

Community breastfeeding mentoring workshops are an effective method to support breastfeeding

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The 22094VIC Course in Community Breastfeeding Mentoring Workshop

The 22094VIC Course in Community Breastfeeding Mentoring is a nationally recognised Short Course developed and accredited by the Australian Breastfeeding Association (ABA) on the 1 January 2011.

Why ABA developed the course

During 2008, ABA conducted a review of existing breastfeeding and lactation education and training for health workers, allied health professionals and community members and identified knowledge and skills gap for training in how to support breastfeeding. This review established most health professionals who work with mothers and families receive minimal training or education in the promotion, assessment and management of breastfeeding. The National Breastfeeding Strategy 2010 – 2015¹ identifies that educating health professionals to value and support breastfeeding is a key factor in improving the consistency of information provided to mothers and increasing the duration rates of breastfeeding in Australia.

Breastfeeding is an important preventative health behaviour with implications for infant and maternal health, as well as future health costs. These public health benefits are described in the 2013 Infant Feeding Guidelines² and National Breastfeeding Strategy 2010 – 2015¹ and include for infants:

- reduced risk of infection, asthma and atopic disease and sudden infant death syndrome
- improved cognitive development
- protection against obesity, hypertension and some chronic diseases in later life.

Benefits to mothers include:

- improved bonding with their infant
- accelerated recovery from childbirth and progress towards a healthy body weight.
- reduced risk of some cancers.

Evidence indicates that breastfeeding rates for Aboriginal and Torres Strait Islander mothers in regional and rural areas are lower than non-Indigenous infants but remain high in remote areas. In the general population of Australia it is estimated that 96% of mothers initiate breastfeeding and approximately 50% continue to offer only some breast milk at six months. Very few infants are exclusively breastfed at this age. These figures are well below the NHMRC recommendations for maintaining exclusive breastfeeding until six months. Mothers commonly seek support for breastfeeding and infant feeding decisions from a variety of health professionals and report receiving inconsistent, confusing and at times inaccurate advice which leads them to cease breastfeeding earlier than planned.

The content and structure of the Community Breastfeeding Mentor (CBM) workshop

The content of the course covers two main areas:

- Essential and clear information about breastfeeding. This includes
 - Why it is important
 - How it works
 - How most babies behave

- How to recognise basic breastfeeding problems
- How and where to refer mothers for more help for breastfeeding problems
- Mentoring communication skills. This includes
 - Understanding what being a mentor means
 - Reflection on how own beliefs and values influence what you say and do
 - Communication skills such as active listening and empathy
 - Promoting and supporting breastfeeding in the community

To address the learning needs of the target group and best teach the practical mentoring skills the CBM workshop is held over 2 days and is facilitated by 2 trainers. The maximum number of participants is 15. All learning activities are designed to encourage contribution and discussion from participants and build skill and knowledge development. The learning activities of the workshop are supported by a participant manual, a flip book and other resources. Participants are able to use the material they work with in the workshop as enduring resources to support their work with parents.

Each day of the CBM workshop is based around interactive small-group learning activities such as brainstorming, reviewing materials, analysing responses and personal beliefs, discussion, practice of how to position and attach babies, role plays of working with mothers and breastfeeding information quizzes.

Participants are supported as they work together through the structured assessment activities.

Participants who complete all the assessment tasks and are assessed as competent for the course are issued with a Statement of Attainment.

The 2014 workshops

During 2014 ABA delivered 12 CBM workshops across Australia to groups that included Aboriginal Health Practitioners, allied health professionals working with Aboriginal and Torres Strait Islander communities, community support workers and members.

Evaluation of the Rural Health Continuing Education Stream Two funded workshops

Six of these workshops were funded by Rural Health Continuing Education Stream Two grant funding from the Department of Health and were held in Moree, Armidale and Narrandera NSW, Cairns QLD, Mildura VIC and Albany WA. To establish the longer term impact of the training delivered in the workshop a detailed two-stage evaluation process was conducted on these workshops in line with the Kirkpatrick Model of Evaluation.

First stage of evaluation: To gain immediate feedback regarding workshop content, structure, delivery and evaluation at the conclusion of each day of the workshops participants were asked to rate a number of statements using a Likert scale ranging from strongly agree (being the most positive feedback) to strongly disagree (being least positive).

Table 1 Immediate feedback from workshop participants

Day 1	Strongly Agree	54% average
	Agree	42% average
	Remainder of responses	4% average
Day 2	Strongly Agree	79% average
	Agree	16% average
	Remainder of responses	5% average

These percentages are consistent with the feedback received from other CBM workshops delivered by ABA.

An interesting trend across all locations is that participants significantly shift to the strongly agree response at the end of day two (Table 1). Day 2 has a greater interactive content with the development of mentoring skills. Participants also have had time to develop trust, feel more confident and know they are able to express their views. Participants are able to put their learning into practice, receiving positive, tangible results and so providing more positive feedback (Table 2)

Table 2 Comments provided in the workshop feedback forms

'The role plays were a really important part of the learning to articulate knowledge.'
'Very informative and well run. I would strongly encourage people working within community to attend if and when available.'
'I really enjoyed this learning workshop. Presenters are passionate, real and engaging!'
'Very organised and well run workshop. Excellent source of information and learning.'
'I feel I could walk away today with confidence in mentoring.'
'Role playing and resources are excellent, especially the flip book.'
'I felt the role play activities very valuable – open discussions with fellow learners helped a lot.'
'Always good to get the most updated information available.'

Second stage of evaluation: To follow up post workshop telephone interviews were conducted with a sample of participants from each location to establish whether the workshop had changed their work practice and increased their understanding. Thirty eight percent of participants were interviewed.

Post workshop participant evaluations were:

- anonymous to encourage open and honest feedback
- conducted by an independent member of staff not involved in the development or delivery of the workshop to retain integrity of the findings
- wherever possible, focused on identifying new knowledge/skills acquired from the workshop and whether there have been any changes in behaviour since returning to work
- conducted at least a month after participants attended their workshop to give them an opportunity to put their learnings into practice.

Survey questions were created to capture participant feedback in the following areas:

- the overall value of the workshop in relation to the participant's work
- any new knowledge and skills gained from the CBM workshop (Learnings)
- how participants have applied these since returning to work (Behaviour)
- any changes to the participant's view of what mentoring means and whether they are better able to support and encourage women with breastfeeding (Behaviour)
- whether they found the enduring resources helpful and if they've used any since (Behaviour)
- whether they have noticed any changes to the way their support is being received (Results)

- whether they would recommend this workshop to others

Many of the questions focused on pre and post workshop behaviours to determine whether there had been any change in the participant's approach to their day-to-day work following the workshop. Examples were collected where possible.

Summary of post workshop interview feedback

The 'value' of Aboriginal health workers

Feedback from Aboriginal health workers indicated they felt their role was being valued and recognised for their ability to make a positive impact on breastfeeding in their community when they were invited to attend the workshop. As a result of this, and the workshop, they feel more confident, are more active and reinvigorated to support and promote breastfeeding in their communities. Participants said that whilst they were positive about breastfeeding before, they are now even more passionate about it because they have learnt about the overall health benefits associated with it.

Better 'informed' and 'equipped' advocates

The workers also identified that they now feel more informed and knowledgeable and responses from breastfeeding mothers (many of whom are young women) have so far been positive and welcoming, some even surprised that Aboriginal women have such detailed knowledge on breastfeeding! The consistent, accurate and up-to-date resources from ABA provided in the workshop were highly valued and the resources have now become a part of their work to inform, educate and mentor Aboriginal women to breastfeed. Many participants noted that the resources pack now form a part of their pack that they take to home visits.

A beneficial outcome participants identified was the value of having consistent breastfeeding information across all health workers. Most participants had personal experience in breastfeeding, but felt that they have only ever referred to their own experience. As a result of the workshop they now had consistent and detailed knowledge across the board. Participants considered this knowledge and information as key to changing the way communities view breastfeeding. As one participant said, *'If you sound like you're well informed, people will listen. You've got to know what you're talking about.'* The more we can equip health workers with the ability and knowledge to talk about breastfeeding amongst themselves and within the community, the better chance we have at changing attitudes going forward.

Making a 'real impact' at the community level

Aboriginal health workers are often closer to women within their local communities and can therefore play a more effective role as a mentor. The knowledge and mentoring skills acquired from the workshop allowed these workers to help improve and promote breastfeeding not just in the service area, but in the community. Some participants even noted that there is some level of curiosity in the community regarding their attendance at the workshop and that in time, through word of mouth; more women will seek their advice and support. This is particularly true in rural areas where there isn't the same amount of breastfeeding support, and hence the community plays a larger role in supporting young mothers. Having local community members and health workers on board and reinvigorated about breastfeeding will be vital to changing attitudes where it matters.

Creating a 'team' of health workers

Another very positive outcome is that the workshops have enabled a 'team' of workers who can provide breastfeeding support that is additional to what maternal child health workers and midwives provide. This 'empowers' Aboriginal health workers to provide more holistic care on a broad range of health issues without needing to constantly refer to other 'experts'. This also boosts their confidence.

The following additional feedback was sent to ABA head office by a participant's manager who wanted to share how valuable the workshop had been for their staff members:-

'We have just spent 2 x amazing days of learning with 2 x very skilled presenters at our Moree site for Community Breastfeeding Mentors Workshop...'

'I have learned so much and thoroughly enjoyed myself and the group-roleplaying and having discussions.'

'I hope all of our health services in our areas have the opportunity to experience and learn through further workshops.'

'I have always promoted breastfeeding but now I know how and why it is so important to give our women the best support and education, with which they can make **informed choices** and I feel real excitement about doing this.' – AHEO, Moree.

Table 3 Key findings from the telephone survey responses

Overall Value - Structure	<ul style="list-style-type: none"> • The interactive nature of the workshop was a highlight among all participants • Role plays and scenario work was deemed most effective by the participants • Participants were able to consolidate their learning and practice their new skills and knowledge in a safe learning environment with qualified trainers • The workshop gave participants an opportunity to network with others in their profession and share ideas and experiences • The overall tone of the workshop was appropriate and targeted to the right audience ie. towards Aboriginal community members/health workers where the impact for change will be greatest • Facilitators were constantly mentioned as being excellent, informative and understanding of participants' needs and learning style
Learnings - New Skills and Knowledge	<ul style="list-style-type: none"> • All participants either gained new knowledge on breastfeeding or felt that the information refreshed their prior knowledge <ul style="list-style-type: none"> – Most survey respondents noted this as being the most useful element they took away from the workshop – Common themes were that the workshop information was: <ul style="list-style-type: none"> ▪ detailed and practical ▪ well presented as visual aids ▪ extremely user friendly ▪ consolidated their own knowledge ▪ broken down into meaningful parts that can easily be communicated with others – Many participants noted that even though they have previously breastfed themselves, they have never received such useful practical information about breastfeeding in the past – Those who had little prior breastfeeding knowledge gained a better overview of breastfeeding particularly in areas of the correct terminology, what's appropriate to say/not to say • Greater 'confidence' in own ability to support others <ul style="list-style-type: none"> – This was a frequently noted change in participant's own evaluation – With their newly acquired/supplemented knowledge, participants say they: <ul style="list-style-type: none"> ▪ are more confident than before, therefore better communicators when it comes to talking about breastfeeding ▪ know how to 'break the conversations down' so as to make breastfeeding less confronting and scary ▪ can give more practical advice on such things as breastfeeding technique, expressing, signs to look for, anatomy, when to feed, demand feeding, infections etc. ▪ have a better understanding of where and when to refer mothers for further help ▪ are more comfortable knowing that the information is up to date and consistent with ABA advice ▪ are able to point women in the right direction when midwives are not available ▪ have an improved understanding of health issues that are related to breastfeeding – (eg. Mastitis)

	<ul style="list-style-type: none"> • Improved skills in talking about breastfeeding <ul style="list-style-type: none"> – The role plays gave participants opportunities to practice various scenarios – Immediate feedback from ABA trainers helped to consolidate/confirm their learning – Participants gained a broader sense of the issues surrounding breastfeeding compared to before – Participants now have a full appreciation for the overall health benefits of breastfeeding. Although it is important, bonding is not the only benefit • Overcoming the 'embarrassment' aspect <ul style="list-style-type: none"> – In some communities, there is still a sense of embarrassment when it comes to breastfeeding – women have to hide away to do it or it is not a regular discussion topic – There is a sense that in having the CBM workshops, people will feel more comfortable talking about breastfeeding, especially among community members and this will make breastfeeding a more culturally acceptable and positive thing to do
Behaviour – Application of knowledge and skills since returning to work	<ul style="list-style-type: none"> • Due to the nature of their roles and in some cases, the limited time that has passed since the workshop and small number of clients, not all respondents have had the opportunity to put in practice their learning • Some participants have: <ul style="list-style-type: none"> – shared their learnings and resources with their team upon returning to work and received positive feedback – been involved in running local weekly meetings (eg. Yarning sessions, reference group meetings, world breastfeeding day events) within their services to provide mothers with breastfeeding information – had the opportunity to attend home visits of new mothers as a result of their new knowledge and skills – used their learning within their community (eg. Setting up feeding chairs in family fun days to promote breastfeeding as a culturally normal and acceptable thing) – talked to families and local members of the community about breastfeeding – noted that they are working better alongside other health workers (eg. Midwives) to pass on information and to encourage women to breastfeed • With their new skills and knowledge, some participants felt more 'empowered' to improve initiation of breastfeeding within the Aboriginal community • There is renewed enthusiasm amongst some of the elder workers to persist in the promotion of breastfeeding, recognising that this is a slow change process they need to continue chipping away at
Behaviour – Mentoring	<ul style="list-style-type: none"> • All participants' views of what mentoring means is consistent with the workshop teachings • Since the workshop, most participants surveyed now take the following approach towards mentoring: <ul style="list-style-type: none"> – mentoring is about a partnership – working 'alongside' breastfeeding mothers – it is not about telling women what to do in an authoritarian style – more encouragement and positive reinforcement is needed – more listening and looking at issues from the mother's point of view – recognising that everyone is different and conversations need to be tailored with the right language and tone – gaining trust and being comfortable with the mothers • All respondents felt that they were clear on their role as a mentor and have been positive about performing this role within their work • Practical mentoring tips like making eye contact, using encouraging language has brought participants out of their shell and given them the tools to talk confidently about breastfeeding • Those participants who were previously shy are now more confident in talking about breastfeeding, adding that their connection with their community places them in a position to make positive changes in this area

Behaviour – Enduring Resources	<ul style="list-style-type: none"> • Since completing the workshop, most respondents have actively used or referred to the enduring resources provided • Common responses about the resources include: <ul style="list-style-type: none"> – the resources were very practical – the visual aids are excellent – many have used these to help mothers to understand the concepts better (eg. Tiny tums) – many have used the flipbook as a tool to structure and guide conversations with breastfeeding mothers • Many participants have displayed the resources in their office and handed out information to new mums and colleagues
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A final word

ABA uses the feedback collected to improve better meet the needs to the groups that attend. We are currently working with NSW Health on father's workshop.

One hundred percent of respondents said they would recommend this workshop to others. ABA's current experience is that a number of Aboriginal health/medical services and communities (particularly in NSW) who have already had a workshop are keen to hold further workshops for community members and others.

References

1. Australian Health Ministers' Conference. The Australian National Breastfeeding Strategy 2010-2015. Canberra: Australian Government Department of Health and Ageing; 2009.
2. National Health and Medical Research Council. Infant Feeding Guidelines: Summary. Canberra: National Health and Medical Research Council; 2013.

Presenter

Melanie Carter is currently the Senior Manager Training and Education of the Australian Breastfeeding Association. Melanie qualified and worked as a high school teacher before moving to adult education in the VET sector. Melanie was originally involved with ABA as a trained volunteer breastfeeding counsellor. Since 2005 she has been responsible for the management of ABA as a Registered Training Organisation and for the development of accredited courses in breastfeeding education, community mentoring, counselling and management offered by ABA.