The District of Columbia Lactation Commission held a public meeting on June 22, 2020 from 6:30 pm – 8:00 pm. The meeting was held via WebEx. Below are the minutes from the meeting.

Notetaker: Commissioner Christina Stowers

I. Call to Order at 6:34pm

II. Roll Call

Attendance Via WebEx:
Commissioner Sahira Long—Pediatrician/Neonatologist Member
Commissioner Jennifer Tender—Pediatrician/Neonatologist Member and Commission Chair
Commissioner Aubrey Villalobos—Public Health Expert Member
Noni Robinson—DC Health Representative
Commissioner Christina Stowers—Consumer Member
Emily Woody—DC Health Representative
Suzanne Henley—OSSE Representative
Commissioner Noelene Jeffers—Lactation Expert Member
Commissioner Stephanie Hack—Obstetrics/Gynecology (Ob/Gyn) Member
Commissioner Gwendolyn West—Lactation Expert Member
Jessie Lupo—WIC State Agency
Quamiece Harris—DC Department of Human Resources Representative
Colleen Sonosky—DC Department of Healthcare Finance Representative
Judy Campbell—Public Member

Absent:
Commissioner Lauren Propst-Riddick—Consumer Member
Jill Johnson—DC Department of Human Resources Representative
Commissioner Kanika Harris—Public Health Expert Member
Commissioner Angela McClain—Community Outreach Expert Member

III. Adoption of Agenda
    Motion made by Commissioner Villalobos and seconded by Commissioner Long. The motion was approved.

IV. Approval of Minutes
    January 2020 Meeting: Correction made by Commissioner Tender to correct spelling of DHCF from DCHF. Motion to approve corrected minutes made by Commissioner Hack and seconded by Commissioner West. The motion was approved.

V. Lactation Commission’s mission:
The Lactation Commission has been established to make recommendations to the Mayor of the District of Columbia and the Department of Health regarding legislative, programmatic, and policy ways to improve the District’s strategies to reduce infant mortality and increase infant and child health outcomes through promotion, awareness, and support of breastfeeding and lactating mothers.

It was discussed that our subcommittees need to keep our mission in mind when making recommendations.

VI. Review of current recommendations
   a. Needs assessments
      i. An original task of the commission
      ii. Currently have research data about attitudes and barriers to breastfeeding from Commissioner Villalobos’s survey of over 500 women (not all from DC), Kathy Logan’s study and WIC survey which could be included in the report.
      iii. Commissioner Tender met with multiple members from DC Health to learn what about past and current needs assessments.
         • Title V just completed an every 5-year needs assessment through community discovery survey, focus groups and key informant interviews. They will try to provide us with some preliminary results related to breastfeeding.
         • Perinatal needs assessment: Currently collecting data related to families’ experience with health care and provider interactions which does not have questions related to breastfeeding. There may be a potential to do an amendment to their needs assessment to include breastfeeding questions

Summary of meeting with Dr. Ankoor Shah (Deputy Director for Programs & Policy at DC Health)
   b. Commissioner Tender met with Dr. Ankoor Shah and WIC staff to discuss our focus for the annual report. He recommended:
      i. COVID-19 related or adjacent issues which includes breastfeeding
      ii. Items that are actionable vs studies.
      iii. Prenatal interventions such as breastfeeding peer counselors because one of their overall goals is to increase prenatal care.

   Commissioner West Gwen mentioned that anecdotally volume has changed in patients both for in-person provider appointments and patients showing up to providers in crisis.

VII. Additional recommendations for report and focus areas
Commissioner Tender mentioned that perhaps we should change the subcommittees based on the outline of our annual report to include needs assessment, prenatal breastfeeding support, intrapartum support and post-partum support. Commissioner Long felt we should keep the current subcommittees which better reflect the commission’s original objectives. The focus of the subcommittees will be determined based on the report’s recommendations.

VIII. Annual report:
   a. Commissioner Villalobos and Long felt we should review recommendations in previous reports before adding additional ones. They felt we should include a few key, high-level recommendations with more specific actions in the Appendix.
   b. A subcommittee to be formed to create a template, outline, and recommendations for moving forward with the report.
      i. Commissioners Tender, Long, West, and Villalobos will meet before the next meeting and provide a template.

IX. Collaboration with other Commissions: Assignments
The benefit of attending other commission meetings is that we can learn what they are doing and be able to include breastfeeding support in their recommendations. Commissioner Tender has a list of potential commissions including (Commission on Health and Equity, Thrive by Five, Employee Appeals, Infant Mortality and Perinatal Health (within DC Health)). Commissioner Villalobos mentioned that we should review the list that she and former Commissioner Sieswerda had previously provided.

   It was decided to assign Commissioners to join other Commission meetings after we determine our recommendaitons.

X. Additional Old Business: none

XI. DC Health Jessie Lupo-Breastfeeding Attrition Predictor Tool (BAPT)
   a. Completing practicum by working on a project: Development of BAPT
   b. Goal: provide staff with the tools to empower women at the WIC sites to breastfeed babies
   c. Research: The closest thing that exists is breastfeeding prediction tool from 1992 and a few others older than 2004.
   d. Ms. Lupo would like to talk to anyone who has resources or tools that would help in her future research. Commissioner Tender mentioned to speak with Kathy Logan who had researched various tools including the Self-Efficacy scales.
   e. Once the project is completed, there will be trainings, followed by an evaluation period.
XII. **Opportunity for Public Comment**

Judy Campbell mentioned that she is having ongoing issues with supplying breast pumps for families.

XIII. **Future Meeting Schedule**

Will meet monthly until the Annual Report is completed. Next meeting Monday July 27th 6:30 to 8:00 pm via WebEx.

XIV. **Items to Continue for Next Meeting**

a. DC Breastfeeding Coalition and probably DC Health are hosting a webinar on COVID-19 positive moms and breastfeeding in the early post-partum period with the plan to invite speakers from the American Academy of Pediatrics, the WHO, and CDC for panel discussions and answers. The webinar will be available for area providers (preferentially) and national providers. They are aiming for the first week of August or end of July.

b. Annual report outline discussion.

c. Government Representative Woody will reach out to Title 5 and the Perinatal & Infant Health Division to see if they can speak to the commission over the next few meetings.

XV. **Adjournment**

Meeting adjourned at 8:01pm