

ENVIRONMENTAL SCAN

Twins Cities, Minnesota

ABSTRACT

With funding from Reducing Disparities in Breastfeeding through Continuity of Care Identifying Care Gaps grant, from National Association of County and City Health Officials (NACCHO), the Hmong Breastfeeding Coalition conducted an environmental scan of the Twin Cities (Minneapolis and Saint Paul, MN) on breastfeeding promotion and support for child-bearing age Hmong women and families.

A breastfeeding (BF) assessment was created specifically for this project and confirmed what Hmong community members have previous mentioned to HBC. Additionally, a storytelling collection initiative was launched since oral history is deeply rooted in the Hmong culture.

These two methods portrayed how the lifestyle of a Hmong woman's role resembles what is found in a Confucius model of the family, where an individual's success is celebrated and viewed as the whole family's success. Likewise, individual interests and needs are never put above the interests and needs of the family's general welfare. This maybe what is contributing to low BF rates in the Hmong community but can also be leveraged for information sharing, resources, and encouragement to be more supportive.

Hmong Breastfeeding Coalition Minnesota Breastfeeding Coalition June - November 2021

CONTEXT

The 2019 American Community Survey (ACS) estimated roughly 91,000 Hmong living in Minnesota with 23% being women of child-bearing age (18 -44 years old). The Minnesota Department of Health (MDH) WIC Program disaggregated breastfeeding data by cultural identity only to find that Hmong women had the lowest breastfeeding initiation and duration rates. This led to the Hmong Breastfeeding Project (HBP) which was an attempt to understand Hmong perspectives and experiences regarding breastfeeding. Key informants were interviewed, and listening sessions were held to learn about the myths, beliefs, and practices of breastfeeding in Hmong families. In these conversations, participants highlighted barriers Hmong breastfeeding or post-partum mothers experienced working within manufacturing companies and accessing lactation spaces.

Although the State of Minnesota has a breastfeeding law, there is a component of noncompliance due to ignorance, lack of motivation, worrying about the bottom line or not having the resources to comply. Participants of the HBC pointed out that Hmong women working in the manufacturing field may not get the time and space for pumping and are less likely to initiate the conversation with their employers about pumping needs. Many Hmong Minnesotans work in medical technology companies like Abbott Laboratories, Boston Scientific and Medtronic. The 2019 ACS estimated roughly one in five Hmong women of child-bearing age worked in the manufacturing industry. There were anecdotal stories of manufacturing companies stating that they support breastfeeding in the workplace yet HBP participants were not aware of lactation spaces available to them and/or did not feel supported in accessing these spaces. There seemed to be a disconnect between employers and Hmong employees.

When the HBP ended, majority of the participants formally organized and became the Hmong Breastfeeding Coalition (HBC) under the Minnesota Breastfeeding Coalition (MBC). MBC supports HBC when invited to but does not supervise or direct HBC in any way. Wanting to further explore this disconnect, HBC applied and was awarded the Reducing Disparities in Breastfeeding through Continuity of Care Identifying Care Gaps: Conducting Community Assessments to Improve the Chest/Breastfeeding Landscape in Historically Oppressed Communities grant from National Association of County and City Health Officials (NACCHO). This environmental scan is the first step to identifying where the care gaps may exist; followed by a Facebook Live event with community participation and a story telling activity using stories shared by Hmong families.

BREASTFEEDING SERVICES AND SUPPORT

The following tables (Table 1 and 2) show a snapshot of the services available to Hmong families. These are by no means exhaustive lists, but it gives an indication of the organizations in the Twin Cities area.

Table 1: Family Services

Organization Name	Strengths	Weaknesses
Lao Family Community of MN, Inc.	 Well established organization in the Hmong community Social work assistance Youth and family programs Educational, arts and crafts programs Sponsors Hmong Radio and many community events 	No lactation education and support Uneven reputation in the Hmong community
United Hmong Family, Inc	 Social work assistance Youth and family programs Sponsors Hmong Radio and many community events 	No lactation education and support
Center For Hmong Arts and Talent	 Catered to Hmong youth (ages 15-19) Music and art lessons Fashion design mentorship Theatrical plays 	 No lactation education and support Newer organization so still building rapport with Hmong community

	Sliding-scale fee classes, scholarships available	
Hmong American Partnership	 Well established organization in the Hmong community Works primarily with refugee families Workforce development Social work services Children and family programs to address tobacco-free living, diabetes prevention, chemical health, mental health and wellness. 	No lactation education and support Uneven reputation in the Hmong community
	Fee for service, insurance may cover	
Hmong Cultural Center	 Promote personal development through education and providing resources that enhance cross-cultural awareness between Hmong and non-Hmong. Online classes about Hmong history and culture Music, dance and ceremonial art classes Museum-quality interactive exhibits Hmong Resource Center Library Sliding scale fee classes, scholarships available 	 No lactation education and support Newer organization so still building rapport with Hmong community

Table 2: Lactation Support

Organization Name	Strengths	Weaknesses
Hmong Breastfeeding Coalition	 Cultural coalition Members are Hmong with and without personal breastfeeding experiences/stories Open to the public Compensation for participation 	No direct breastfeeding support/trouble shooting
Women, Infant & Children (WIC) Peer Breastfeeding Program	 Bilingual Hmong Peer Counselors Staff will reach out to patient Free One-on-one meetings, can be home visits 	 Must a WIC client to participate No direct breastfeeding support/trouble shooting
Pump Talk 101	 A monthly class that teaches the basic of breastfeeding and returning to work. Open to the public 	 Fee of \$10/person per session No Hmong staff noted, interpreter may be available.
Fairview Lactation Services	 Board certified lactation consultant staff Outpatient services available Access to U of MN milk bank 	 Fee for service, insurance may cover Must be a Fairview patient Appointment needed No Hmong staff noted, interpreter may be available.
Milk Moms	 Access to high quality brand and styles of breast pumps at best price available Staff specialized in insurance billing of breast pumps Free Open to the public 	No Hmong staff noted, interpreter may be available.
Health Partners/Park Nicollet Breastfeeding Center	 Board certified lactation consultant staff Access to breastfeeding products and education Open to the public 	 Fee for service, insurance may cover Appointment needed No Hmong staff noted, interpreter may be available.

	Services available online, by telephone or at Park Nicollet Methodist Hospital	
AMMA Parenting Center Weekly Q&A time Welcome Baby Care	 Open to the public Free Group meeting Certified Postpartum Doulas Lactation Specialists Night Nurses Specializes in extra support for preemies and multiples 	 Online only No Hmong staff noted, interpreter may be available. Fee for service, insurance may cover No Hmong staff noted, interpreter may be available.
St. Croix Parenting Breastfeeding Success "Strategy Hour"	 Free, one-hour session to help participants understand their breastfeeding goals Open to the public Referrals to other professionals (doctors, lactations consultants, etc.) as needed 	 Self-made appointments only by phone or online No Hmong staff noted, interpreter may be available.
La Leche League (LLL)	 La Leche League Leaders are trained and accredited by LLL International Many local groups with various meeting dates and times Open to the public Free Option to be part of LLL USA with a membership fee Group meetings, socializing circle 	 All groups are not meeting in person due to the COVID-19 pandemic No Hmong staff/member noted
Lactation Lounge by Blooma	 Lactation Counselor available Free, weekly live stream Open to the public Group meetings, socializing circle 	 No Hmong staff noted, interpreter may be available. No one-on-one meetings
The Boob Geek	 A calendar of free breastfeeding support throughout Twin Cities area Free access to calendar Open to the public 	Online calendarEnglish only

REFERENCES

http://www.culturecareconnection.org/matters/diversity/hmong.html

https://www.mnhs.org/hmong

https://data.census.gov/cedsci/table?q=hmong%20MN%202019&t=020%20-

%20Hmong%20alone%20%28422%29%3AAge%20and%20Sex&g=0400000US27&tid=ACSSPP1Y2019.S0201

https://www.pewresearch.org/social-trends/chart/economic-characteristics-of-u-s-hmong-population/

https://ppsupportmn.org/breastfeeding/

BREASTFEEDING ASSESSMENT

A breastfeeding assessment was created specifically for this environmental scan (Appendix A). It was sent via email to the HBC members and shared on social media to encourage participation. The incentive to complete the assessment was being entered into a drawing to win one of four \$25 Visa gift cards. A total of 70 Hmong completed the survey.

Unfortunately, out of the 70 survey participants no one identified as working in manufacturing and/or hospitality. Nevertheless, the survey confirmed what the Hmong Breastfeeding Coalition heard from community members during the Hmong Breastfeeding Project. These include:

- Social determinants of health play a role in whether or not families meet their breastfeeding (BF) goals.
- Office jobs have breastfeeding policies.
- If a mother contemplated about BF and made the decision to BF before delivery, there is a higher chance of successfully BF.
- BF confidence increased with each new baby.
- Not having a person or support group to talk to correlates with BF difficulty and not meeting BF goal.
- Not having a supportive workplace correlates with chances of not meeting BF goal.

To summarize, the Hmong household dynamic and relationships are complex with potential for information sharing, resources and encouragement to be more supportive. This resembles a Confucius model of the family, where an individual's success is celebrated and viewed as the whole family's success. Likewise, individual interests and needs are never put above the interests and needs of the family's general welfare; conflict within a family is frowned upon.

The Hmong word "nyab" is a title that all Hmong girls are taught to uphold when they marry; it means "daughter-in-law." There are unspoken rules of how a nyab is supposed to revere her elders, especially the elders in her husband's family. A nyab should be proactive in helping her mother-in-law raise and teach the husband's younger siblings and do all that she can to achieve and maintain family harmony. This usually involves cooking and cleaning for her husband's family and living with them. Multi-generational homes are very common in the Hmong community and if the nyab and son are both working outside of the home, the grandparents are usually the main caretakers of the babies.

A Hmong Lactation Consultant (and currently the only one in the nation) Yang Her, shared her thoughts on the general success rates of BF for Hmong mothers. Based on their living circumstances, success is divided into three tiers, with the first tier being the most successful.

Tier 1	Hmong woman's partner is non-Hmong and they live on their own.
Tier 2	Hmong woman's partner is Hmong and they live on their own.
Tier 3	Hmong woman's partner is Hmong and they live in a multi-generational home (with the mother and father-in-law) and is fully engaged in the duties of a <i>nyab</i> .

Additionally, there were a few new factors that popped up from the survey results. These include:

- Roughly 20% of survey participants did not meet their BF goal.
- Medical professionals have a significant role in encouraging and supporting BF.
- One-third of survey participants used medical professionals and friends/family as a source of BF resource.
- Almost all survey participants said that they made the decision to BF on their own.

Through anecdotal evidence, we assume that the reason data for manufacturing and hospitality employees are hard to find is because the majority of workers are affiliated with temporary staffing agencies. The survey results do not show adequate representation for Hmong families working in manufacturing and hospitality so the care gap we have identified is that supporting these families is complicated due to:

- Temp agency does not support BF*
- Timing of work shift
- Lower income status and the social circles
- More family responsibilities
- Workplace culture and attitudes regarding breastfeeding

BREASTFEEDING STORYTELLING COLLECTION

Hmong culture is rooted in oral storytelling to preserve language and traditions. Although the Romanized Popular Alphabet was developed in the 1950's to form today's Hmong written language, it is common to find at least one person in a Hmong family who cannot read or write Hmong.

In addition to the online breastfeeding survey, HBC launched a storytelling collection. The campaign was sent via email to the HBC members and shared on social media to encourage participation. If someone was interested in sharing their breastfeeding story, they would email the HBC email account and receive a talking point document (Appendix B) to guide them and a media release form (Appendix C). The story telling collection was open during August, September and October and the incentive to submit a story was a \$100 thank you gift. During the month of October, HBC encouraged younger generations to interview older family members such as their mothers, grandmothers, and aunts about their breastfeeding journey and returning to work. The incentives for these interviews were \$100 thank you gift to the interviewee.

There was a total of 22 stories that were submitted, with four of them identifying as working in a manufacturing and/or hospitality workplace. Below were the emerging themes from the storytelling collection:

Success	Challanasa	
Successes	Challenges	
Thought about BF before giving birth.	Finding the time in work schedule to pump- it gets too busy at work. Demanding work timeline.	
Being deliberate about making time to pump/following pump schedule. Building a stash for going back to work. Have more confidence with each new baby. Doing own research after each baby experience.	Low milk production or fear of baby not getting enough to eat. Supplemented with formula and baby no longer took to the breast.	
Co-workers who have BF before and reaching out to them about policy and procedures. Having someone to talk to about BF and what to expect. Have a FB group to talk to: exclusive pumpers.	Didn't know a lot of women who BF and if they are comfortable talking about it. Not having anyone to talk to about BF.	
Benefits of BF and cost saving, but not putting too much pressure on myself if I need to supplement.	Workplace not having a dedicated lactation space.	
The pandemic gave flexibility because employers knew that children were going to be home. Working from home and nursing instead of pumping.	Post-partum mental health. Feeling overwhelmed.	
Setting small BF goals to keep going. i.e. let's make it to 1 month, 3 months, 5 months, etc.	Baby attached to the breast is seen as a bad thing. i.e. not taking the bottle, only nursing	
Introducing the bottle to baby around 2 months old as preparation to heading back to work.	Fear of employer looking at me in a "different/bad" light. Employer not openly supporting the decision to BF.	
Having a set of pump supplies at work and one at home. Not having to carry supplies back and forth, reducing the chances of forgetting a piece of equipment.	Not understanding baby cues. Stressing about baby crying, wanting to make sure that baby is always content.	

LESSONS LEARNED AND NEXT STEPS

As with any assessment project, there were some lessons learned and more work to be done. Lessons learned include:

- 1) The way HBC phrased the promotions for online survey and storytelling initiative. It may have excluded BF families that knew they were going to stop BF when returning to work and families who were supplementing with formula.
- 2) A staff dedicated only to social media. Since this project was done heavily online and on a social media platform, it was hard to respond to interested parties in a timely manner. This may have been a reason why there were not more BF story submissions.
- 3) **Involving key community stakeholders take time**. Perhaps the combination of HBC being a younger organization, the timeframe of this project and current events of the pandemic led to no successful partnerships formed with Hmong centric organizations.
- 4) Finding demographic data for employees working in manufacturing and hospitality workplaces is difficult and maybe complex. HBC assumes that the reason why it is difficult find this data is because the majority of workers are affiliated with temporary staffing agencies. Once this data is obtained, are the employees governed by the temp agencies' workplace policies or the policies of the physical workplace where the employee is performing work?

While HBC plans to use the emerging themes from the storytelling collection to apply for other funding to further the work, there are a few tangible next steps that will be put into motion in the next few months below. These next steps came out of a Consensus Workshop that NACCHO hosted as technical assistance to grantees. Please see the Hmong Consensus Workshop Mural (Appendix D) for more details.

- 1) **Create Hmong specific breastfeeding support opportunities.** This could mean establishing a peer BF support group and continuing to host community conversations on BF.
- 2) Equip Hmong centric organizations to support Hmong families with breastfeeding. This could mean finding funding to create lactation spaces at public events such as the annual Hmong New Year and Freedom Festival.
- 3) **Equip Hmong breastfeeding families with lactation education and skills.** Maybe create a BF advocate campaign and go on the Hmong radio show to talk about the benefits of BF.

This project really helped HBC increase their social media presence and following. Through promoting the online breastfeeding survey and storytelling initiative, HBC made a total reach to 4,161 individuals and engaged 90 individuals. It was a pleasant surprise that Hmong community members from Wisconsin and California heard about this project and wanted to join.

Hmong Breastfeeding Assessment for Families * 1. How old are you? Under 18 18-24 25-34 * 2. To help us better understand your breastfeeding situation, please check all that apply to you. This is my first baby My partner is Hmong and we live on our own This is my 5th (or more) baby My partner is Hmong and we live in a multi-generational home (parents or parent-in-laws and grandparents live with I do not have a partner or support person My partner is not Hmong and we live on our own I have heard of the lightning myth and/or other Hmong myths about breastfeeding My partner is not Hmong and we live in a multi-generational home (parents or parent-in-laws live with us) I believe in the lightning myths and/or other Hmong myths about breastfeeding My annual household income is less than \$50,000 * 3. When you were pregnant, did you have plans to breastfeed? I am currently pregnant and plan to breastfeed I am currently pregnant and do not plan to breastfeed * 4. Tell us about your breastfeeding goal Breastfeed less than 2 weeks Breastfeed at least 3 months Breastfeed between 2 weeks and 2 months Breastfeed at least 6 months Breastfeed at least 2 months Breastfeed 12 months or more * 5. After having your baby, did you meet your breastfeeding goal? I am currently pregnant I am currently done breastfeeding and did not meet my goal I am currently breastfeeding and will not meet my goal I am currently done breastfeeding and met my goal I am currently breastfeeding and will meet my goal I am currently done breastfeeding and exceeded my goal I am currently breastfeeding and will exceed my goal

	Knowing the benefits of breastfeeding	What family members said about breastfeeding
	Cost of formula	What friends said about breastfeeding
	Having to go back to work after delivery	What doctors and medical professionals said about breastfeeding
	Other response or more details	
* 7. \apply	у.	reastfeeding education and support from? Check all
	Family and friends	Breastfeeding community (virtual social groups, breastfeeding coalitions, etc.)
	Medical professionals (doctor, midwife, nurse, lactation consultant, etc.)	Community organizations (Hmong American Partners
	Woman, Infant and Children (WIC) Program	Lao Family Community of MN, etc.) Workplace, employer and/or co-workers
	Other response or more details	workplace, employer and/or co-workers
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apply	I am currently pregnant Family and friends Medical professionals (doctor, midwife, nurse, lactation consultant, etc.) Woman, Infant and Children (WIC) Program Other response or more details If you have a partner, how were they involved in the solution of the soluti	Breastfeeding community (virtual social groups, breastfeeding coalitions, etc.) Community organizations (Hmong American Partnersl Lao Family Community of MN, etc.) Workplace, employer and/or co-workers your decision to breastfeed? Check all that apply.
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apply	I am currently pregnant Family and friends Medical professionals (doctor, midwife, nurse, lactation consultant, etc.) Woman, Infant and Children (WIC) Program Other response or more details If you have a partner, how were they involved in the solution of the soluti	Breastfeeding community (virtual social groups, breastfeeding coalitions, etc.) Community organizations (Hmong American Partnersh Lao Family Community of MN, etc.) Workplace, employer and/or co-workers your decision to breastfeed? Check all that apply. Explained to family and friends the reasons for and be of breastfeeding

\bigcirc	Yes	
\bigcirc	No	
† 11 .	. How did they (father, father-in-law, brother, etc.) a	ffect your decision to breastfeed? Check all that a
	Talked with me about breastfeeding plans and goals	Discouraged or told me to not breastfeed
	Asked the health provider (doctor) questions about breastfeeding	They did not affect my decision to breastfeed
	Explained to family and friends the reasons for and benefits of breastfeeding	
	Other response or more details	
' 12.	. How did you access breastfeeding support?	
\bigcirc	Booked my own appointments	
	Walk-in or drop-in support	
	Researched on my own	
	Automatically received a phone call, text or appointment after	r my baby was born.
	Other response or more details	
* 13.	. What is hard for you related to accessing breastfe	eding education and support? Check all that appl
	No time because of family responsibilities	Hours of operations
	Transportation	Language
	Childcare for other children	Recovering from childbirth
	Costs (parking fees, service fee, etc.)	
	Other response or more details	

Family and frie time	nds help with family responsibilities so I have	Hours of operations	
Transportation		Language	
Childcare for of	ther children	Recovering from childbirth	
Costs (parking	fees, service fee, etc.)		
	e or more details		
* 15. Are you curr	ently employed?		
Yes	only on project.		
O No			
* 16. Please provide	your employee information below. All	information will be kept confidential and	d not be
linked to you.			
Job title or position (put "None" if you are not			
employed)			
Company name			
2nd Job title or position			
(put "None" if you do not nave a 2nd job)			
2nd Company name			
3rd Job title or position (p	ut		
'None if you do not have a			
3rd job)			
3rd Company name			
±47.5			
before giving birth		(guaranteed time and space) and did y	ou know about i
	· · · about the breastfeeding policy before giving b	birth	
	ow about the breastfeeding policy before givin		
	er does not have a breastfeeding policy	ig biiti	
No, my employ			
	ny employer has a breastfeeding policy		

18. When you w	ere pregnant, what were your plans for child care? Check all that apply.
A family memb	er or friend who is not a licensed child care provider
An in-home lice	ensed child care provider
A child care ce	nter
Stay at home v	vith baby (you or your partner)
Other response	e or more details
19. After having	your baby, who did you use for child care? Check all that apply.
I am currently p	pregnant
A family memb	er or friend who is not a licensed child care provider
An in-home lice	ensed child care provider
A child care cer	nter
Stay at home v	vith baby (you or your partner)
Other response	e or more details
f you would like t w. This informati	to be entered into the drawing for 1 of 4 (\$25) gift cards, please provide your information will not be used to identify your responses in this survey.
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If you would like to w. This information (first and last)	to be entered into the drawing for 1 of 4 (\$25) gift cards, please provide your informa

Appendix B



We are looking for your breastfeeding story!

The story can be in Hmoob or English.

Please contact hmongbf@gmail.com if you are interested.

Talking points for BF stories:

- 1) Context (the date, family situation, etc.)
- 2) Did you think about BF at all when you were pregnant?
- 3) Did you have anyone to talk with about BF and going back to work?
- 4) What were you anticipating going back to work while BF?
- 5) Provide details about the journey between birth and going back to work?
- 6) Your experience of pumping and being at work.
- 7) How long did you end up breastfeeding for?

Requirements to get \$100:

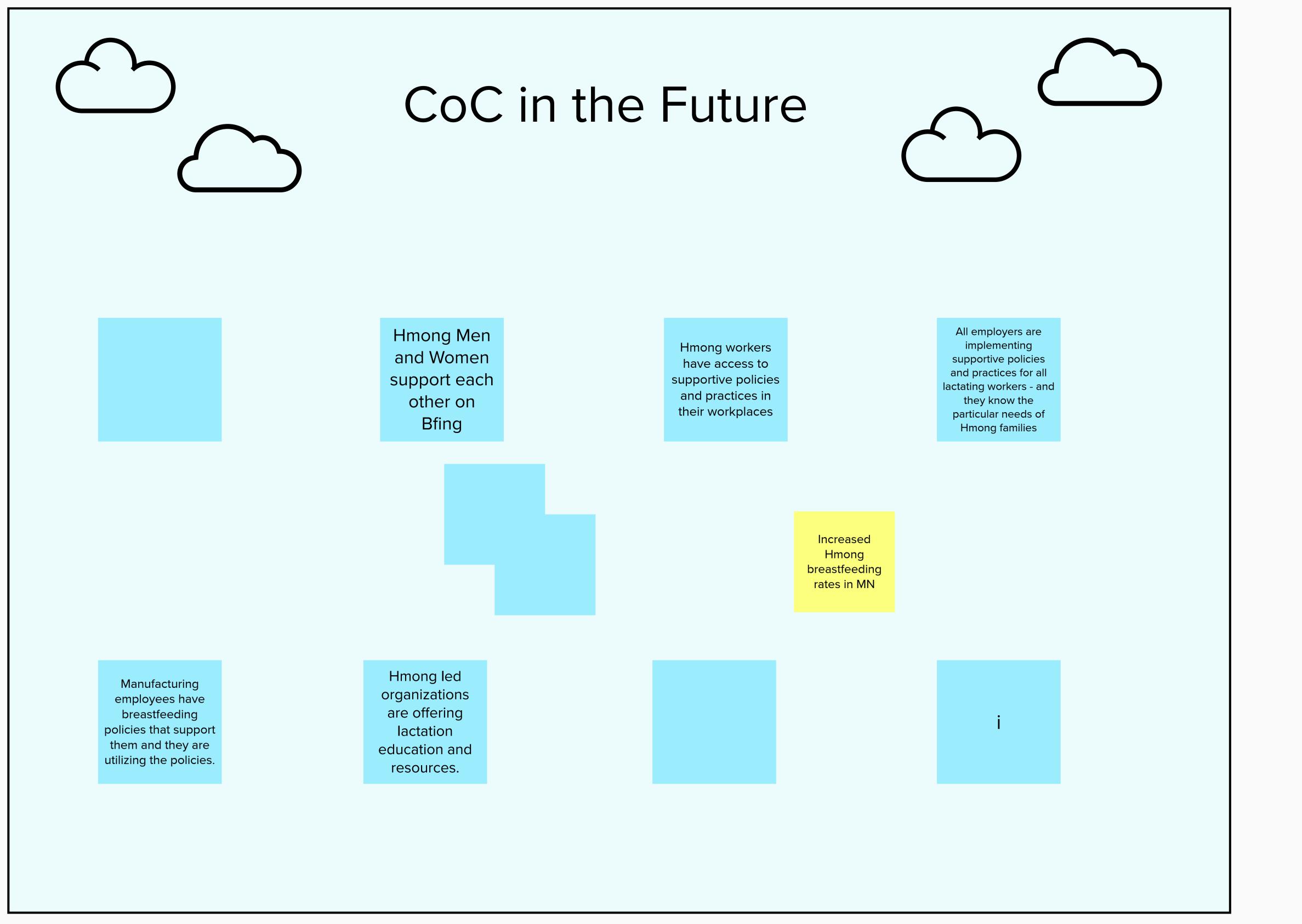
- Story should be focused on breastfeeding and going back to work. If you ended up not breastfeeding when you returned to work- how come?
- Recorded format; audio like MP3 or audio-video like MP4.
- Participants can record their own stories or coordinate with HBC to help with recording.
- Average length of 5 7 minutes.
- Interviewer will receive \$100 and the interviewee will receive \$100.
- Submit story by October 31, 2021 to hmongbf@gmail.com

Example of final product: Betsy Yang's story- https://youtu.be/7NLoLinHiBo



breastfeeding: healthy babies · healthy families · healthy communities

Audio/Image/Video Release Form

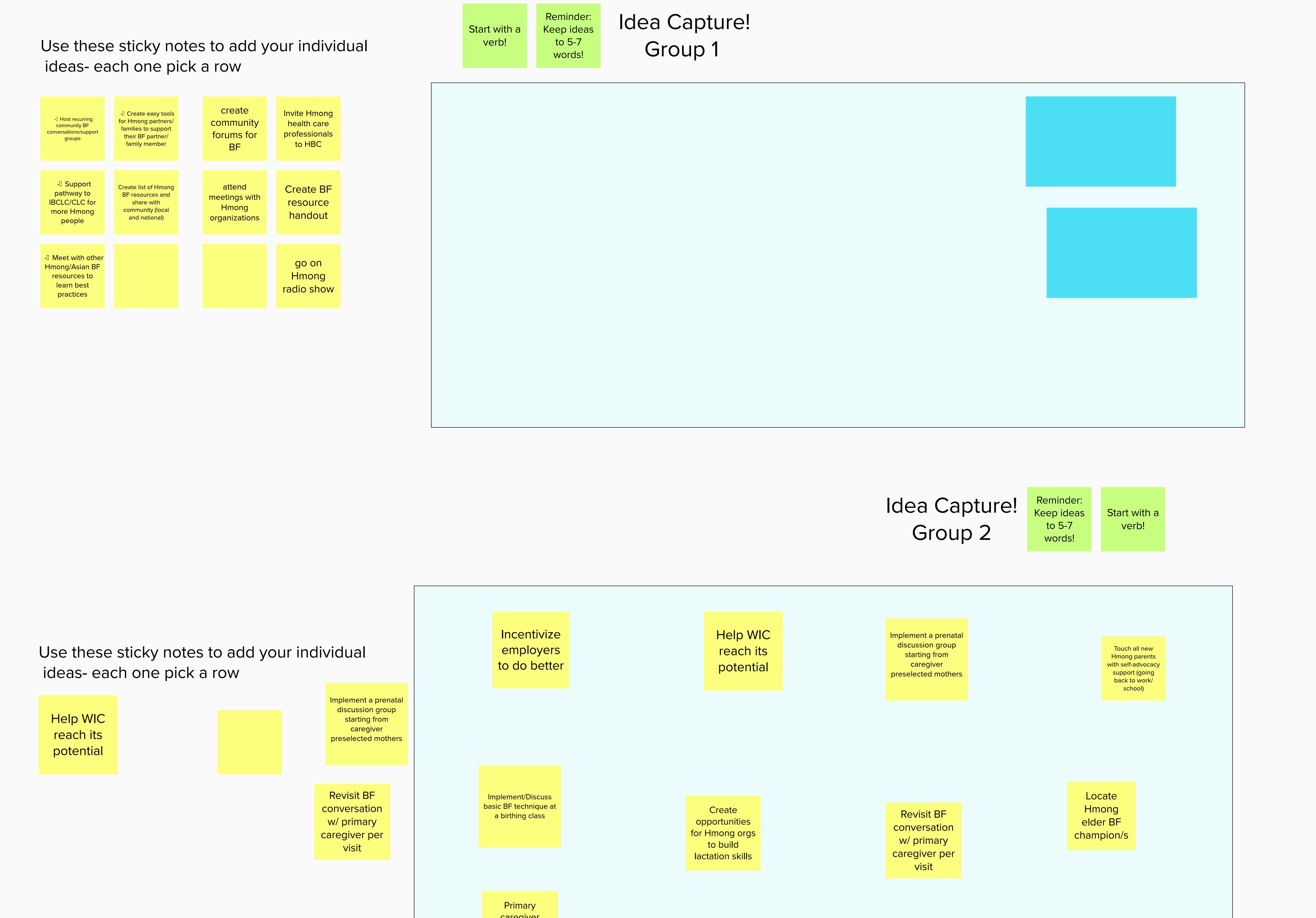


Appendix



Individual brainstorming instructions							
Use paper/ pen		Write 5-7 words like this		Start with a verb		1 idea per sticky note	

Group 3





Use these sticky notes to add your individual ideas- each one pick a row

Prioritize 🕉 20min

Your team should all be on the same page about what's important moving forward. Place your ideas on this grid to determine which ideas are important and which are feasible.

PRO TIP: Use the cursors to point at where a sticky note should go on the grid.

