalizing breastfeeding across our state. Breastfeeding education can help to change systems that are not currently designed for breastfeeding success and is still very much needed to counter misinformation surrounding breastfeeding.

## REPRESENTATION MATTERS IN EDUCATION

As demonstrated by the National Association of Professional and Peer Lactation Supporters of Color (NAPPLSC), classes and trainings (such as CLC, CLS, and IBCLC courses) need to be designed by and for women of color in order to address the specific needs of these communities.<sup>6</sup> Culturally competent, sensitive, and representative information grounded in humility is necessary from providers that reflect the communities desirous of race-based and cultural-based breastfeeding education. Women who are already doing this work are serving as role models for elevating education to this level of support.<sup>7</sup> Relevant breastfeeding education follows a culturally humble model of care rather than imposing viewpoints from outside the community onto its participants.



## EVIDENCE-INFORMED VERSUS EVIDENCE-BASED RESEARCH

Life experience is its own form of evidence. Historically, evidence-based research has only benefited certain groups of people and has failed to include the full spectrum of experience.<sup>8,9</sup> Evidence-informed research is an alternative that acknowledges this historical lack of understanding and representation, particularly in communities of color.<sup>10</sup> One of the limitations of evidence-based research is the potential to exploit rather than include communities of color.<sup>11</sup> Education needs to include researchers that represent the communities they serve in order to provide resources and tools that are applicable to their local learning community. Researchers need to include the community in all steps of establishing the evidence-base from research design to interpretation of research findings. Educational offerings based on these principles would then reflect equitable methodology and research practices committed to a more respectful and community-centered way to improve breastfeeding outcomes.



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## OUR AIMS

**MIBFN aims to make breastfeeding education accessible and inclusive to encourage the broad base of community leaders who endeavor to become breastfeeding supporters.** We do this by providing free, local, or web-based, and regularly-occurring educational opportunities.

**MIBFN aims to align with ongoing efforts that focus on issues of equity within breastfeeding education.** These efforts include identifying and overcoming systemic barriers, creating culturally relevant education, and partnering with presenters whose work is centered outside the dominant culture.

**MIBFN aims to promote culturally relevant breastfeeding research from diverse viewpoints.** We work with presenters that employ respectful data collection methods and implement practical approaches to breastfeeding success that include experiences drawn from the local community.

**MIBFN aims to provide relevant and timely education on how to work toward eliminating the systemic and structural barriers that prevent breastfeeding success.** The decisions about what content to offer will be driven by the people currently working on dismantling the barriers to breastfeeding success within their communities.

**MIBFN aims to connect breastfeeding educational opportunities with access to equitable, sustainable financial compensation for those who provide breastfeeding support.** Inequitable hiring practices and compensation for breastfeeding professionals prevent families from receiving the care they need.

IF EVERY CHILD WERE EXCLUSIVELY BREASTFED  
FOR THE FIRST SIX MONTHS OF LIFE

**800,000**

Child lives could be saved each year

**20,000**

Maternal lives could be saved each year

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## MIBFN BREASTFEEDING EDUCATION REFERENCE LIST

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# SUPPORT TOOLS FOR BREASTFEEDING EDUCATION



MIBFN offers the following educational opportunities.  
More information is available at [www.mibreastfeeding.org](http://www.mibreastfeeding.org) and by emailing [info@mibreastfeeding.org](mailto:info@mibreastfeeding.org).



## QUARTERLY NETWORK MEETING

In partnership with the Michigan WIC Division, Quarterly Network Meetings (QNMs) aim to create a platform to learn, share, and connect among local and regional breastfeeding supporters. For more information and to register for upcoming Quarterly Network Meetings visit [www.mibreastfeeding.org/qnm](http://www.mibreastfeeding.org/qnm).



## GREAT LAKES BREASTFEEDING WEBINARS

Michigan Breastfeeding Network presents free Great Lakes Breastfeeding Webinars on the third Tuesday of the month from 1-2pm EST in partnership with Michigan Department of Health and Human Services Bureau of Family Services with support provided by Wisconsin Division of Public Health. The GLBW series focuses on a broad range of topics to bring timely, relevant information to its attendees for use in daily practice and to implement systems-level change. Each monthly webinar offers 1 CERP, 1 social work CE hour, 1 nurses' contact hour, and a certificate of attendance to attendees who are able to watch live and complete the post-webinar evaluation. To view and register for upcoming webinars visit <https://www.mibreastfeeding.org/webinars/>.



## DIVERSITY, EQUITY, AND INCLUSION LEARNING RESOURCES

MIBFN board, staff, and projects team members have all begun training on bias and privilege, root causes of racial inequity, and cultural humility. As we grow, this work will become more intersectional, and so will the list of resources that are informing our work. If you feel inspired to lend your insights on these or additional resources, please email [info@mibreastfeeding.org](mailto:info@mibreastfeeding.org). To learn more, visit [www.mibreastfeeding.org/learning-resources](http://www.mibreastfeeding.org/learning-resources).