

## **Contents**

1 Demographic Profile

4 Breastfeeding Support
Systems

2 Current Trends & Practices

Research in Review:
Limitations & Solutions

Cultural Obstacles in Breastfeeding

6 References



# Demographic Profile

Vietnamese Population in San Diego County

- ❖ Vietnamese population makes up ~13% of API population in Mid-City region of San Diego County
- Third-largest ethnic group in SD County

#### **POPULATION SIZE**



- Little Saigon is located along El Cajon Blvd & University Ave in City Heights
- Recognized in 2013
- ❖ Vietnamese population makes up ~45% there

#### LOCATION



- Primarily
   Vietnamese and
   English, some
   Cantonese and
   French
- ~83% Vietnamese Americans are bilingual English & Vietnamese

#### **LANGUAGES**



- 75.7% of Asian
   Americans
   exclusively
   breastfeed in San

   Diego County
- In Vietnam, exclusive breastfeeding rates rose from 17% in 2010 to 24.3% in 2014

#### **MORE DEMOGRAPHICS**









# Current Trends & Practices

Breastfeeding in the Vietnamese Community

# Variations in Feeding Practices

"Hot"/"Cold" states in mothers fare for specific diets during breastfeeding



> Replenishment

Maintains breast milk production



- ➤ Stigma of "dirty" milk
- Perceived as not nutritious & discarded







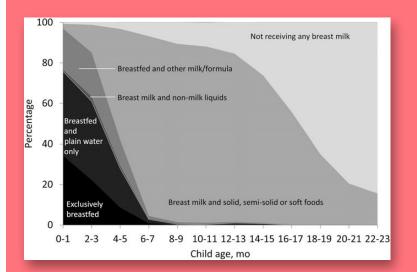


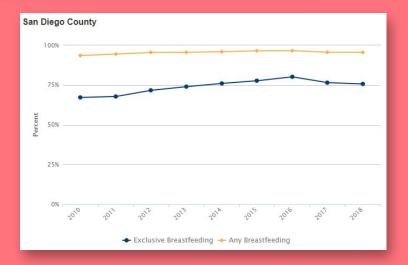




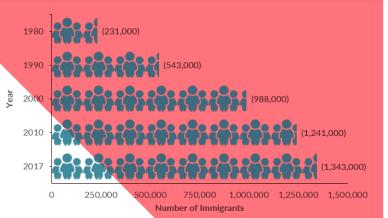
# Attitudes Towards Breastfeeding

- ❖ Vietnam
  - 11 Vietnamese provinces: Low rate of exclusive breastfeeding (~30%), high rate of mixed feeding (~65%)
- San Diego, CA
  - Asian American population: High rate of exclusive breastfeeding (~76%), high rate of any breastfeeding (~96%)
- Social influences from social network (e.g. family) & healthcare professionals impacts feeding method in either regions









# **Barriers & Challenges**

Transitions & Maintenance of Breastfeeding

# Barriers & Challenges to Breastfeeding

## Postpartum Mental Health

- Postpartum depression & mood disorders
- Physical pain translates to mental insecurities
- Self-efficacy and self-esteem in breastfeeding skills are affected



## **Immigration**

- Cultural supportive network is disrupted
- Induces some immigrant mothers to abandon breastfeeding



# Barriers & Challenges to Breastfeeding

### Support System Infrastructure

#### Family Traditions

Fear that lactating mother may suffer from "cold" disease & lack of access to abundant breast milk for infant

#### Biomedical Focus

- Implementing a 3-pronged approach:
  - > Tailored educational materials
  - In-service clinician training
    - Proficient material distribution



#### Socioeconomic Status of Milk

#### Hierarchy of Milk

Belief that formula is superior to breastmilk

#### **Work Obligations**

 Pressures of returning to work after maternity leave

#### **Education Matters**

 Mothers with higher education levels have greater rates of longer exclusive breastfeeding





## **VIETNAM**

- Alive & Thrive Initiative: Advocate, support, & implement learning for breastfeeding practices in hospitals
- Regional & national partnerships
- Centers of Excellence for Breastfeeding
- \* Accreditation:
  - Central hospitals, by Ministry of Health (MOH)
  - Provincial & district hospitals, by Departments of Health (DOH)



# **CALIFORNIA**

- Department of Public Health: Breastfeeding initiative from Division of Maternal, Child, & Adolescent Health
- UCSF: Breastfeeding Support Logic Model



### **SAN DIEGO**

- Health & Human Services Agency: Maternal, Child, and Family Health Services (MCFHS)
- UCSD, Lactation Supportive Environments:
   Breastfeeding-Friendly San Diego (BFSD) Initiative











Center for Community Health



## **SAN DIEGO**

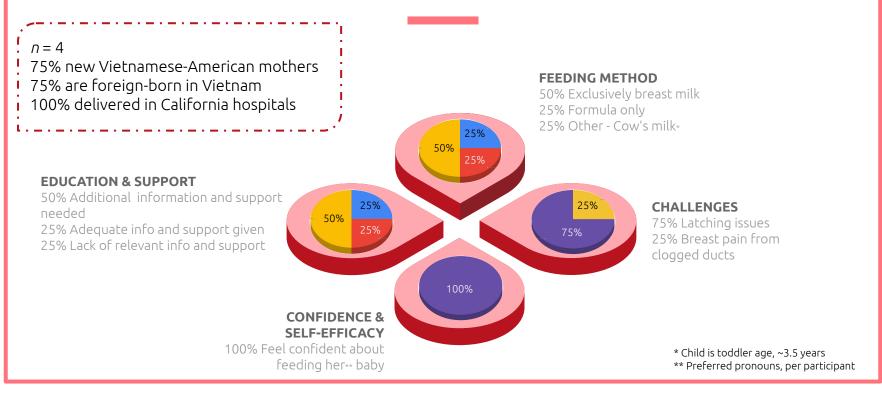
San Diego County Breastfeeding Coalition

Women, Infants, & Children, Southeast San Diego





# Brief Overview: Infant Feeding Experience Survey





# Research in Review

Limitations & Recommendations Based on Literature Review



# **Findings of Research Limitations**



#### **LIMITATION 1**

Disproportion between population size and breastfeeding support available to Vietnamese families in San Diego

#### **LIMITATION 2**

Local clinics with resources tailored to Vietnamese-speaking families

#### **LIMITATION 3**

Health education programs geared toward Vietnamese-American mothers



# **Recommendations of Solutions**



#### **SOLUTION 1**

Run focus groups with families in Little Saigon to observe the needs and fit to appropriate scaling

#### **SOLUTION 2**

Partner with community health providers to share breastfeeding resources, bilingual option available

#### **SOLUTION 3**

Host /facilitate a quarterly educational program for the community in collaboration with other agencies

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# Thank You!



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