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OMB Control No.: 0584-0524
Expiration Date: 6/30/2016

USDA Food and Nutrition Service: WIC *Loving Support Campaign*
Attachment E

Guide for in-depth interviews with home-visiting nurses/midwives and community-based doulas

Objectives

- Understand the perceptions of home-visiting nurses/midwives and community-based doulas regarding WIC moms' knowledge and beliefs about breastfeeding
- Learn about the nature and context of interactions about breastfeeding between home-visiting nurses/midwives and community-based doulas and WIC moms
- Explore home-visiting nurses/midwives' and community-based doulas' views on the barriers, motivations, and opportunities for WIC moms who are making breastfeeding decisions
- Gain insight into the factors that influence and/or determine WIC moms' self-efficacy to initiate and continue exclusive breastfeeding
- Explore what breastfeeding supports are most and/or least effective for WIC moms
- Understand what resources and tactics home-visiting nurses/midwives and community-based doulas find to be most and least valuable in supporting WIC moms
- Learn about barriers, motivations, and opportunities for home-visiting nurses/midwives and community-based doulas to work successfully with WIC moms

I. Introductions/Setup (5 minutes)

Hi, I'm _____ with Hager Sharp, a social marketing firm working with the U.S. Department of Agriculture (USDA), Food and Nutrition Service (FNS) WIC program to update a campaign about breastfeeding. Is this still a good time for you? **[IF NOT, RESCHEDULE]**

Thank you for taking the time to speak with me today. We would like to ask you some questions about your experiences as a home-visiting nurse/midwife or community-based doula. Specifically, we are interested in your perceptions of the WIC moms to whom you provide support. We will be asking you questions about how much the WIC moms you support know about breastfeeding, what factors encourage or motivate them to breastfeed, what challenges they face in starting and continuing to exclusively breastfeed, and what opportunities may exist to support breastfeeding among these women.

This call will take no more than one hour. You are not required to participate, and you can stop participating at any time. There are no penalties for not participating in whole or in part. If there are any questions that you do not feel confident in answering, just let me know and we will move on. Everything you say will remain private and will not be shared with anyone outside the researchers involved in this data collection, except as otherwise required by law. We will combine your comments with those of other participants in a report that we will provide to the USDA Food and Nutrition Services. The USDA will not be able to attribute your comments to you personally.

Do you have any questions before we begin?

Please be candid and provide as much insight as you are comfortable sharing. Your feedback is important to us. I will be taking notes during our conversation and, because we want to make sure we

don't miss any comments, I would also like to record our conversation. Is it okay with you if I record our conversation? **[TURN RECORDING ON]**

II. Your Role as a Home-Visiting Nurse/Midwife or Community-Based Doula who works with WIC Moms (15 minutes)

1. How long have you been a home-visiting nurse/midwife or community-based doula?
 - a. How long have you provided these services to WIC moms, specifically?
 - b. Through what process are WIC moms typically referred to you for services?
2. In a few sentences, can you briefly tell me about the breastfeeding support you provide to WIC moms?
3. How many WIC moms do you currently support?
4. How are WIC moms typically referred to you?
5. How long do you typically follow/support a WIC mom?
 - a. Does this timeframe vary from one person to another? **[PROVIDE PROMPTS, IF NECESSARY]**
 - Ex: What is the typical length of your services for first time WIC moms? What about for second time breastfeeding WIC moms? What about for older WIC moms?, etc.
6. Now I'd like to ask you to briefly tell me about the WIC moms you support in your community:
 - a. Are there particular racial/ethnic groups that make up the majority of women you support?
 - b. What is the age range of the majority of WIC moms that you support?
 - c. Under what circumstances do you have the most success contacting WIC moms? What is the best way to reach WIC moms (e.g., via telephone, Facebook, text, etc.)?
7. What, if any, direct contact do you have with the WIC moms' support system (e.g., fathers, partners, family members, other health care providers, employers, other lactation support providers, WIC breastfeeding support)?
 - a. What, if any, challenges do you face in interacting with these individuals?
 - b. What changes, if any, might make these interactions more effective?
8. Do you or other nurses/midwives/doulas with whom you work currently use any materials or resources to explain the benefits of breastfeeding initiation, exclusivity, and duration that could be used with WIC moms? If so, please describe.
 - a. Which resources are most used by you or other practitioners with whom you work?
 - b. Are there any effective resources, tools, or support that you wish were available (at free or limited cost) to help WIC moms with breastfeeding? **[PROVIDE PROMPTS, IF NECESSARY]**
 - Ex: breastfeeding app, websites, listservs, etc.
9. What helps you to succeed in providing breastfeeding support to WIC moms?

- a. When do you feel like your efforts to help a WIC mom with breastfeeding have been successful?
 - b. Are there any community partners that help you in providing support to WIC moms?
 - c. What interaction with WIC breastfeeding resources (peer counselors, materials, food packages) helps your efforts to support WIC moms?
10. In working with WIC moms, are there aspects of promoting and supporting breastfeeding that you find frustrating? What obstacles or other problems related to promoting and supporting breastfeeding are a source of frustration for you?
11. What change(s) could help you support more WIC moms to successfully breastfeed?
- a. Are there changes that would help you to support WIC moms to try exclusive breastfeeding?

III. Knowledge of Breastfeeding (10 minutes)

Now I'd like to ask you some questions about how much knowledge about breastfeeding is typically shown by the WIC moms to whom you provide support.

12. Using a scale of 1 to 5 with 5 being the highest, in your experience, how much do the WIC moms to whom you provide support typically know about breastfeeding? For example:
- a. How much do they typically know about how the mother's body makes breast milk? **[PROVIDE PROMPTS/EXAMPLES, IF NECESSARY]**
 - Ex: lets down milk before or during a breastfeeding session, produces milk in response to supply and demand
 - b. How much do they typically know about the benefits of breastfeeding? **[PROVIDE PROMPTS/EXAMPLES, IF NECESSARY]**
 - Ex: nutritional value, maternal/infant bonding, cost savings, health benefits for mom and baby, convenience
 - c. How much do they typically know about the benefits of exclusive breastfeeding? **[PROVIDE PROMPTS/EXAMPLES, IF NECESSARY]**
 - Ex: protecting the baby from illnesses, protecting the baby from developing allergies, helping the baby to gain the right amount of weight
 - d. To what extent do they typically have knowledge/skills to successfully breastfeed? **[PROVIDE PROMPTS/EXAMPLES, IF NECESSARY]**
 - Ex: positions, latch, how often to feed and for how long, baby's hunger signs, signs of baby getting enough milk, pumping and storing milk
 - e. How knowledgeable are they about making breastfeeding fit into their lifestyle? **[PROVIDE PROMPTS/EXAMPLES, IF NECESSARY]**
 - Ex. school, work, social life, etc.
 - f. To what extent are they aware of their legal rights with regard to breastfeeding? **[PROVIDE PROMPTS/EXAMPLES, IF NECESSARY]**

- Ex: break time for nursing moms at work (how often and location), breastfeeding in public
 - g. How knowledgeable are they about potential sources of support (e.g., emotional – fathers, partners, family, etc.; informational – health care providers, WIC support, etc.)?
13. In your experience, which area that we've discussed (i.e., biology, benefits, skills, rights, sources of support) is most important to include in efforts to increase breastfeeding knowledge and skills among WIC moms?

IV. Motivations and Barriers around Breastfeeding (15 minutes)

Now I'd like to ask a few questions about what factors encourage or motivate WIC moms to breastfeed and what challenges these mothers typically face in starting and continuing to exclusively breastfeed and/or combination feed (i.e. a combination of formula and human milk).

14. Among the WIC moms that you support, how typical is it that they originally plan to initiate breastfeeding? **[PROVIDE PROMPTS, IF NECESSARY: NOT AT ALL TYPICAL, SOMEWHAT TYPICAL, TYPICAL, VERY TYPICAL, ETC.]**
- a. Of those who intend to initiate breastfeeding, how typical is it that they actually do so?
 - b. How typical is it that they plan to breastfeed exclusively?
 - c. How typical is it that they plan to continue—exclusively or in combination with formula—to six months? To a year?
15. Do the WIC moms to whom you provide support mention specific reasons why they want to start/initiate breastfeeding?
- a. What are these reasons?
 - b. Do you know why these reasons motivated/encouraged them to start breastfeeding?
16. If they don't intend to breastfeed, what are the reasons?
17. Do WIC moms to whom you provide support mention specific reasons why they are motivated to continue breastfeeding?
- a. Do they mention different motivations for exclusive breastfeeding (i.e., feeding their child only breast milk) versus breastfeeding with supplementation (i.e., replacing a portion of breast milk with formula)?
 - What reasons lead them to start formula feeding when they are already breastfeeding?
 - Is it difficult to convince moms to exclusively breastfeed (versus combination feed)?
 - b. Do you know why these reasons motivated/encouraged them to continue breastfeeding?
 - c. Do you know why these reasons motivated/encouraged them to continue exclusive breastfeeding?
18. Who supports WIC moms in meeting their breastfeeding goal?

- a. What role do partners, family members, or other supporters play in a WIC mom's motivations or barriers to exclusive breastfeeding success?
19. What concerns about breastfeeding do WIC moms face...
- a. Prenatally?
 - b. At birth?
 - c. In the first two weeks at home with the baby?
 - d. Upon a return to work/school?
 - e. Other?
20. What challenges do WIC moms face in initiating breastfeeding? What challenges do WIC moms face in exclusively breastfeeding? **[PROVIDE PROMPTS/EXAMPLES, IF NECESSARY]**
- Ex: pain, supply issues, engorgement, plugged ducts/infection, latch issues, lack of support, embarrassment
 - a. How do these challenges change over time for women who continue breastfeeding?
 - b. In what ways do WIC moms overcome these challenges?

V. Breastfeeding Self-Efficacy and Opportunities (10 minutes)

21. How do the WIC moms you support describe their feelings/experience about...?
- a. Breastfeeding in public?
 - b. Pumping and storing breast milk?
 - c. Returning to work/school?
 - d. Asking for breastfeeding help?
22. What, if anything, do you believe WIC could do to improve opportunities for mothers to breastfeed? **[PROVIDE PROMPTS/EXAMPLES, IF NECESSARY]**
- Ex: in public, in the workplace, in hospital settings, in other settings

VI. Overall Information & Wrap Up (5 minutes)

23. Now that we've spent some time talking about breastfeeding among WIC moms, where do you see the biggest opportunities to make a difference in encouraging WIC moms to initiate and continue exclusive breastfeeding?
- a. Have the WIC moms you support shared any feedback on how WIC could improve its support for breastfeeding?
 - b. What recommendations do you have for USDA to improve breastfeeding support to WIC moms?

- c. Do you have specific suggestions for how other home-visiting nurses/midwives or community-based doulas such as yourself could be engaged to support WIC moms to breastfeed?

24. Is there anything else you would like to discuss that didn't come up?

Thank you so much; your help has been invaluable.