

WIC Breastfeeding Research Report

South Plains
Community Action Association
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research + campaigns = behavior change



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SUMA Social Marketing prepared this report

for

South Plains Community Action Association



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WIC Breastfeeding Research

Executive Summary

On behalf of the South Plains Community Action Association (SPCAA) and The Special Supplemental Nutrition Program for Women, Infants and Children Program (WIC), SUMA Social Marketing (SUMA) conducted research with women in six cities across Texas to gain insight into breastfeeding knowledge and behaviors as well as reactions to creative approaches to promote breastfeeding.

Research Goals

- Determine how realistic and achievable current breastfeeding medical recommendations are for Texas mothers.
- Explore nuanced ideas regarding women's feelings and perceptions around their unmet breastfeeding goals and around pressure to breastfeed.
- Explore what can be done to help more mothers achieve their breastfeeding goals.
- Explore attitudes, barriers, opportunities, and themes in order to develop appropriate communication and programmatic strategies.
- Utilize information on barriers addressed in the WIC Infant Feeding Practices Survey to get nuanced qualitative information that can be used in developing initiatives, programs, trainings, and other resources or materials.
- Gain feedback on various sample campaign materials, including: BreastmilkCounts.com, Facebook posts, radio and TV ads as well as billboards.

In total, twenty-four focus groups were held with four groups in each of the following cities: Dallas, Houston, San Antonio, McAllen, Tyler, and Beaumont. Three groups were held with each of the following groups: African American, Caucasian, English-dominant Hispanic women, and Spanish-dominant Hispanic women who are enrolled in WIC. An equal number of groups with the same demographic breakdowns were held with women who qualify for WIC but are not currently enrolled. All participants were at 185% poverty level.

In addition to the focus groups, participants completed a short survey prior to the groups about their breastfeeding behaviors.



What Women Planned, What Happened

Participant responses indicate that most pregnant women and their supporting communities do understand that breastfeeding is healthier for babies and they are motivated to breastfeed. The majority of women in the focus groups planned to exclusively breastfeed for the first six months of their babies lives; after they delivered their babies, their plans often changed. A wide variety of factors influenced their decisions to introduce formula. Participants talked about challenges with the latch, breast pain, producing enough milk, going back to work, and medical situations among others. On the pre-group survey, all participants as a whole responded that the following factor(s) contributed to their decision to introduce formula “a lot.”

- Difficulty with latch (34%)
- Return to work (31%)
- Baby is still hungry (24%)
- Breast pain (21%)
- Convenience of formula (21%)

Among the Spanish-speaking participants, the survey responses were slightly different. They identified that the baby was still hungry as a greater issue than the latch:

- Baby is still hungry (33%)
- Breast pain (28%)
- Difficulty with latch (16%)
- Return to work (12%)

According to the WIC Infant Feeding Practices Survey that was consulted to complement and direct the current research project, 40% of the WIC babies are born via C-section. Several women said that soreness from surgery, fear they would pass pain medication onto their baby, or anesthesia-induced sleep interfered with their ability to exclusively breastfeed. Other medical reasons included doctors’ recommendations for formula for babies with jaundice or circumstances related to a premature birth and/or care in the neonatal intensive care unit (NICU).

In spite of these challenges, many women talked positively about breastfeeding and responded on the pre-group survey that it was enjoyable for both them and their babies (61% of the all participants and 73% of Spanish-speaking participants). Some women did not have any challenges with breastfeeding at all; some of those who did have challenges were able to work through them. Exactly half of all participants and 68% of Spanish-speaking women specifically breastfed as long as they planned.

Interestingly, there was very little correlation between confidence level about breastfeeding during pregnancy and breastfeeding success. Some women who felt certain they would be successful at breastfeeding were not, while others who were apprehensive during pregnancy were successful in the end.



How Women Felt When Their Plans Changed

Women expressed a wide range of emotion about how they felt when their breastfeeding plans changed. Some said they knew that they did the best they could. Others expressed a sense of relief, while many expressed sadness, shame, or a feeling that were not good parents because they were unable to breastfeed as planned. Some describe being pressured or feeling judged by family members, friends, or even strangers. Stories of being shamed in online groups was not uncommon. Women also mentioned being shamed for breastfeeding in public and some did not know that they are protected by law to breastfeed in public.

How Women Learn About Breastfeeding and The Role of WIC

Most women said they learned the mechanics of breastfeeding from the nurse or lactation consultant at the hospital. Most were grateful for the help and credit that experience for getting them started with breastfeeding. Even with a successful start at the hospital, breastfeeding plans often changed when women got home with their babies. At home, babies may not have latched successfully, mothers didn't think they were producing enough milk, or they could not juggle breastfeeding with caring for their other children. Without immediate and convenient help, many chose to introduce formula.

Breastfeeding is often more complicated than women expect it to be and this is why education during pregnancy, at the hospital, and when women go home after birth is so important. Based on these focus group findings, WIC is the only organization that offers breastfeeding classes or education led by peer counselors to help women from this socioeconomic level prepare prior to giving birth as well as supporting them during the postpartum period. WIC participants reported that they are appreciative of breastfeeding counseling, breast pumps, and other lactation services from WIC.

In some parts of the state, women who participated in focus groups said they attended mandatory WIC breastfeeding classes and found them helpful even if they had breastfed other children. The value of in-person breastfeeding instruction prior to birth was echoed by all women who took a WIC class or met with a peer counselor. A few women took the online breastfeeding classes and described them as basic knowledge. Others bemoaned not knowing about the support WIC can provide during pregnancy because they could have used the help. This was particularly true for those who were not enrolled in WIC; they said it was a service they would have sought out if they had known more about it.

WIC breastfeeding support also includes encouraging clients to call WIC if they need help after their babies are born or receiving check in calls from peer counselors to see how things are going. Many mothers who participated in focus groups went to WIC clinics to get breastfeeding help; for many, they were able to continue breastfeeding successfully because of this assistance. One mother who suffered from severe postpartum depression credits the WIC lactation counselor with saving her life when the counselor recognized her depression and got her in touch with the right help. A surprising number of focus group participants mentioned postpartum depression and an uncertainty of where to turn for help other than to doctors.



While many women reported that they received breastfeeding help from WIC after their babies were born, others talked about challenges when they went to WIC to request formula when breastfeeding did not go as planned. Some women reported unpleasant experiences – that they felt pressured, shamed, and guilty during these interactions.

Participant comments were mixed about the WIC clinic environments and customer service in general. Comments about caring staff, nice clinics, and good service were common. There were also complaints about long waits, rude staff, dirty and/or crowded clinic settings.

What Non-Enrolled Women Said About WIC

Many of the participants in the groups of mothers not enrolled in WIC had actually been enrolled at one time. Women leave the WIC program for a variety of reasons. While long waits or transportation challenges were the main reasons cited, others included immigration status, time, income, shopping difficulties, rude staff, and scheduling issues.

Many of the focus group participants who were not enrolled in WIC expressed misconceptions and/or negative perceptions about the program. Some were not aware of the breastfeeding support available. Some had negative impressions from years past and did not know of the recent changes. Some were confused about enrollment procedures and income guidelines.

For a number of focus group participants, their experience while enrolled in WIC was better than expected. They mentioned more options, better breastfeeding support, and improved food packages. It was not uncommon for women not enrolled in WIC at the time of the focus groups to express an interest in getting enrolled or renewing their enrollment with WIC as a result of their participation.

The Power of the Internet

The majority of mothers in the focus groups also reported that they educate themselves online by Googling topics about breastfeeding, watching YouTube videos, or engaging in online groups and forums on Facebook and elsewhere. These resources are extremely popular and helpful, and women turn to them on a regular basis. Participants were enthusiastic when they heard about an existing closed Facebook group in one region of Texas with professional lactation consultants as moderators. They said they would like to sign up for a similar group.

Only a few participants knew about either BreastmilkCounts.com or the Texas Lactation Support Hotline, which is a 24/7 resource. Participants were asked to review the website and expressed overwhelmingly positive feedback about its content, look, and feel. Many said that it had everything they needed to know about breastfeeding and they wondered why they did not know about it through their interactions with WIC or otherwise. When participants were asked to share the most important thing they learned during the groups, learning about the website was by far the most commonly identified answer.



Promotion of any WIC effort, whether it is BreastmilkCounts.com or WIC services, must use social and online media platforms. Participants almost unanimously said that they do not use traditional broadcast media or radio. Of their online media use, Google, YouTube, Facebook, Instagram, Pandora, and Spotify offer opportunities for high-impact and creative outreach. Facebook was most frequently identified as the most popular social media site and the place where women were most likely to find breastfeeding support.

Having access to immediate help either through a video chat or through the 24-hour hotline was a popular concept. Women need and want breastfeeding support when they get home from the hospital as well as flexibility in how and when they access that support.

Focus group participants expressed some interest in in-person lactation support groups; however, some expressed concern about attending because of logistical issues such as work schedules, transportation limitations, or the need to care for other children. Some had heard about WIC's Lactation Centers, but few had tried them.

Messaging

During the focus groups, participants reviewed sample WIC-generated social media posts about breastfeeding as well as billboards, radio, and TV ads. They responded well to images of photos of women who were relatable and real world. They liked positive messaging and words of encouragement that congratulated them on any breastfeeding effort regardless of length of time. The tagline Every Ounce Counts resonated well for this reason.

Mothers expressed mixed reactions as to the feasibility of The American Academy of Pediatrics recommendation to exclusively breastfeed for the first six months of a baby's life, followed by breastfeeding in combination with the introduction of complementary foods until at least 12 months of age, and continuation of breastfeeding for as long as mutually desired by mother and baby. Hispanic participants tended to think it was realistic, while other participants were more likely to say it seemed daunting and unrealistic.

It is clear that breastfeeding is a nuanced and complex issue for mothers and that messaging and outreach to support breastfeeding mothers should thoughtfully reflect this complexity.



Recommendations

- Promote WIC as a place where all women (regardless of their specific income or situation) can get breastfeeding support either online, through the 24-hour hotline, or in person. Promotion of this type will not only increase breastfeeding success, it will brand WIC as an expert community resource for all.
- Create a landing page on BreastmilkCounts.com containing a chat room, videos, and mom blogs. Although participants were overwhelmingly positive about the website's current design, they were also enthusiastic about the idea of this style for the landing page.
- Offer a wide range of breastfeeding support options through WIC. Different mothers need different kinds of support. Some prefer in-person groups, some one-on-one interactions, and some online chats or groups. Special attention should be paid to mothers immediately after they return home from the hospital.
- Offer live online classes that offer a chat function.
- Use closed Facebook groups moderated by lactation experts to offer mothers trustworthy breastfeeding advice as well as peer and expert support.
- Expand promotion of BreastmilkCounts.com. Women want WIC staff to show it to them on their phone and offer an overview while they are in the clinic. Promote the site on TexasWIC.org, through direct text messages, and with Facebook ads that link to the site as well as with ads and posts on Instagram, YouTube, Pandora, Spotify, and Hulu.
- Train WIC staff so they are consistently prepared to recommend resources for postpartum depression. Some focus group participants reported suffering from it.
- Use positive outreach messaging that focuses on what mothers have accomplished despite everyday realities, rather than on "unrealistic goals."
- Feature relatable women in breastfeeding promotion who look like the mothers enrolled in WIC, and include messaging and images that reflect real-life breastfeeding challenges.
- Continue to distribute the breastfeeding bag.
- Develop a protocol or script for WIC staff to use when talking to a woman who wants to introduce formula. This takes the burden off of individual staff who have to balance encouraging breastfeeding with an understanding of when to accept and support a woman's choice to introduce formula.



Background and Objectives

SUMA conducted 24 focus groups in six locations from October 23, 2018 to December 5, 2018. Participants included both WIC and non-WIC mothers of childbearing age who delivered their babies in Texas, breastfed in the past year, and are at or below 185% of the federal poverty level. Groups were held with white, African-American, and Hispanic/Latina (Spanish dominant and English dominant) mothers. Table 1 offers a summary of the participants.

Table 1: Focus Groups (N=24)

	Race/Ethnicity	WIC Status	Focus Groups
Dallas	White	On WIC	2
	White	Not on WIC	2
Houston	Hispanic	On WIC	1
	Hispanic*	On WIC	1
	Hispanic	Not on WIC	2
San Antonio	Hispanic	On WIC	1
	Hispanic*	On WIC	1
	Hispanic*	Not on WIC	1
	Hispanic	Not on WIC	1
McAllen	Hispanic	On WIC	1
	Hispanic*	On WIC	1
	Hispanic*	Not on WIC	1
	Hispanic	Not on WIC	1
Tyler	African American	On WIC	1
	African American	Not on WIC	1
	White	On WIC	1
	White	Not on WIC	1
Beaumont	African American	On WIC	2
	African American	Not on WIC	2

*Groups conducted in Spanish

All focus group attendees completed a questionnaire prior to participating in the focus groups. One hundred thirty-nine surveys by English-speaking participants and 29 surveys by Spanish-speaking participants were completed. The survey was designed to further support the research goals.

English speaking mothers in Dallas, Houston, McAllen, Tyler, San Antonio, and Beaumont, included Caucasian, Hispanic and African-American women. The Spanish speakers were Hispanic women in San Antonio, Houston, and in McAllen.

The objectives of the research were to help WIC better understand:

- How realistic and achievable current breastfeeding medical recommendations are for Texas mothers.
- Nuanced ideas regarding women’s feelings and perceptions around their unmet breastfeeding goals and around pressure to breastfeed.
- What can be done to help more mothers achieve their breastfeeding goals.
- Attitudes, barriers, opportunities, and themes in order to develop appropriate communication and programmatic strategies.
- How to utilize information on barriers addressed in the WIC Infant Feeding Practices Survey to get nuanced qualitative information that can be used in developing initiatives, programs, trainings, and other resources or materials.
- How to apply feedback on various sample campaign materials including: BreastmilkCounts.com, Facebook posts, radio and TV ads as well as billboards.

Methodology

To recruit participants for the focus groups, SUMA researchers created screening tools with questions designed to ensure participants fit the desired profile of study. As recruiting proceeded, SUMA received frequent status updates and addressed any questions about participant qualifications to modify the recruitment strategy as needed, ultimately ensuring the integrity of the research.

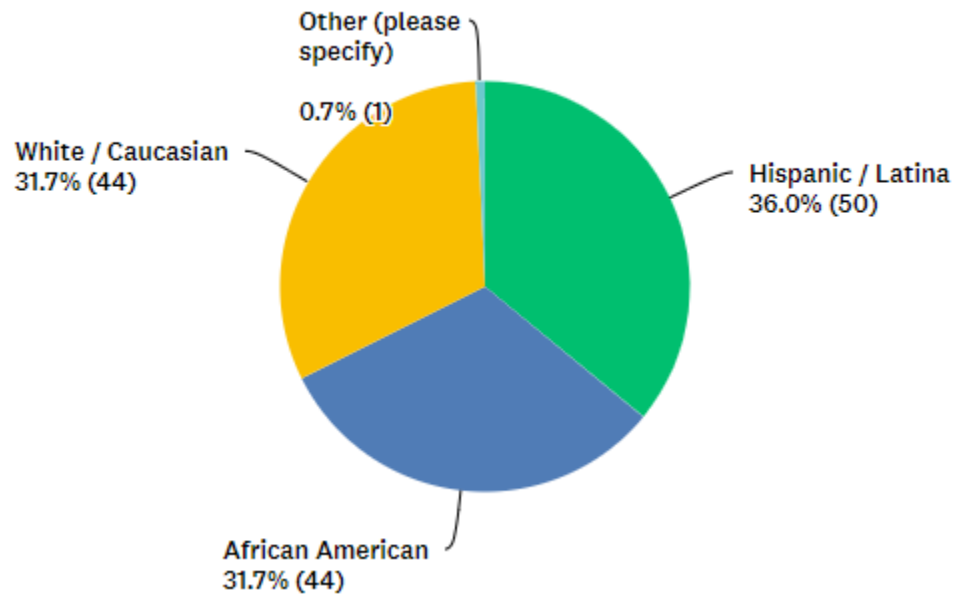
Most of the focus groups were comprised of 8 to 10 women each, although a few were smaller. Trained moderators led all focus groups. The sessions were audio-recorded, and the recordings were transcribed verbatim.

During focus groups, researchers do not take exact counts of how many participants respond in a certain way on each line of inquiry, but rather foster a conversation through which participants can speak candidly. Then, as the transcripts of all focus groups are analyzed, trends emerge and qualifiers such as “few” and “most” are assigned to help the reader understand the prominence of each trend.

Please note that the data gathered from the focus groups is qualitative in nature, meaning that it addresses open-ended questions designed to explore matters of “how, why, and what,” rather than “how many.” Therefore, findings from focus groups should be considered directional rather than statistically definitive.

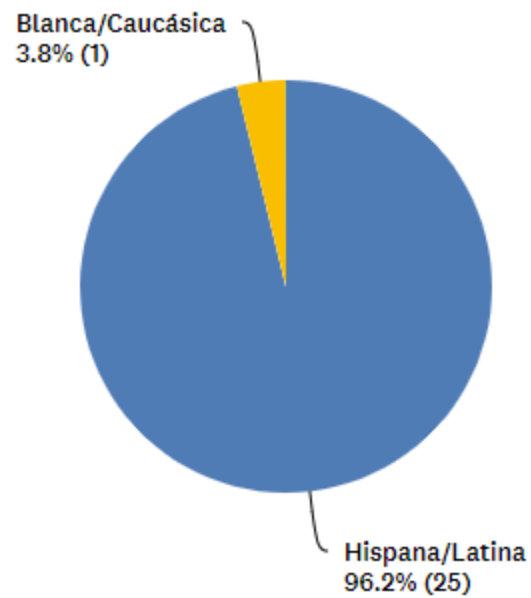


Race/Ethnicity of Participants in English Dominant Focus Groups (N = 139)



*Other response = "Hispanic/Caucasian"

Race/Ethnicity of Participants in Spanish Dominant Focus Groups (N = 26)

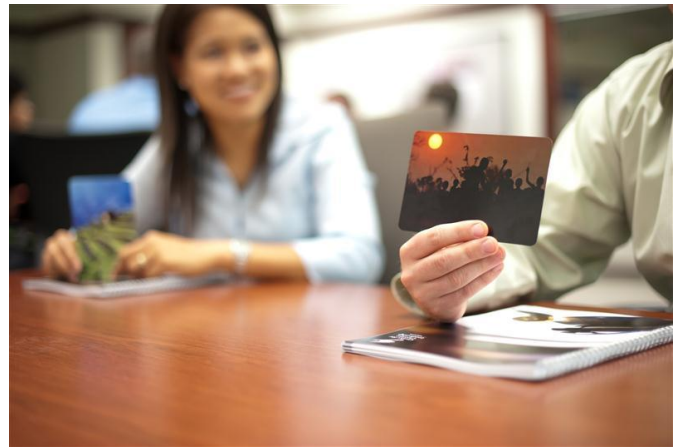


Detailed Findings

Breastfeeding Experiences and Perceptions of Breastfeeding

In an icebreaker discussion at the beginning of each focus group, the moderator spread out a deck of Visual Exploration™ cards on the table containing images of different people, places, and situations. Participants were instructed to browse the cards and select the image that best illustrated their feelings about breastfeeding. This warm-up exercise introduced the topic of breastfeeding and set the tone for the rest of the discussion, creating an atmosphere of intimacy and open sharing.

Participants' photo selections varied widely to match their personal experiences. Some selected images of skulls and crossbones or women isolated from their surroundings. Others selected images of beaches, smiley faces, or baby feet overlaying adult feet. There was a correlation between meeting breastfeeding goals and the tone of the images. Those who had met their goals were more likely to select a positive image; those who had not were more likely to select a negative one.



The following themes emerged from this exercise:

- Disappointment, sadness, and guilt when breastfeeding doesn't work as planned
- A peaceful, relaxing experience when breastfeeding does go as expected
- Bonding between parent and child as part of breastfeeding
- How breastfeeding creates better health for the baby
- How breastfeeding can be difficult and requires hard work
- How breastfeeding can be painful, stressful, and exhausting

"I feel relaxed and at peace when I'm breastfeeding." – Houston

"This just represents intimacy, sort of a bond. That's what I thought when I saw this and how I associate it." – Houston

"I picked this one, the hippo laying down, because breastfeeding is exhausting. So, she kind of looks like laying down, just exhausted." – Houston

"I chose this picture. It's a woman covering her face with a mask. To me, it's just how I felt because I felt ashamed that I couldn't produce." – San Antonio

"I picked this one because the image has a bunch of crazy lights, kind of like neon lights. They're all just kind of mixed together because that's what I felt.... My feelings were like this, just kind of all crazy that I couldn't nurse my baby." – San Antonio



Breastfeeding: What Women Planned and What Happened

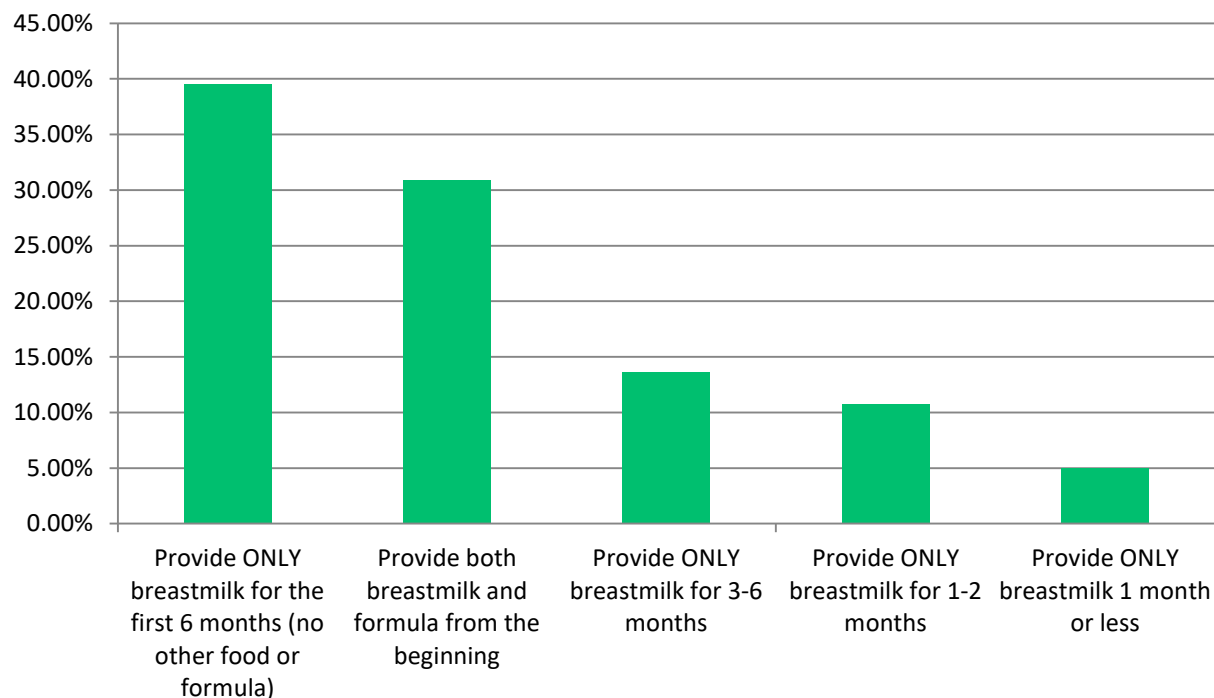
In order to determine trends in breastfeeding plans, participants were first asked what their original plans were, how they changed, why they changed, and to describe their feelings about the change in plans. They were also asked about community and WIC responses to the changes in their plans. Finally, they were asked about their pre-delivery confidence levels about breastfeeding to see if there was a correlation with breastfeeding success.

Pre-Delivery Versus Post-Delivery Feeding Plans for Baby

Most participants stated that, while they were pregnant, they planned to exclusively breastfeed for anywhere between six weeks and two years with a smaller number who planned to mix breast and bottle feeding. In response to the survey that focus group participants took just prior to the groups, 40% of English speaking and 58% of Spanish speaking respondents planned to exclusively breastfeed for six months or more.

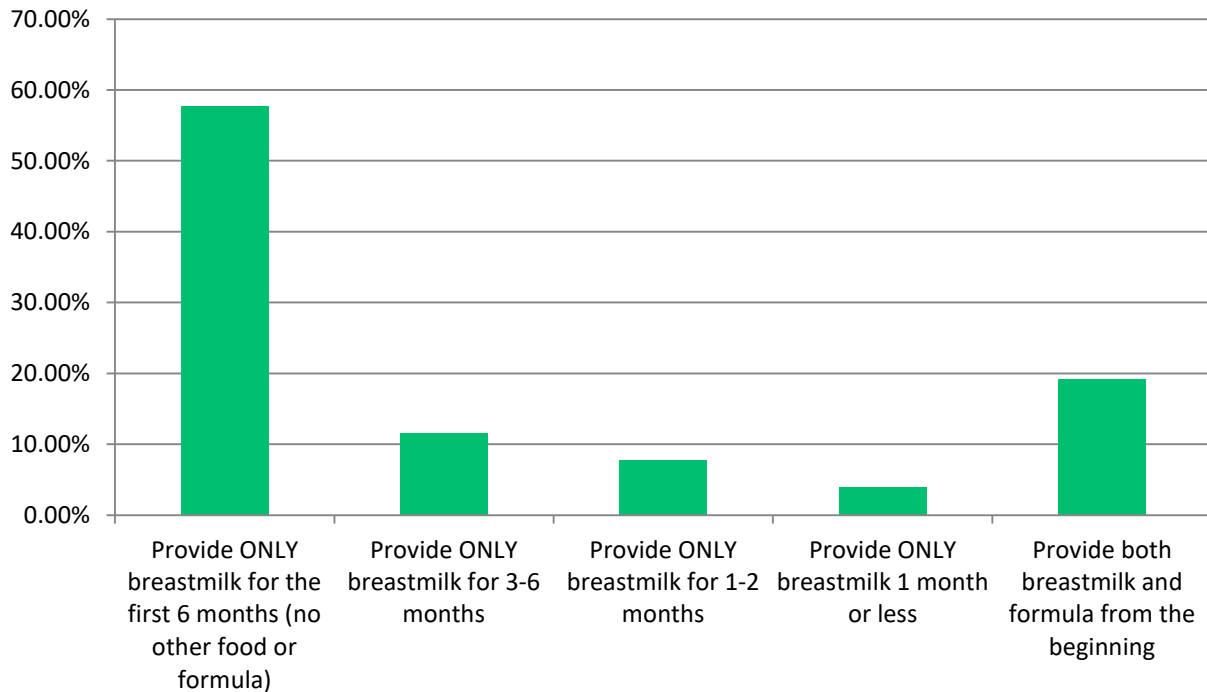
Breastfeeding Plans

*“During your last trimester, how long did you plan on to breastfeed your baby?”
(English-speaking participants, n=139)*



Breastfeeding Plans

“During your last trimester, how long did you plan on to breastfeed your baby?” or “¿En el último trimestre de mi embarazo con este bebé, mi plan fue?” (Spanish-speaking participants, n=26)



Reasons for wanting to breastfeed included:

- It's better for the baby.
- Family or societal expectation
- Formula is expensive.
- Wanting to lose weight

“My plan was that I was going to breastfeed exclusively until I needed to go back to work.” – San Antonio

*“It was always my plan to breastfeed for a year or, if I could, to breastfeed more.”
–Houston*

“Breastfeeding and bottle.” – Houston

“I planned on possibly formula. We bought formula just in case. But we didn't even open it. Breastfeeding was cheaper.” – Dallas

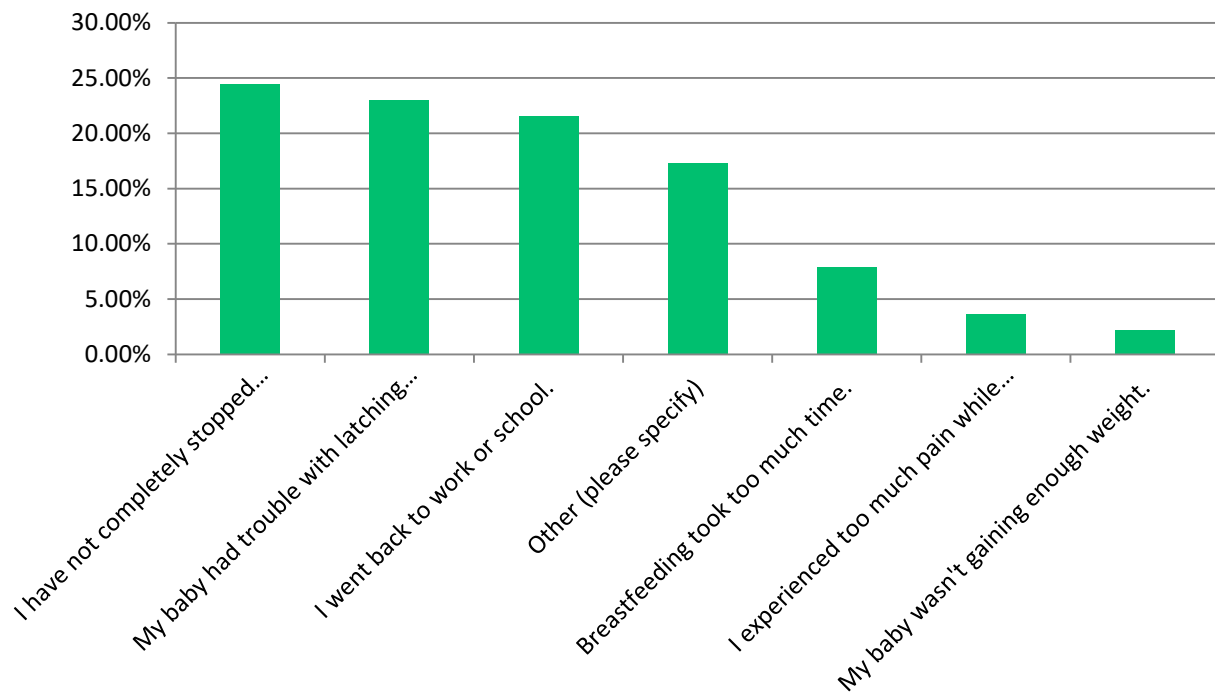


Changes in Plans

All focus group participants at least attempted to initiate breastfeeding in the hospital; however, many did not meet their breastfeeding goals. Those who did not meet their initial breastfeeding goals reported changing their plans for a variety of reasons. In the majority of cases, mothers described the reasons for those changes as being outside of their personal control. On both the pre-group surveys and in the focus groups, the most common reason participants cited was difficulty with latch or milk supply.

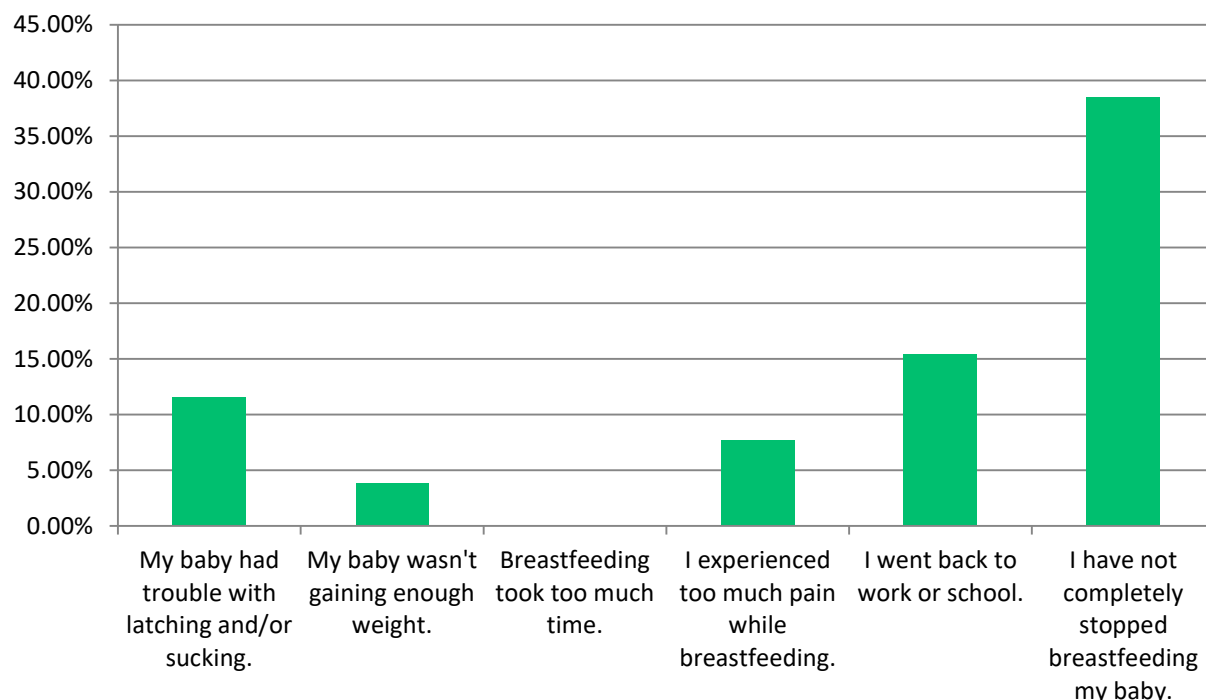
Reasons for Stopping

“What was the main reason you completely stopped breastfeeding?”
(English-speaking participants, n=139)



Reasons for Stopping

“What was the main reason you completely stopped breastfeeding?” or “¿Cuál fue la razón principal por la que dejaste de amamantar por completo?” (Spanish-speaking participants, n=26)



Of the English-speaking survey respondents, 23% said that they stopped breastfeeding because they had trouble with the latch, and 22% said it they quit because they went back to work or school. For Spanish-speaking respondents, problems latching and sucking were also noted (11%), but going back to work or school was a larger factor (15%).

“I had so much trouble with the latching on and I have – I feel bad saying this, but I have no patience and just had a meltdown eventually. She was always hungry after feeding, like I wasn’t producing enough.” – Dallas

“It would hurt me a lot. So then I started pumping and giving him pumped milk for three months, and then I switched to formula.” – Houston

“I didn’t produce enough milk. The baby wasn’t latching on, so my milk dried up.” – Dallas



Many women also cited the need to go back to work as the reason they stopped breastfeeding. While some described a work environment that was ostensibly supportive of pumping, participants also spoke of logistical difficulties and how finding the time to pump at work often made it too difficult for them to continue.

“I breastfed my son up until he was six months, and that was because I started going back to work.” – Houston

“With me going to work, it got hard to find time for me to pump... When I did go back to work, he got detached and didn’t want the nipple anymore.” – Beaumont

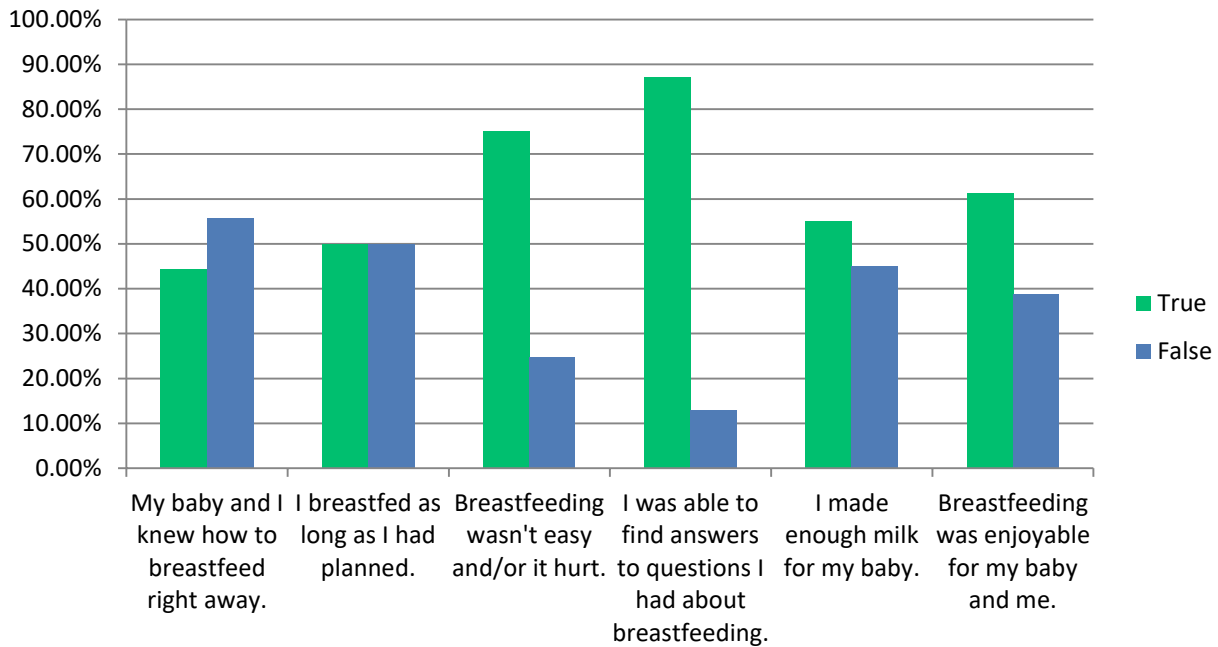
“I wasn’t producing enough milk... I’d be driving and pumping on the way to work or pumping throughout the day at work. I didn’t want my boss to say I wasn’t being productive, so I would have to be working and pumping at the same time in an office. It just wasn’t enough time in the day.” – Tyler

While latching and returning to work may have been identified as the primary reasons women stopped breastfeeding, there were many other challenges reported that may have been contributing factors. On the survey, respondents were asked to reflect back to their breastfeeding experience with their most recent baby and to respond true or false to a list of statements. Almost 45% of all respondents indicated that they did not make enough milk for their baby, and 75% responded that breastfeeding wasn’t easy and/or it hurt. In spite of these findings, 61% of the English-speaking and 73% of the Spanish-speaking respondents answered that breastfeeding was enjoyable for them and the baby. The English-speaking respondents were equally split 50/50 on if they breastfed as long as they planned to, and 68 % of the Spanish speakers indicated that they had. Most women also reported they were able to find answers to their breastfeeding questions.



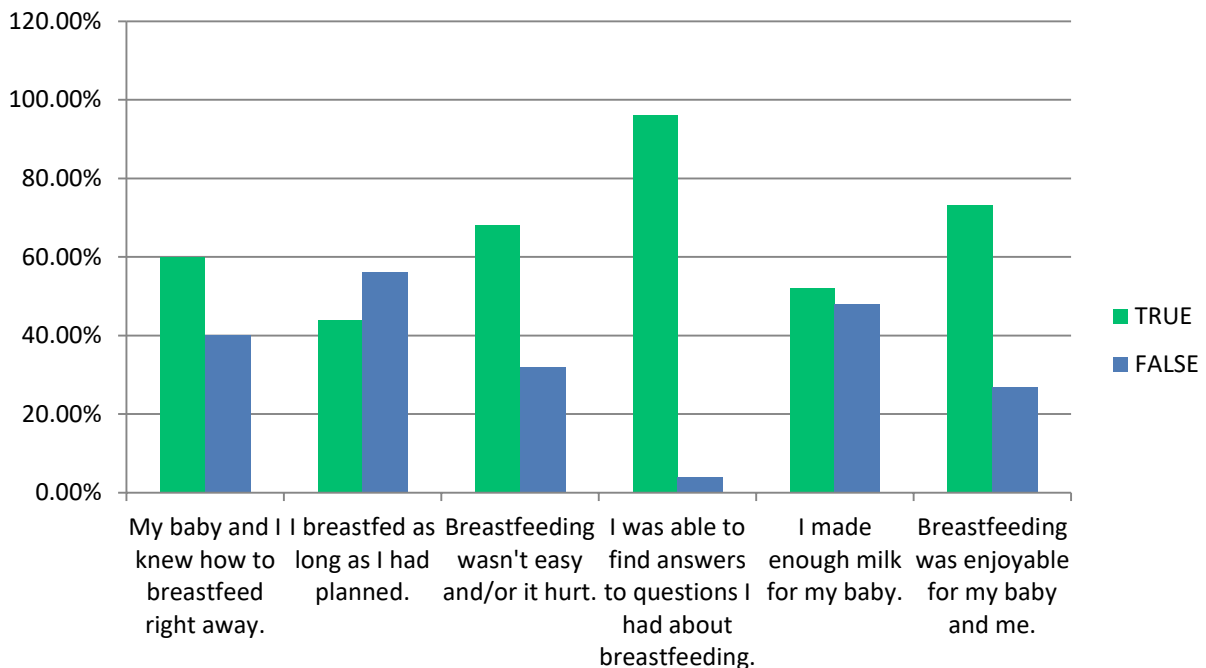
Before You Had Your Baby

*"Think back to after you had your baby and respond to these statements."
(English-speaking participants, n=139)*



Before You Had Your Baby

"Think back to after you had your baby and respond to these statements." or "Recuerda después de que tuviste a este bebé y responde las situaciones que aplican." (Spanish-speaking participants, n=26)



Women cited additional logistical difficulties in meeting their breastfeeding plans. Examples included the need to care for multiple children and economic or transportation factors, including the inability to get to WIC for help.

“My plans changed because I still hadn’t bought my car and the idea was that I was going to leave my daughter at daycare and come back and breastfeed, but I started giving her the bottle.” – Houston

“I think that the stress of taking care of the other two children and the baby just paralyzed my lactation.” – San Antonio

Some women’s breastfeeding plans changed due to lack of support at the hospital. Some participants reported that hospital nurses gave their infants formula despite having a clear statement of intent to breastfeed.

“[The NICU nurses] started with a bottle, so it was hard for me to put him on the breast again. And I did it at home and... I wasn’t getting enough [breast milk] for him, he was still hungry. And so, I stopped breastfeeding. He was two months and a half.” – Houston

A notable number of mothers cited medical reasons for their change in breastfeeding plans, which was most commonly related to having a C-section. In fact, according to the Texas WIC Infant Feeding Practices Survey, 40% of the babies born to mothers enrolled in WIC were born via C-section. In the focus groups, women spoke of pain from their C-sections interfering with their breastfeeding plans, or being in an anesthesia-induced sleep after delivery and waking to find that their baby had already been given formula. Others elected not to breastfeed because they were taking pain medication following the surgery.

“I had an emergency C-section and they gave me anesthesia to knock me out and I didn’t wake up for two to three hours afterwards, and they had already given him formula.” – Houston

Other medical reasons for not breastfeeding included doctors’ recommendations to supplement with formula because of jaundice, the need for the baby to have a feeding tube, or a baby with a tongue tie.

“He had a feeding tube, so it was inconvenient to take the feeding tube out to try to feed him.” – Dallas

“They told me I had to [stop breastfeeding] because he had jaundice. ...So, I started supplementing three days after I had him.” – Houston

“At her two-week checkup, they weren’t satisfied with her weight, so I just went ahead and I started doing the half breast milk and half formula and that helped her.” – San Antonio



Confidence Levels

Focus group participants reported a variety of confidence levels about breastfeeding prior to giving birth, but there was no apparent correlation between their reported prepartum confidence levels and their success with breastfeeding. Some said that they were extremely confident and had breastfed successfully with other children, but then it didn't work out with their most recent baby. Others reported a lack of confidence, but that they were ultimately successful in breastfeeding.

"I had every confidence that it was going to be super easy." – San Antonio

"I felt like I would be able to, but I was afraid that I wouldn't be able to, like I couldn't with my first baby." – McAllen

American Academy of Pediatrics Breastfeeding Recommendations

Mothers expressed mixed reactions as to the feasibility of the American Academy of Pediatrics recommendation to exclusively breastfeed for the first six months of a baby's life, followed by breastfeeding in combination with the introduction of complementary foods until at least 12 months of age, and continuation of breastfeeding for as long as mutually desired by mother and baby. Hispanic participants tended to think it was realistic, while other participants were more likely to say it seemed daunting and unrealistic.

Feelings About Breastfeeding Plans Changing

While many participants were still breastfeeding, those who were not and did not meet their breastfeeding goals had a range of feelings about it. Some participants seemed at ease with the effort that they had made. Others had strong emotions – to the point of tears – when they spoke about it.

The descriptions of their feelings included:

- Believing they had done the best they could
- Sadness
- Guilt, shame, or failure
- Anxiety because of pressure from self and others
- Frustration
- Fear of the financial burden of formula
- Fear that their child was going to get sick
- Relief

Results of the pre-group survey indicate that, of the English-speaking participants who had quit breastfeeding, 47% responded that they did "the best they could" when their breastfeeding

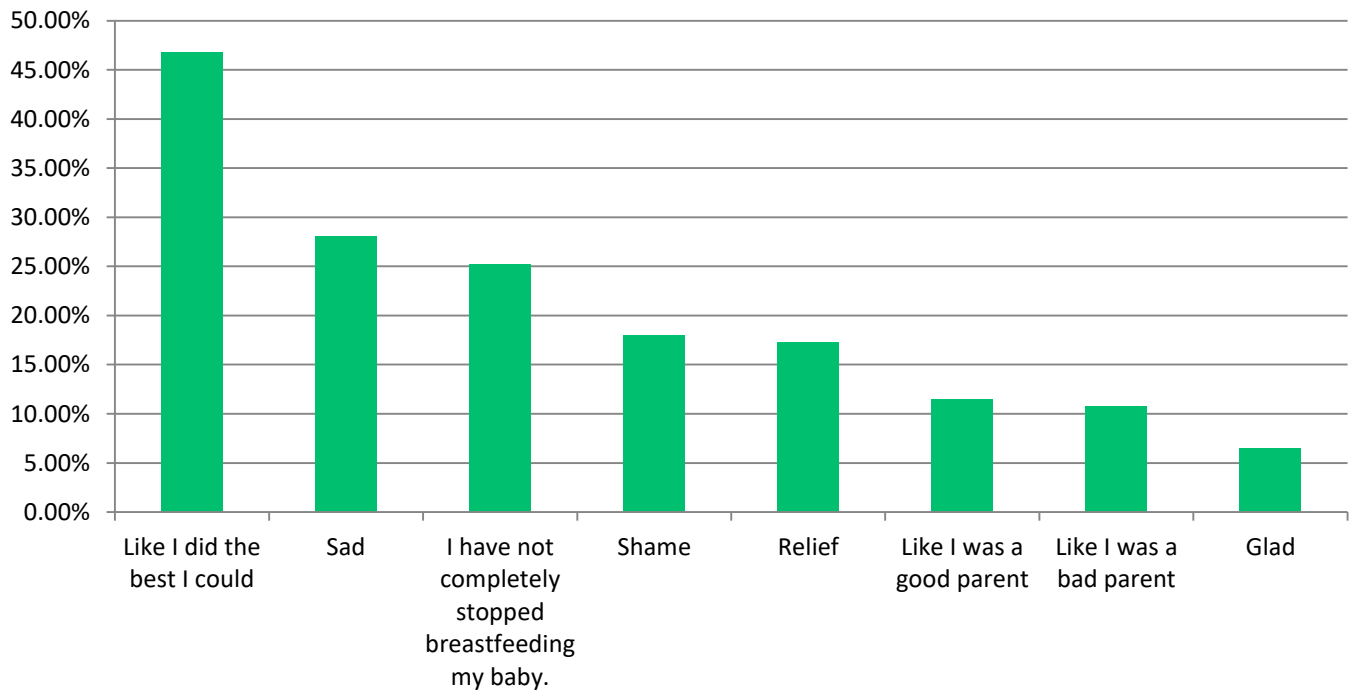


plans changed, 28% responded they were sad, and an equal number (18%) felt either shame, or relief. Of the Spanish-speaking respondents who had quit breastfeeding, 35% answered that they were sad, 30% said they did the best they could an equal number (8%) responded that they felt shame or relief.



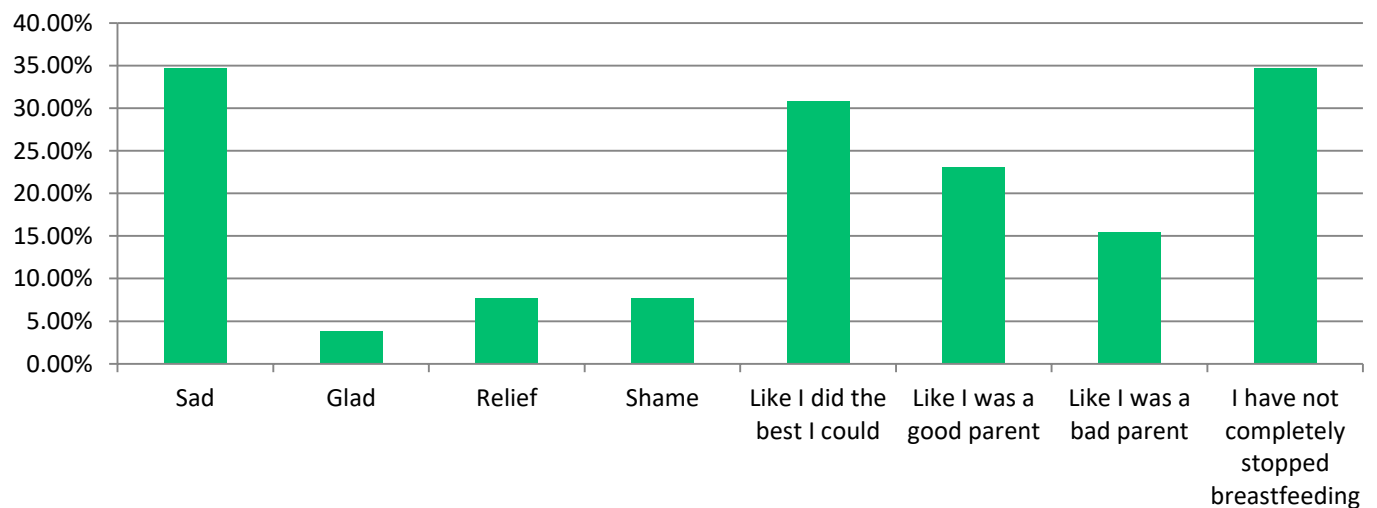
Feelings When Stopping

"When I stopped breastfeeding, I felt:" English-speaking participants, n=139



Feelings When Stopping

"When I stopped breastfeeding, I felt:" or "Cuando dejé de amamantar me sentí (indique todas las que se aplican):" (Spanish-speaking respondents, n=26)



“When I stopped producing, I cried for like three months,” – Beaumont

“I felt disappointed and I was really worried financially.” – Dallas

“I wanted to breastfeed her to make sure she was going to develop better and have overall better health. And I was sorry that I couldn’t do it.” – Houston

“I was sad and relieved because I wanted to do it, but like relieved that the pressure’s off.” – Dallas

“My feelings were that I wasn’t being a good mom. I couldn’t give him what he needed. When I had to give him formula, I felt like I was a failure.” – San Antonio

“I felt impotent, because it was my body that was failing.” – San Antonio

“Sometimes I didn’t want people to come visits me at home because they would see me feeding the baby formula and they go, ‘Why are you giving him formula when he’s so little?’ ” – San Antonio

Participants also expressed strong feelings about the pressure and judgement they perceived from family members, friends, or even strangers in internet groups who shamed them for not breastfeeding.

“I would reach out on Facebook to a lot of mom groups and a lot of other moms will shame you for not breastfeeding.” – Dallas

“People judge. They were saying that he wasn’t going to be as intelligent. That breast milk was better. That the formulas have lots of chemicals.” – Houston

“When I would tell [my husband] that the baby wasn’t getting enough to eat, he’d say, ‘Well, you’re here all day with him.’ I felt like he was thinking that I was there at home, so I should be doing something more successful for the baby than what I was doing... and I wasn’t doing my job as a mom.” – San Antonio

Breastfeeding Education – Understanding the Mechanics of Breastfeeding

Pregnant women are resourceful and motivated and learn how to breastfeed in multiple ways with the help of various people and resources. When women in the focus groups were asked how they learned the mechanics of breastfeeding, their most common response was through the nurses and lactation specialists at the hospital. Then, if they were having problems with breastfeeding after they got home from the hospital, they sought help from specialists, family, friends, online, or from WIC.

When focus group researchers probed to explore what prepared mothers to breastfeed before getting to the hospital, some explained that they turned to family members and friends to help them understand breastfeeding. However, many used the internet as their main source of



education. Across all groups, women relied on their own breastfeeding research. “Googling” was extremely common for both the English- and Spanish-speaking participants. This was verified in survey participants took prior to the focus groups where 85% of the English-speaking respondents and 90% of the Spanish-speaking respondents indicated they use Google specifically when they use the internet to search for information on breastfeeding.

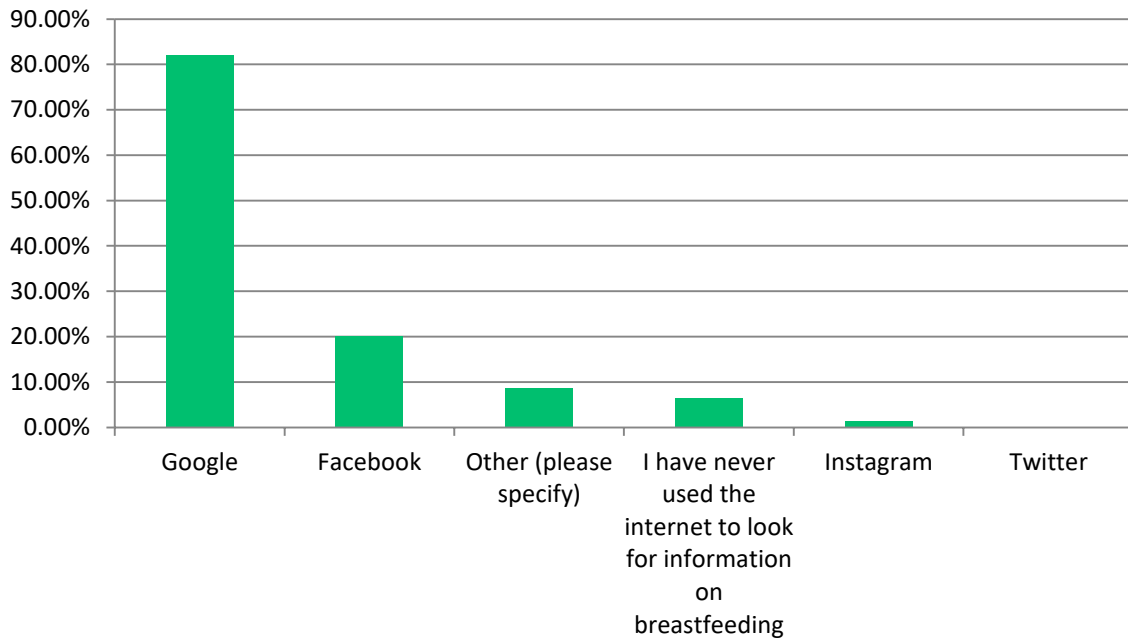
The use of Facebook groups, mom blogs, and YouTube how-to videos is also pervasive and is one of the main ways in which mothers reported that they learn about breastfeeding. Some spoke specifically about using the videos on YouTube showing moms visually solving breastfeeding problems, such as latch, positioning, and pumping. Many use Facebook mom groups to connect with and learn from other mothers about breastfeeding. Participants also mentioned BabyCenter, La Leche League, a variety of online forums, and occasionally Pinterest.

When focus group participants were asked if they attended any non-WIC breastfeeding classes at hospitals, schools or churches while pregnant, very few indicated that they had.



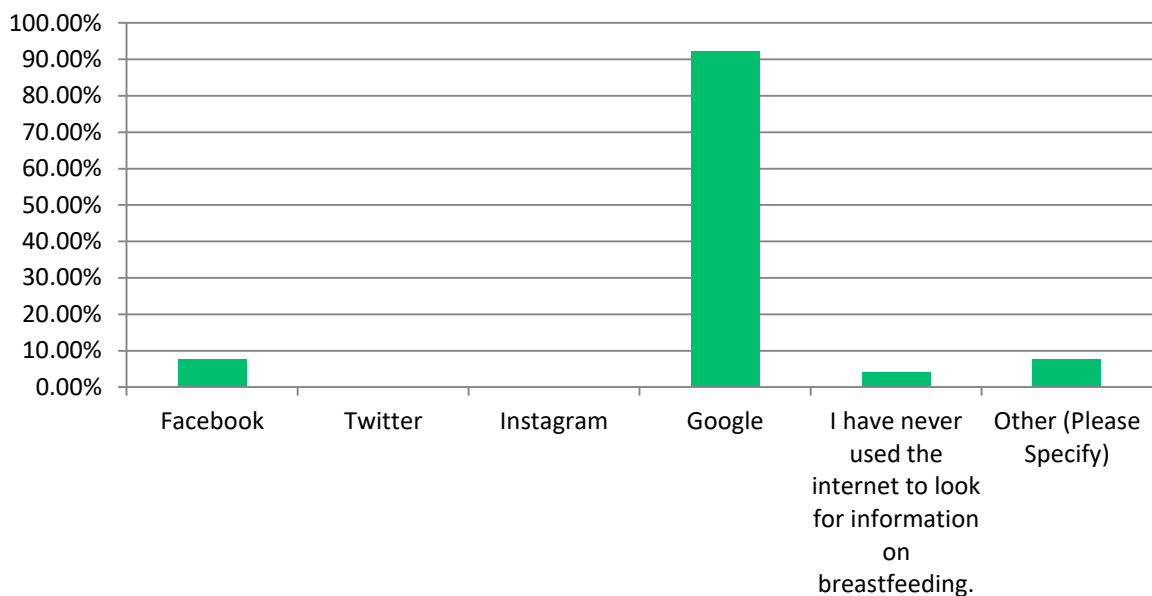
Internet Breastfeeding Resources

"When I use the internet to look for information on breastfeeding, I most often use:"
(English-speaking participants, n=139)



Internet Breastfeeding Resources

"When I use the internet to look for information on breastfeeding, I most often use:" or *"Cuando uso la internet para buscar información acerca de la lactancia, usualmente uso:"*
(Spanish-speaking participants, n=26)



“There’s good video and instruction on You Tube. They have the moms showing you – carrying the baby, how to latch the baby. That’s how I learned.” – Houston

“Google. I would start typing a question, and it would fill it out because it had been asked before. It made me feel a little better to know I wasn’t the only one.” – Dallas

“Google is my best friend.” – Tyler

“I followed a bunch of mom blogs and mom vlogs on YouTube, and they would tell me stuff like the best things to use for my child, the best feeding tips, the best things to do while a child is fussing or clustering.” – Dallas

“My mom helped a lot. And then, when I got to the hospital, the nurse did.” – Houston

“I used Google and YouTube.” – Houston

“I have an older sister and she already has four kids, so she’s been like my guidance through everything.” – Houston

“I just learned everything the hard way, on my own.” – Beaumont

“A nurse at the hospital.” – Beaumont

Education: WIC Participants

Women enrolled in WIC are fortunate to have WIC as their main source of information and education about breastfeeding. Whether it was a group class, a counseling session with a lactation specialist such as a peer counselor, an online class, or even a phone call, focus group participants said that WIC helped to educate them on breastfeeding mechanics. Mothers spoke highly of the breastfeeding sessions with staff at WIC and were grateful for the assistance. They also viewed peer counselors and lactation specialists as competent and helpful.

Classes have traditionally been a hallmark of breastfeeding education in WIC clinics. In recent years, WIC has shifted to hosting more convenient online classes and fewer classes at clinics. Yet, across the state, many agencies still do offer breastfeeding classes. All WIC programs provide breastfeeding education – either group classes, online classes, or one-on-one counseling with a nutritionist or a breastfeeding specialist (e.g., peer counselor or lactation specialist). It was clear from the feedback of focus group participants that peer counselors and other WIC staff are making a difference.



When participants had attended WIC group classes, either when their older children were babies or for their most recent baby, they viewed them positively. Many remembered using dolls to practice breastfeeding and overall had compliments about the classes. Even if they had



attended class several times before and were reluctant to go again, most reported that they learned something new each time and were glad to have attended. However, some women said their breastfeeding education at WIC consisted of watching a video, which they did not feel was sufficient.

"I've been to that class three times, with each of my kids. But each time it's refreshing. Then this last time, it had a list comparing all the things in breast milk compared to formula, and that was cool to see because, even though I already knew it, seeing it physically laid out for me is cool." – San Antonio

"The classes I took were through the internet. I learn more when they're telling me one-on-one, when I get advice face-to-face." – McAllen

"I did my class online. It was just the basics. I kind of already knew what it was, but it's just the basis to get started." – McAllen

"Our classes aren't really interactive. We have a board set up back there. Go read the board and we'll call you when your card is ready." – Tyler

"[WIC's mandatory breastfeeding class] was really good. It brushed me up on a lot of things and there were some new things that I didn't remember [from] before." – San Antonio

"I'm so glad I went because you really don't know what the heck you're in for." – San Antonio

Breastfeeding support from WIC did not stop at learning how to breastfeed. Some participants said they were invited to call the WIC clinic after their babies were born if they had any breastfeeding problems. Receiving phone calls from breastfeeding counselors after delivery was not uncommon. Many mothers reported that they went to the WIC clinic to get breastfeeding help with their babies and, for many, breastfeeding was successful because of this assistance. There were numerous stories in the focus groups of WIC breastfeeding counselors who helped mothers overcome breastfeeding difficulties. In one case, woman felt that the WIC breastfeeding counselor had saved her life by recognizing postpartum depression and putting aside breastfeeding concerns to focus on the real issue at hand.

In fact, a number of women in the focus groups discussed how they suffered from postpartum depression. WIC staff may be some of the only trusted professionals these women come in contact with who can connect them to appropriate resources.

"When I went to WIC, she immediately gave me a postpartum [support] number to call and said, 'When you feel down, call this number.' She didn't even continue on with anything. She just went right in and got a breast pump and said, 'If you need me, to help, if you want to continue on getting her latched, I'm here 100%. If not, we'll use other [methods].' She recognized right away that I needed help. Oh my God, this lady is so awesome." – San Antonio



"I had a lactation specialist at WIC who helped me a lot. She put me in a different position. She got my nipple and she got the baby's head and I didn't feel any pain. And after that, the baby ate and she left me [alone to feed]. And I said, 'Why didn't they tell me this with all the other children?' " – San Antonio

"My baby gained three ounces. He was a male, the counselor. I was nervous about that, but he was so warm and loving about it. He was so excited. He gave me such confidence. It was a really good experience." – San Antonio



FIND A WIC OFFICE

"She was the one that saved my lactation. She sat there and showed me the proper way to latch on. And we spent 45 minutes in that office teaching me how to do it. From that time on, I had no pain. It was night and day difference." – Dallas

"WIC helped a lot, yeah. ...[In] the beginning when I first applied, she showed me how to do it, and then she gave me a whole bunch of... books and flyers that I went through and it showed me what I could do to produce more milk. I actually thought that I wasn't producing enough milk. Now that I have the baby, so when I went back to my appointment ...to re-apply... she gave me a specific flyer that helped when I thought I couldn't make enough. I read it and it says that as much as you latch your baby to your chest, you will produce more milk. So the information given to me was actually very helpful." – Houston

"My lactation consultant at WIC was like better than my husband, because she would call me every week. 'Do you need this? I can do this for you.'" – San Antonio

"Liked being able to call the WIC office to ask breastfeeding questions." – Dallas

"They gave us that cell phone number and said, 'Call anytime, even if its 3:00 in the morning.'" – Tyler

Breastfeeding support did vary by location and, in some locations, WIC was barely mentioned as a source of breastfeeding education other than a few participants who mentioned WIC online classes.



Education: Non-WIC Participants

In the focus groups of women not enrolled in WIC, participants had much less formal education about the mechanics of breastfeeding prior to having their most recent baby. Family members, such as mothers and sisters, were mentioned most frequently as the people who helped them learn breastfeeding mechanics. After delivery, nurses and lactation consultants in the hospital were credited by many, but not all, as helpful. Doctors, midwives, and partners were mentioned infrequently. In Tyler, a woman who qualified for WIC but was not currently enrolled, explained how she was charged several hundred dollars for breastfeeding help at the hospital. This caused an economic hardship for her family. Many participants who were not enrolled in WIC were surprised to hear about the breastfeeding support that WIC offers, often commenting that they wished they had known about it.

“If I had known I could have gone to a lactation consultant, [I would have gone to WIC].”
– Tyler



Experience with WIC

Responses varied widely throughout the state when focus group participants were asked how WIC responded when their breastfeeding plans changed and they needed formula. Many mothers in Dallas and Houston expressed difficulty when going to WIC to ask for formula after making the decision to stop or cut back on breastfeeding. They stated they were pressured, shamed, made to feel guilty, and forced or pushed to continue to try breastfeeding again. Although some participants did say that they were willingly given formula when they explained their circumstances, the overall reaction to this question was very strong and decisively negative in both Dallas and Houston.

“They give you the third degree.” – Dallas

“They make you feel guilty.” – Houston

“They try to help. It was uncomfortable when they take your breast out.” – Houston

“I think that’s what makes people mad when they keep pushing and pushing and pushing and you’re like OK, I’m an adult.” – Houston

However, in other parts of the state, negative sentiment was not nearly as strong and participants described a more positive experience when their breastfeeding plans changed and they needed formula. Fewer mothers commented about feeling shamed, guilty, or embarrassed as a result of the interactions with WIC. There were more expressions of appreciation for the help from the WIC counselors. While some still felt pressure to continue breastfeeding, they knew it was better for the baby and didn’t feel it was overbearing pressure. Some mentioned getting formula easily.

“I think they lean toward it being easier to choose formula.” – San Antonio

“They were helpful.” – San Antonio

“I felt some pressure but not judgement.” – McAllen

“I was treated nicely.” – McAllen

In Tyler and Beaumont, feelings among focus group participants were mixed. Some felt encouraged and helped by WIC; others felt more pushed or even shamed and guilty.

*“They encourage it, but once I said, ‘I’m done,’ they were like, ‘Okay.’ There was no more pushing because I went in there crying, many, many days, saying, ‘Help. I can’t do this.’”
– Tyler*

“They didn’t push, they helped.” – Tyler



“When I asked for a pump, she was pushy. I said, ‘At least I was still giving my baby breast milk.’” – Tyler

“They want to help you.” – Beaumont

“It was like an interrogation.” – Beaumont

Some women in focus groups thought that the WIC staff should be less judgmental, more open-minded, sensitive and understanding, and less forceful about breastfeeding. There was strong sentiment that all mothers are trying to do their best, that there are many reasons why some choose not to or cannot breastfeed, and that all mothers should be treated equally. Even participants that were highly successful at breastfeeding agreed that everyone should be treated equally at WIC.

“Not to be so pushy. Be more sensitive.” – Dallas



WIC Materials and Benefits

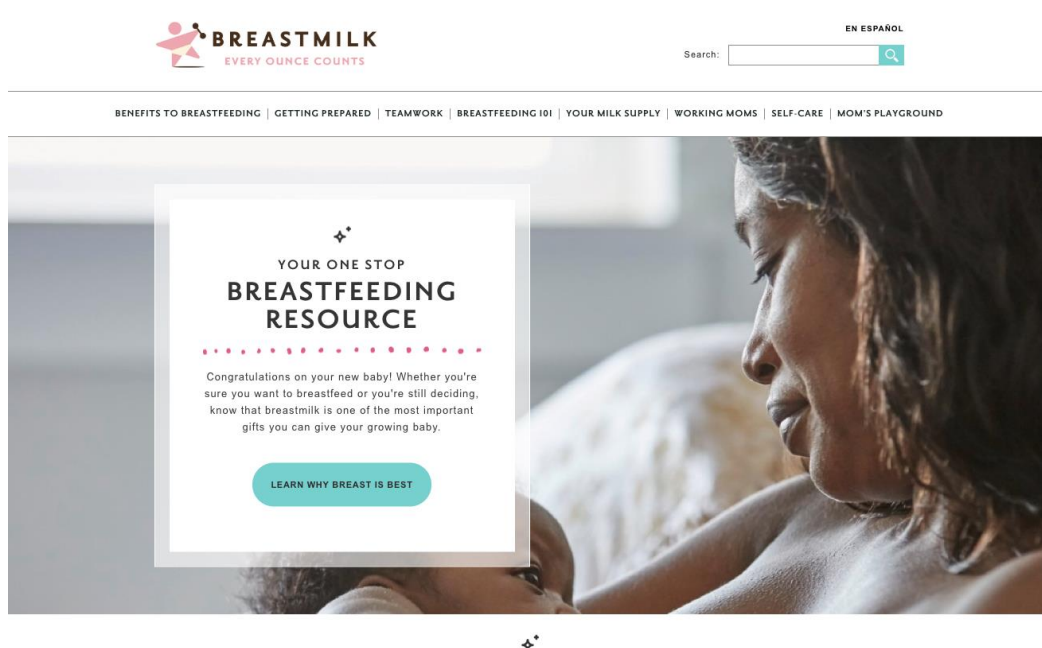
Women in focus groups all over the state had received the breastfeeding backpack. Most participants recalled the pamphlets, DVD, and other materials in it. Many especially liked the keychain and plastic cards. A notable number also remembered seeing a poster which uses a Lego-style graphic to demonstrate the benefits of breast milk versus formula. Participants also talked about learning about the size of the baby's stomach, which helped them to understand why the baby did not need much milk in the beginning. In a few focus groups, participants said they learned about the concept of supply and demand and the role that it plays in milk production. They understood that, the more you breastfeed, the more milk you will produce.

When prompted, less than a handful of all participants remembered seeing or hearing about the website (BreastmilkCounts.com) or the 1-800 number; consequentially, very few had visited the website or called the help line.

Contact Us



Breast pump usage was common among focus group participants, and breast pumps are considered a great WIC benefit. WIC policy is to offer manual and single-user electric pumps for any reason. However, some women discussed difficulty and confusion around acquiring a breast pump through WIC; some indicated they had to buy their own pumps as they had been denied by WIC.



"They don't help you. They've never given it to me. They told me I had to talk to Medicaid...I had to go buy one because I couldn't wait for it, I was getting a fever, so I had to get one to be able to pump." – Houston

*"The breast pump [is a great WIC benefit] because it helped me if I was on the go or if the baby was with the babysitter, I could give him breast milk either way."
– San Antonio*

WIC Clinic Environment

When asked about the WIC clinic environment, answers from focus group participants varied widely. Some groups expressed mostly positive opinions, others mostly negative.

The negative comment most frequently mentioned was long wait times. Many said that a two-hour wait was standard. Other negatives were rude staff as well as dirty and crowded clinics. Getting newborn babies, some just out of NICU, out to the clinic was a real issue for some mothers, especially to crowded clinics where they might have to interact with other children who could be contagious with something. As illustrated in the following quotes, customer service is not consistent around the state – or even sometimes in the same local agency.

*"You have to wait a really long time, and then when it's your turn it goes really fast."
– Houston*

"They're super caring sweet ladies. I just love it now." – San Antonio

"There's nothing for the kids to do." – San Antonio

"It's like a second family." – Tyler

"I didn't go for 2 years because of that rude lady." – Tyler

"They should have secret shoppers." – Tyler

"She hardly ever talks to you or greets you or makes up a conversation. Maybe that's why people don't want to go back." – McAllen

"Yeah they help you a lot." – McAllen



Hospital Experiences

Focus group participants reported a variety of hospital breastfeeding experiences depending on hospital and location. For some, it was extremely supportive, while others stated that they did not receive the support that they needed. Yet overall, nurses and lactation consultants in the hospital were credited with being the key breastfeeding educators in every community, and many described them as extremely helpful and dedicated.

“My baby didn’t want to eat. What the nurse did, the nurse who arrived, she brought a little syringe and spoon. ...She showed me how to stimulate.” – McAllen

“I had two lactation consultants that made it very clear that I could reach them on their phone any time of the day that I needed them to come in.” – Houston

“Skin to skin contact as soon as the baby was delivered. I loved it.” – San Antonio

As mentioned previously, there were also reports from focus group participants of hospitals that did not support breastfeeding and may even have given formula without the mother’s consent.

“I did pump because I had to be far away from her for three days—she was in another hospital. And I didn’t want formula, so I would send her my breast milk. I told them to, please, please, give her that colostrum first because it’s important.... They had told me that they had given it to the baby. After that, I realized that they had not given it to her, that it was still there.” – San Antonio

“One of [the nurses] ended up telling me I had to bottle feed.” – Houston

“I told every nurse and doctor [in the NICU], ‘I’m gonna stay here on demand. I understand what that means.’ And they were very ugly to me. ... they told me that I couldn’t sleep there, that I couldn’t stay there, they would come by and check if I was nodding off sitting in the chair.” – Dallas

Participants who introduced formula to their babies at the hospital reported the following reasons:

- Having a C-section
- Baby was in the NICU
- Nurses encouraged formula or gave formula when it wasn’t requested
- The mother was taking medication that wasn’t good for the baby



"The birth control that I'm on, I can't breastfeed." – Beaumont

"I was in the NICU. He started with the little feeding tube and then they just started [the bottle]. I asked them if I could put him on the breast, but they didn't want [me to]."
– Houston

"I noticed that I would tell the nurses, when she wakes up bring her so I can feed her, and they would just give her a bottle." – Houston

"For me it was that nurses were like, 'I've had enough. We'll just do a bottle of formula.' I'm like, 'Okay.' That's what discouraged me also, so I'm like, 'Okay, I'll just do formula at home, too.'" – McAllen

When asked what could have made their hospital experiences better, some participants wanted nurses to be more respectful of their bodies and decisions, or to give more information and assistance with learning how to use a breast pump.

"I wish I would have known a little bit more about the breast pump because I had to go back to work." – Dallas

"Talk to you before they just grab your boob and doing it for you." – Houston



Going Home

When asked what happened when they got home from the hospital, many focus group participants found that they needed extra lactation support then. Common problems included difficulty with latch, having sore or overly full breasts, trying to figure out nipple shields or pumping, and balancing the needs of other children.

"I cried. I cried and cried and then finally just gave up." – Dallas

*"During the hospital stay, they would latch on, but at home, they wouldn't latch on."
– McAllen*

"Well you know when you leave the hospital, it's a little different because you don't have the nurses helping you anymore. You have to do everything on your own." – Houston

When asked what kinds of support that they found or wanted from their communities, many mothers reported having gotten support from family members or from WIC. It was very clear that many participants either wanted or got support from their babies' fathers specifically and expressed that this was very important to them. Women often mentioned online groups, and a few attended in-person community groups like La Leche League to support them.

"WIC offers a lot of consultants and help and stuff. They even have a lot of hotlines that you can call and things like that." – Dallas

"My husband helped me a lot. He took some days off and he was there helping me. I think that's part of the reason why it was easy going." – Houston

"La Leche League was very, very supportive." – Dallas



Social Media and Traditional Media Use

In order to determine the best methods for developing media outreach campaigns, participants in focus groups in all areas were asked about their social and traditional media usage. Participants across all groups indicated an overall trend of using social and online media far more frequently than traditional television or radio.

Social Media Use Trends

Social media use was pervasive amongst participants – particularly use of Facebook, which is the go-to platform for those who want to communicate with women who qualify or are enrolled in WIC. Even those who were unlikely to post or share on Facebook stated that they turn to it to find support as a mother, connection with family members, or to keep in touch with what’s happening in the community.



Of all available platforms, participants identified the following ones, which are listed from most to least popular based on the number of responses:

- Facebook
- Instagram
- Snapchat
- Pinterest
- WhatsApp

Of all of these, mothers turn to Facebook the most for breastfeeding help.

“Once I actually started breastfeeding when he got here, I followed something on Facebook—it’s breastfeeding something—and it made me feel a little bit more comfortable, and I could see how they were doing it.” – Tyler

“I don’t really find anything about parenting on Snapchat. It’s more Facebook than anything.” – San Antonio

“I looked on Facebook groups. Because you know I like to talk to other moms.” – Beaumont

“Mainly Facebook. I have others, but Facebook’s the main one.” – McAllen



Participants discussed a variety of ways that they use Facebook. For the purposes of breastfeeding support, many use Facebook mom groups to get lactation information and guidance. Some of these groups include:

- La Leche League
- Latina Moms
- Queen Moms
- SuperMoms
- Breastfeeding Mamas
- Mommy LLC
- Tyler Crunchy Moms Group
- Mommy's Circle

"I joined La Leche League on Facebook ... They have leaders on there that are educators on things like that topic of breastfeeding." – San Antonio

"On Facebook, there are groups that are like Latina mothers. You can ask a question about nursing, or if someone is struggling with something and a lot of moms comment and answer your questions and recommendations." – San Antonio

"I use Facebook. I know there's a group – I don't know if anybody's in it – called Queen Moms." – McAllen

"SuperMoms is huge." – Dallas

A few participants were leery of Facebook either because of privacy concerns or concerns about getting advice from untrained people.

"All everyone does on Facebook is judge everyone, criticize everyone, put everyone down. So, I'm not going to give my personal business saying, hey you know, can you give me some advice? I'm going to call a doctor or go see a doctor or go to the WIC office before I do that." – Dallas

"Some of those mom pages, it seems like they just have a bunch of very natural drama." – Dallas



TV and Radio Consumption

Participants were asked about their video and music consumption trends. Overall, it was very clear that more media is being consumed online than using traditional broadcast media. Most participants stated that they only rarely watch television and only listen to the radio when they are in the car.

"I don't even have time to watch TV." – McAllen

*"I was staying in a hotel the other day and that was literally the first time in years that I've watched cable."
– San Antonio*



Instead of watching television, most participants chose the following streaming media platforms, listed from more to less popular:

- YouTube
- Netflix
- Hulu
- Amazon Prime
- Others, such as Redbox or Movies on Demand

Most focus group participants stated that they watch the commercial-included versions of Hulu, YouTube, or Amazon Prime rather than paying for the premium services. When asked about the best platforms to reach them, participants identified Hulu and YouTube primarily.

"YouTube. A lot of streaming on YouTube." – San Antonio

"Hulu, because there's still commercials on Hulu, at least on my price. ... I think we went for the cheaper one." – San Antonio

*"We actually love and pay attention to Hulu commercials because that's our only TV."
– San Antonio*

Participants stated that they may listen to broadcast radio when driving, but are more likely to use the following services for music:

- Pandora
- Spotify
- YouTube
- Apple or Amazon Music Services



Participants mostly identified Pandora and Spotify as their primary music sources and listen mostly to advertisement-included versions of those platforms too.

"I don't listen to anything but Pandora anymore." – San Antonio

"My favorite thing about Pandora is when it has the 'start your hour free.' It's one ad for the whole hour, so if you guys had a one hour free for WIC, I would definitely listen to that." – San Antonio

"I listen to Pandora every day." – Dallas

Private Facebook Groups for Breastfeeding Support

Participants in Dallas and Houston were shown screenshots from a closed Facebook group for Beaumont/Port Arthur that offers mothers the chance to chat and is moderated by WIC lactation consultants who can comment if any information is false or misleading and interrupt conversations if needed.

Participants responded very positively to the concept of having a group moderated by experts and stated that they would be likely to post in the group.

"The group I'm was in, I joined because of that. So, I'm getting answers from esteemed people and not just other moms." – Dallas

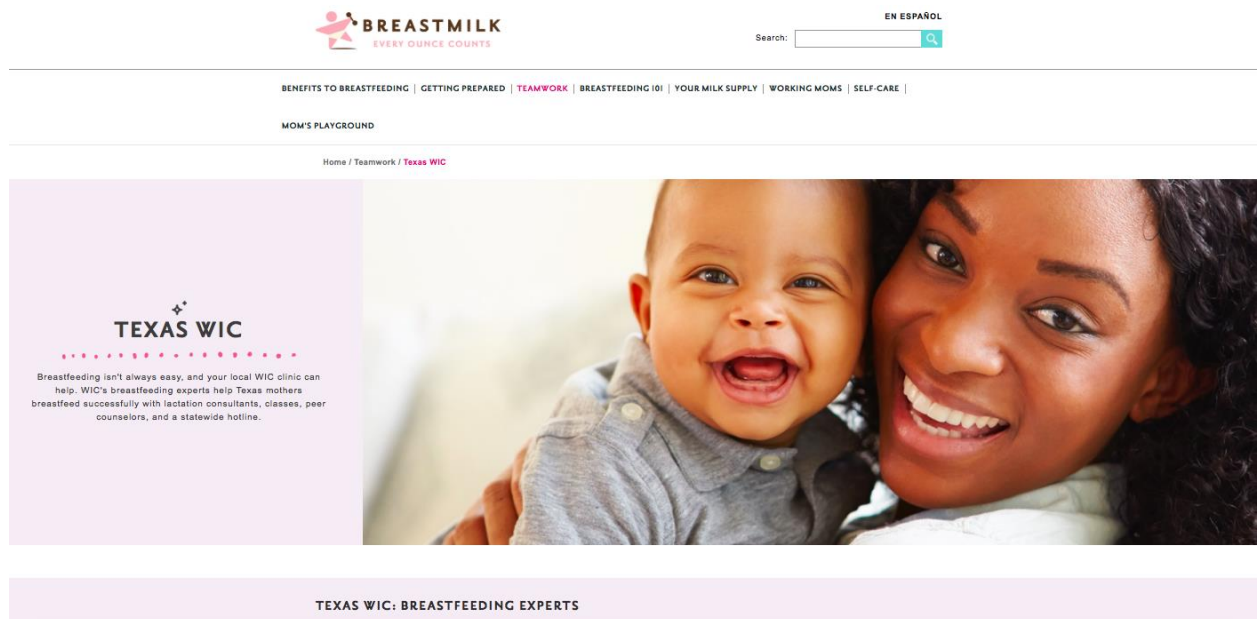
"I would be interested in reading it and seeing what it's about." – Houston

"I'd share it. Because there's a lot of new moms that are breastfeeding for the first time." – Houston



BreastmilkCounts.com

After reviewing the site for about 5 minutes, focus group attendees were asked for their reactions. In every group, the consensus was overwhelmingly positive – on the look of the site to all of the information it offers. Many women commented positively about the sections on self-care, returning to work, child care, dads, and grandmas. The site made such an impression on participants that, during the focus group wrap-up, it was frequently mentioned as the most important takeaway from the session.



Unfortunately, only a few women in all the focus groups had ever seen the website prior to the focus group date. Many lamented that it would have helped them breastfeed and questioned why they did not know about it.

"It has everything you need." – Dallas

"I like the self care." – Dallas

"I like the child care tips." – Dallas

"Very Informative. I like the pictures." – Dallas

"Working mom tips" – Dallas

"I think, if they would've told me about it, I would've used it because I look for everything online. It would have been a huge help." – McAllen

"I like that it has articles for dad, for grandma, because sometimes you want to tell your relatives something, but you don't want to come across rude, so you can say, read this." – Houston

"It catches your attention, doesn't look boring. Makes you want to breastfeed your baby." – Houston

"They should include like a pamphlet at hospital. Didn't know about this site because I'm like, where has this been all my life?" – Houston

"That there's information about mom and what's going on with you as a woman." – Houston

"It makes you want to read it. It's interesting." – San Antonio

"Gives you a voice to use when talking to professionals." – Beaumont

"I would have used it a lot." – Tyler



Promotion of BreastmilkCounts.com

Although the website is currently listed on numerous pamphlets and other WIC materials, it does not appear to be catching the eye of WIC participants. Only a few women in the focus groups vaguely remembered “seeing it somewhere.”

Many women suggested that they needed to be shown BreastmilkCounts.com at the WIC clinic by the staff at their prenatal visits. Sitting in the waiting room would be a great time read the information on the site. While discussing breastfeeding, staff should have them take out their phones, go to the site, and review the information with them.

Others suggested that WIC could text them the link, so they could just click on it easily. They would also like the Texas Lactation Support Hotline number texted to them for easy access after their baby is born.

Some wondered why BreastmilkCounts.com wasn’t included on TexasWIC.org where they take their online classes.

Other predominant themes and suggestions for advertising BreastmilkCounts.com included: YouTube, Facebook, Pandora, doctors’ offices, pharmacies, billboards, hospitals, WIC offices, TANF (food stamp) offices, posters, refrigerator magnets, and on the WIC benefits card. Almost all focus group participants emphasized that the advertising must be on social media with a clickable link to the website for easy access.

“When you go to your consultation [they should say], ‘Take your phone out. Everybody take your phone out. Right now. Let’s do this.’” – McAllen

“When they give me that backpack of stuff. That would be a great opportunity for her to tell you about it.” – Tyler

“I didn’t know that some WIC classes are nothing but a certificate that you have to do online. You might as well just link all of that together. It’s already in the internet. You might as well link it.” – Houston

“I’ve never seen this and I do my classes, my WIC classes, online. And I’ve never came across this.” – Houston



Knowledge of WIC Lactation Services – Lactation Support Hotline, Lactation Centers

Overwhelmingly, the women who participated in the focus groups did not know about the various Lactation Centers or the 1-800 number available to them. When these resources were discussed, they had an extremely positive reaction and said they wished they had known sooner. However, some admitted they liked the idea of a Lactation Center, but would be unlikely to use it unless it was close to their home. In all the groups there were only a handful of women who had either been to a Lactation Center or called the 1-800 number; of those, two who did call hung up because they were on the line waiting for so long.

“I went there. They weigh the baby. I breastfeed him. Then they weighed him again. Then they told me, ‘Yes you are producing.’ This is when I felt more encouraged, more positive about lactating.” – McAllen

“If I’d had known about the 1-800 number, it would have been a game changer. I had no idea.” – Tyler

If I’d have known, I’d still be breastfeeding.” – Beaumont

American Academy of Pediatrics Breastfeeding Recommendations

Mothers expressed mixed reactions as to the feasibility of The American Academy of Pediatrics recommendation to exclusively breastfeed for the first six months of a baby's life, followed by breastfeeding in combination with the introduction of complementary foods until at least 12 months of age, and continuation of breastfeeding for as long as mutually desired by mother and baby. Hispanic participants tended to think it was realistic, while other participants were more likely to say it seemed daunting and unrealistic.

WIC Magnet to Promote Hotline and Website

Participants in Houston, San Antonio, McAllen, Tyler, and Beaumont were shown an example of a refrigerator magnet and asked if they would use a magnet that included the hotline number and www.breastmilkcounts.org. Most participants responded that this would be helpful.

“I think a magnet would be great.” – San Antonio

“I think it’s awesome.” – San Antonio



WIC Business Card to Promote Hotline and Website

Participants in Houston, San Antonio, and McAllen were shown a business card listing breastfeeding facts, including their right to breastfeed in public, and asked if they would find value in a similar card with the website and Texas Lactation Support Hotline listed on it. Most participants responded that this would not be as helpful as a refrigerator magnet.

“Most of the time we carry cards and we just leave them in our wallets.” – San Antonio

“I lose those.” – San Antonio

Facebook Media Posts

Participants in all locations were shown samples of Facebook posts developed for the South Plains WIC Facebook. They were asked to select their favorites and cross out those that they liked the least. Then, they were asked to discuss what they liked or disliked about the posts.

Participants overall responded well to photos they thought were “relatable” or “funny” and depicted breastfeeding as they experienced it. They also responded positively to educational facts and motivational statements.

The English Facebook posts are included on the following two pages.



A



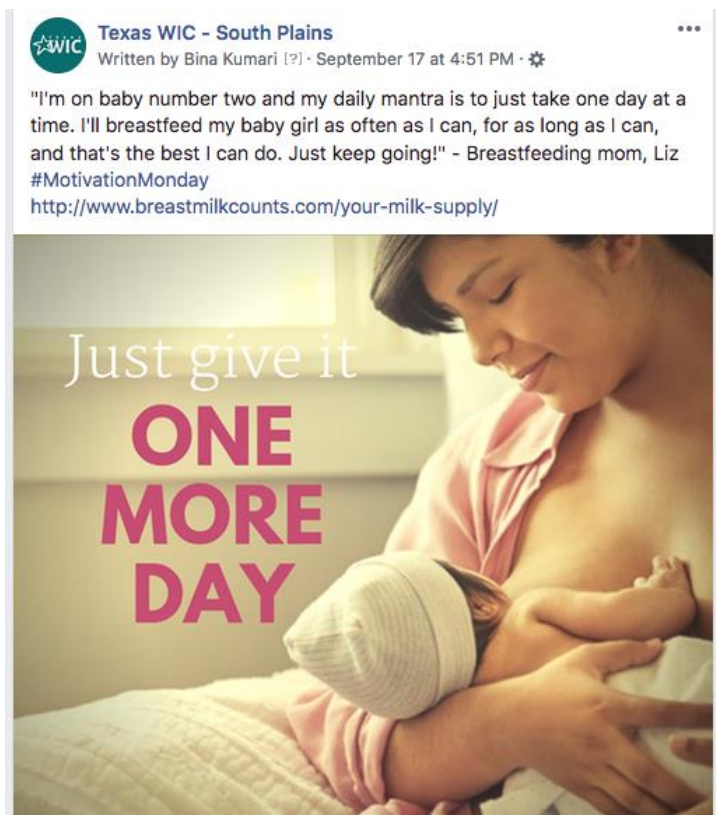
B



C



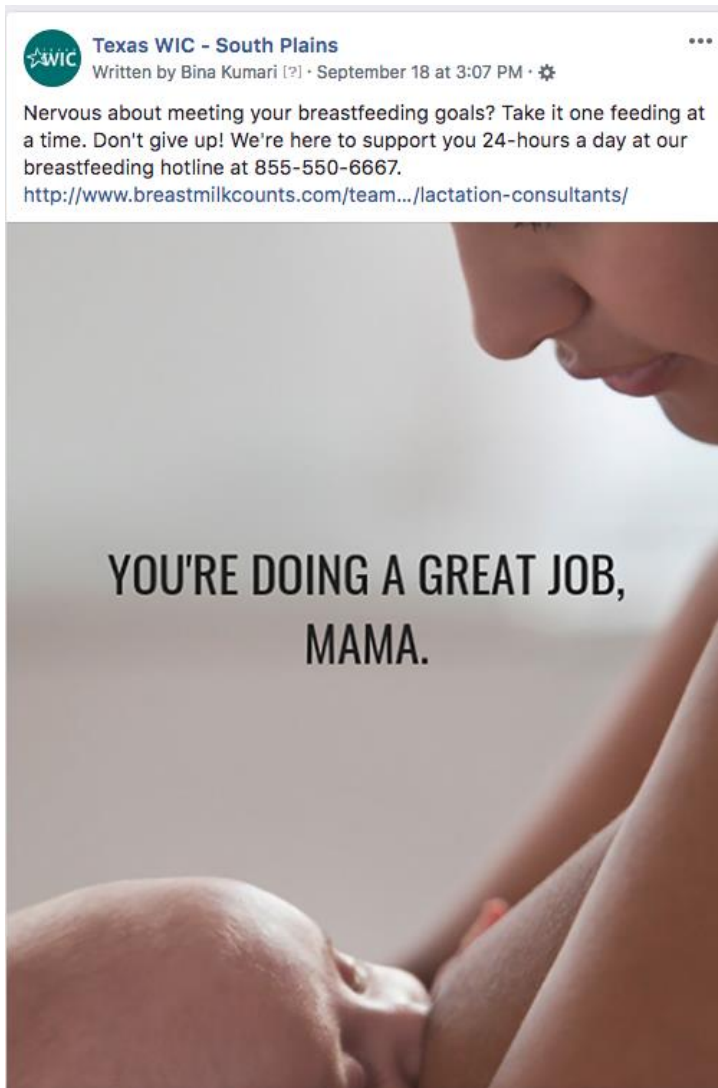
D



E



F



Many focus group participants listed pictures B, D, and F as their favorites because they felt that they offered positive and supportive messages, the photos looked realistic and “relatable,” and/or they offered tangible help or solutions. Women stated that these would encourage them to continue breastfeeding.

Some participants liked the message of picture A because it told them to be proud and keep going, but others found the picture to be too unrealistic for their situation. Participants overall did not like picture C, as they didn’t like the poop-moji and felt that the information was not something that would affect their breastfeeding decisions. Picture E, which discusses SIDS, was very controversial. Some participants had friends or family members that lost babies to SIDS. As a result, they felt it would spark feelings of guilt in parents who had been feeding their babies with formula and had lost their babies. Other participants felt that offering more information about SIDS to pregnant women might be of value.



Picture A

"I liked the first one ... because sometimes I would be so down that I could only make a little bit of milk ... so when they said it's OK, so even if I only have a little bit, it's still good." – Houston

"I X'ed this one [out] because her hair's clean, her makeup's done, her shirt's clean. It's too happy." – Dallas

Picture B

"I liked the one with the Facebook vs. real life because it's true, we always – I mean I always – look like a mess at home." – Houston

"I would share B." – San Antonio

Picture C

"I crossed off the poop moji because I just hate it." – San Antonio

Picture D

"Everything's a day at a time. That's how you should take it, a day at a time. You plan things out and it just doesn't pan out, just take it a day at a time." – McAllen

Picture E

"I think because a lot of moms, they do whatever they can and they still lose their baby, it would be unfair for them to see that and they would feel bad." – Houston

"I liked the – or what I learned from – babies who are breastfed have 36% lower risk of SIDS, I didn't know that." – Houston

Picture F

"This one has the baby and it has a supportive message in the picture, and then when you look at the actual post, it's got even more important information." – San Antonio



In the final two locations, Tyler and Beaumont, two new Facebook post examples were shown. One has a woman on the toilet breastfeeding; the other has a woman on the beach with two children breastfeeding. There were mixed reactions among participants to both images.



Picture of Mom on Toilet:

"If my baby was still breastfeeding, that's how he would be. He doesn't let me do anything as it is now" – Tyler

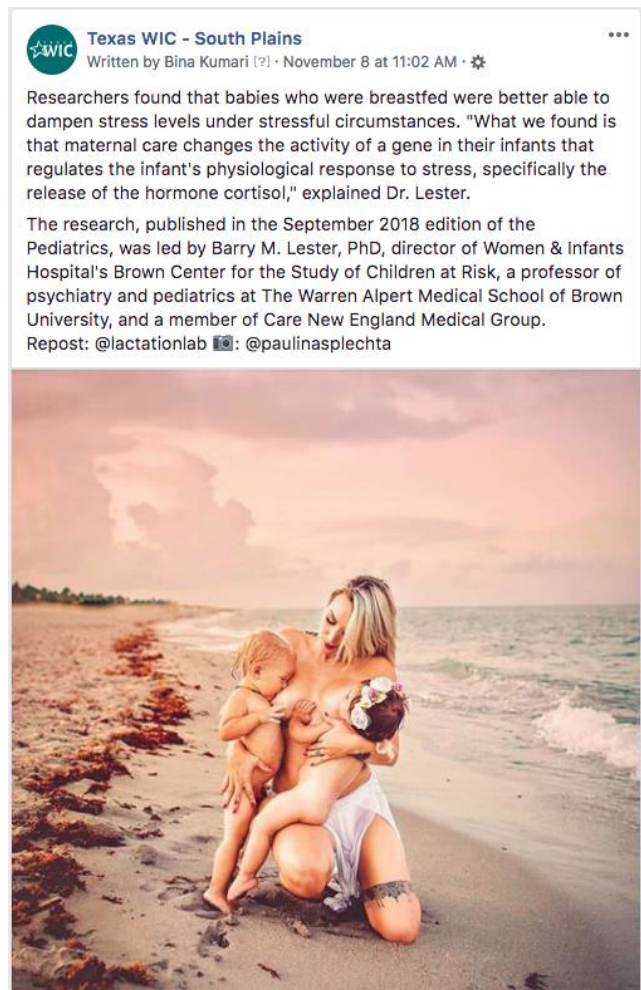
"Bathrooms are dirty. It shouldn't be a place you breastfeed." - Beaumont

Overall, most of the Facebook post examples were effective. Participants largely stated that they would either share the posts they liked on their own feeds, would like them, or would comment on them and tag people who they thought should see them.

"I'd tag people that are pregnant or post it on that picture wall." – McAllen

"I'd share it." – Dallas

"I'm mad that I'm actually seeing this because it looks like it's possibly real and our offices, if they do have it, a Facebook page with these encouraging posts, they don't advertise it. I would like to see this type of stuff on my social media." – Tyler



Tagline “Every Ounce Counts”

Most focus group participants reacted positively to the tagline of “every ounce counts.” It resonated strongly with many women who had experienced first-hand the feeling that whatever breastmilk they were able to give their baby made a difference.

“Even if you can’t make enough milk, just a little bit that you do make does make a difference. You give them those antibodies that your milk is making.” – Dallas



“That's great. Because it's true. Because I've pumped sometimes and sometimes I'll only get an ounce, sometimes I'll get two. So it matters because every little ounce that I save in the freezer, it'll add up to something later, like for example right now. It really matters. Every ounce really does matter.” – San Antonio



WIC: Ideas for Expanded Breastfeeding Support

It is extremely apparent from the focus groups that women need more breastfeeding support in the days and weeks after they have their babies. Reactions to chats, video chats, 24/7 hotline access, and in-person support groups were overwhelmingly positive. Some liked the anonymity and convenience of online forums; others preferred face-to-face groups. In person support groups were popular with many of the women, but time and place were specific to each women's situation; some preferred weekdays, some evenings, some weekends. To meet the needs of this wide audience, a variety of forums will be required. Overwhelmingly, however, focus group participants agreed that more support is needed and that they would participate in WIC-related support services.



"I like the idea of the videos. I hope they do that soon because it would help me a lot." – McAllen

"And the chat thing. It's extremely convenient. And even videos." – Dallas

"Yeah, and like a mediator, so its one big chat room where the WIC staff is like a mediator and if someone asks a question, if the wrong answer comes through...they can come to the rescue with the correct answer." – Dallas

"And you don't need to get out of the house with a new baby." – Dallas

"And the 24/7 phone line. I think that would be helpful because especially some of those moms getting up at 2 and 3 o'clock in the morning feeling like we're about to lose our marbles. I've been there where it's been like mastitis kicks in and you're sitting there dying in the bathroom crying and trying not to wake up anybody." – Dallas

"I'd rather it be in person." – Beaumont



How WIC Could Use Social Media

Most everyone agreed that Facebook groups, chats, mom forums, 24-hour phone lines with lactation specialists, and videos for breastfeeding problems would all be welcome additions to WIC services. As is evident from the focus group discussions, these are the types of communications and support women are using now and what fits in with their current lifestyle and communication methods.

Mothers viewed expert chat, group, and forum moderators as an extremely important element of these resources so as not to allow mom-shaming, myths, bad information, etc. Many participants suggested the inclusion of troubleshooting videos like those on YouTube where real moms show actual solutions to problems.

“Short breastfeeding videos.” – Houston

“Chat with a WIC mediator, and if a wrong answer comes up, they can come to the rescue with the correct answer.” – Dallas

“Maybe they do as a piece of when you sign up for WIC, you register, you create an account online. Everyone would be connected at that point.” – San Antonio



WIC's Value

Women participating in the focus groups appreciated all the breastfeeding support received from WIC. The personal contact with peer counselors, breast pumps, classes, etc. were highly valuable to those enrolled in WIC. Since the focus of this research is on breastfeeding, comments about other services were minimal, but other WIC benefits were mentioned occasionally.

"The nutritionist. When they check on the baby and find something that's not right, they immediately tell you where to take your child..." – McAllen

"We were migrant workers. An increase in vegetables, cereals, your basics, the essentials of what you need. It's changed a lot over the years and there's a lot more assistance. Hopefully it'll still be here for generations to come." – San Antonio

The things I got on my card were extremely helpful. I got six to nine cans of formula, cereal, fruit, vegetables, milk for me, eggs, cheese." – Dallas

"They tailored the WIC package more so you get allotment of fresh fruits and vegetables." – San Antonio

"I feel like it can – it does – it educates you. So, the first time around when you, when it's your first baby. I mean, some people do have support from their parents, some people don't. Or just, I feel like the first time around it was very helpful because there are certain foods that I probably didn't think about eating and it was on there." – Houston



Qualified but Not Enrolled Participants: Reasons for Not Being on WIC

Many focus group participants who qualified for WIC but were not enrolled had been enrolled in WIC at one time. When asked why they were no longer enrolled, the reason most frequently cited was the amount of time it takes at the clinic. Two-hour wait times were reported as common. Work and school schedule conflicts and transportation issues were also a problem for many women. Other reasons included rude staff, grocery store problems, a belief that their income made them ineligible, and immigration status. Many had been on WIC intermittently over several years and had different experiences throughout that time.

"I don't know how it will affect my resident status." – McAllen

"I don't have legal documents." – McAllen

"Stigma." – Tyler

"The schedule makes it difficult. I work till 5, they close at 5." – Dallas

"There was no one to take me and I missed a class." – McAllen

"It was more of a problem to go than the benefits I was getting." – Houston

"It was too complicated to go because I was waiting so long. My husband said maybe there was other ways I could get the information. He would say, 'You go get the milk. I just buy it for you because I can't take you.'" – McAllen

"For me it was time." – Houston

"I stopped going because I didn't have a car." – San Antonio

It is clear from these focus group responses that the WIC outreach is still missing eligible women and that misconceptions about WIC are common and often based on past experiences. Some participants had never tried to enroll in WIC because of negative impressions of it. There was general confusion about WIC services and benefits. Some were surprised to hear about the breastfeeding support; some didn't know that WIC provided formula and other benefits. Confusion about who to contact and how to contact the program was common. Some information on WIC local agency websites is apparently not clear enough.

"I didn't know about WIC when I was pregnant. It would have been super helpful." – Dallas

"You cannot get it if your baby isn't on Medicaid." – Beaumont

"I didn't even know you could get on it while you were pregnant." – Dallas

"I didn't know they had lactation consultants." – McAllen

"Society looks down on you." – Tyler



"I didn't need formula, so I didn't sign up." – Tyler

"Thinking back to my other kids, it's now more tailored to what you need. An increase in fruits and vegetables. It's changed a lot over the years." – San Antonio

What Would Make You Enroll in WIC?

When focus group participants who were not enrolled in WIC were asked what would prompt them to enroll, some mentioned that more information about the breastfeeding support, breast pumps, and/or the food packages may have helped.

"I would have considered it if I had known they could help with breastfeeding. But my impression of WIC was that I'd be embarrassed. It's a social thing." – Dallas

"I looked into this past week, actually, and I went to the website. There is no way you can contact them without going into an office. I have two kids." – Dallas

"There's things WIC does – the consults, the help. I thought it was just food." – McAllen



Lactation Center Classes

One focus group conducted in McAllen in the Rio Grande Valley consisted entirely of women who had participated in services at the Lactation Care Center RGV. Only one attendee was enrolled in WIC. The others had been referred to the class by doctors, friends, and Facebook.

These mothers described the classes as extremely informative and motivational with an engaging and fun instructor. This Lactation Center offers a comprehensive lactation support services including prenatal breastfeeding classes as well as support and lactation consultant services after the baby is born. A number of the fathers attended the classes along with the mothers and became strong breastfeeding supporters and advocates as a result. Many took advantage of lactation services after their babies were born, such as lactation consultants and breastpumps. Over half the women in this group breastfed for seven to eight months or were still breastfeeding. All of the following quotes are from the McAllen focus group.

"My husband went and he supported me when we went to the hospital because of the classes. I was so tired. He made sure to wake me up every 3 hours while he was there."

"She makes you feel welcome and comfortable and she's funny. She's informing you, but at the same time, she's making jokes. Even men, they're laughing and then she gets the boob thing, but at the same time, she's teaching you, so it makes you want to go."

"Her passion for it is very contagious."

"My husband was a first-time daddy. He enjoyed the class a lot. He learned a lot. I had already been a mother in the past, but for him, it was very important, 'Do it like this. Do it like that.'"

"They show you the ingredients, the pros and cons of the formula and the breastmilk and how your body reacts to your baby. If your baby is sick, your body produces more of what she needs. I mean, it's amazing, exactly. The connection of the feeding, the wonderful bond. It's just amazing."

"If it wasn't for the breastfeeding class and having that much knowledge about the actual breastmilk, which was shown with Legos and stuff, I probably would've stopped and I wouldn't have gone to exclusively pumping. I know that I had it in my mindset, like yes, I want him to have breastmilk one way or another, but going to those classes helped me push a little bit more for it."



Media Testing

Billboards

English-speaking focus group participants in McAllen, Tyler, and Beaumont were shown samples of four potential billboards for BreastmilkCounts.com and asked to give their reactions. Overall, participants liked the idea of the billboards and stated that billboards were a good way to advertise WIC services and the website.

Based on the feedback collected from mothers in the focus groups, women want messages that are direct and readable when driving – with an emphasis on the website. On all billboards, they requested that the website be featured nearly as prominently as the headline so that they would not have to look extra times to see it while driving. As with the social media post examples, participants responded well to images of women who looked like they were struggling and weren't totally put together.



Billboard #1: “Real Help If Breastfeeding Is Real Hard.”



This ad had mixed reactions from mothers in the focus groups. Participants in McAllen said they didn't feel like they connected with the tagline or the mother in the image. Participants in Tyler and Beaumont had lukewarm reactions. They liked the fact that the image contained a mother who had tattoos and looked more like a real person than a model, but found the fact that she appeared to be on her phone to be distracting. The phone seemed to either make them think that she was having too easy a time breastfeeding, or that she wasn't focused enough on her baby.

Overall, this billboard didn't inspire the same level of positive reaction as the other billboards.

“You have to read it like three times in order to understand it.” – McAllen

“For help, I would look at the website. As far as the picture, it doesn't make me want to breastfeed or anything like that.” – Tyler



Billboard #2: “Breastfeeding Problems? Let’s Chat Right Now.”



This ad was only shown in McAllen. Focus group participants there responded positively. However, they wanted to leave the “right now” part off and have it more clearly direct the audience to the website.



Billboard #3: “Breastfeeding Help Anytime. Like at 3AM.”



This ad was the clear favorite in all focus groups. Mothers related both to the message and to the image of the woman trying to breastfeed. They said it would be motivating and catch their attention.

Participants in Tyler and Beaumont found this amusing and relatable as many of them felt they needed help at 3am. Participants in McAllen liked the message of help at all hours, but took this message more literally – as though 3am was the only time that the billboard was suggesting help would be needed. They suggested switching to a message of 24/7 availability.

“It’s not always at 3am.” – McAllen

“It’s perfect.” – Tyler

“At 3am, that’s when you’re really breastfeeding.” – Beaumont

“I think if we saw more things like this around, people wouldn’t have so much negative to say about whipping it out.” – Tyler



Billboard #4: “Breastfeeding Can Get Hard. Getting Help Is Easy.”



This ad also got mixed reviews. Participants in focus groups liked the message, and some laughed because they thought the image was a realistic portrayal of breastfeeding.

The tagline was clear enough that this billboard was often participants’ second favorite of the four billboards.

“Someone can help when breastfeeding gets hard.” – Beaumont

“I think the website could be a whole lot bigger.” – Beaumont

“The only thing that I see in the picture is that breastfeeding can get hard. It doesn’t look like it gets any easier after that.” – Tyler

“I like that it has ‘breastfeeding’ and ‘easy’ in the same sentence. It would make me more likely to connect them.” – Tyler



Billboard #5: “Real Breastfeeding Help Real Quick.”



This ad was not a favorite overall. Some groups liked the tagline, but others in McAllen and Tyler found it somewhat confusing and stated it would take more than one look to understand it. Many groups didn't like the image. The inclusion of the website did get some positive comments.

“Too much real.” – McAllen

“I would go to that website.” – Beaumont

“It looks like it's more about her than it is about breastfeeding.” – Tyler



Radio and TV

Note: Scripts for television and radio ads can be found in the Appendix.

In McAllen, Tyler, and Beaumont, the focus moderators read descriptions and sample scripts from two television ads and one radio ad and asked participants for their feedback; participants in Tyler and Beaumont heard about one additional ad. These ads were late additions and were only tested in English speaking groups.

The group in McAllen tended to want very simple direct communications, while participants in Tyler and Beaumont preferred more humor and related messages that described their difficulties and experiences.

Video Ad: “Bad Dog”

This was a humorous ad showing the chaos of real life and new motherhood. It had screen messages that included, “No matter how hard breastfeeding gets, WIC is here to help.” And “Breast milk. Every ounce counts. Visit BreastmilkCounts.com for real help 24/7.”

Participants in Tyler and Beaumont responded very positively to this ad, enjoyed the humor, and found it motivating. They identified with problems like leaking through their blouses, challenges with nipple shields, and even the problems of dealing with the family dog. They specifically noticed that it was from WIC, that it included the hotline and the website, and said it would motivate them to turn to WIC, the website, or the hotline for help. They recommended having an announcer read all text that is shown on the screen (including the name of the website) as many of them may listen to videos and advertisements while doing something else instead of just watching the screen.

“I like it because it’s real.” – Beaumont

“It’s giving you the message to keep trying and keep going.” – Beaumont

“Whoever came up with shields, it had to have been a man. I did like that one.” – Tyler



"Sometimes you're hearing the TV, but you're not watching it because you're doing something else." – McAllen

"Anyone who's getting ready to breastfeed and ready to deliver, you won't be like a deer in headlights like, 'Oh it's going to be all perfect,' like 'You'll have problems, but here's how to fix it.'" – Tyler

Participants in McAllen found it more confusing.

"There's too much going on. We're trying to picture it." – McAllen

Video Ad: "Real Moms"

This ad copy was read to focus groups participants in Tyler and Beaumont. It shows a series of mothers having real-life problems who then go to WIC and get their problems solved.

The groups almost uniformly liked this ad. They stated that the hurting nipples and other challenges rang true for them, and they loved learning that there was somewhere to go for help. They particularly liked the humorous approach to the situation as it felt relatable and lightened what can be a frustrating experience.

One group did express minor confusion between whether it was saying that WIC would be open 24/7 or that there was a hotline to call for 24/7 help.

*"[It would motivate me to] go to the WIC office for support and call and get help."
– Tyler*

"It's all real, all the things that moms would say, feeling bad, stopping breastfeeding or thinking to stop breastfeeding, but then someone says that, actually, you can find help, and it's free." – Tyler



Video Ad: “Anita”

The third video ad was shown to participants in McAllen, Tyler, and Beaumont. It is a poignant ad about a woman who was having trouble breastfeeding, but went to WIC and got help.

Participants felt this ad was much more serious than the previous ones. It was very moving for some participants, especially those who had had a lot of trouble with breastfeeding. These participants liked the message that there is somewhere to go.



The direct message and portrayal resonated with more women in McAllen who said it was something that it was likely to make them stop, pay attention, and possibly share with their friends. Groups in Tyler and Beaumont, however, stated concerns that this would appeal to a narrower audience and found it less motivating than the more humorous commercials. Some found the direct emotional appeal too overwhelming, while for others it resonated.

In both Tyler and McAllen, some participants expressed skepticism of the commercial; their WIC experiences were not as positive as the one depicted.

“It’s good. You know where to go when you need help. You can’t go back to the hospital.” – Beaumont

“It’s relatable, but it might just not be for everybody.” – Tyler

“I like that one. She took the initiative to go to WIC.” – Beaumont

Radio Ad

The radio ad offered a similar message to the “Bad Dog” television ad – one with various women who were facing challenges with breastfeeding. The ad directs the audience to the website or hotline for help. It was only read to participants in Tyler and Beaumont, who responded very well to it. They stated that it would get their attention and that it captures a realistic picture of breastfeeding challenges. Overall, participants stated that it would make them want to go to the website.

“It’s problems that each mother experiences.” – Tyler

“I like this a little more better. It helps.” – Beaumont



Conclusion

Women who participated in these 24 diverse focus groups in different areas of the state have the knowledge that breastfeeding is best and the healthiest infant feeding choice. Most wanted to successfully breastfeed, even if not exclusively.

However, the knowledge that breastfeeding is best is not enough. There was a tremendous lack of education and understanding among participants about the mechanics and the “how-to’s” of breastfeeding. Women did not know what to expect and what to do when breastfeeding problems occurred. They also did not know what to expect emotionally nor the reality of breastfeeding a newborn. Some left the hospital successfully breastfeeding; others arrived home still struggling to get their baby to position correctly, to latch, to produce enough breast milk, and to successfully breastfeed. Some went to family members to help, some went to WIC for help, but most searched for answers on the internet. They Googled, they found blogs, forums, mom groups, videos, and other ways to try to solve their problems. Sometimes their issues were resolved; often, they were not and they either gave up on breastfeeding or started feeding formula more and more. Some felt as if they had failed their child, some felt like bad mothers, some felt depressed, but many felt that they did the “best they could.”

These mothers all use social media, almost exclusively. Magazines and books were rarely mentioned as a source of information in the discussions. When looking for answers to questions “Googling” was most often utilized, but Facebook is extremely popular as a way for the mothers to connect with each other, find answers to questions, and find communities of other moms in similar situations.

The mothers in these focus groups were enthusiastic about the idea of WIC being more aggressive with social media. They were extremely positive about WIC’s breastfeeding website, BreastmilkCounts.com. They would also like more support after the baby is born, such as in-person support groups, moderated Facebook groups or online chats, video tutorials, breastfeeding discussions with experts, and a 24/7 phone line. Even though some of these services already exist, hardly any of these mothers knew about them.

The discussions in this report and the feedback provided in these focus groups – from a wide variety of women – offer valuable insights for WIC, especially about media and social media preferences that can drive targeted breastfeeding promotion and support efforts in the near future and beyond.



WIC Breastfeeding Research Appendix

South Plains
Community Action Association
December 2018



research + campaigns = behavior change

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Enrolled in WIC Focus Group Guide

WIC Breastfeeding 2018

Moderator begins by introducing the concept, process, and purpose of the focus group. She will also lay ground rules for the discussion, explain the purpose of the tape and/or video recording equipment, and assure participants that their remarks are confidential in the sense that their names will never be attached to their statements.

I. Introduction

- Please introduce yourself and tell us how old your baby is and his or her name, the names and ages of your other children if you have other children, and a little bit about yourself like if you have a job outside the home or if you are a full-time mom.
- Card sort: Please pick a card from the picture cards laying in the middle of the table that expresses your feelings about your breastfeeding experience with your most recent baby. Then we will go around the table and you will share why you picked the card you picked.

II. Breastfeeding Experience

- Thinking back to the time when you were pregnant, how did you plan to feed your baby during his or her first few weeks? Sometimes plans change and if they did we will talk about that in a minute but for now just tell me what your plan was. I would like to hear from everyone on this question so we will go around the table.
- How did your plan change? Why – tell me what happened? Again, we will go around the table for this question. *(Moderator will say each persons name aloud before or after they talk so we capture on recording who said what. Also probe to determine if they were going to exclusively breastfeed.)*
- When you originally decided to breastfeed, **how confident** did you feel that you that you would be successful?

- How did you feel when your breastfeeding plans changed?
- How did the people around you respond to the change in feeding plans?
- How many of you went to WIC to ask for formula when your plans changed? What happened when you said you were going to introduce formula? How did your visit to WIC make you feel?

III. **Breastfeeding Education and Influencers**

- Who helped you understand the mechanics of breastfeeding?
- Did you take a class anywhere for instance as part of a prenatal class did they talk about breastfeeding?
- Where else did you look for information? Did you look online? Tell me about those experiences. (*listen to see if anyone mentions breasfeedingcounts.org*)
- Tell me about your experience at WIC when it comes to breastfeeding?
 - Who did you talk with and what did they say? Peer-counselor?
 - What kind of materials did you receive about breastfeeding? Were any particularly helpful? Did you take a breastfeeding class? (probe online or in person?)
 - Did they encourage you to go to any websites for more information? Which sites? Did you go?
 - What did you learn about the Texas Lactation Support Hotline – a 24-hour breastfeeding help line? (*take a hand count of how many people know about the help line.*)
 - In Houston, San Antonio, Dallas and the Valley – what did you learn about lactation centers or baby cafes? (*take a hand count of how many people know about them*)

- What, if anything, did anyone say about breastfeeding or not that made you feel uncomfortable? If anything, how could that information have been given to you in a way that wouldn't make you feel uncomfortable?
- How did the clinic environment make you feel? (*Probe for anything uncomfortable.*)
- Did anyone say anything negative about feeding your baby formula, or that formula was harmful?
- What were you told about getting formula in the first month?
- What, if anything could WIC have done to improve your breastfeeding experience?

IV. Hospital Experience

- Now we are going to focus on what happened when it comes to feeding your baby just after birth at the hospital.
- We talked earlier about your breastfeeding plan. How did that work out at the hospital? Probe: Who helped you? Who hindered your experience?
- For those who started to include formula, tell me about what led up to formula being introduced? **Probe:** did you ask for it or did someone just bring it? Why did you ask for formula?
- How could your hospital experience have been better in terms of supporting your breastfeeding plan?

V. First few days at home

- How did the plan you had for feeding your baby go at home – especially the first few days?
- What impacted your ability to do what you had planned?

- What kind of support did you need? How did you get it? (family, peer counselor, lactation counselor, websites, social media or online videos, WIC information line- did you know WIC information line?)
- When you went back to WIC for the first time after the baby was born, did anyone talk to you about breastfeeding? Or, what kind of contact did you have from WIC after the baby was born to see how breastfeeding was going? Did anyone call the Texas lactation support hotline? Please tell me about that.
- When you had breastfeeding challenges, what kind of support was available to you in your community?
- How could your community or support people have helped you better meet your breastfeeding goals?

X. Social Media

- What social media do you use? *Moderator probes around Facebook, Instagram, Pinterest, Snapchat.*
- Can anyone share a story about how they used social media or a website to help them during their pregnancy or with a newborn?
- How have any of you used social media to support your breastfeeding? e.g. putting out a question on Facebook, mommy blogs, etc.
- Speaking of social media, or looking for information on the web, in what ways could WIC use it to better support new moms when it comes to breastfeeding?

Test Social Media Posts

- *Moderator hands out screenshots of social media post exercise.*
Please look over these social media posts and circle the 3 you like best, and put a star next to the one that is most likely to catch their attention. Please put an X on any you do not like.
- Let's talk for a minute about these potential posts: Which one is most likely to catch your attention? Why?
- What would you do when you see it? Probe: post an emoji, comment, share, click?
- How likely are you to comment on a post like these or send it as a message to friends?
- How helpful is seeing a post like this when you are breastfeeding?
- How do these posts make you feel?

Other Media

- What do you watch on TV? Cable? Streaming like Netflix or Amazon
- What, if any, radio do you listen to? Local? Pandora?

Now I am going to show you some billboards:

Billboard one: Moderator read the billboard aloud

- What is your top of mind reaction to this billboard?
- What do you think it is asking you to do?
- How likely is it to motivate you to do that?
- What do you think about the message?
- What do you think about the image?

Repeat for each billboard

Now I am going to read you a couple TV ads

- What is your top of mind reaction to this TV ad?
- What do you think it is asking you to do?
- How likely is it to motivate you to do that?

- What do you think about the message?
- What do you think about the images?

Repeat for second ad.

Now I am going to read you a radio ad?

- What is your top of mind reaction to this TV ad?
- What do you think it is asking you to do?
- How likely is it to motivate you to do that?
- What do you think about the message?
- What do you think about the images?

VI. BreastmilkCounts.com

- Have any of you heard of the website Breastmilkcounts.com?
Moderator asks participants who have heard about it to raise their hand and takes a hand count aloud for the recording. How did you hear about it?

Moderator passes out tablets.

- Please look on your phones or the tablets we have at the website, Breastmilkcounts.com. Keeping in mind the questions we just listed, please take a few minutes to look through the site.

Moderator gives participants a few minutes to look through the site.

- What questions if any did you not find answers to?
- How helpful, or not, would this site have been for you for breastfeeding – before, during, and after? What makes you say that?

- What do you think about the tagline, “every ounce counts”? How does that phrase make you feel?
- Some of you had not heard of this site. What would be the best way to get you to go to the site?
- WIC is considering a campaign to highlight the resources it has available to help mothers breast-feed for longer. The campaign will promote a single place/ landing page with links to these resources.
 - 24/7 breastfeeding consultation line
 - In-person breastfeeding consultation
 - Facebook/chat forum where feeding moms can seek the advice of other moms.
 - Links to dozens of how-to ‘mom breast-feeding videos’ featuring moms and lactation consultants.
- How helpful would something like that have been during your breastfeeding experience with your most recent baby?

Reaction to idea of live classes online.

- What do you think about the idea of breastfeeding support groups? Chat? Or in person?
- How likely would you be to attend a live WIC breastfeeding class on Texas WIC.org.
- How comfortable would you be sharing personal experiences or asking questions in an online live class?
- What would be the best time? Morning, evening, 8:00?

Lactation Centers

- In Dallas, Houston, San Antonio and the Valley – Did anyone go to a WIC lactation center or Baby Cafe? *Based on response the moderator then explains what the lactation centers are and that they are available at no cost.* Now that you know what the lactation center is, how likely would you be to use it?

VII. AAP Medical Recommendations

Moderator holds up black board with the following statement: The American Academy of Pediatrics recommends exclusive breastfeeding for about the first six months of a baby's life, followed by breastfeeding in combination with the introduction of complementary foods until at least 12 months of age, and continuation of breastfeeding for as long as mutually desired by mother and baby.

What do you think of this statement? Probe: What does it mean?

- How does this statement make you feel? (if guilty – Probe why?)
- What are your top-of-mind thoughts about this statement?
- What would you do after hearing this statement?
- Thinking about your life and your own experience, how realistic is this recommendation? If not realistic – what is?

Closing

Now let's go around the table and I want each of you to tell me, What is the most important thing we talked about tonight – for you - what did you hear that you might talk about with someone else?

Thank you very much!

Not Enrolled in WIC Focus Group Guide WIC Breastfeeding 2018

Moderator begins by introducing the concept, process, and purpose of the focus group. She will also lay ground rules for the discussion, explain the purpose of the tape and/or video recording equipment, and assure participants that their remarks are confidential in the sense that their names will never be attached to their statements.

I. Introduction

- Please introduce yourself and tell us how old your baby is and his or her name, the names and ages of your other children if you have other children, and a little bit about yourself like if you have a job outside the home or if you are a full-time mom.
- Card sort: Please pick a card from the picture cards laying in the middle of the table that expresses your feelings about your breastfeeding experience with your most recent baby. Then we will go around the table and you will share why you picked the card you picked.

II. Breastfeeding Experience

- Thinking back to the time when you were pregnant, how did you plan to feed your baby during his or her first few weeks? Sometimes plans change and if they did we will talk about that in a minute but for now just tell me what your plan was. I would like to hear from everyone on this question so we will go around the table.
- How did your plan change? Why – tell me what happened? Again, we will go around the table for this question. *(Moderator will say each persons name aloud before or after they talk so we capture on recording who said what. Also probe to determine if they were going to exclusively breastfeed.)*
- When you originally decided to breastfeed, how confident did you feel that you that you would be successful?

- How did you feel when your breastfeeding plans changed?
- How did the people around you respond to the change in feeding plans?

III. **Breastfeeding Education and Influencers**

- Who helped you understand the mechanics of breastfeeding?
- Did you take a class anywhere for instance as part of a prenatal class did they talk about breastfeeding?
- Where else did you look for information? Did you look online? Tell me about those experiences. (*listen to see if anyone mentions breasfeedingcounts.org*)

IV. **Hospital Experience**

- Now we are going to focus on what happened when it comes to feeding your baby just after birth at the hospital.
- We talked earlier about your breastfeeding plan. How did that work out at the hospital? **Probe:** Who helped you? Who hindered your experience?
- For those who started to include formula, tell me about what led up to formula being introduced? **Probe:** did you ask for it or did someone just bring it? Why did you ask for formula?
- How could your hospital experience have been better in terms of supporting your breastfeeding plan?

V. **First few days at home**

- How did the plan you had for feeding your baby go at home – especially the first few days?
- What impacted your ability to do what you had planned?
- What kind of support did you need? How did you get it? (family, peer counselor, lactation counselor, websites, social media or online videos)
- When you had breastfeeding challenges, what kind of support was available to you in your community?
- How could your community or support people have helped you better meet your breastfeeding goals?

X. Social Media

- What social media do you use? *Moderator probes around Facebook, Instagram, Pinterest, Snapchat.*
- Can anyone share a story about how they used social media or a website to help them during their pregnancy or with a newborn?
- How have any of you used social media to support your breastfeeding? e.g. putting out a question on Facebook, mommy blogs, etc.

Test Closed Facebook Group

- *Moderator passes out Beaumont Breastfeeding Coalition Facebook group screenshots. Now I would like to show you an idea for breastfeeding support. These are screenshots*

from a closed Facebook page for breastfeeding support that one Texas community is using.

- What do you think about this idea? How helpful would this have been for you?

Test Social Media Posts

- *Moderator hands out screenshots of social media post exercise.*
Please look over these social media posts and circle the 3 you like best, and put a star next to the one that is most likely to catch their attention. Please put an X on any you do not like.
- Let's talk for a minute about these potential posts: Which one is most likely to catch your attention? Why?
- What would you do when you see it? Probe: post an emoji, comment, share, click?
- How likely are you to comment on a post like these or send it as a message to friends?
- How helpful is seeing a post like this when you are breastfeeding?
- How do these posts make you feel?

Other Media

- What do you watch on TV? Cable? Streaming like Netflix or Amazon
- What, if any, radio do you listen to? Local? Pandora?

Now I am going to show you some billboards:

Billboard one: Moderator read the billboard aloud

- What is your top of mind reaction to this billboard?
- What do you think it is asking you to do?
- How likely is it to motivate you to do that?
- What do you think about the message?
- What do you think about the image?

Repeat for each billboard

Now I am going to read you a couple TV ads

- What is your top of mind reaction to this TV ad?
- What do you think it is asking you to do?
- How likely is it to motivate you to do that?
- What do you think about the message?
- What do you think about the images?

Repeat for second ad.

Now I am going to read you a radio ad?

- What is your top of mind reaction to this TV ad?
- What do you think it is asking you to do?
- How likely is it to motivate you to do that?
- What do you think about the message?
- What do you think about the images?

VI. BreastmilkCounts.com

All of you tried breastfeeding. Thinking about that experience, I want you to tell me your unanswered questions. *Moderator writes them on the board.*

- Where did you go or who did you talk to about your questions?
Probe: again - did you go to any website? Apps? How helpful where they?
- Have any of you heard of the website Breastmilkcounts.com?
Moderator asks participants who have heard about it to raise their hand and takes a hand count aloud for the recording. How did you hear about it?

Moderator passes out tablets.

- Please look on your phones or the tablets we have at the website, Breastmilkcounts.com. Keeping in mind the questions we just listed, please take a few minutes to look through the site.

Moderator gives participants a few minutes to look through the site.

- What questions if any did you not find answers to?
- How helpful, or not, would this site have been for you for breastfeeding – before, during, and after? What makes you say that?
- What do you think about the tagline, “every ounce counts”? How does that phrase make you feel?
- Some of you had not heard of this site. What would be the best way to get you to go to the site?

Lactation Centers

- In Dallas, Houston, San Antonio and the Valley – Did anyone go to a WIC lactation center or Baby Cafe? Did you know there are WIC lactation centers or baby cafes available at no charge to you? *Based on response the moderator then explains what the lactation centers are and that they are available at no cost.* Now that you know what the lactation center is, how likely would you be to use it?
- What do you think about the idea of breastfeeding support groups? What should they look like – go some place and be with other women or do a chat?

VII. AAP Medical Recommendations and WIC Knowledge

Moderator holds up black board with the following statement: The American Academy of Pediatrics recommends exclusive breastfeeding for about the first six months of a baby's life, followed by breastfeeding in combination with the introduction of complementary foods until at least 12 months of age, and continuation of breastfeeding for as long as mutually desired by mother and baby.

What do you think of this statement? Probe: What does it mean?

- How does this statement make you feel? (if guilty – Probe why?)
 - What are your top-of-mind thoughts about this statement?
 - What would you do after hearing this statement?
 - Thinking about your life and your own experience, how realistic is this recommendation? If not realistic – what is?
-
- Tell me what you know about WIC.
 - Do you know other women on WIC? What do they say about it?
 - Have you ever thought about getting on WIC? What kept you from signing up?
 - What have you heard about the services they have for breastfeeding moms?
 - What did you value most about being on WIC? Did your perspective on the value of the program change in anyway?
 - How was your experience with WIC compared to your expectations?
 - What are some of the reasons that you didn't continue on WIC?

- What would you recommend to improve the experience of being on WIC for families?
- If you knew you could get help breastfeeding from peer counselors (women who have breastfed their babies and are trained to help you), and that they have lactation centers, a 24-hour breastfeeding help line, and that women who breastfeed get a bigger food package - would that impact your decision to signing up?
- Under what circumstances would you sign up for WIC?

Closing

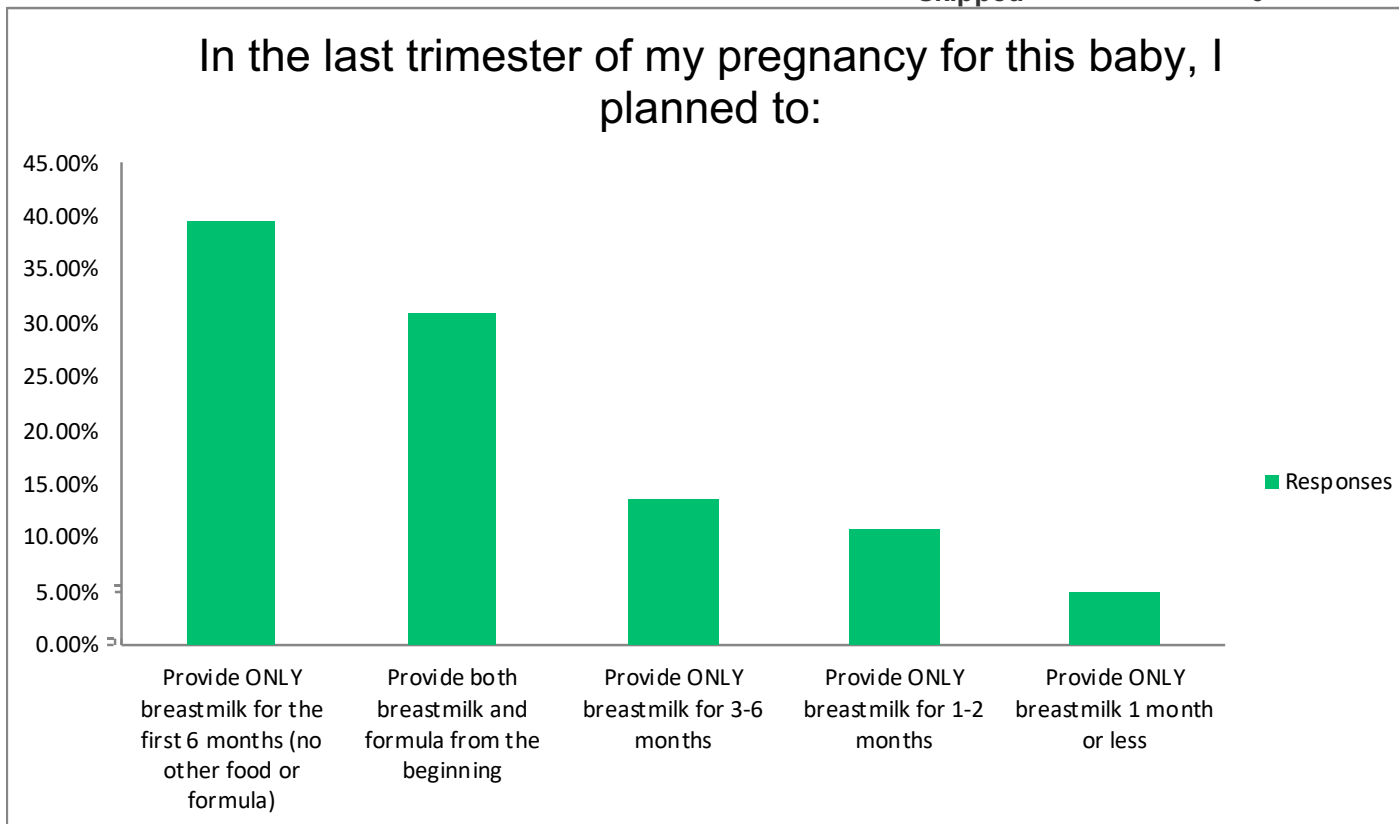
Now let's go around the table and I want each of you to tell me, What is the most important thing we talked about tonight – for you - what did you hear that you might talk about with someone else?

Thank you very much!

Breastfeeding

In the last trimester of my pregnancy for this baby, I planned to:

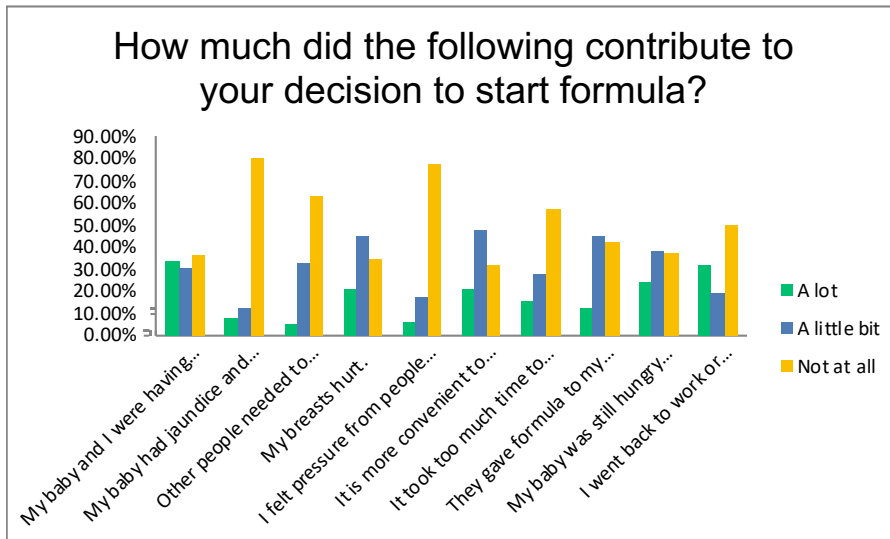
Answer Choices	Responses	
Provide ONLY breastmilk for the first 6 months (no other food or formula)	39.57%	55
Provide both breastmilk and formula from the beginning	30.94%	19
Provide ONLY breastmilk for 3-6 months	13.67%	15
Provide ONLY breastmilk for 1-2 months	10.79%	7
Provide ONLY breastmilk 1 month or less	5.04%	43
Other (please specify)		8
Answered		139
Skipped		0



Breastfeeding

How much did the following contribute to your decision to start formula?

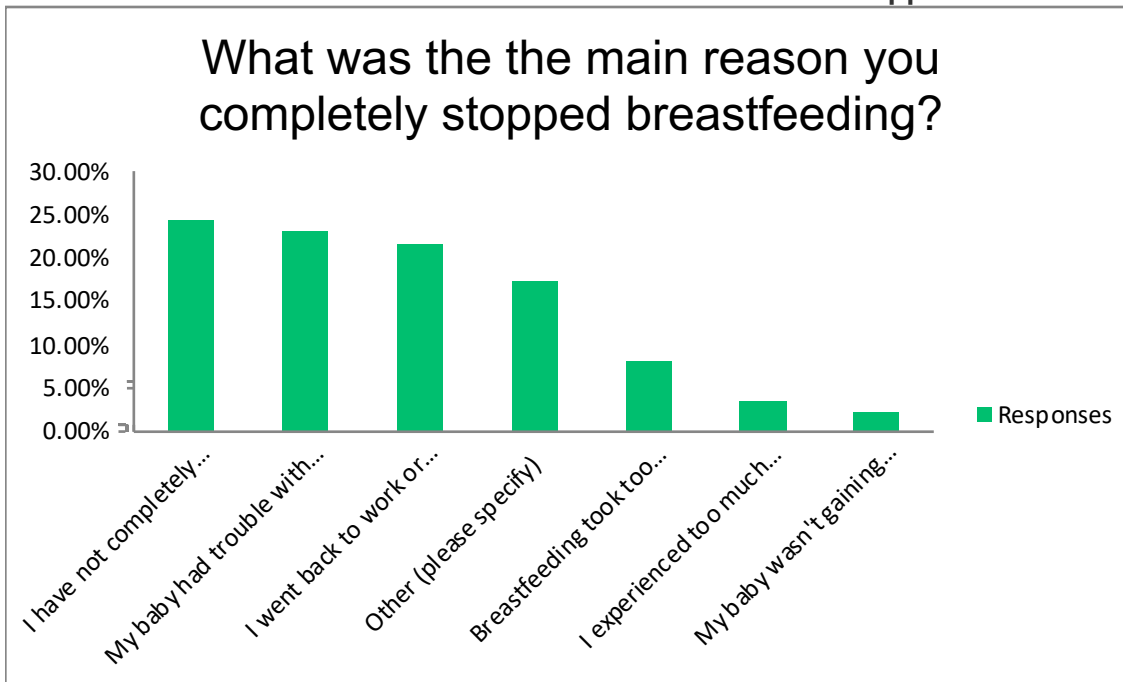
	A lot		A little bit		Not at all		Total
My baby and I were having a difficult time with breastfeeding (poor latch or	33.09%	46	30.22%	42	36.69%	51	139
My baby had jaundice and the doctor told me to use formula.	7.91%	11	12.23%	17	79.86%	111	139
Other people needed to feed my baby sometimes.	5.04%	7	32.37%	45	62.59%	87	139
My breasts hurt.	20.86%	29	44.60%	62	34.53%	48	139
I felt pressure from people around me.	5.76%	8	17.27%	24	76.98%	107	139
It is more convenient to use formula.	20.86%	29	47.48%	66	31.65%	44	139
It took too much time to breastfeed only.	15.11%	21	27.34%	38	57.55%	80	139
They gave formula to my baby in the hospital.	12.95%	18	44.60%	62	42.45%	59	139
My baby was still hungry after breastfeeding.	24.46%	34	38.13%	53	37.41%	52	139
I went back to work or school.	31.16%	43	19.57%	27	49.28%	68	138
Other (please specify)							5
					Answered		139
					Skipped		0



Breastfeeding

What was the the main reason you completely stopped breastfeeding?

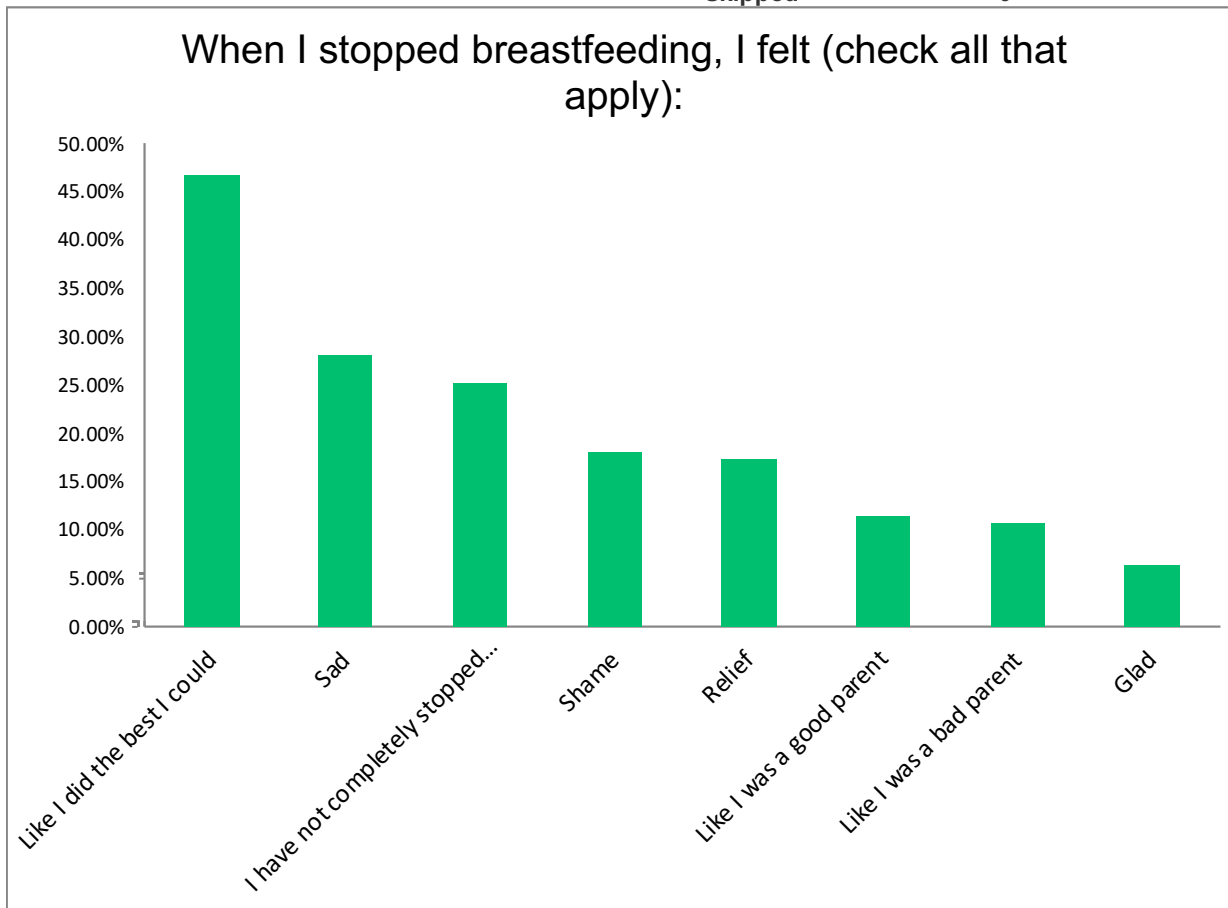
Answer Choices	Responses	
I have not completely stopped breastfeeding my baby.	24.46%	32
My baby had trouble with latching and/or sucking.	23.02%	3
I went back to work or school.	21.58%	11
Other (please specify)	17.27%	5
Breastfeeding took too much time.	7.91%	30
I experienced too much pain while breastfeeding.	3.60%	34
My baby wasn't gaining enough weight.	2.16%	24
Answered		139
Skipped		0



Breastfeeding

When I stopped breastfeeding, I felt (check all that apply):

Answer Choices	Responses	
Like I did the best I could	46.76%	39
Sad	28.06%	9
I have not completely stopped breastfeeding my baby.	25.18%	24
Shame	17.99%	25
Relief	17.27%	65
Like I was a good parent	11.51%	16
Like I was a bad parent	10.79%	15
Glad	6.47%	35
Answered		139
Skipped		0



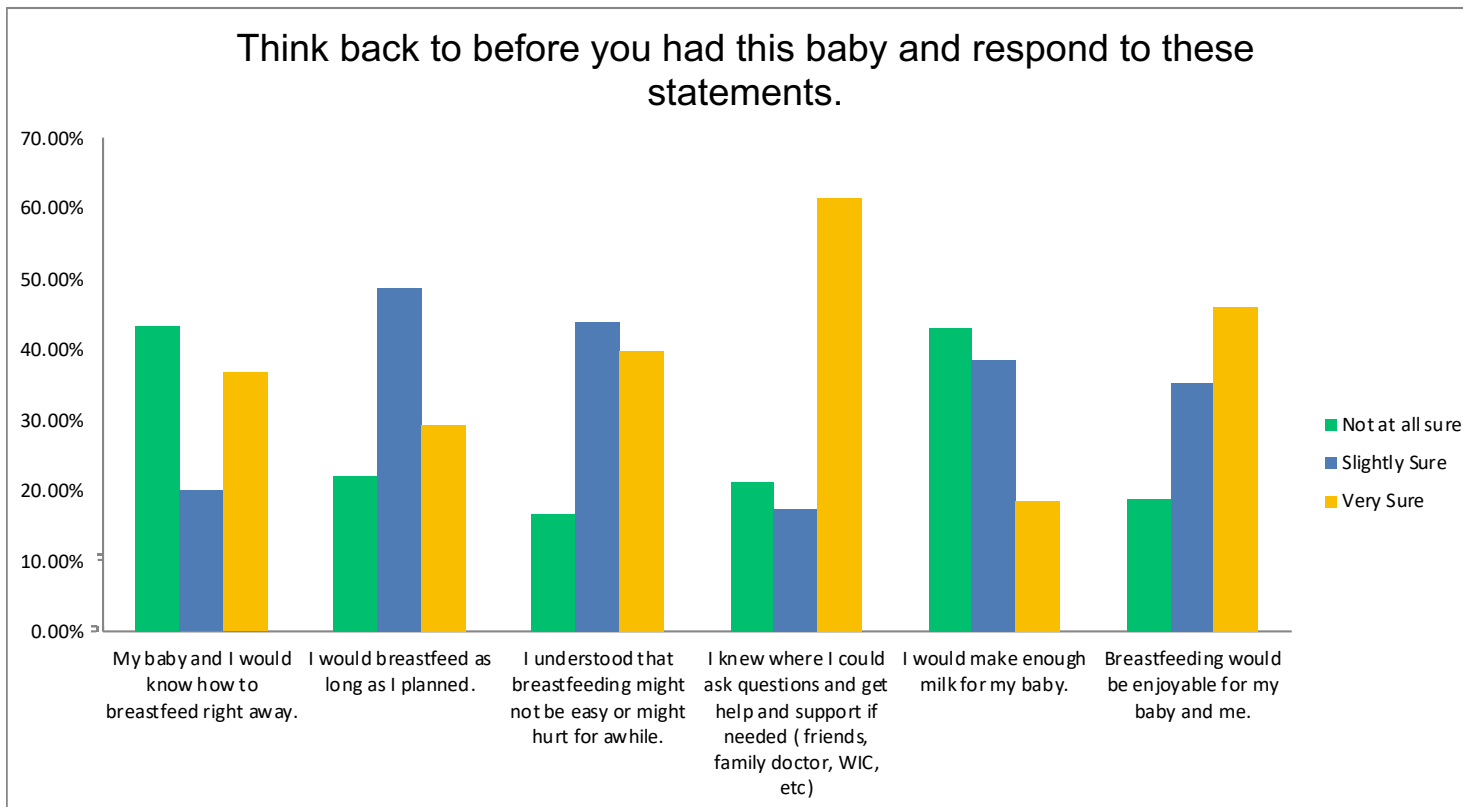
Breastfeeding

Think back to before you had this baby and respond to these statements.

	Not at all sure		Slightly Sure		Very Sure		Total
My baby and I would know how to breastfeed right away.	43.33%	13	20.00%	6	36.67%	11	30
I would breastfeed as long as I planned.	21.95%	9	48.78%	20	29.27%	12	41
I understood that breastfeeding might not be easy or might hurt for awhile.	16.67%	8	43.75%	21	39.58%	19	48
I knew where I could ask questions and get help and support if needed (fr	21.15%	11	17.31%	9	61.54%	32	52
I would make enough milk for my baby.	42.86%	30	38.57%	27	18.57%	13	70
Breastfeeding would be enjoyable for my baby and me.	18.82%	16	35.29%	30	45.88%	39	85

Answered
Skipped

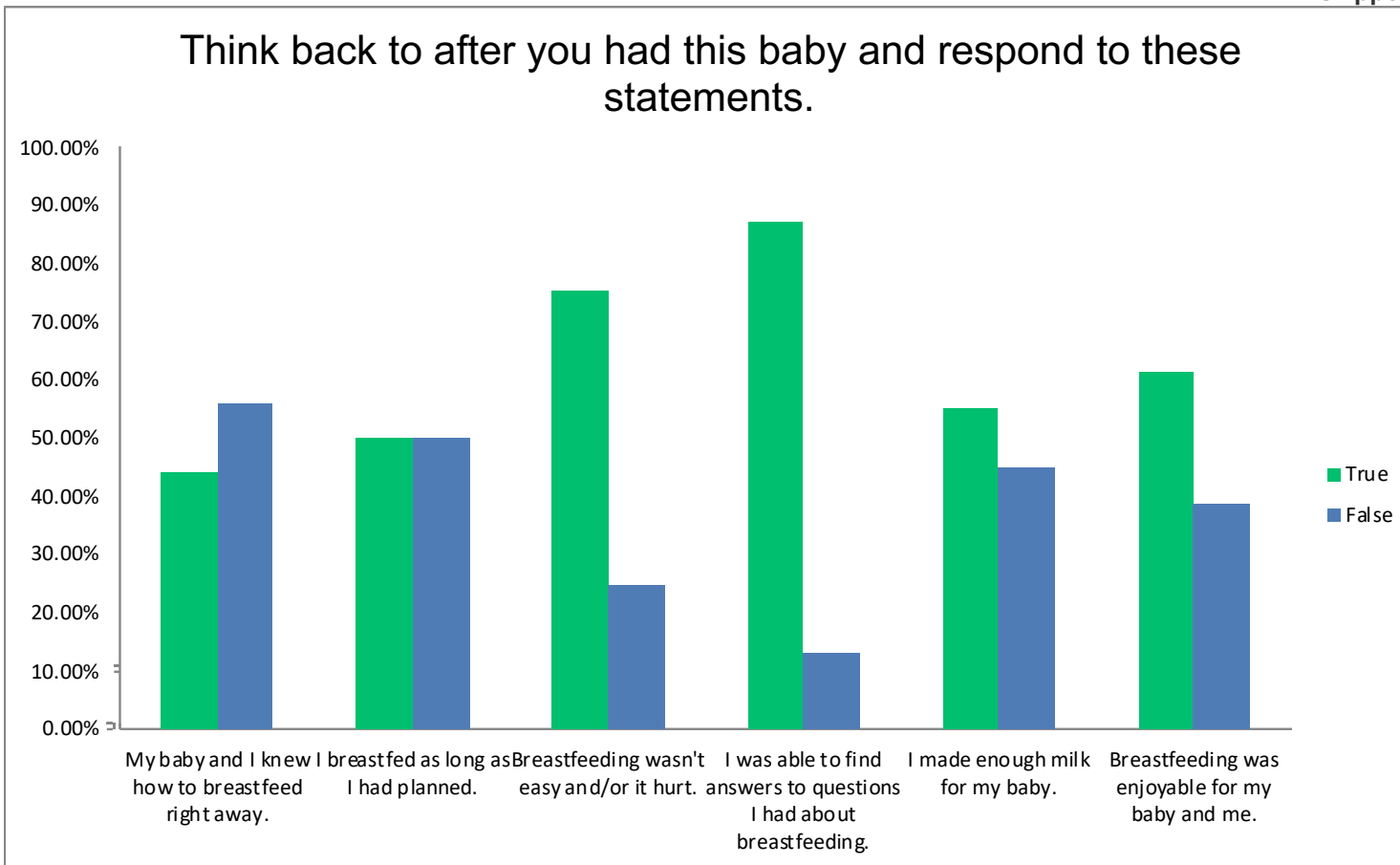
139
0



Breastfeeding

Think back to after you had this baby and respond to these statements.

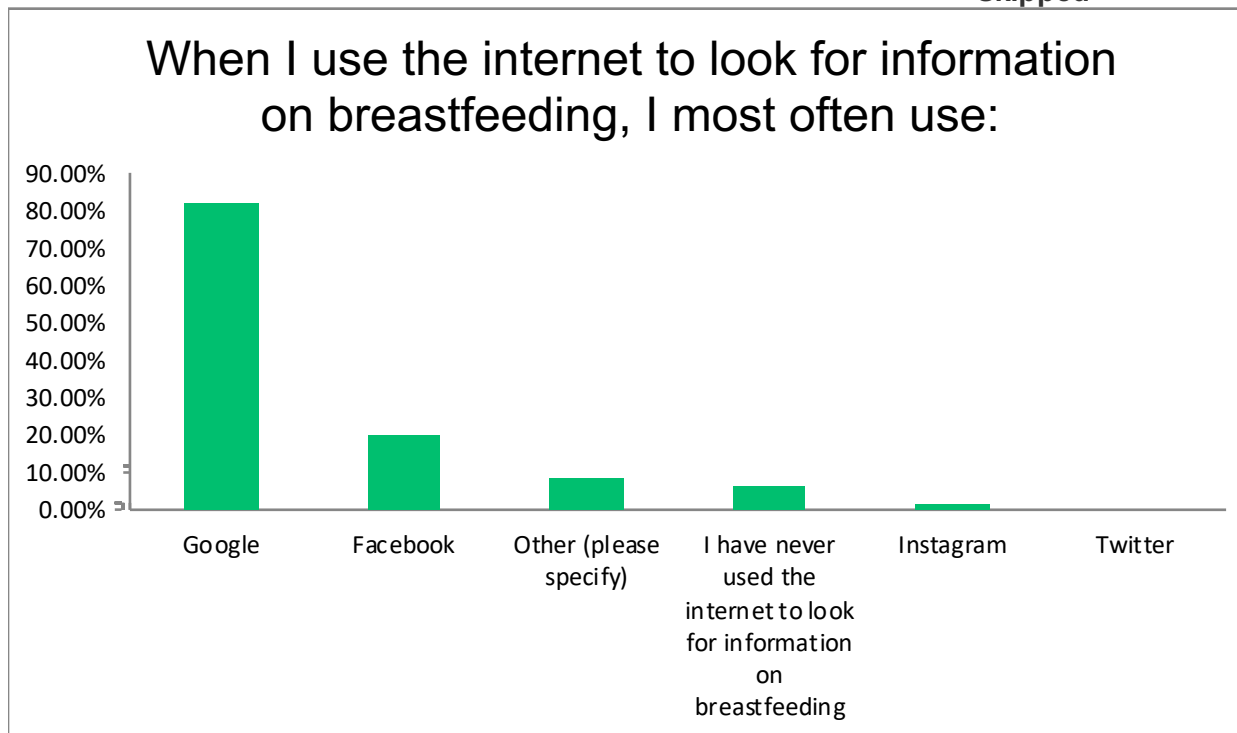
	True		False		Total
My baby and I knew how to breastfeed right away.	44.20%	61	55.80%	77	138
I breastfed as long as I had planned.	50.00%	69	50.00%	69	138
Breastfeeding wasn't easy and/or it hurt.	75.18%	103	24.82%	34	137
I was able to find answers to questions I had about breastfeeding.	87.05%	121	12.95%	18	139
I made enough milk for my baby.	55.07%	76	44.93%	62	138
Breastfeeding was enjoyable for my baby and me.	61.31%	84	38.69%	53	137
Other (please specify)					2
				Answered	139
				Skipped	0



Breastfeeding

When I use the internet to look for information on breastfeeding, I most often use:

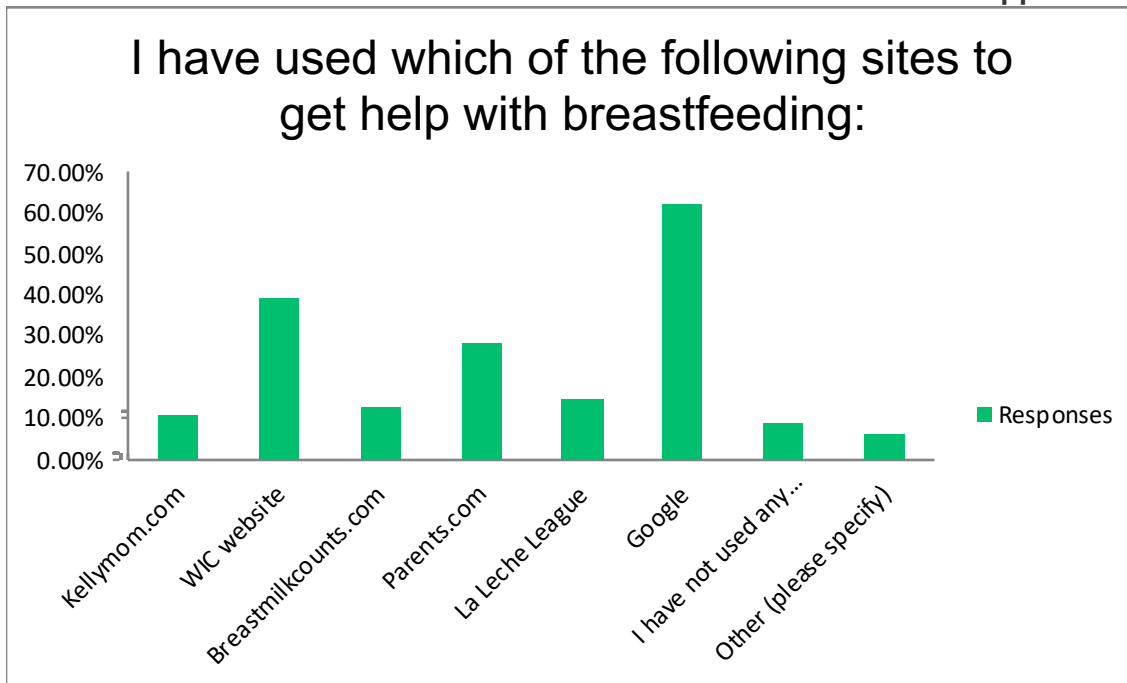
Answer Choices	Responses	
Google	82.01%	28
Facebook	20.14%	0
Other (please specify)	8.63%	2
I have never used the internet to look for information on breastfeeding	6.47%	114
Instagram	1.44%	9
Twitter	0.00%	12
Answered		139
Skipped		0



Breastfeeding

I have used which of the following sites to get help with breastfeeding:

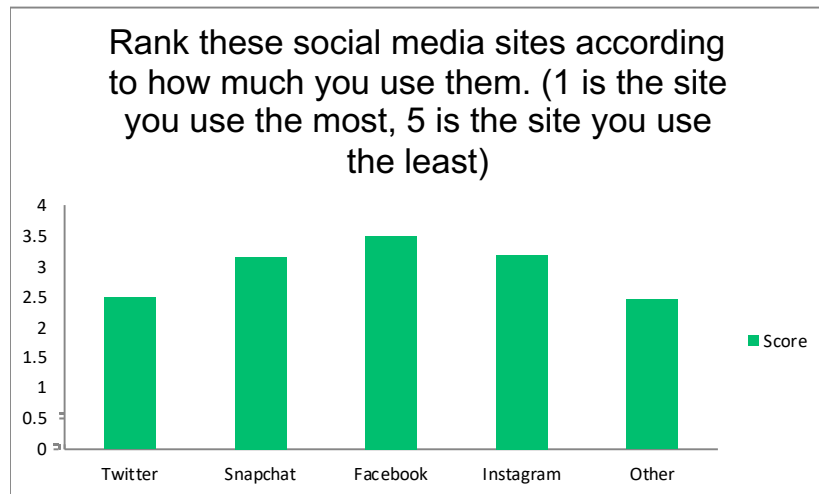
Answer Choices	Responses	
Kellymom.com	10.79%	15
WIC website	39.57%	55
Breastmilkcounts.com	12.95%	18
Parents.com	28.06%	39
La Leche League	14.39%	20
Google	61.87%	86
I have not used any websites to get help with breastfeeding	8.63%	12
Other (please specify)	6.47%	9
	Answered	139
	Skipped	0



Breastfeeding

Rank these social media sites according to how much you use them. (1 is the site you use the most, 5 is the site you use the least)

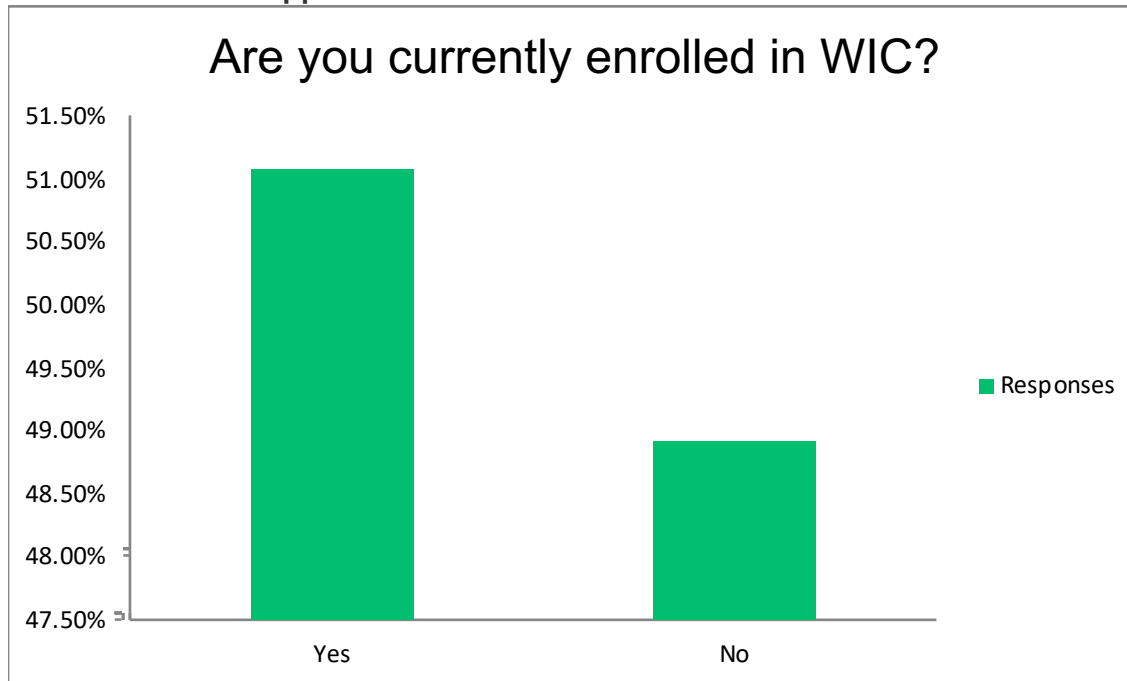
	1		2		3		4		5		Total	Score
Twitter	18.75%	18	10.42%	10	9.38%	9	25.00%	24	36.46%	35	96	2.5
Snapchat	7.77%	8	30.10%	31	38.83%	40	15.53%	16	7.77%	8	103	3.15
Facebook	46.88%	60	12.50%	16	8.59%	11	5.47%	7	26.56%	34	128	3.48
Instagram	14.16%	16	28.32%	32	26.55%	30	22.12%	25	8.85%	10	113	3.17
Other	19.18%	14	9.59%	7	10.96%	8	17.81%	13	42.47%	31	73	2.45
											Answered	137
											Skipped	2



Breastfeeding

Are you currently enrolled in WIC?

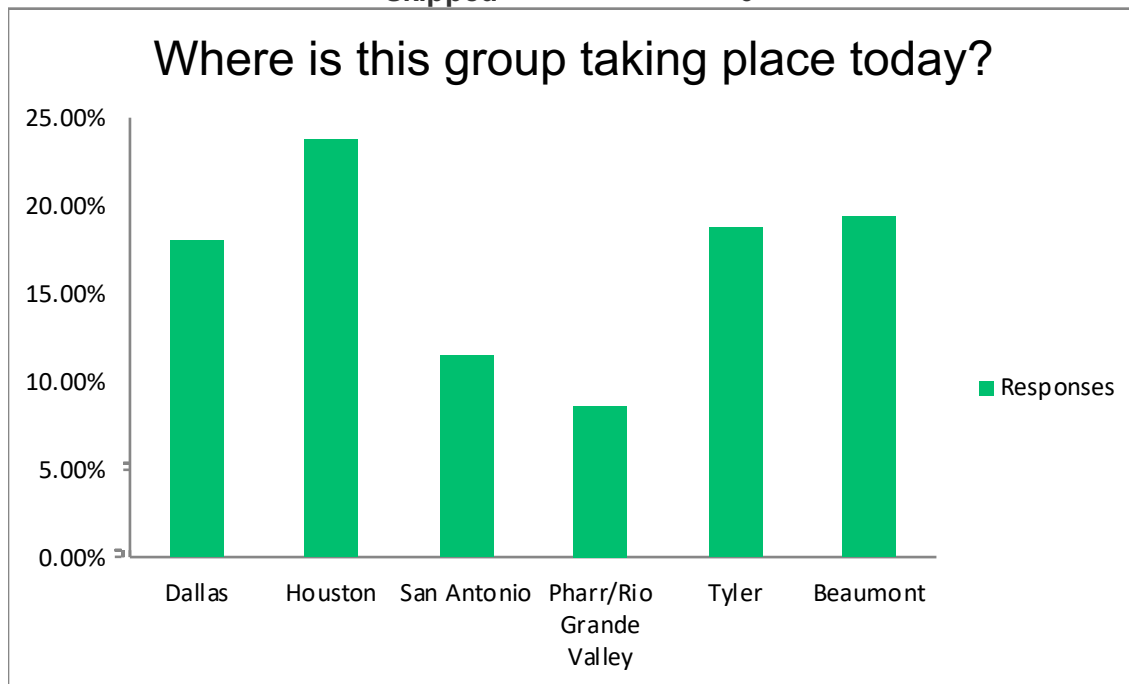
Answer Choices	Responses	
Yes	51.08%	71
No	48.92%	68
Answered		139
Skipped		0



Breastfeeding

Where is this group taking place today?

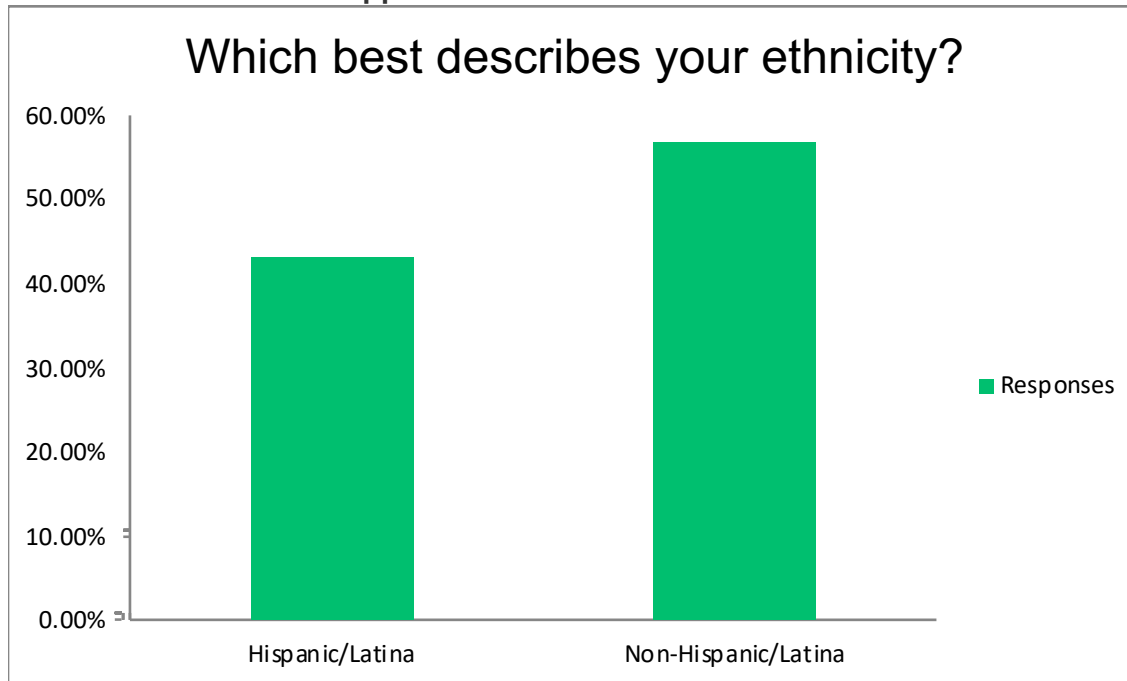
Answer Choices	Responses	
Dallas	17.99%	25
Houston	23.74%	33
San Antonio	11.51%	16
Pharr/Rio Grande Valley	8.63%	12
Tyler	18.71%	26
Beaumont	19.42%	27
Answered		139
Skipped		0



Breastfeeding

Which best describes your ethnicity?

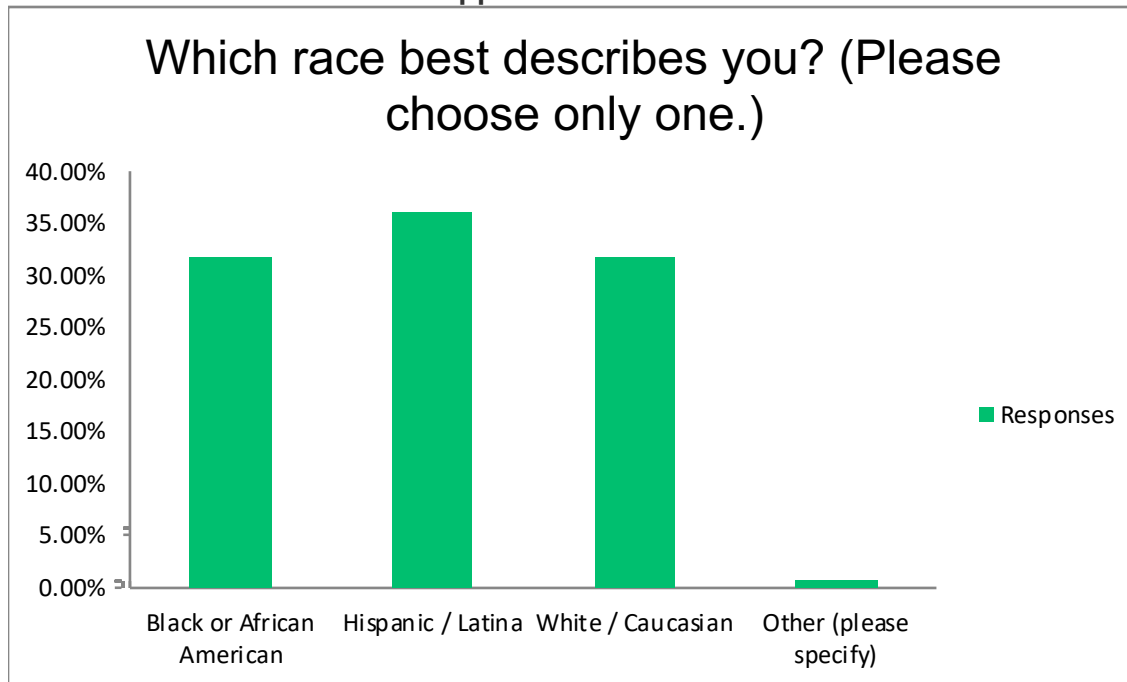
Answer Choices	Responses	
Hispanic/Latina	43.17%	60
Non-Hispanic/Latina	56.83%	79
Answered		139
Skipped		0



Breastfeeding

Which race best describes you? (Please choose only one.)

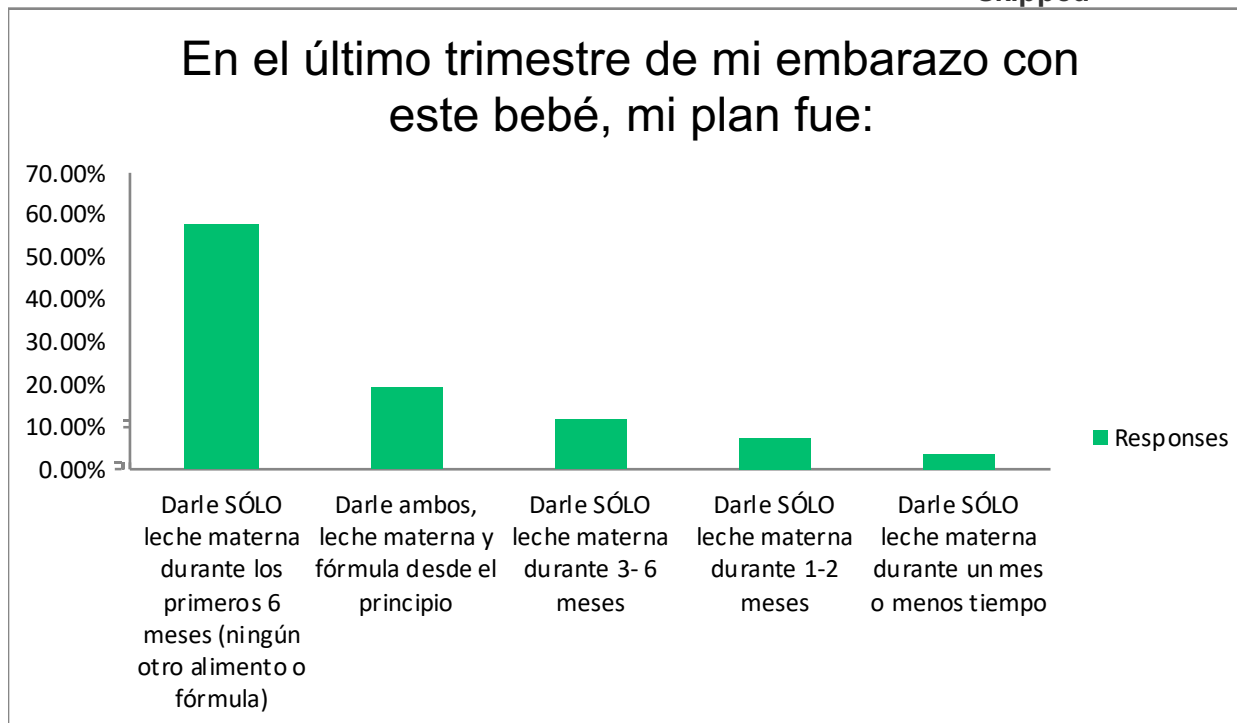
Answer Choices	Responses	
Black or African American	31.65%	44
Hispanic / Latina	35.97%	50
White / Caucasian	31.65%	44
Other (please specify)	0.72%	1
Answered		139
Skipped		0



Breastfeeding Spanish

En el último trimestre de mi embarazo con este bebé, mi plan fue:

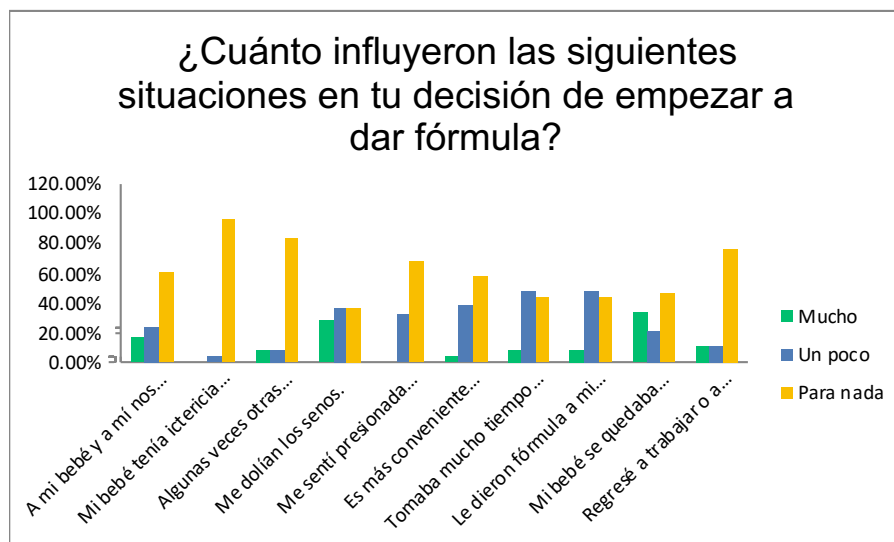
Answer Choices	Responses	
Darle SÓLO leche materna durante los primeros 6 meses (ningún otro alim	57.69%	15
Darle ambos, leche materna y fórmula desde el principio	19.23%	3
Darle SÓLO leche materna durante 3- 6 meses	11.54%	2
Darle SÓLO leche materna durante 1-2 meses	7.69%	1
Darle SÓLO leche materna durante un mes o menos tiempo	3.85%	5
Otro (por favor especifique		2
Answered		26
Skipped		0



Breastfeeding Spanish

¿Cuánto influyeron las siguientes situaciones en tu decisión de empezar a dar fórmula?

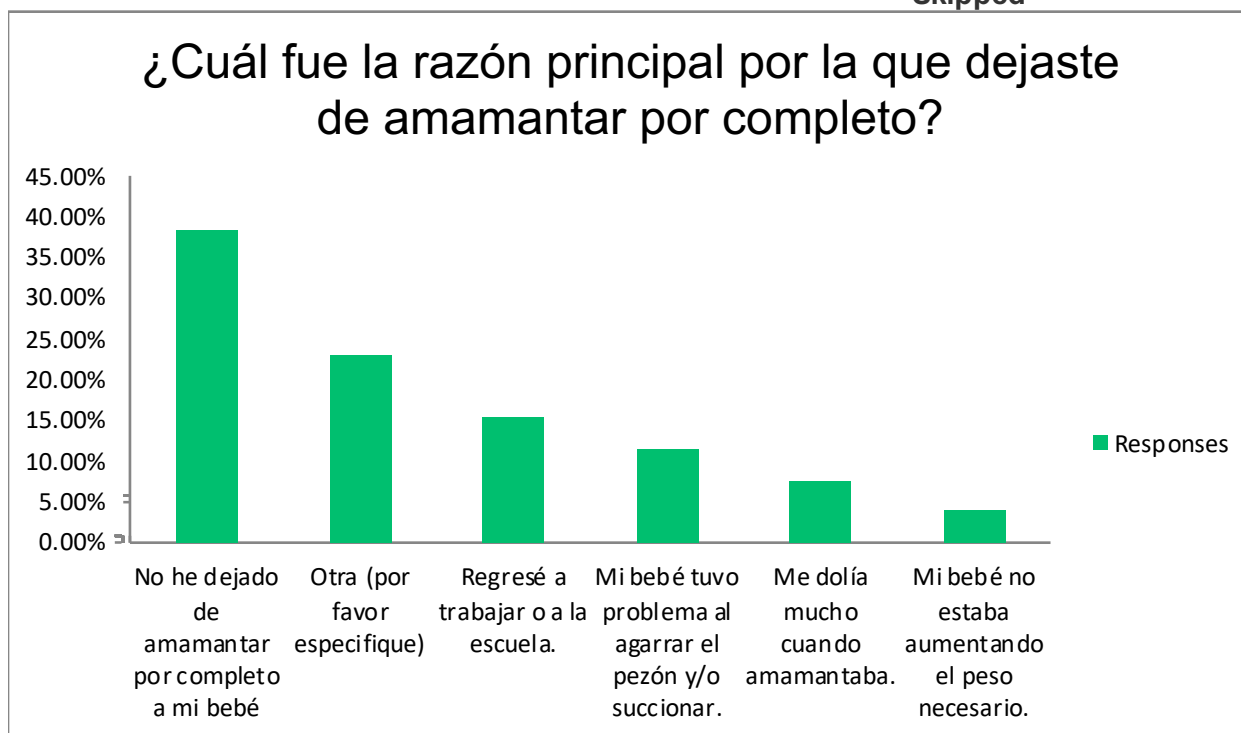
	Mucho		Un poco		Para nada		Total
A mi bebé y a mí nos está costando mucho trabajo la lactancia (mala colo	16.00%	4	24.00%	6	60.00%	15	25
Mi bebé tenía ictericia y el doctor me dijo que usara formula	0.00%	0	4.00%	1	96.00%	24	25
Algunas veces otras personas tenían que darle de comer a mi bebé.	8.00%	2	8.00%	2	84.00%	21	25
Me dolían los senos.	28.00%	7	36.00%	9	36.00%	9	25
Me sentí presionada por la gente a mi alrededor.	0.00%	0	32.00%	8	68.00%	17	25
Es más conveniente usar fórmula.	4.17%	1	37.50%	9	58.33%	14	24
Tomaba mucho tiempo si sólo lo amamantaba.	8.00%	2	48.00%	12	44.00%	11	25
Le dieron fórmula a mi bebé en el hospital.	8.00%	2	48.00%	12	44.00%	11	25
Mi bebé se quedaba con hambre después de amamantarlo.	33.33%	8	20.83%	5	45.83%	11	24
Regresé a trabajar o a la escuela.	11.54%	3	11.54%	3	76.92%	20	26
Otra (por favor especifique)							2
Answered							26
Skipped							0



Breastfeeding Spanish

¿Cuál fue la razón principal por la que dejaste de amamantar por completo?

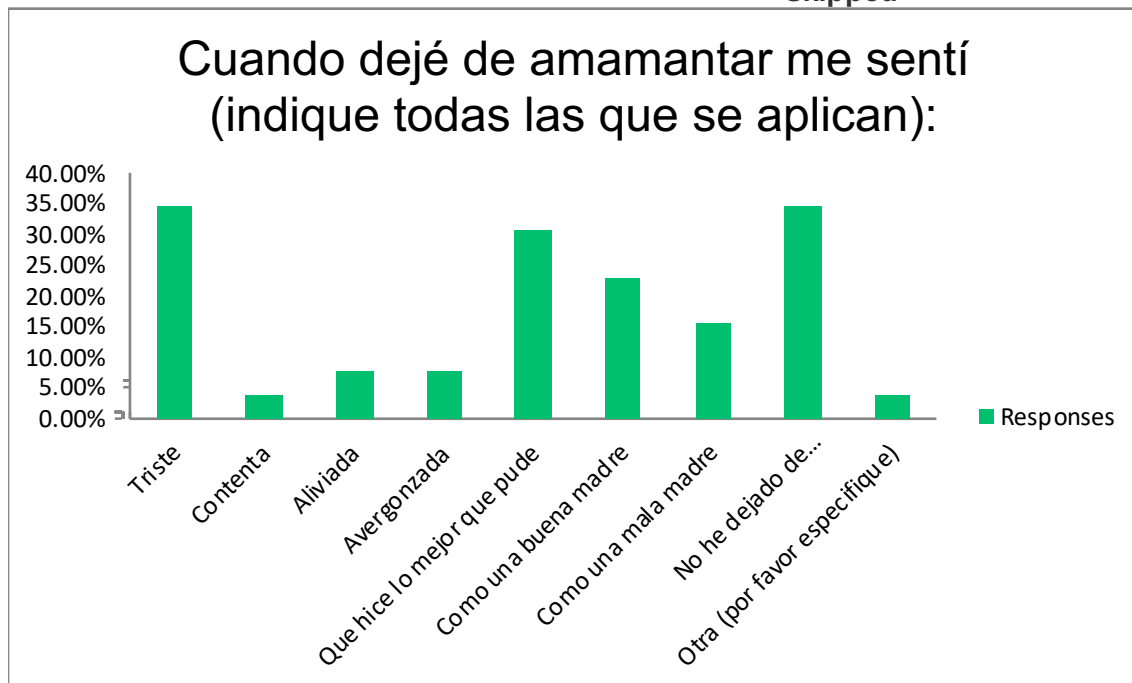
Answer Choices	Responses	
No he dejado de amamantar por completo a mi bebé	38.46%	3
Otra (por favor especifique)	23.08%	1
Regresé a trabajar o a la escuela.	15.38%	0
Mi bebé tuvo problema al agarrar el pezón y/o succionar.	11.54%	2
Me dolía mucho cuando amamantaba.	7.69%	4
Mi bebé no estaba aumentando el peso necesario.	3.85%	10
Answered		26
Skipped		0



Breastfeeding Spanish

Cuando dejé de amamantar me sentí (indique todas las que se aplican):

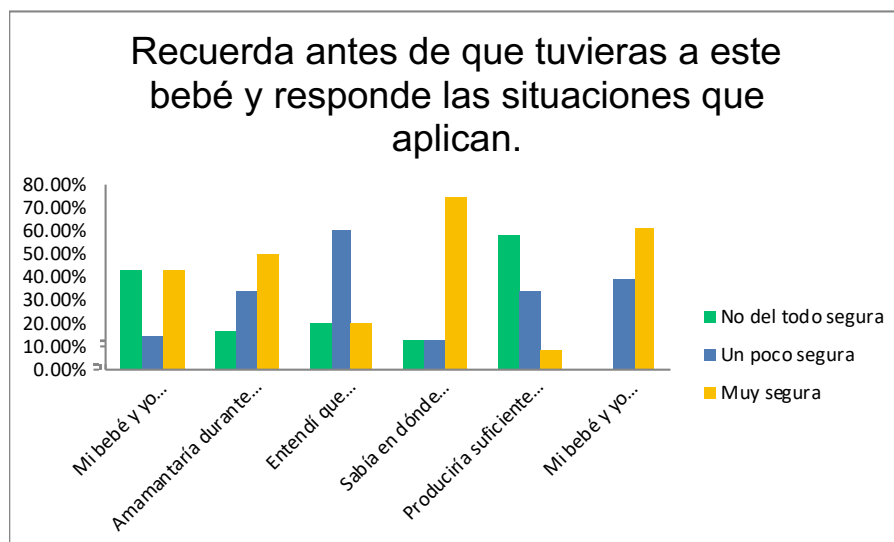
Answer Choices	Responses	
Triste	34.62%	9
Contenta	3.85%	1
Aliviada	7.69%	2
Avergonzada	7.69%	2
Que hice lo mejor que pude	30.77%	8
Como una buena madre	23.08%	6
Como una mala madre	15.38%	4
No he dejado de amamantar por completo a mi bebé	34.62%	9
Otra (por favor especifique)	3.85%	1
Answered		26
Skipped		0



Breastfeeding Spanish

Recuerda antes de que tuvieras a este bebé y responde las situaciones que aplican.

	No del todo segura		Un poco segura		Muy segura		Total
Mi bebé y yo sabríamos cómo amamantar de inmediato	42.86%	3	14.29%	1	42.86%	3	7
Amamantaría durante todo el tiempo que planeé.	16.67%	1	33.33%	2	50.00%	3	6
Entendí que amamantar podría no ser sencillo y que podría doler por un ti	20.00%	1	60.00%	3	20.00%	1	5
Sabía en dónde preguntar para recibir la ayuda y el apoyo en caso neces	12.50%	1	12.50%	1	75.00%	6	8
Produciría suficiente leche para mi bebé.	58.33%	7	33.33%	4	8.33%	1	12
Mi bebé y yo disfrutaríamos la lactancia	0.00%	0	38.89%	7	61.11%	11	18
						Answered	26
						Skipped	0

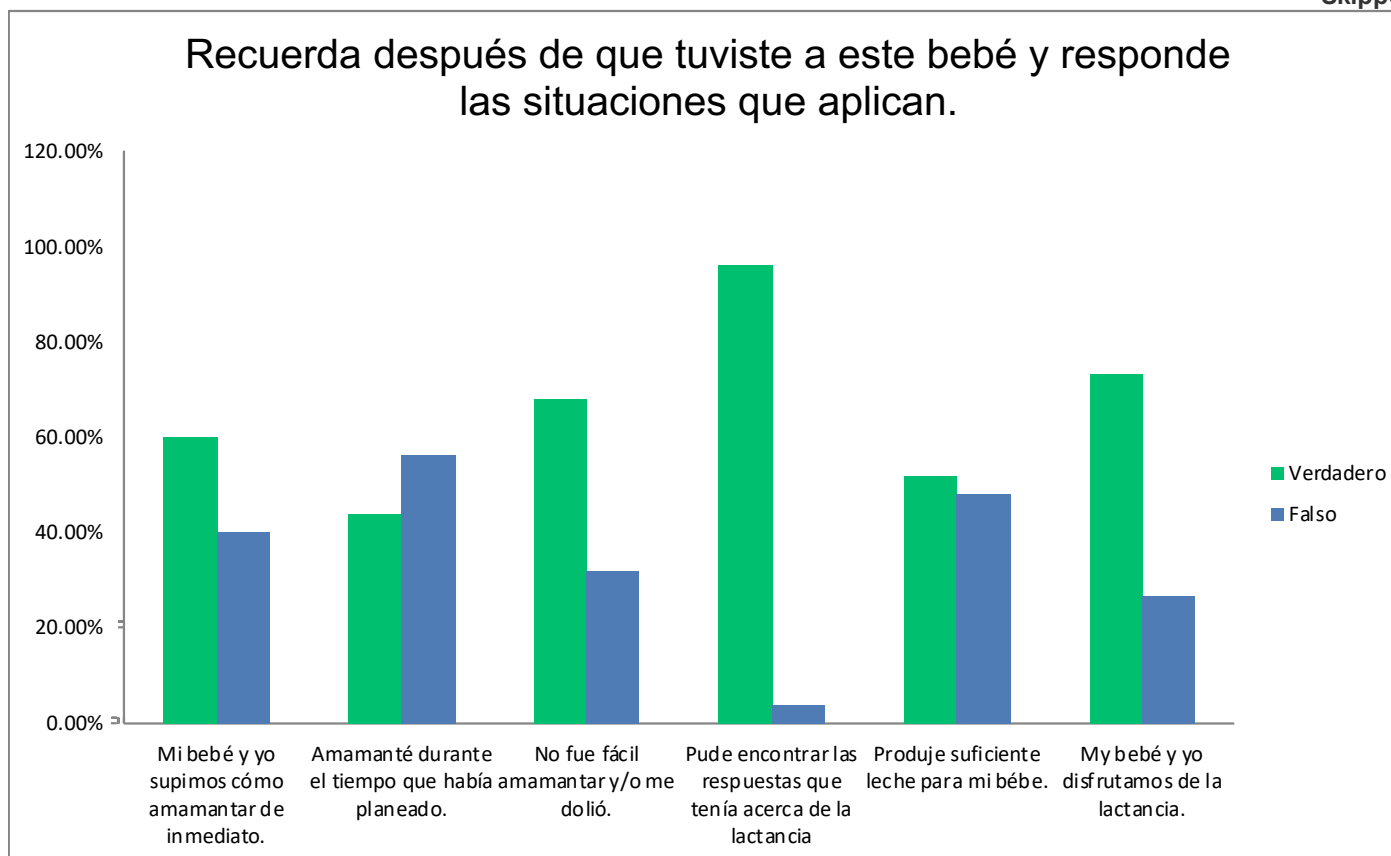


Breastfeeding Spanish

Recuerda después de que tuviste a este bebé y responde las situaciones que aplican.

	Verdadero		Falso		Total
Mi bebé y yo supimos cómo amamantar de inmediato.	60.00%	15	40.00%	10	25
Amamanté durante el tiempo que había planeado.	44.00%	11	56.00%	14	25
No fue fácil amamantar y/o me dolió.	68.00%	17	32.00%	8	25
Pude encontrar las respuestas que tenía acerca de la lactancia	96.00%	24	4.00%	1	25
Produje suficiente leche para mi bebé.	52.00%	13	48.00%	12	25
My bebé y yo disfrutamos de la lactancia.	73.08%	19	26.92%	7	26
Otra (por favor especifique)					0
					26
					0

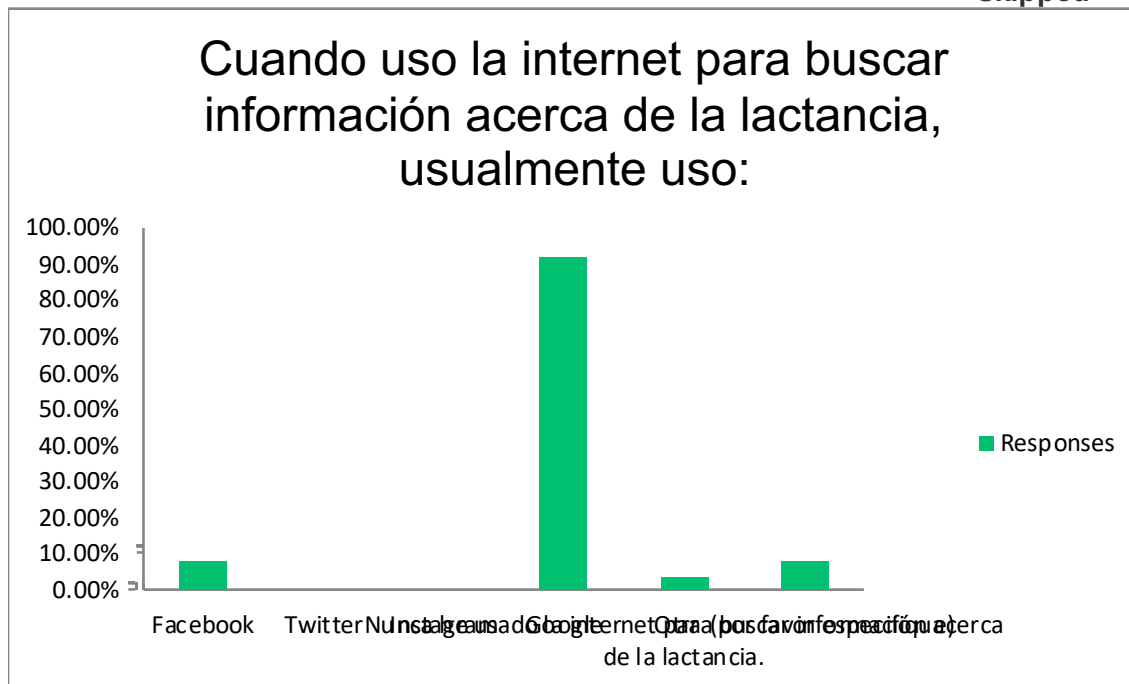
Answered
Skipped



Breastfeeding Spanish

Cuando uso la internet para buscar información acerca de la lactancia, usualmente uso:

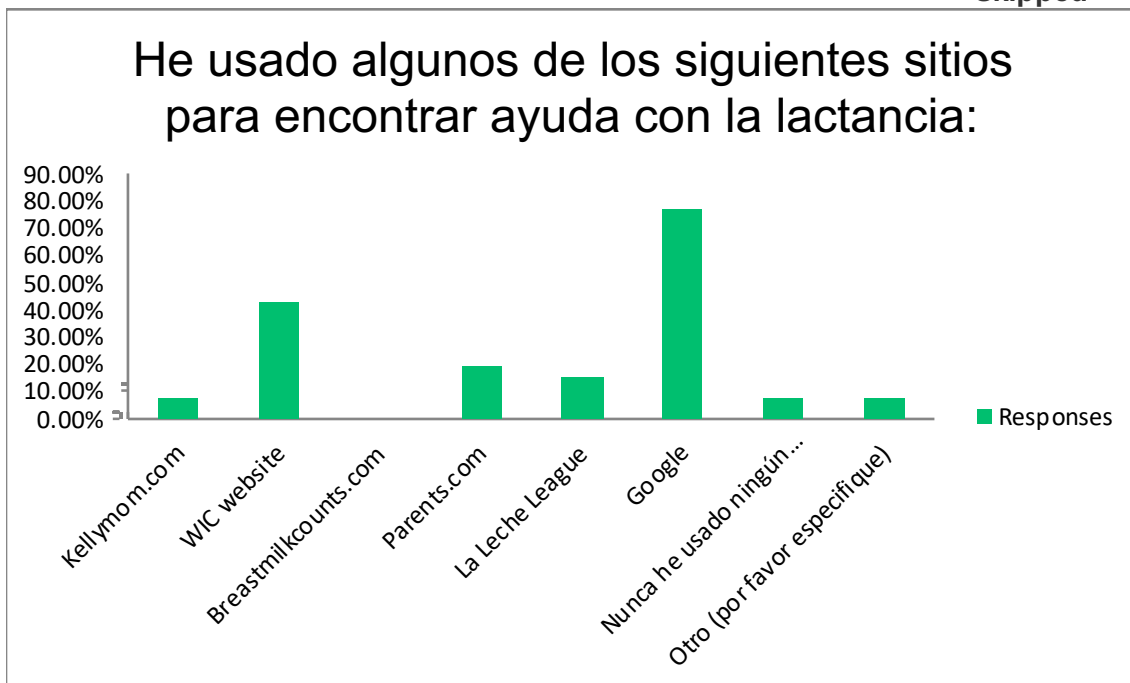
Answer Choices	Responses	
Facebook	7.69%	2
Twitter	0.00%	0
Instagram	0.00%	0
Google	92.31%	24
Nunca he usado la internet para buscar información acerca de la lactancia	3.85%	1
Otra (por favor especifique)	7.69%	2
Answered		26
Skipped		0



Breastfeeding Spanish

He usado algunos de los siguientes sitios para encontrar ayuda con la lactancia:

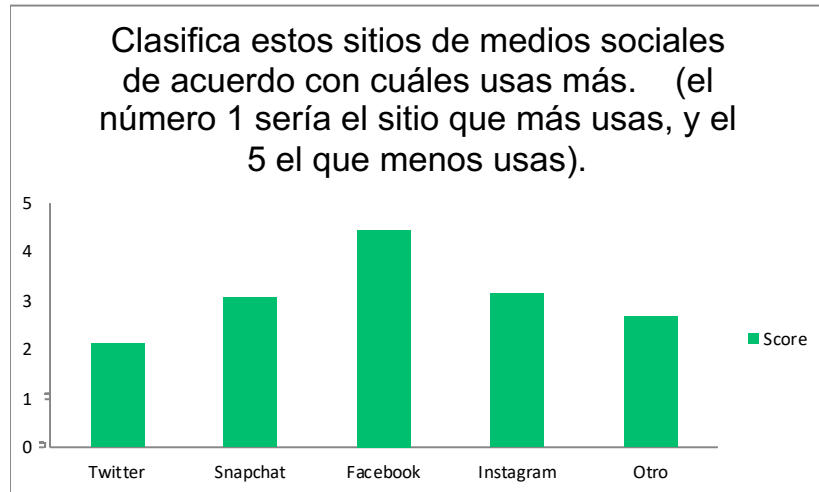
Answer Choices	Responses	
Kellymom.com	7.69%	2
WIC website	42.31%	11
Breastmilkcounts.com	0.00%	0
Parents.com	19.23%	5
La Leche League	15.38%	4
Google	76.92%	20
Nunca he usado ningún sitio de internet para buscar ayuda con la lactancia	7.69%	2
Otro (por favor especifique)	7.69%	2
Answered		26
Skipped		0



Breastfeeding Spanish

Clasifica estos sitios de medios sociales de acuerdo con cuáles usas más. (el número 1 sería el sitio que más usas, y el 5 el que menos usas).

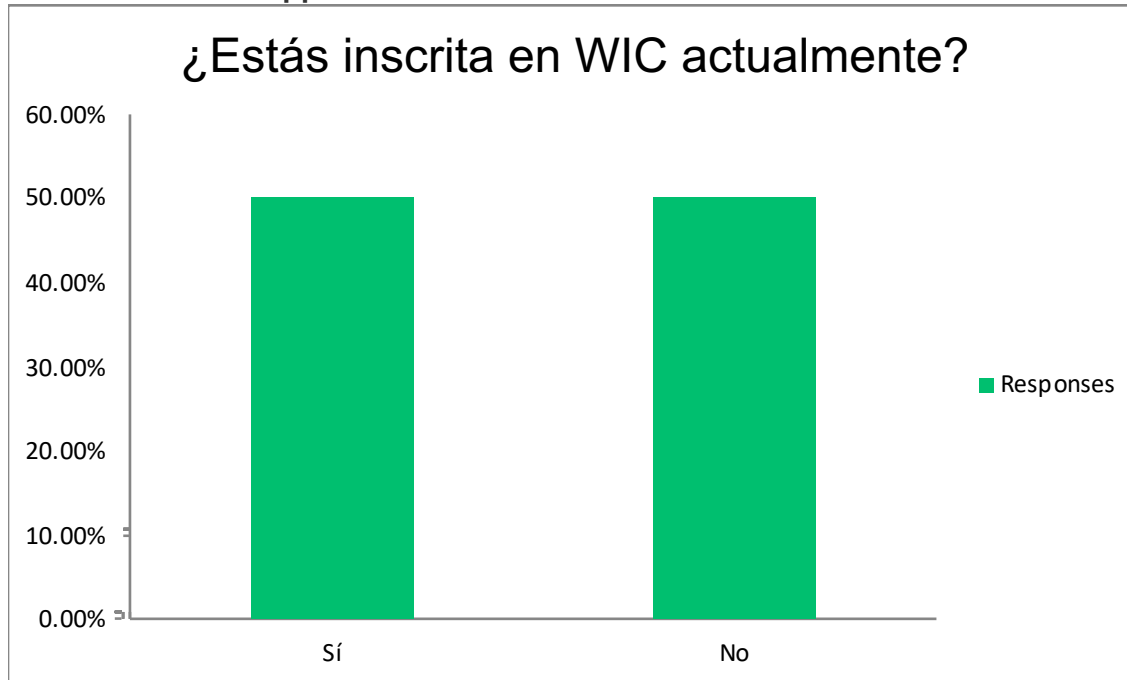
	1		2		3		4		5	Total	Score	
Twitter	6.67%	1	6.67%	1	26.67%	4	13.33%	2	46.67%	7	15	2.13
Snapchat	0.00%	0	42.11%	8	21.05%	4	36.84%	7	0.00%	0	19	3.05
Facebook	81.82%	18	0.00%	0	9.09%	2	0.00%	0	9.09%	2	22	4.45
Instagram	0.00%	0	47.37%	9	31.58%	6	10.53%	2	10.53%	2	19	3.16
Otro	20.00%	3	20.00%	3	6.67%	1	13.33%	2	40.00%	6	15	2.67
Answered											25	
Skipped											1	



Breastfeeding Spanish

¿Estás inscrita en WIC actualmente?

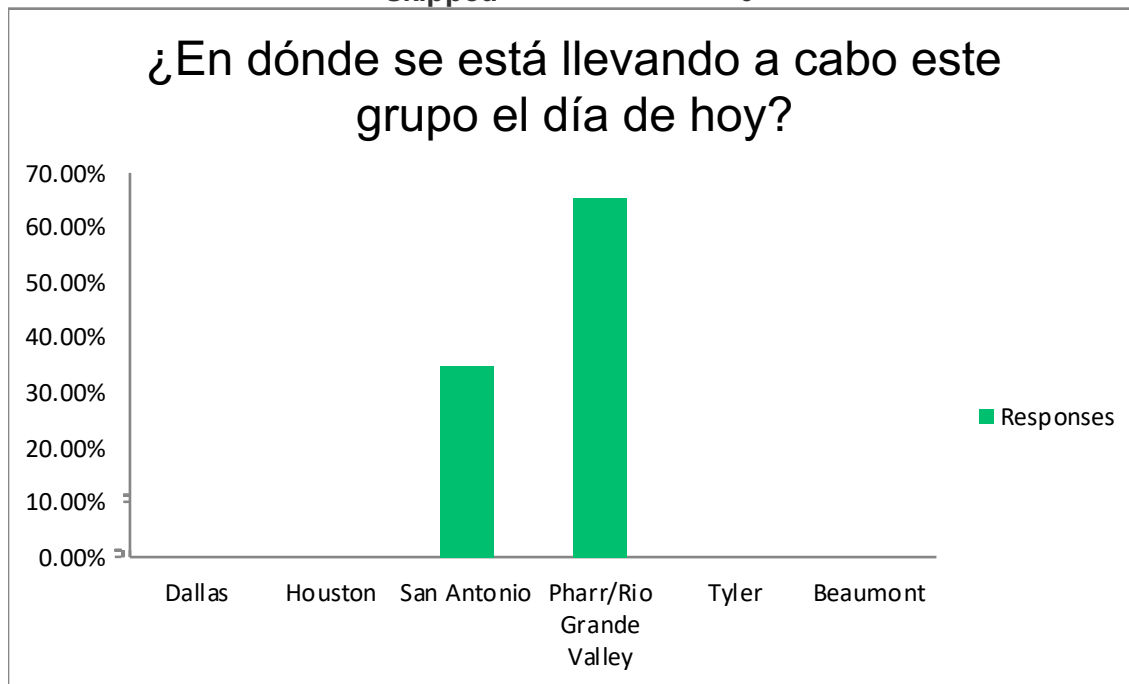
Answer Choices	Responses	
Sí	50.00%	13
No	50.00%	13
Answered		26
Skipped		0



Breastfeeding Spanish

¿En dónde se está llevando a cabo este grupo el día de hoy?

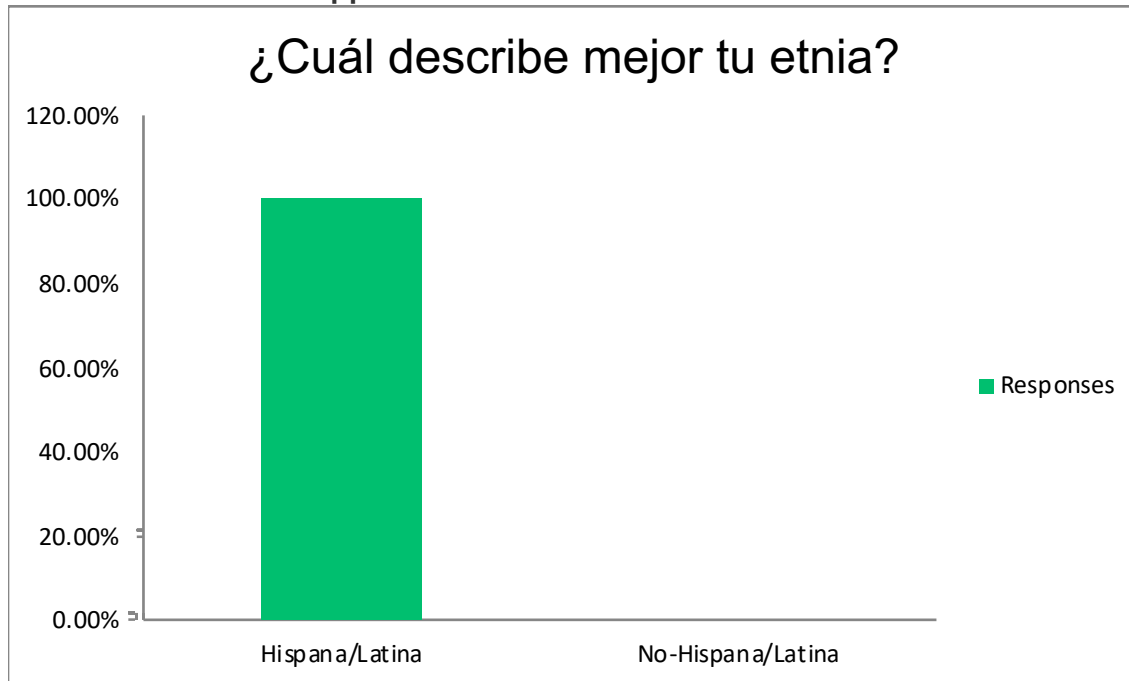
Answer Choices	Responses	
Dallas	0.00%	0
Houston	0.00%	0
San Antonio	34.62%	9
Pharr/Rio Grande Valley	65.38%	17
Tyler	0.00%	0
Beaumont	0.00%	0
Answered		26
Skipped		0



Breastfeeding Spanish

¿Cuál describe mejor tu etnia?

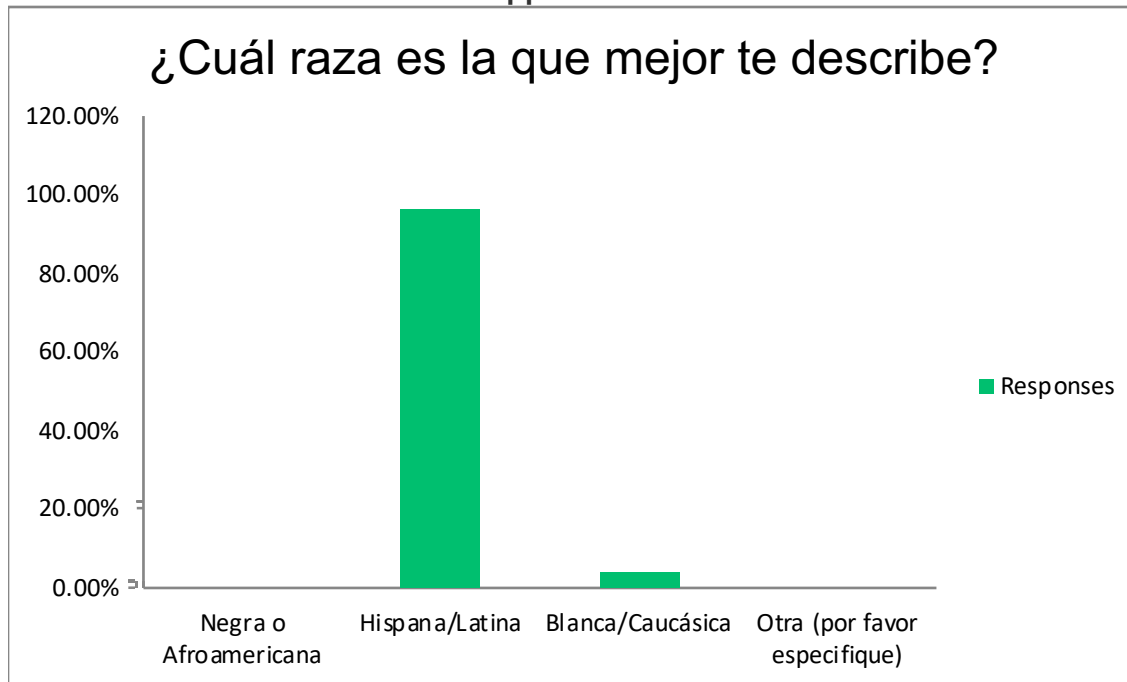
Answer Choices	Responses	
Hispana/Latina	100.00%	26
No-Hispana/Latina	0.00%	0
Answered		26
Skipped		0



Breastfeeding Spanish

¿Cuál raza es la que mejor te describe?

Answer Choices	Responses	
Negra o Afroamericana	0.00%	0
Hispana/Latina	96.15%	25
Blanca/Caucásica	3.85%	1
Otra (por favor especifique)	0.00%	0
Answered		26
Skipped		0





SPOT: BAD DOG
DATE: 11/8/18
FORMAT: :30

The following will serve as a reference script for the DSHS Breastfeeding Awareness (Texas WIC) /HHSC :30 Broadcast spot. The left column represents visuals on screen. The right column represents what our moms might say.

Visuals	Audio
Fade up from black.	
Mom interviews cut with b-roll of the hilarious, beautiful chaos of real-life new motherhood—leaking boobs on a work shirt, discreet shot of a disheveled mom trying to hold pump on while eating a snack, etc.	MOM 1: You don’t EVEN want to see what these nipples look like. MOM 2: Two words: projectile vomit. MOM 3: My mom’s dog kept eating my nursing bras...
Onscreen Text: No matter how hard breastfeeding gets, WIC is here to help.	
	MOM 1: Who even invented nipple shields?! It must have been a man. MOM 2: The first week home, I called the breastfeeding hotline every night at 3 in the morning. MOM 3: Know what’s fun? Leaking milk through your work shirt. Just kidding! Not fun! MOM 1: And I just kept thinking, if I can just make it one more week. I just kept going...
Onscreen Text: Breastmilk. Every Ounce Counts. Visit breastmilkcounts.com for real help 24/7.	



SPOT: ANITA
FORMAT: :30

The following will serve as a reference script for the DSHS Breastfeeding Awareness (Texas WIC) /HHSC :30 Broadcast spot. The left column represents visuals on screen. The right column represents what our mom might say.

Visuals	Audio
Fade up from black.	
Mom interview cut with b-roll of the beautiful chaos of real-life new motherhood.	<p>ANITA: I was so determined to breastfeed. I wanted to. But it was breaking my heart that I couldn't.</p> <p>I kept asking myself, What am I doing wrong? Why is it so hard? It was making me feel worse and worse and it made me think I was going to have to give up.</p>
Onscreen Text: WIC is here to help.	<p>ANITA: I arrived at WIC crying.</p> <p>[But Elizabeth] taught me to latch and position the baby.</p> <p>[She] told me, "Be patient. Enjoy your baby." And now I really am. She helped me do what I always wanted to do.</p>
Onscreen Text: Breastmilk. Every Ounce Counts. Visit breastmilkcounts.com for real help 24/7	

SPOT: REAL MOMS
DATE: 11/08/18
FORMAT: :30 RADIO

Upbeat music...

MOM 1: I was TOTALLY planning to breastfeed my baby.

MOM 2: But I had a really hard time. My daughter wouldn't latch...

MOM 3: My nipples hurt.

MOM 4: I couldn't tell if my baby was getting enough...

MOM 3: I felt like a terrible mom.

Music swells...

MOM 2: The team at WIC helped me fix my latch. And it was FREE.

MOM 1: WIC has in-person breastfeeding support, how-to videos, and there's even a hotline you can call at like 3 in the morning.

MOM 3: They didn't judge me.

MOM 4: I kept going, and so can you!

MOM 2: Don't give up, mama! It's all worth it!

MOM 1: Visit [breastmilkcounts dot com](http://breastmilkcounts.com) for real help 24/7.