

INTERVENTION

Texas Mother-Friendly Worksite Program Texas Department of State Health Services (DSHS)



INTENT OF THE INTERVENTION

The Texas Mother-Friendly Worksite Program (MFWP) is designed to bestow official recognition upon worksites that adhere to the Program's criteria for being "Mother-Friendly," including having a written and communicated policy that provides space for breast milk expression in the worksite, flexible work schedules for breastfeeding mothers, and access to hygienic breast milk storage options (refrigerator or cooler). Additional recognition is given for worksites with more comprehensive worksite lactation support programs. The MFWP encourages organizational policy and practice changes to develop worksite cultures that support employees who choose to breastfeed in meeting their personal breastfeeding goals. This is a **practice-tested** intervention.

OVERVIEW

The Texas Mother-Friendly Worksite Program was established in accordance with state legislation in 1995 and continues as an ongoing program. The MFWP is an employer recognition program that designates worksites as "Mother-Friendly" if they voluntarily develop and submit to Department of State Health Services (DSHS) a written policy that supports employees' efforts to combine continued breastfeeding with employment. At a minimum, the policy must ensure:

- Flexible work scheduling to allow time for breast milk expression,
- Access to private locations for breast milk expression,
- Access to a clean, safe water source to wash hands and clean pumping equipment, and
- Access to hygienic options for workplace storage of expressed breast milk.

This intervention functions at two levels: at the state-level and at the worksite level. DSHS provides resources and support to worksites wanting to be designated and the worksites must implement their individual plans for achieving and sustaining designation.

In 2010, the Texas DSHS received Communities Putting Prevention to Work (CPPW) funds. The intent of the CPPW initiative – called the Mother Friendly Worksite Policy Initiative (MFWPI) – was to transform and expand the MFWP's capacity, scale, and reach to increase employer uptake of comprehensive worksite lactation support policies and programs. With CPPW funding, the Department was able to apply the social marketing process to implement a multi-component initiative including formative assessment, pilot-testing, media and communications, state program enhancements, and strategic partnership development. Lessons learned from the MFWPI continue to be integrated into the Texas Mother-Friendly Worksite Program. This template reflects the MFW Program now being implemented with lessons incorporated from MFW Policy Initiative.

Time in the field: The Texas Health and Safety Code establishing the "mother-friendly" designation was passed into law and, in 1995, the Texas Mother-Friendly Worksite Program was launched. Program administration rules were formalized in the Texas Administrative

Code in 2001. Texas' Mother Friendly Worksite Program transformation through the Policy Initiative (MFWPI) has been in process since 2010.

Intended population(s) to be impacted by the program: At the state level, the primary audience is employers/worksites; at the worksite level, the primary audience is new and expectant mothers.

Primary setting(s) intended to adopt the program: The **state** must adopt a policy and/or a program that specifies criteria for recognizing employers that create worksite cultures supportive of breastfeeding. Worksites then demonstrate that they have met the criteria for designation.

HEALTH EQUITY CONSIDERATIONS

This section provides demographic information about the population reached by the policy/intervention, including age, gender, race/ ethnicity, socioeconomic status, urban/ rural. Participating worksites in Texas include a mix of small and large employers, with 71% of worksites having 50 or fewer employees and 10% of worksites having from 500 to more than 25,000 employees. Most worksites (84%) are in urban settings (50,000 or more people), with 8% in large rural towns (10,000 to 49,999 people), 5% in small rural towns (2,500 to 9,999 people), and 3% in isolated rural towns (fewer than 2,500 people). Worksites represent the full spectrum of industries from the North American Industry Classification System, with heavy representation from the Social Assistance (44.3%), Public Administration (25.8%) and Health Care (16%) industries. These industries have been targeted for the MFWP because they serve large, diverse populations, including low-income families with young children. Based on review of the U.S. Census Equal Opportunity Employment Tabulation Detailed Census Occupation by Industry, Sex, and Race/Ethnicity for worksites in the United States, participating worksites have diverse employee populations. Based on national averages, 62% of MFWP worksites are from industries that have employee populations that are greater than 66% female; 51% of worksites are from industries that have employee populations that are 10% or more Hispanic; and 87% of worksites are from industries that have employee populations that are more than 15% non-Hispanic Black.

CORE ELEMENTS

This section outlines the aspects of an intervention that are central to its theory and logic and that are thought to be responsible for the intervention's effectiveness. Core elements are critical features of the intervention's intent and design and should be kept intact when the intervention is implemented or adapted.

State-level

Statewide coordinating agency:

- Completes formative assessment process to define and understand key audiences and effective strategies/messaging to motivate behavior change,
- Works with partners and stakeholders to align and integrate the program into existing infrastructures,
- Develops and formalizes criteria, guidelines, processes, and branding for worksite recognition (designation) program,

- Adapts or develops then tests, refines and disseminates resources to support worksite-level implementation,
- Spearheads a targeted statewide media/communications campaign to increase community and employer awareness of and interest in the initiative,
- Cultivates strategic local-level partnerships to extend integration, dissemination and reach of the program, and
- Develops program monitoring and statewide surveillance to provide ongoing assessment of program.

Worksite-level

Worksites and worksite committees:

- Apply for designation by submitting qualifying written and communicated policy (Develop policy using model policy guidance from statewide coordinating agency)
- Implement the policy in the worksite.
- For an effective and sustainable worksite lactation support program:
 - Generate employee buy-in for the program by using resources from the statewide coordinating agency.
 - Create a diverse committee to plan and implement program development and implementation steps.
 - Complete baseline assessment to understand employees' needs using resources from statewide coordinating agency.
 - Plan for worksite lactation support program implementation and evaluation by using resources from the statewide coordinating agency.
 - Implement the program/plan using implementation tools from the statewide coordinating agency.

RESOURCES REQUIRED

Staff: This includes an estimate of the number and types of staff necessary to implement the intervention.

State level: In Texas, the Mother-Friendly Worksite Program is housed in the Office of Title V and Family Health and is coordinated by the State Women's and Perinatal Health Nurse Consultant/Coordinator, who also holds the title of State Breastfeeding Coordinator. While all WIC state agencies are required to designate a WIC Breastfeeding Coordinator to oversee breastfeeding promotion and support within the WIC program, few states also have the distinct role of a State Breastfeeding Coordinator to oversee statewide cross-program coordination. Based on the Texas experience, at least 0.5 FTE is recommended to oversee implementation and maintenance of an existing program like the MFWP. To start a new program or increase capacity of an existing program, significantly more human resources would be necessary, which could come from in-kind or unpaid help such as MPH/MPA interns, volunteers, and/or staff from other departments working on similar sorts of initiatives.

Worksite level: Staffing at the worksite level develop and implement the policy/support program. Ideally, worksites would incorporate program coordinator duties into an existing job description/staff position to establish a dedicated, sustainable point of contact for the program. Worksite staff form the planning committee and serve as champions and advocates; this can be done by a volunteer or another staff person having this as "other

assigned duties” or by an official position within the worksite such as Human Resources, wellness coordinator, or facilities manager.

Materials: The **state coordinating agency** uses training, technical assistance, implementation and marketing materials developed and distributed to key stakeholders, including:

- Turn-key print and online toolkits, including “Build Your Program” Toolkit for employers and the Outreach Partner Toolkit (see www.TexasMotherFriendly.org)
- Employer designation “welcome pack” materials (provided in Intervention Materials section below)
- Educational and communication materials for working mothers to promote the program to their employers; and
- Outreach and marketing materials.

At the **worksite level**, the basic required material resources include:

- a small hygienic non-bathroom space that is adequately outfitted to ensure privacy,
- a comfortable chair,
- a clean work surface (desk, table or shelf),
- an electrical outlet,
- access to a nearby safe water source (often an existing sink in a break room or restroom, but may be a dedicated sink within the lactation space), and
- access to hygienic milk storage options (mom’s-own or employer-provided cooler with icepack, shared refrigerator space, such as in an employee break room, or a dedicated lactation room refrigerator).

The employer may also provide amenities such as a high efficiency multi-user breast pump, lactation education/support services and materials, and promotional materials.

Other Costs: Potential costs for the worksite may relate to: modifying existing space/ creating new space for mothers to breastfeed/express milk; purchasing supplies and equipment, maintaining cleanliness and functionality of the space; coordination, monitoring and assessment of worksite breastfeeding lactation activities; and printing and distributing educational/ promotional materials. Research demonstrates that employers can experience a \$3 return on investment for every \$1 dollar invested in worksite lactation support. Savings are realized through lower absenteeism, turnover rates, and health care costs.

IMPLEMENTATION

As stated elsewhere, the Texas Mother-Friendly Worksite Program was established in 1995 to recognize employers that implement written and communicated worksite lactation support policies. The Mother-Friendly Worksite Policy Initiative is a capacity-building process that DSHS implemented in 2010 to transform the MFWP to have greater capacity, and wider scope and reach. Read about the implementation activities for the CPPW-funded Mother-Friendly Worksite Policy Initiative in the grey box below.

Summary Description of Mother-Friendly Worksite Policy Initiative Implementation

The following activities were an essential part of the CPPW-funded capacity building effort called the MFWPI. The focus of this effort was to scale up the Texas Mother-Friendly Worksite Program to increase program capacity and scope; provide additional guidance and support for employers wishing to implement worksite lactation support policies and programs;

and to increase the program's reach through awareness and uptake of the worksite designation. The CPPW funding provided resources to:

- Complete formative assessment to:
 - understand needs, facilitators and barriers to establishing worksite cultures supportive of breastfeeding; and
 - develop and test messaging and strategies for engaging key target audiences;
- Conduct a pilot-test of training, technical assistance, and implementation processes, tools and materials with select employers wishing to implement comprehensive and sustainable worksite lactation support policies and programs;
- Develop and execute a targeted professional communications/media campaign to increase awareness about and interest in the MFWP;
- Implement enhancements, including changes to the program's administrative policy, and development of new resources, strategies, and outreach mechanisms to extend the capacity and reach of the MFWP;
- Develop and strengthen strategic partnerships to ensure widespread impact and sustainability of the MFWP.

While Texas was fortunate to receive CPPW funding, funds of this size are unlikely to be available again for some time. Therefore, the activities below are detailed for your information; however, Center TRT does not expect that a new adopter would do all of these things. Rather, this section gives you an understanding of how Texas arrived at the transformed Mother-Friendly Worksite Program that is now being implemented, including the communication and implementation materials.

A comprehensive summary of the Mother Friendly Worksite Policy Initiative appears at the end of this document.

State-level planning and implementation

Below we describe the implementation of the MFWPI (the pilot process) and how lessons learned from the MFWPI are being integrated into the MFWP. Note that these steps are written linearly, but may occur in a parallel or iterative process.

1. **Round up partners.** Multiple partners, within and external to DSHS, were involved in supporting the formulation and implementation of the MFWPI. In particular, extensive partnerships were fostered around breastfeeding support activities in general and worksite lactation support in particular. Throughout the initiative, internal marketing communication efforts were heavily employed to keep current partners engaged and to expand the circle of partners aware of—and buying into—the initiative. In Texas, key internal partners included state office and regional staff in program areas such as maternal and child health, WIC, obesity prevention, chronic disease prevention and wellness. Texas' state agency wellness program, Texas Ten Step hospital recognition program, regional and local health services, and WIC served not only as invaluable advisors in the initiative but also as gatekeepers to MFWPI's targeted worksites. Key external partners included the state and local breastfeeding coalitions, the Texas Association of Local WIC Directors, and state worksite wellness advisory board. Partnerships were expanded during program implementation to include the state stroke and heart health program, local chronic disease prevention coalitions, and others.

2. **Conduct assessment.** Gather information about what is currently known about the baseline condition of worksite lactation support in your state. This could include completing a labor analysis to identify target labor markets and potential reach; reviewing literature and state and national quantitative and qualitative data about worksite barriers to breastfeeding and infant feeding outcomes; and conducting surveys and/or key informant interviews with a variety of stakeholders to identify strengths, opportunities, current level of awareness, needs, and competing demands. Local WIC agencies, state and local breastfeeding coalitions, and breastfeeding support organizations like La Leche League will likely have a pulse on problems that women encounter with worksite lactation. Human resource management, public administration, and building and facility management organizations are also invaluable informants.
3. **Develop strategy.** Strategy development includes establishing strategies to administer and sustain the initiative as well as strategies for development of the initiative's framework. Using the social marketing process, The Mother-Friendly Worksite Policy Initiative involved strategies designed to affect systems, organizational and public health policies, and both the built- and cultural environment. The objective was to make the healthy choice (supporting employees with lactation while working) the easy choice for employers. As part of strategy development, the project team should define the problem; set project goals, objectives and indicators; and define strategic target audiences. The project team should use the social marketing process to involve key audience sectors and increase their awareness, access and buy-in for implementation of worksite lactation support while also anticipating and proactively responding to their concerns, resistance, or competing demands about being involved in this effort. *See Resource Section for social marketing training.*
4. **Monitor and Evaluate.** Regular, ongoing process monitoring, gathering of lessons learned, and communication with partners are critical to ensure that the project is on-track and is effectively contributing to the desired outcomes. This allows for midcourse strategy/implementation adjustments, for leveraging of new opportunities and for assurance that the initiative keeps moving in the right direction.

Worksite-level planning implementation

DSHS walked the pilot sites through a series of implementation steps. While many worksites seeking designation may start small by adopting a policy that meets the MFWP minimum criteria and some may delay or forego the following implementation steps, worksites wishing to develop comprehensive worksite lactation support programs may follow these steps. *Tools to support these steps are available at TexasMotherFriendly.org.*

1. **Generate buy-in** within worksites. Support from all levels of the worksite is important for developing a successful lactation program. Identification of senior management champion(s) is particularly important; these champions may participate in the worksite committee directly, approve budgets, or show support by actively and visibly communicating their support to staff.
2. **Create a planning committee** that will integrate diverse perspectives, increase buy-in, and ensure that details about program logistics are covered. Committee membership should include decision-makers and interested or essential parties (i.e., human resources, wellness coordinator(s), facilities representative, an employee who has or is breastfeeding, pregnant employees, etc.). Assign roles to committee members, designate a coordinator, and establish program expectations.

3. Before designing the program for the worksite, **complete a baseline assessment** to understand how the organization currently supports (or doesn't) worksite lactation. Assess current policies, environments, supports, needs, constraints and employee demographics. Assessment might include committee discussions, an organizational scan, broad employee assessment, and interaction with stakeholders and key informants through the use of focus groups, interviews, or forums. Findings will determine what type of program is most appropriate for that particular worksite.
4. **Develop a policy and apply for designation.** The lactation support policy will shape worksite culture and attitudes about this issue. The policy should clearly state what the employees can expect from the organization and what the organization expects from employees. Some find it necessary to have a policy in place first and develop the rest of the program as part of a policy implementation plan, while others find that the approval of a formal policy is the end product of the implementation process. Once a policy is finalized, apply for Mother-Friendly Designation!
5. **Plan for implementation.** Outline options for your Mother-Friendly Worksite employee program in a written operating plan. The operating plan provides the framework for your worksite lactation support program, guides your organization's implementation of the proposed components, creates legitimacy for the worksite lactation support program within the organization, and provides a road map for action.
6. **Implement the program/plan.** Explore options for implementation of the time, space, education and support components of your completed operating plan (developed in step 5). Part of this step is to communicate about your worksite lactation support program to managers, employees, customers, potential employee recruits, and the larger community. Also be sure to document lessons learned so that you can refine and improve the program as time goes on!
7. **Evaluate your program.** The Texas Mother-Friendly website provides evaluation planning tools so that sites can consider how to gather feedback. Evaluating the program is an ongoing activity that can ensure sustainability and help identify areas for improvement. Input from stakeholders within the worksite who are affected by the program can help identify important information valued by users and supporters of the project. The MFWP recommends evaluating the program as a whole, as well as the different components. The results of the evaluations should be incorporated into future policy revisions and program updates.

Monitoring and evaluation:

From a state coordinating agency perspective, evaluate what is working/not working about the statewide Mother Friendly program. Some of the evaluation data collected by the MFWPI pilot project includes:

- Number of newly designated sites and an ongoing tally of total designated sites
- Number of employees potentially reached by the designated sites
- Number of employers implementing worksite lactation support programs (measured by existence of policies meeting or exceeding minimum designation criteria, operating plans, interviews)
- Comprehensiveness of worksites policies (extent to which policies explicitly address provision of time, space, education and support)
- Comprehensiveness of employer programs as measured by activities and/or activity work plans to provide education and support

As part of the MFWPI, additional questions about breastfeeding and worksite lactation have been added to statewide surveillance systems to evaluate public beliefs, perceptions and

behaviors. Three state-added questions were included in the Behavioral Risk Factor Surveillance System (BRFSS) and several questions were added to the Texas WIC Infant Feeding Practices Survey (IFPS), which is completed by mothers of infants participating in the Texas WIC program.

Keys to Success:

State level

- Fostering strategic partnerships was paramount to successful state-level implementation and to increasing reach throughout the MFWPI.
- MFWPI strategies, objectives, and evaluation planning were shaped by the assessment. Please see “Formative Evaluation” in Evidence Summary for more on this.
- The social marketing process (see Resources section for web-based training) was the overarching framework for the initiative and ensured that the initiative’s objectives strategies, program activities, technical assistance resources, messaging and partnerships were developed strategically with target audiences in focus and end goals in mind.

Worksite level

- Buy-in from all levels of worksites (from leadership to procurement/purchasing staff) was particularly important for a project’s success. Obtain information about the Fair Labor Standards Act provision for Reasonable Break Time for Nursing Mothers and the benefits of breastfeeding for business, parenting employees (dads, too!) and babies; these are effective to get needed buy-in.
- A planning committee to support implementation was critical to success in many pilot sites. Diverse planning committees bring multiple perspectives and expertise to the project and make planning and implementation more efficient and robust. Committees typically included a woman who had breastfed who could bring experienced testimonials and an insider perspective to the group. By participating on the committee, employees who were previously uninformed about the benefits of breastfeeding or a breastfeeding friendly workplace became advocates for a mother-friendly environment.
- Most project teams used the assessment tools provided by DSHS to develop a clear picture of the needs and attitudes of employees who were expectant- or new parents, management staff, and the larger employee population. Assessment data also provided planning committees with a better understanding of what assets were available to them as well as potential barriers to program implementation. A few teams that struggled with buy-in after not conducting an assessment wished they had done so before they approached executive leadership about the project. In hindsight, they believed they could have made a stronger case to their organizations’ leaders by demonstrating need and making the “unspoken need spoken”. For example, one finding from the state-level formative assessment process was the disconnect between employers’ awareness and perception of the need for worksite lactation support and employees’ reported experiences of trying to maintain lactation after returning to work. Employers reported not hearing from employees about their need for worksite lactation support, which they interpreted to mean that the need was already met. On the other hand, employees reported their struggles with maintaining lactation, finding appropriate space and time for pumping, negative or overtly hostile

attitudes from co-workers, and a great deal of hesitancy from fear for job security to speak to their employers about their worksite lactation experiences and needs.

- Training managers helps ensure comprehensive support for breastfeeding mothers returning to work. Simply leaving supervisors and managers to work out the details of policy implementation with new mothers may not be as effective.

Barriers to Implementation

State level

- The low level of awareness and unfamiliarity with the topic of worksite lactation support was a barrier to promoting the program. The lack of familiarity ranged from lack of understanding about what is required to maintain milk production when a mother is separated from her infant to the barriers women encounter when trying to work and breastfeed. Employers did not always immediately understand the meaning of “worksite lactation support” or “employee breastfeeding support” and often assumed that this would require a mother to bring her infant into the worksite to breastfeed. For these reasons, establishing the need for such a program can be a challenge. To address this barrier, it is helpful to address myths (such as those listed here: http://www.texasmotherfriendly.org/files/document_41.pdf), to raise awareness of the need (e.g. through public health data, testimonials, and a worksite assessment) and to provide basic, concise information about the cost-benefit of supporting breastfeeding. It is helpful to develop a plan for leveraging early adopters and their successes to build awareness. Project activities and timeline should allow for some level of education, myth-busting, and awareness building for *all* stakeholders (even early adopters).

Worksite level

- Locating dedicated space for lactation breaks was often identified as an initial barrier to buy-in. However, once employers learn that *flexible space options are allowable*, resistance diffuses. To address this barrier, deemphasize the space requirements, emphasize the importance of the other components of a supportive mother-friendly policy, and include a facilities management expert on the planning committee who can help identify appropriate lactation space.
- Within governmental worksites, unfamiliarity and restrictions with *purchasing processes* for lactation space furnishings can result in implementation delays. A purchasing expert on the planning committee can reduce this barrier.

EVIDENCE REVIEW SUMMARY

Underlying Theory/Logic: This intervention uses the social capital theory and the social marketing process as well as the Transtheoretical Model (stages of change).

Intervention strategy: This intervention employs the evidence based strategy of [support for breastfeeding in the workplace](#). The intervention uses programs and policies that provide staff information and education, flexible work schedules, a safe, clean place for the expression and storage of breast milk, and a culture of support for employees’ continued breastfeeding after return to work from childbirth.

Formative evaluation: Initial assessment included: labor market analysis; review of literature and review of best practices in workplace lactation support; and more.

Key informant interviews were conducted with 102 individuals including key outreach partners, experts in worksite lactation, and business representatives. This was followed by fifteen focus groups with a total of 119 participants to explore experiences and attitudes related to working and breastfeeding mothers, fathers who had supported a breastfeeding partner, and employers around the state. Several sources of data were used to inform the program, communication and advertising strategies: the key informant interviews and focus groups discussed above, process and impact data collected during the Mother-Friendly Employer Technical Assistance Pilot Project, and pilot employers' own baseline worksite assessment data. Campaign messages and materials were market-tested in five focus groups with mothers and employers and in four in-depth interviews with Spanish-speaking mothers.

Process evaluation at the state level: Google analytics was used to assess website use; market reports summarized media reach; and tallies were kept of contacts with key business influencers at conference exhibits (473 contacts made) and through direct outreach (153 phone calls and emails). There were over 200 million media impressions. The website logged approximately 40,000 visitors between May 1 and September 30, 2012. There were also at least 58 communication and planning resources developed or adapted, including 8 webinars.

Process evaluation at the worksite level: The tools, resources, and technical assistance were piloted in 30 worksites. The final versions of the tools and resources are available on the TexasMotherFriendly.org website. Evaluation of the pilot included review of the 30 worksites' operating plans (submitted by 55% of the pilot worksites) and progress reports, as well as interviews with 108 individuals representing all 30 sites, among other data sources.

Process evaluation findings:

- **All 30 pilot sites completed the following steps:** gain buy-in and develop a committee, provide human resources data, conduct worksite assessments (environmental scan, employee survey, findings summary), draft, adopt, and begin to implement an operation plan (description of program activities, breastfeeding facilities, and promotion plans), draft, adopt, and plan to implement a written workplace lactation policy, apply for MFWP designation, and evaluate efforts and progress (monthly and final reports, sustainability/tracking plans).
- In the interviews with 108 representatives from the pilot sites, participants reported that they found the technical assistance, tools, and resources helpful.

Outcome evaluation at the state level: The state is tracking worksites that submit and receive designation and has added questions related to breastfeeding to statewide surveillance systems. From 2010 to 2012, the number of adopting worksites increased from 233 to 1,120. Data on awareness, attitudes, and practices related to women breastfeeding at work is being collected through questions added to the BRFSS and the biennial Texas WIC IFPS. Data on the impact of the policy in those areas is not yet available.

Outcome evaluation at the worksite level: Evaluation of the pilot included review of the 30 employer policies, operating plans (submitted by 55% of the pilot worksites), and progress reports and in-person or phone interviews with 108 individuals representing all 30 employers. A number of employers also submitted photographs to document their breastfeeding support activities. Findings from outcome evaluation include:

- 100% of employers adopted formal mother-friendly policies.

- 100% of employers had functional lactation rooms and/or plans for flexible provision of lactation space for all of their worksites.
- 73% of employers explicitly addressed provision of education and support in their Mother-Friendly policies.
- 100% of employers had work plans and activities for enhanced education and support.

Although some of these data are self-reported, reports were verified through site visits to most locations and many worksites provided photographs of the new lactation space.

POTENTIAL PUBLIC HEALTH IMPACT

- **REACH:** This is state-level policy, which has potential for broad reach to employees across Texas. Collectively, the 30 employers that participated in the Mother-Friendly Employer Technical Assistance Pilot Project represented hundreds of worksites across the state employing over 118,500 employees. The MFWP outside of the technical assistance pilot is reaching hundreds of thousands of employees. Data are not available on the policy's impact on breastfeeding. Data collected during the formative stage revealed that it may be harder for lower-income and hourly workers to breastfeed after returning to work.
- **EFFECTIVENESS:** The intervention has been successful at getting worksites to adopt breastfeeding policies that meet established criteria for flex time and women's access to a pump room, sink, and milk storage. In the 30 pilot sites, the policy led to the specified improvements in the work environments. Evidence is not yet available on population awareness and attitudes towards breastfeeding at work or on the possible impact of the policy on women's breastfeeding practices. Questions about breastfeeding have been added to the BRFSS and the Texas WIC IFPS which will provide future data on changes in worksite breastfeeding attitudes and practices.
- **ADOPTION:** Since they implemented the marketing campaign, the number of adopting worksites has increased from 233 in 2010 to 1,120 in 2012. Since 2012 the number has continued to rise. Participating worksites are scattered throughout Texas, with most of them in the more populated regions.
- **IMPLEMENTATION:** Data from the pilot sites indicate that they are implementing the policy as intended. Data suggest that participants find the technical assistance tools and support useful. Most of the pilot sites were provided grants and all were provided with extensive technical assistance to develop and implement their policies. Through the pilot work, implementation guidance and tools were developed that might make it easier for future worksites to implement the policy. However, it is not clear how well sites that do not have grants and technical assistance will implement the policy.
- **MAINTENANCE:** The state level policy and recognition system have broad potential for sustainability. Partnerships and communication strategies developed during the Mother-Friendly Worksite Policy Initiative have expanded the state program's capacity for outreach and recruitment of additional worksites. Many local WIC and public health agencies have incorporated Texas Mother-Friendly Worksite outreach activities and indicators into their local program planning efforts. Texas can build on its initial investments. Major work has been done to develop a marketing campaign and a set of tools and resources. The high level of technical assistance provided to the pilot sites will be difficult to maintain, but it is anticipated that the MFWPI-developed tools and resources will provide much of the support needed to implement the policies, and therefore less direct technical assistance will be required. The connections with many partners, including the Building Healthy Texans Statewide

Agency Wellness Program, DSHS Nutrition Education Branch (Texas WIC), the DSHS Texas Ten Step Program, the DSHS Healthy Texas Babies Initiative, the DSHS Texas Nutrition, Physical Activity, and Obesity Prevention Program, the DSHS Transforming Texas Initiative, the DSHS Cardiovascular Disease and Stroke Program and local public health partners should also help to increase long-term sustainability.

INTERVENTION MATERIALS

Tools available to help in implementation can be found on the Center TRT website in PDF format.

- **Texas Mother-Friendly Worksite Implementation materials**, including formative assessment findings, sample marketing materials, and the evaluation report can be found in the Public Health Partners section of the Texas MFWP website: <http://www.texasmotherfriendly.org/public-health-partners>
- **Texas Mother-Friendly Worksite Program Welcome Packs:** These include items such as: a designation certificate and window cling decal, web and publication-ready logo files, and comprehensive communications toolkit; bathroom mirror clings directing employees to information about the lactation space, a supportive lactation room poster, and milk storage guideline magnets and educational brochures for program users.
 - MFWP Congratulatory Letter
 - MFWP Designation Certificate
 - A Breastfeeding Guide for Working Moms
 - Right to Breastfeeding “License”
 - MFWP Restroom Cling
 - MFWP Punch-Out Frame Magnet
 - MFWP Lactation Room Poster (English)
 - MFWP Lactation Room Poster (Spanish)
 - MFWP Decals
- **The Texas Mother-Friendly Worksite Employer *Build Your Program* Toolkit** includes materials that were developed, tested and refined during the MFWPI to assist employers in implementing comprehensive, sustainable worksite lactation support programs. Includes resources such as: *Get People on Board*, *Communication Tools*, *Additional Resources*, and *FAQ* sections: <http://www.texasmotherfriendly.org/program/getting-started>
 - Texas MFW Communications Toolkit
- The **Texas Mother-Friendly Worksite Employer Toolkit** was developed to assist in recruiting and equipping local community partners to spread awareness, interest and support for worksite lactation support programs and for the **Texas Mother-Friendly Worksite Program**: <http://www.texasmotherfriendly.org/outreach-partner-toolkit>.
- **Texas Mother-Friendly Worksite Program Community Page** highlights employer success stories developed during through the initiative: <http://www.texasmotherfriendly.org/community#all/>
- **Breastmilk: Every Ounce Counts Website**, a working mother’s one-stop breastfeeding resource: <http://www.breastmilkcounts.com/working-moms.php>

EVALUATION MATERIALS

Center TRT Evaluation Materials

[Center TRT](#) developed an evaluation logic model and evaluation plan for the Texas Mother-Friendly Worksite Program (MFWP), a designation program for worksites that have a written and communicated policy that provides space for breast milk expression in the worksite, flexible work schedules for breastfeeding mothers, and access to hygienic breast milk storage options (refrigerator or cooler). The logic model is intended to guide the evaluation process (as opposed to the planning process); the evaluation plan focuses on the implementation and effectiveness of an approach like the MFWP in changing practices and policies to support breastfeeding women and families. The evaluation addresses the reach, adoption, extent of implementation and effectiveness of the MFWP. The evaluation is a pre-post design with no comparison group. This evaluation plan provides guidance on evaluation questions and types and sources of data for both process and outcome evaluation. We suggest a variety of data collection tools throughout the evaluation plan. If you are interested in answering evaluation questions not listed in the evaluation plan, please refer to the list of additional evaluation questions [here](#).

Evaluation Materials Provided by Texas MFWP

Several tools created by Texas Mother-Friendly Worksite Program (MFWP) staff are [available](#) for your use in evaluation efforts. These tools have been incorporated into the evaluation plan that Center TRT developed. **Please note that Center TRT has not reviewed these tools.**

- MFWP Worksite Application Review Tool
- Potential BRFSS questions about breastfeeding social norms

TRAINING AND TECHNICAL ASSISTANCE

Please contact Julie Stagg (information below) for information on training and technical assistance.

ADDITIONAL INFORMATION

Web links: www.texasmotherfriendly.org

Program Contact(s):

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Related Resources:

- CDC Division of Nutrition, Physical Activity, and Obesity (DNPAO) Social Marketing for Nutrition and Physical Activity Web Course: <http://www.cdc.gov/nccdphp/DNPAO/socialmarketing/index.html>)
- CDC Healthy Worksite Initiative Lactation Support Program Toolkit: <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/lactation/index.htm>
- Business Case for Breastfeeding: <http://www.womenshealth.gov/breastfeeding/government-in-action/business-case-for-breastfeeding/>
- National Business Group on Health *Investing in Workplace Breastfeeding Programs and Policies*: http://www.businessgrouphealth.org/toolkits/et_breastfeeding.cfm
- U.S. Department of Labor Wage and Hour Division Break Time for Nursing Mothers website: <http://www.dol.gov/whd/nursingmothers/>
- United States Breastfeeding Committee: <http://www.usbreastfeeding.org/Employment/WorkplaceSupport/tabid/105/Default.aspx>
- CDC Guide to Breastfeeding Interventions: <http://www.cdc.gov/breastfeeding/resources/guide.htm>

Publications: Manuscript in development.

Comprehensive Description of Mother-Friendly Worksite Policy Initiative (MFWPI)

The following activities were an essential part of the CPPW-funded capacity building effort called the MFWPI. The focus of this effort was to scale up the Texas Mother-Friendly Worksite Program to increase program capacity and scope; provide additional guidance and support for employers wishing to implement worksite lactation support policies and programs; and to increase the program's reach through awareness and uptake of the worksite designation.

While Texas was fortunate to receive CPPW funding, funds of this size are unlikely to be available again for some time. Therefore, the activities below are detailed for your information; however, Center TRT does not expect that a new adopter would do all of these things. Rather, this section gives you an understanding of how Texas arrived at the transformed Mother-Friendly Worksite Program that is now being implemented, including the communication and implementation materials.

The CPPW funding provided resources to do the following in-depth work:

Formative assessment: Texas DSHS completed formative assessment with many stakeholders, including employers both mother-friendly designated and not designated, working and breastfeeding mothers, and breastfeeding experts/outreach partners (other breastfeeding and health oriented partners, such as WIC directors and breastfeeding coalition members), among others. From this process, project staff learned about:

- barriers to breastfeeding for employees;
- how worksites support general work-life balance and breastfeeding for employees;
- non-designated worksites' interest in the designation program;

- appropriate messaging of the designation program; and
- how to improve the program.

This rich qualitative data informed the social marketing campaign, programmatic enhancements, and refinement of the implementation/support materials created and now disseminated via the www.texasmotherfriendly.org website. Center TRT anticipates that less extensive formative work would be necessary for an organization adopting a designation program modeled on the Texas Mother-Friendly Worksite Program. Formative assessment reports are available here: <http://www.texasmotherfriendly.org/public-health-partners>.

Mother-Friendly Employer Technical Assistance Pilot Project: The purpose of the pilot project was three-fold. First, the project intended to increase the number of Texas Mother-Friendly Worksites among prioritized employers. Second, the project aimed to test training, technical assistance (TA), support materials, and the implementation processes for a comprehensive employee worksite lactation support program and policy in real-world conditions.

Pilot testing and formative assessment processes informed development of strategies, tools and messaging for statewide dissemination to employers and other key audiences. Third, employers were strategically selected for their capacity as community role-models and outreach partners to extend the reach of their worksite lactation support beyond their own worksites to other employers and key stakeholders in their communities.

Strategic recruitment: Thirty employers, each representing multiple worksites, were recruited to participate in the pilot project. Employers were public and non-profit organizations whose missions and/or programs are related to maternal and child health and/or health and wellness promotion. The employers' workforce was diverse and settings included both office- and non-office settings. Public employers were a priority audience based on higher than average numbers of female employees and employees more likely to experience disparities. Developing, implementing, and refining effective recruitment strategies was one of the most time-intensive components of the MFWPI.

Provide training and TA to worksites: DSHS provided intensive TA to pilot sites through several channels. DSHS walked the sites through a series of six steps pertaining to implementation, from identifying champions to implementing the policy. Training, TA processes, and materials were tested and refined. The TA and training component for pilot sites included the following:

1. Conducted a four-hour training that covered: an overview of the historical and legal aspects of worksite lactation and the project, information about the TA that would be provided, and information on the general process of developing a worksite lactation program. All participants received a training manual on these topics to take back to their organizations.
2. Participating employers making a formal commitment to the MFWPI project and participation in pilot-testing activities.
3. Formal TA to pilot sites, which included a framework, timeline, and customizable tools and templates designed to support trainees in initiating the project. TA also included consistent communication and individualized consultation with MFWPI staff.
4. Invitations to attend monthly webinars on topics related to the MFWP process, with opportunities for networking and sharing during each webinar.

Develop and implement comprehensive communications campaign: Texas DSHS used the formative work to develop and implement a targeted statewide media and communications campaign to increase target audience awareness of and interest in the initiative. The communication campaign also plays an important role in changing social norms beyond the worksite and bringing community attention to the issues of worksite lactation. The campaign included concept- and key message development, research-based creative strategy for all materials, market-testing and refinement of resource materials and communications approaches, development of outreach strategies and various tools and toolkits, outreach through traditional media channels (e.g., website, billboards, print ads), and targeted community partnership development (e.g., an outreach partner toolkit including an outreach guide and communication tools and templates).

Programmatic enhancements: Texas DSHS used the formative assessment and lessons learned from the Mother-Friendly Employer Technical Assistance Pilot Project to transform the MFWP into a TA and recognition program with value-added benefits for employers. DSHS leveraged the MFWPI to integrate the MFWP into public health infrastructure.

Programmatic enhancements included:

1. Formal changes to the MFWP Administrative Rules to (1) align program criteria with federal requirements, (2) implement a value-added tiered system of recognition for worksites exceeding the minimum requirements, and (3) implement a biennial reapplication requirement to ensure ongoing quality control and compliance with program standards.
2. Enhanced MFWP website to include TA resources and provide employers with opportunities to highlight their stories through success stories posted on the website, and makes the MFWP application and approval processes more efficient.
3. Provision of TA resources for key audiences, including an employer “Build Your Program” toolkit, “Outreach Partner Toolkit”, and enhanced content for working mothers at: <http://breastmilkcounts.com/working-moms.php>
4. Provision of value-added resources for employers receiving the Mother-Friendly Worksite designation including (1) materials, tools and platforms for communicating the designation to their internal and external customers and (2) materials and resources for creating a supportive environment for worksite lactation.
5. Escalated program outreach. Using tools and strategies developed through the communications campaign, the program has extended sustained program outreach efforts at key employer conferences and venues and through targeted community outreach partner development.
6. Integration of MFWP into public health policies, programs and initiatives, such as through the following (not a comprehensive list):
 - Requiring MFWP designation as a prerequisite for all birthing facilities applying for the DSHS Texas Ten Step birthing facility designation.
 - Requiring all WIC Local Agencies to achieve the MFWP designation by 2015.

Strategic Partnership development

Strong, strategic partnerships are among the most critical resources for ensuring sustainability of MFWPI efforts in the absence of funding. Targeted partnership development was incorporated throughout the multiple components of the MFWPI in the following ways:

- Outreach partner stakeholders were included in formative assessment activities to learn more about their needs, challenges, and successes related to worksite lactation support.

- Employers were strategically recruited for participation in the Mother-Friendly Employer Technical Assistance Pilot Project with an eye to their capacity to extend the reach of the MFWP beyond their own worksites. Many of these partners worked to promote MFWP to other employers within their direct spheres of influence (e.g. parent companies, municipalities, other similar agencies) and/or build MFWP outreach activities into their own programmatic priorities. DSHS staff actively engaged in strategic partnership identification and development. This process served to incrementally spread outreach opportunities. For example, an outreach partner panel presentation, “Mother-Friendly Outreach: Stories from the Field”, featured at the Texas WIC Nutrition Education and Breastfeeding Conference served to motivate other WIC Local Agencies to engage in MFWP outreach activities with employers in their communities.
- The MFWPI included intensive internal marketing within DSHS and programmatic partnership development through the DSHS internal Infant Feeding Workgroup. Intensive internal cross-program communication about the MFWP program allowed the MFWP to be more fully integrated into state public health infrastructure, and facilitated expansion of the number of programs participating as partners in the DSHS Infant Feeding Workgroup.