

Background

- Mississippi has high rates of infant mortality/morbidity, and low breastfeeding rates, especially for Black dyads^{1,2}
- Communities and Hospitals Advancing Maternity Practices (CHAMPS) has worked in Mississippi since 2014 to increase breastfeeding and improve maternal child health practices
- CHAMPS implementation is associated with increased breastfeeding rates and decreased racial disparities^{3,4}
- Assessments of national interventions to increase breastfeeding using established implementation science framework assessments are needed⁵

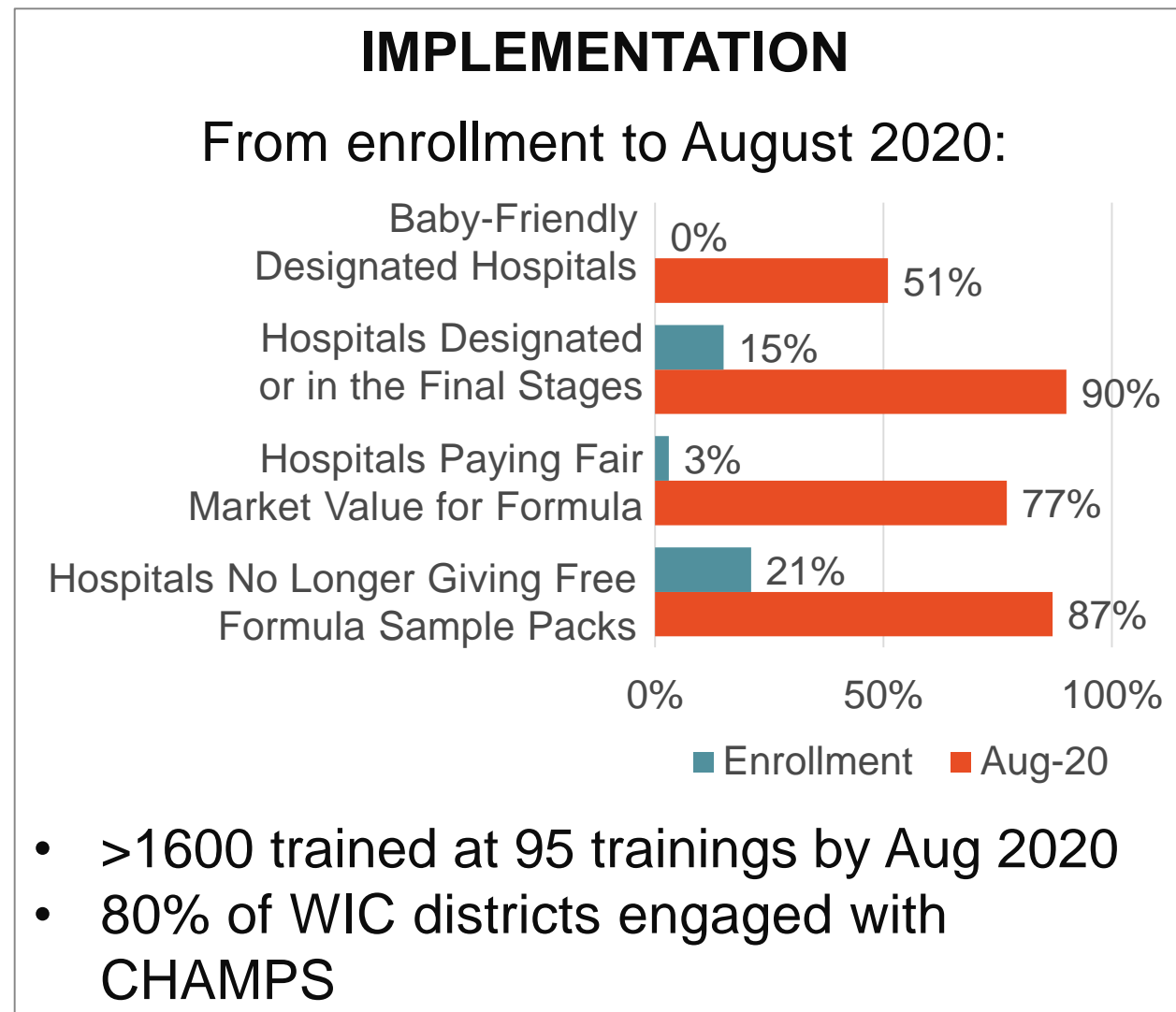
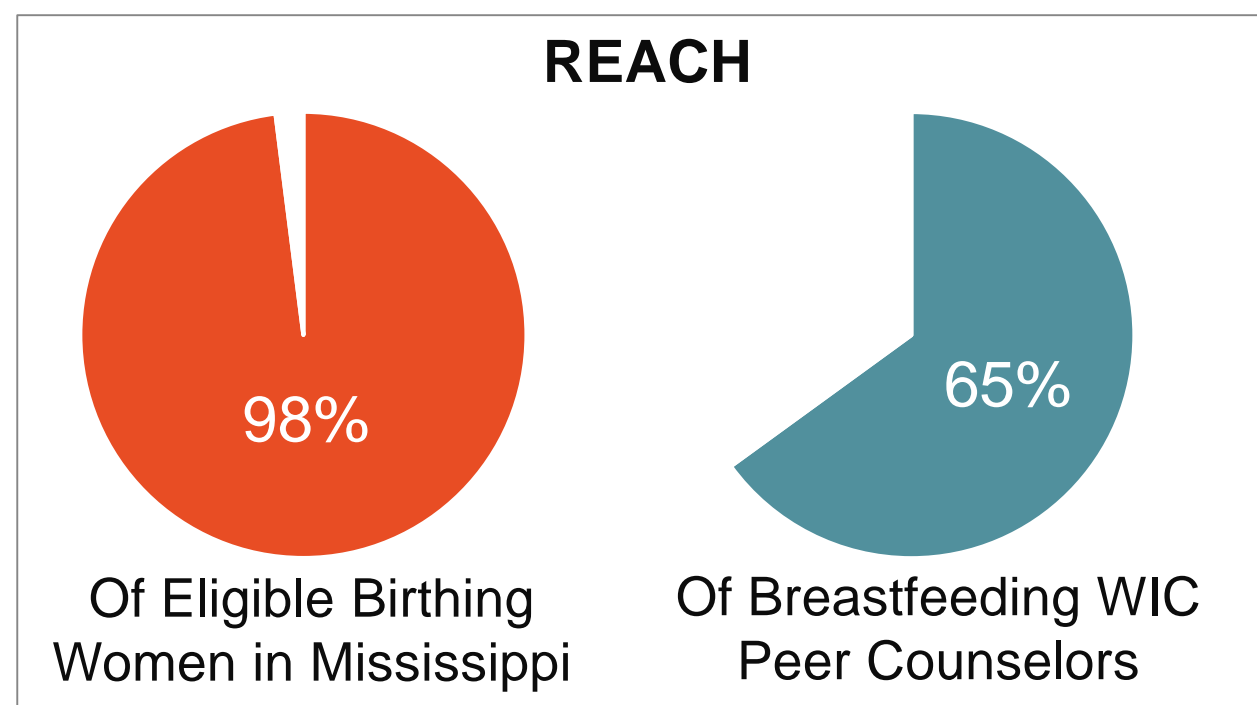
Goal

- Assess the real time implementation of CHAMPS, using the RE-AIM framework six years after the intervention began

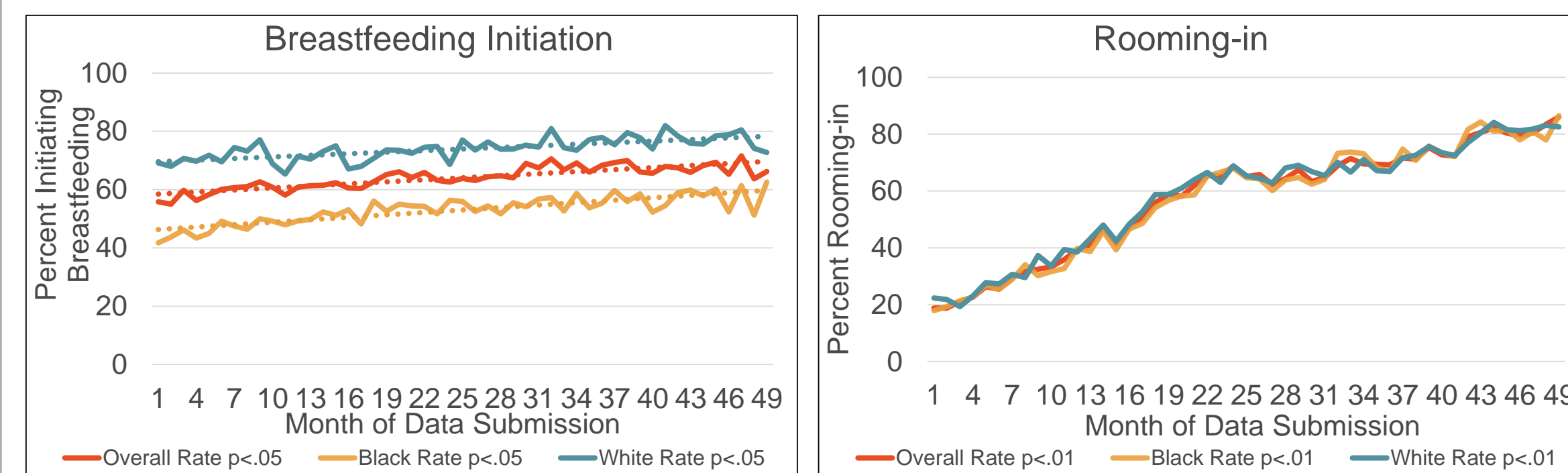
Methods

- CHAMPS Program Methods:
 - Quality Improvement methods in hospitals to implement the Ten Steps to Successful Breastfeeding
 - Intensive engagement with local community partners
- This study assessed CHAMPS using the RE-AIM framework
- Evaluated quantitative data (2014-2020) from national sources, Mississippi hospitals, community partners, and CHAMPS program records; and qualitative focus group data

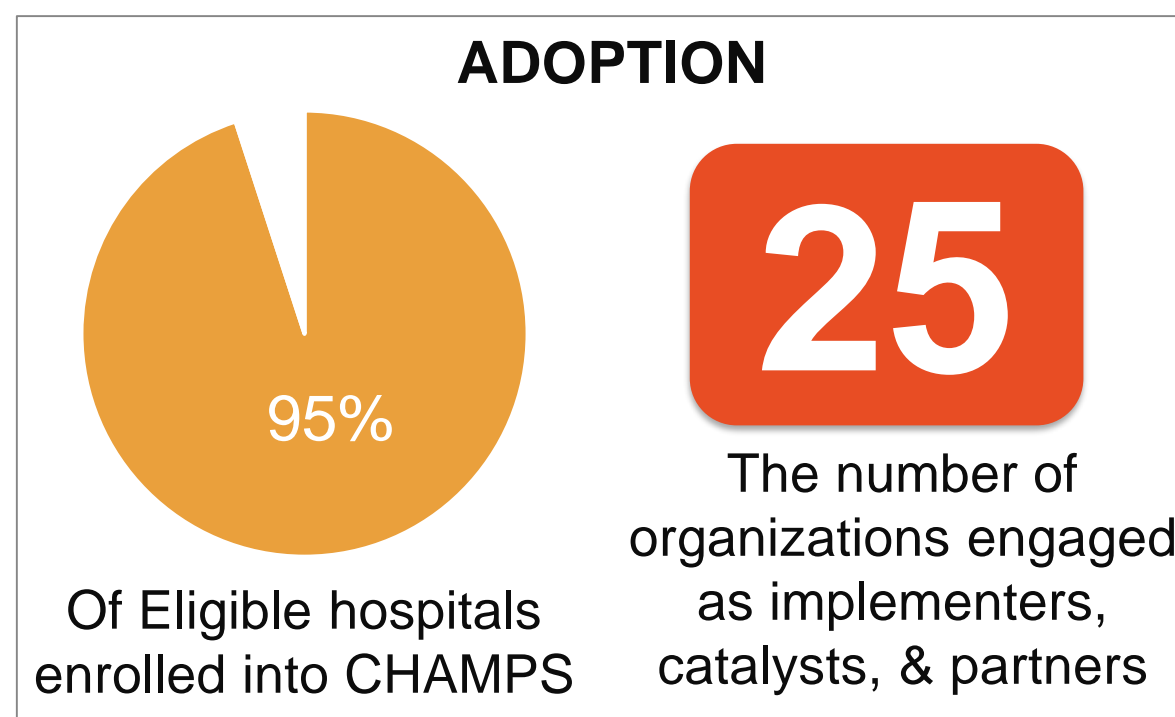
Results



EFFECTIVENESS



- Breastfeeding initiation rates rose from 56% to 66% (p<.05) and the disparity between Black and White dyads narrowed by 17 percentage points
- Exclusive breastfeeding rates increased from 26% to 37% (p<.05)
- Skin-to-skin and rooming-in rates at CHAMPS hospitals increased significantly
- Proportion of “any breastfeeding” WIC recipients increased from 5.1% to 15% (p<.05)



CHAMPS team members with hospital staff during a site visit



Nurse practicing clinical skills during a CHAMPS Training

MAINTENANCE

- 100% remain Baby-Friendly designated
- 100% remain enrolled in CHAMPS

Dimension	Key Pragmatic Questions
Reach	WHO was intended to benefit and who actually participates? Measured by number and similarity of participants to target group.
Effectiveness	WHAT were the most important benefits you were trying to achieve and the likelihood of negative outcomes? Measured by change in key outcome(s) and consistency across subgroups.
Adoption	WHERE was the program or policy applied and WHO applied it? Measured by what settings and staff utilize the intervention.
Implementation	HOW consistently was the program/policy delivered, HOW was it adapted, HOW much did it cost, WHY did the results come about?
Maintenance	WHEN did the initiative become operational? HOW long was the program and its results sustained? Measured by longevity of the program and its effects.

Implications

Breastfeeding initiatives using broad-based strategic programming with multiple stakeholders and a range of evaluation criteria can succeed

References

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