

**DISTRICT OF COLUMBIA  
LACTATION COMMISSION  
MINUTES  
Monday, March 22, 2021**

The District of Columbia Lactation Commission held a public meeting on Monday, March 22th, 2021 from 6:30 pm – 8:00 pm. The meeting was held via WebEx participation. Below are the minutes for the meeting.

Note Taker: Commissioner Kanika Harris- Public Health Expert Member

**I. Call to Order**

The meeting was called to order at 6:35 pm

**II. Roll Call**

Attendance Via WebEx:

Commissioner Sahira Long—Pediatrician/Neonatologist Member  
Commissioner Jennifer Tender—Pediatrician/Neonatologist Member – Commission Chair  
Commissioner Villalobos Villalobos—Public Health Expert Member  
Commissioner Christina Stowers—Consumer Member  
Commissioner Angela McClain—Community Outreach Expert Member  
Commissioner Noelene Jeffers—Lactation Expert Member  
Commissioner Lauren Propst-Riddick—Consumer Member  
Commissioner Kanika Harris—Public Health Expert Member  
Commissioner Christina Stowers - Consumer Member  
Noni Robinson—DC Health Representative  
Suzanne Henley—OSSE Representative  
Judy Campbell—Public Member  
Commissioner Gwendolyn West—Lactation Expert Member

Absent:

Commissioner Stephanie Hack—Obstetrics/Gynecology (Ob/Gyn) Member  
Colleen Sonosky—DC Department of Healthcare Finance Representative  
Tamika Cambridge - DC Department of Human Resources Representative  
Emily Woody—DC Health Representative  
Quamiece Harris—DC Department of Human Resources Representative  
Jill Johnson—DC Department of Human Resources Representative

**III. Adoption of Agenda**

A motion to adopt the agenda was made by Commissioner Villalobos and seconded by Commissioner Long. Motion passed unanimously.

**IV. Approval of Minutes from August 2019 Meeting**

Approval of minutes by Commissioner Long and seconded by Noni Robinson

## V. Old Business

No old business discussed for this meeting. Moved into discussion and presentation with Robin Diggs Purdue – the Deputy Director of Strategy, Programs and Policy for Community Health Administration

## VI. New Business

### A. Commissioner Tender

- i. Purpose of meeting to discuss recommendations from the DC Lactation report and see where DC Health Alliance aligns with recommendations and moving forward with a plan of action.
- ii. Introduced Robin Purdue Deputy Director of Strategy, Programs, and Policy for Community Health Administration. She currently supports COVID-19 response as well as epidemiology and COVID-19 response

### B. 2020 Report

- i. Overview of Lactation Report for Robin Purdue Diggs from Commissioner Tender and Commissioner Villalobos:
  - a. Our report recommendations that align with DC health priorities include: increasing prenatal care, COVID priorities, and how to get increase WIC enrollment. The Report incorporated evidence-based recommendations and provided a financial impact analysis.
  - b. Recommendations were to:
    - 1) provide comprehensive breastfeeding plan
    - 2) improve prenatal breastfeeding
    - 3) improve outpatient breastfeeding support
  - c. Commissioner Villalobos also enhanced the report by emphasizing the importance of knowing current breastfeeding rates and have evidence-based strategies to accurately respond to the unique needs of our community.
- ii. Feedback from Robin Purdue Diggs on Approach and Recommendations including questions and discussion from Commissioners.

A. The approach is on target and there are opportunities to align with some of the current perinatal health initiatives supported by Title V. These other initiatives may also provide the Commission with an opportunity to collect data.

- i. Commissioner Long inquired about the Perinatal Quality Task Force
- ii. Purdue explained they are currently determining key strategic goals.
  - a. The Perinatal task force is currently focused on hypertension and diabetes to prevent maternal death and mortality.
  - b. Consider opportunities to align with breastfeeding and maternal health outcomes and such as obesity and diabetes.
  - c. Incorporating some metrics that also tie breastfeeding to some of those chronic conditions
  - d. WIC is another potential opportunity – planning opportunities and metrics to align with WIC goals and see what metrics that would be mutually beneficial

- B. Data is critically important and should start with obtaining current data and then plan strategies to get from point A to point B. The Commission should then establish some objective and smart goals that will help us achieve our long-term goals.
  - i. Robin Purdue explained that COVID created opportunities for faster data collection in real time and leveraging opportunities to enhance technology. The time is ripe to think through ways we can collect this information from hospitals, pediatricians, and OBGYNs.
  - ii. Consider a way data can be captured through electronic health record systems, so we are not relying on national surveys that are two years old by the time we get the data.
  - iii. Commissioner Tender mentioned that we will also meet with vital statistics department in April to figure out how to get more breastfeeding data from the birth certificates and stratify based on geographic location and possibly insurance type.
  - iv. Commissioner Villalobos – Suggested guest speaker from the CDC to talk about data collection. Suggestion to develop a data repository.
  - v. Creating data that supports and measures system change. Our data and services often focus at the individual level to support moms. Data that can drive systems and policy level changes would be very impactful.
- C. Develop a Breastfeeding Tool Kit rather than a strategic plan
  - i. Consider making the strategic plan very concise and incorporating a product (The Tool Kit) that could be utilized by multiple sectors that could be more actionable.
  - ii. Purdue suggested the Commission think of developing a toolkit that could also be incorporated into various types of programming or services that already exist in the district.
  - iii. Toolkit could include information about:
    - 1. Baby Friendly Hospitals
    - 2. Best practices to collect breastfeeding data
    - 3. Workplace support
    - 4. Childcare Centers
    - 5. Prenatal education: Commissioner Long added that there could be a screening tool for DC resources similar to the food insecurity tool.
    - 6. Create standard levels that can be applied to health care delivery sector.
- D. Improve Prenatal WIC Enrollment and Support
  - a. Commissioner Long –Think about how we can collaborate to build partnerships within the obstetric practice and pediatric clinic so that we can have a WIC champion at each office.
  - b. Opportunities for telehealth the waivers allow us to carry out WIC services remotely.
  - c. Noni Robinson and Emily Woody DC Health Representatives
    - a. Pacify App is offered to participants for free and will continue through the pandemic. Since the implementation of the

program, there has been an increase in breastfeeding rates. Continued 24 hr. access and support.

- b. Marketing campaigns through text messages, social media, through dcwic.org site as well as what's being provided through WIC and Pacify to increase utilization.
  - c. Text message program has increased utilization since the pandemic and allows peer counselors to text all the participants with breastfeeding support issues. Participants benefit from that one-on-one communication through text.
  - d. Since the pandemic, lactation support has been implemented through zoom and teams to provide support classes as well as one-on-one counseling.
  - e. Noni Robinson and Emily Woody have both analyzed data of women pregnant women reach out to enroll in WIC. Emily Woody offered to present on the findings. 2020 data shows out of 800 African American pregnant women that enrolled, we enrolled 42% that were referred to us and in their third trimester. This is a missed opportunity. The goal is for pregnant women to reach out to us as soon as they are pregnant.
- E. Third recommendation is to improve postnatal breastfeeding support for moms and their families.
- a. Commissioner Long mentioned ensuring breastfeeding is included as a priority for Title V funding and still waiting to hear back. Only have funding through the end of the month.
  - b. Commissioner Tender commented to make sure breastfeeding is a public health issue. Mandating legislation that requires providers to learn about breastfeeding.
  - c. Commissioner West suggested also connecting with ACOG to see what opportunities there are for incentivizing trainings for physicians.
    - i. Robin Purdue Diggs preferred to create a toolkit
  - d. Other resources include:
    - i. Momease is a good resource and working to utilize them citywide.
    - ii. MedStar Washington Hospital Center Babyscripts. Both providers and patients have access to the system and they communicate through that portal. Robin Purdue commented on the opportunity to expand Babyscripts and update the language for DC WIC.

**VII. Opportunities for Public Comments**  
No public comment was given

**VIII. Adjournment: The meeting was adjourned at 8:07 pm.**