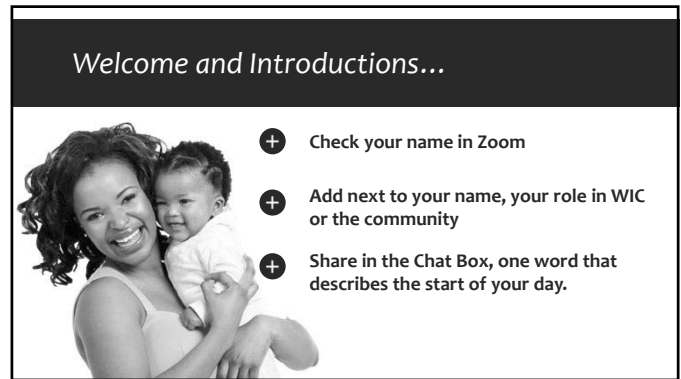




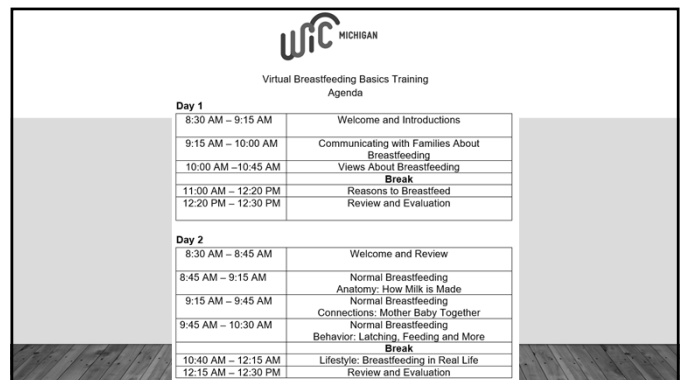
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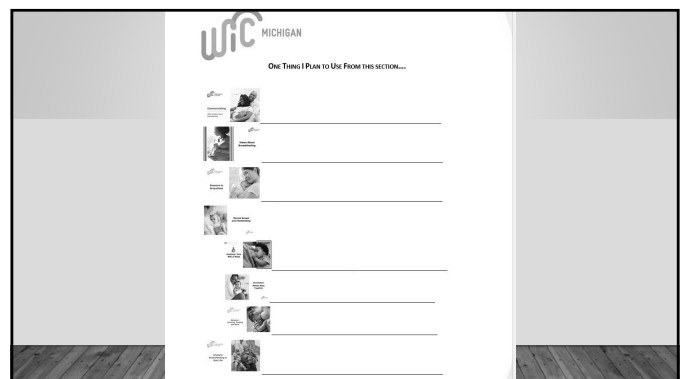
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Inclusive Language


- In this presentation, we will use the term mother and woman to refer to individuals of any sex or gender whose gender identity includes being a mother and/or woman.
- We will use lactating parent, birthing parent, and human milk to describe childbearing populations of any gender.
- We will generally use the term breastfeeding for all genders, recognizing, that in different communities, cultures, and languages the term for breastfeeding may be very different.
- Source: Aunchalee Palmquist, PhD, IBCLC (2022)
- Breastfeeding may look differently for every family, and can include various methods such as directly latching to the breast/chest, expressing milk (or pumping), and/or giving expressed human milk to the child.
- The use of the term breastfeeding is inclusive of all families involved in this process, regardless of the method being utilized.

8



Communicating


With Families About Breastfeeding



1








2




The L.O.V.E. Model

Grade A Communication Strategies
Start with the Heart





-  Listen (Active)
-  Observe (Ask)
-  Validate (Affirm)
-  Educate (Add)



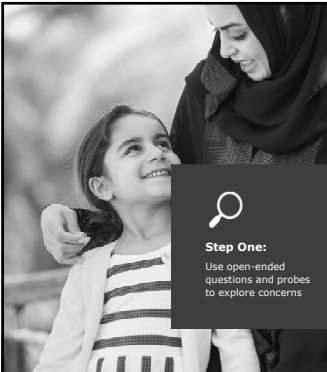
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The L.O.V.E. Model




-  **Step One:**
Listen to what parents are saying
-  **Step Two:**
Observe and ask open-ended questions to explore concerns
-  **Step Three:**
Validate and affirm feelings
-  **Step Four:**
Educate regarding targeted concerns

4



Communicating with Families

Three-Step Counseling

-  **Step One:**
Use open-ended questions and probes to explore concerns
-  **Step Two:**
Validate and affirm feelings
-  **Step Three:**
Education to target concerns... information comes last

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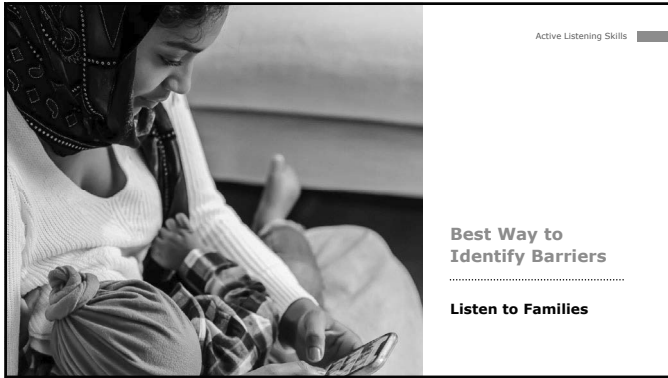
 **Step 1:**
Active Listening Skills

**First Things First:
Connection Before Content**

"People don't care how much you know,
until they know how much you care."

Theodore Roosevelt

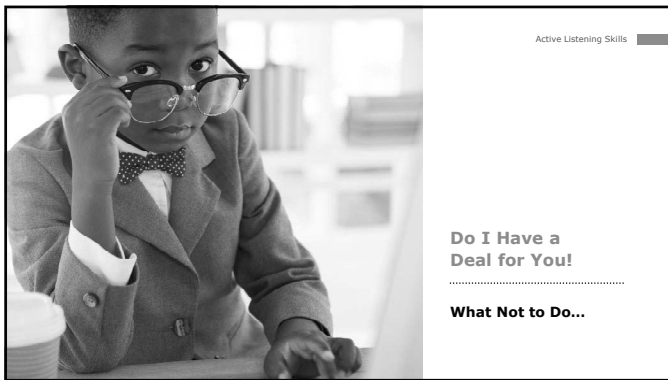
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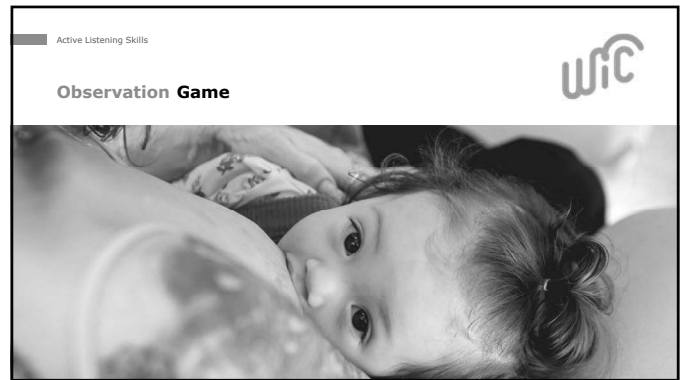
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Step 2:
Observation and
Open-Ended Questions

- Build trust and openness
- Observe what happens naturally
- Have no right or wrong answer
- Avoid making clients feel interrogated
- Help families feel safe sharing thoughts and feelings



13


Above the waterline is
the 10% of what we see



Below the waterline is the 90%
we **DON'T** see, or is difficult to
see - it's what makes all of us
UNIQUE individuals

The Iceberg Analogy

14



Observation and Open-Ended Questions


Examples of Open-Ended Questions

How
...do you feel about breastfeeding?
...can we help you with feeding your baby?


What
...do you know about infant feeding?
...questions or concerns do you have?

Tell Me
...why you feel you will need formula,
...which language you prefer regarding your infant feeding.

15




Observation and Open-Ended Questions




Breakout Session:
.....
Let's practice open-ended questions

16



Don't Make Assumptions

- Extending
- Clarifying
- Reflecting
- Redirecting



17




Step 3:
Validate and
Affirm Feelings

- ✓ Most important part of a successful communication exchange
- ✓ Parents are not ready for information until they feel their opinions have been heard
- ✓ Allows families to build confidence by drawing attention to what they are doing well



18




Validate and Affirm Feelings See Handout


Ways to Affirm

- Find an area where you agree
- Show them they are not alone
- Affirm what is being done well
- Praise parents for all victories
- Remind her of what she has done
- Compliment what matters to them

19



Validate and Affirm Feelings



Poll:
A culture...

20



What is Culture?

21




Validate and Affirm Feelings

Cultural Awareness

Helpful Hints

- Become knowledgeable
- Respect different cultures and backgrounds
- Accept different learning styles
- Distribute culturally appropriate materials
- Communicate honestly

22




Diversity Wheel - Define Your Cultural Identity Dimension


See Handout

Instructions:


- 1 Identify 3 areas on the wheel that shape who you are
- 2 Discuss your list with your group; compare similarities and differences
- 3 How does this influence your lens when you are interacting with others?



23



Validate and Affirm Feelings



Breakout Session:

Discuss your list with your group; compare similarities and differences.


How does this influence your lens when providing or directing care for others?

24


Validate and Affirm Feelings

Scripts for Supporting Families

- You are not alone. I am here to support you.
- You're asking really important questions.
- Let's make a list of resources to help you with this issue.
- Your questions are really valid.
- I am inspired by your dedication.
- You are so responsive to your baby's needs!
- How can I help you?
- What would make it easier to meet your goals?
- We are here because we care.
- You are working so hard!




25


 **Step 4:**
Education

Adults Learn Best When You:

- Feed information in small bites
- Target information to mother's concerns
- Give 2-3 solid options
- Keep it simple
- Reinforce the information



26



Education

Education Goals

- 1 Increase parent's awareness of what is happening
- 2 Increase the parent's confidence
- 3 Help parents to know what to expect
- 4 Help parents find solutions to perceived barriers



27

Education


Knowledge Isn't Always Enough

People do not always adopt healthy behaviors based on information alone.

Effective counseling principles help people help people explore ways to work breastfeeding into their lives.

28



Education

Adult Learning


- Visual learning style
- Auditory learning style
- Kinesthetic learning style
- Reading/writing learning style

29

Education

The Four Gates of Speech

- Is it true?
- Is it necessary?
- Is now the best timing?
- Is it kind?
- Are you the best person to deliver the information?



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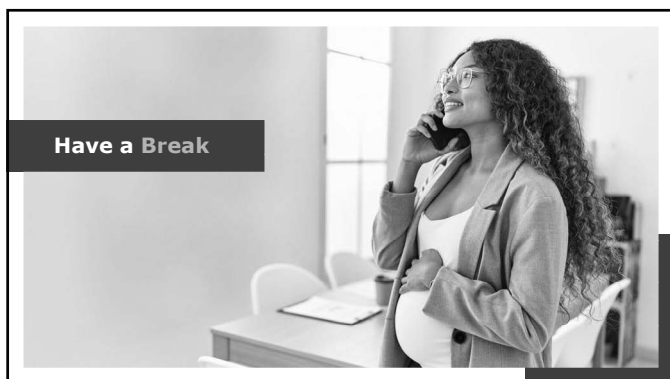
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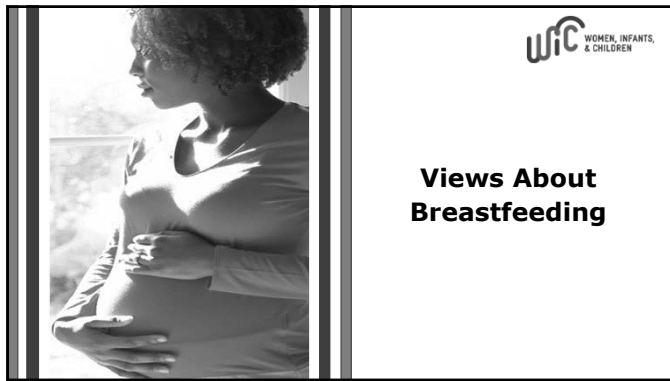
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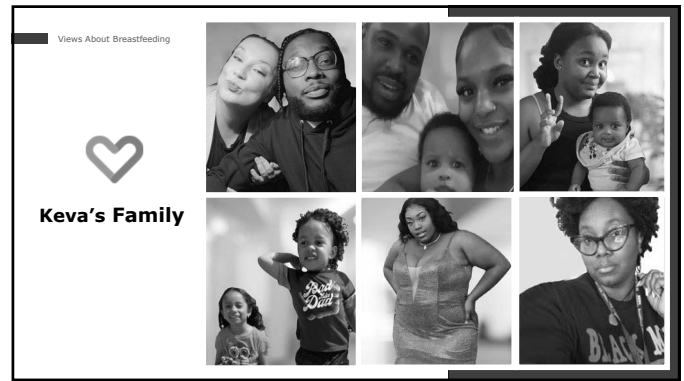
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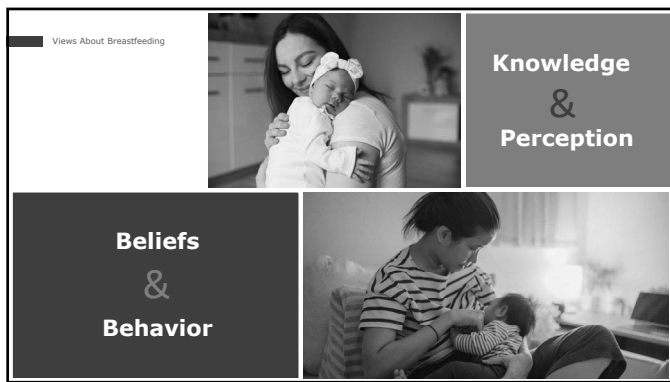
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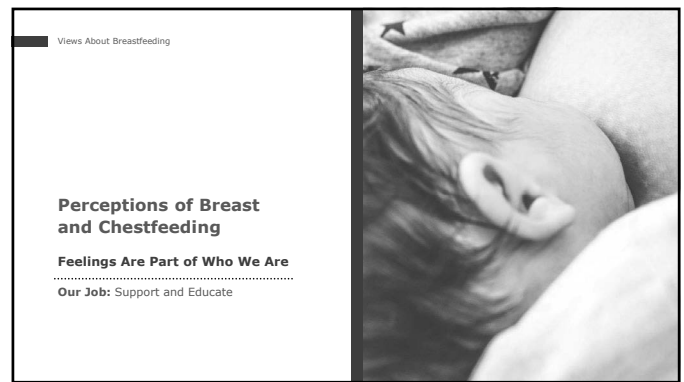
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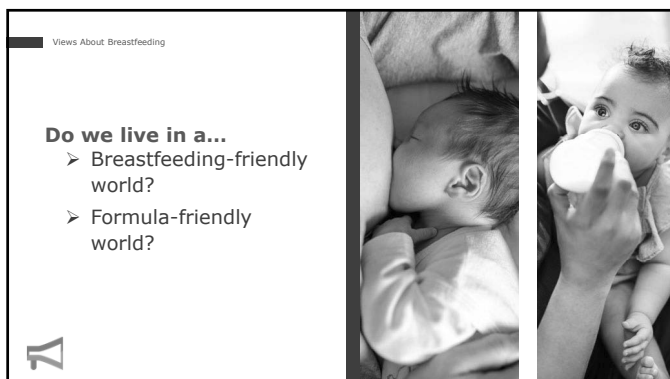
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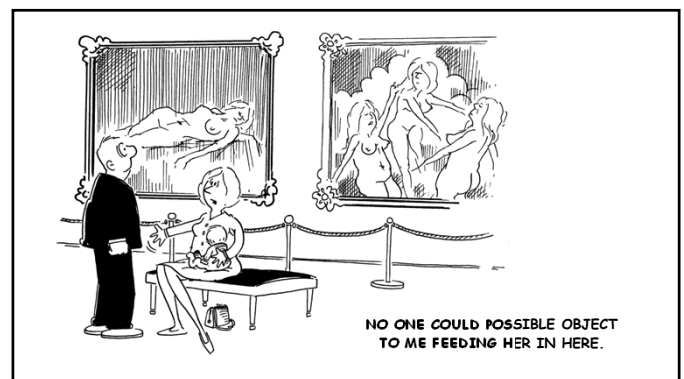
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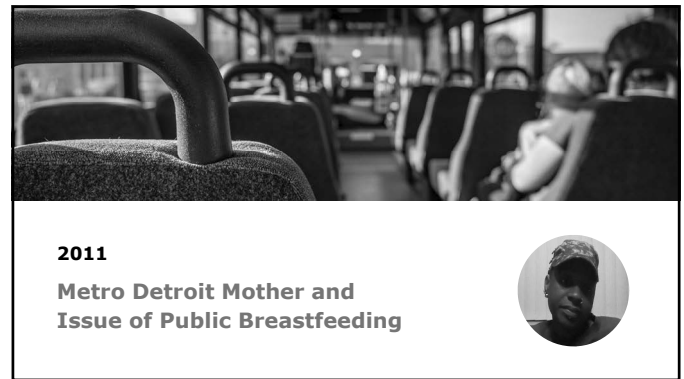
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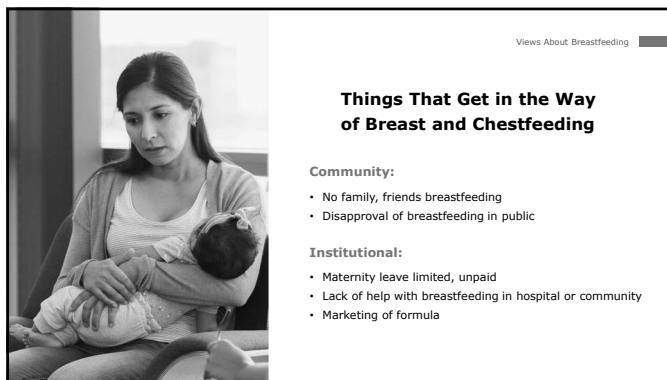
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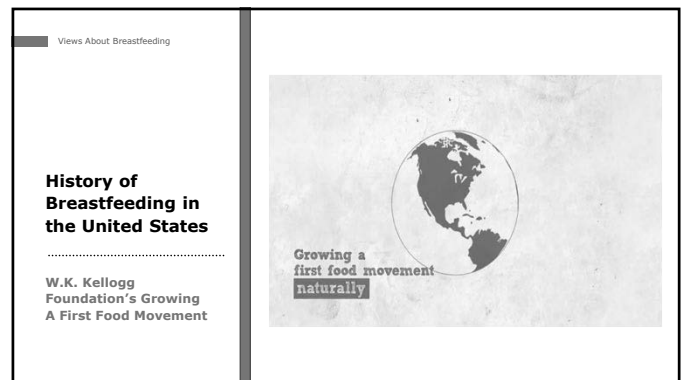
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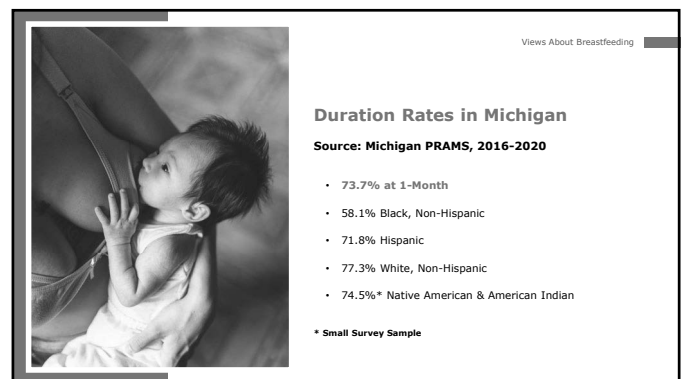
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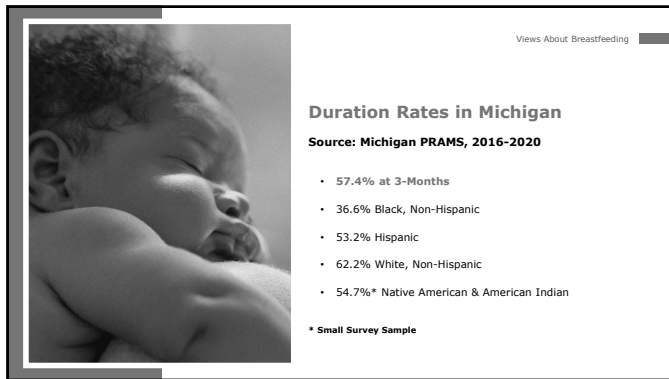
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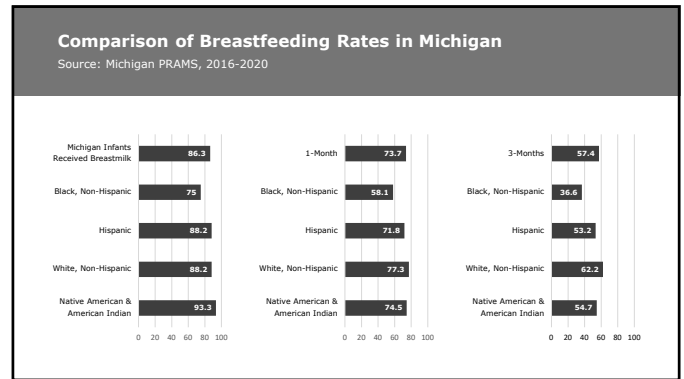
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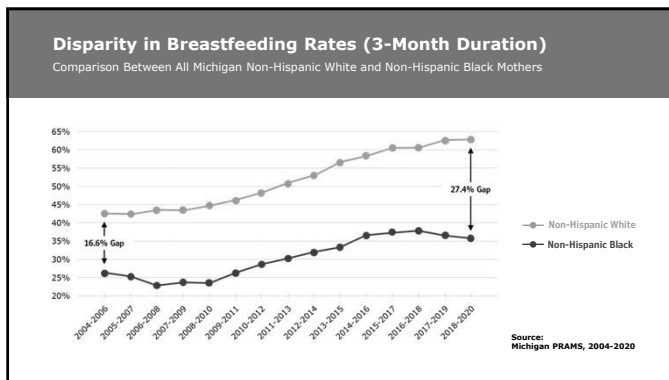
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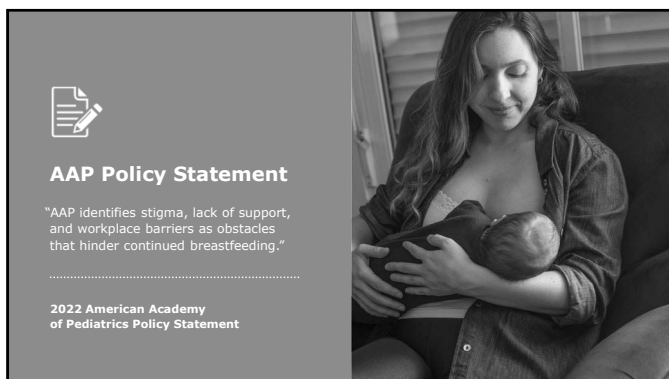
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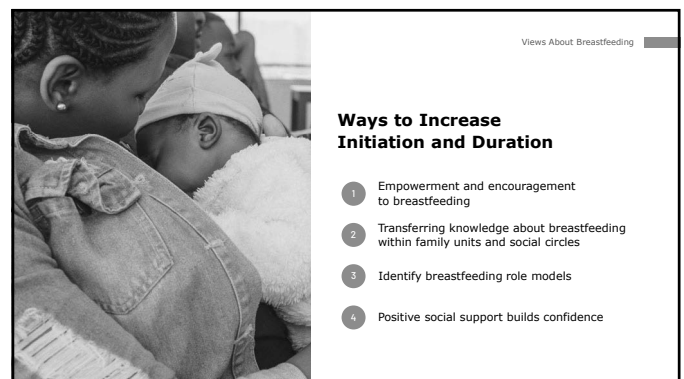
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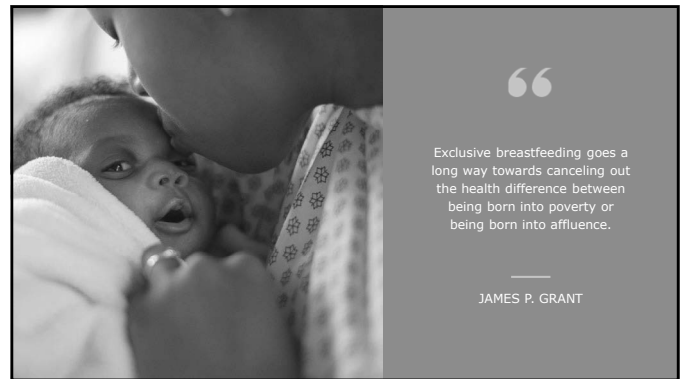
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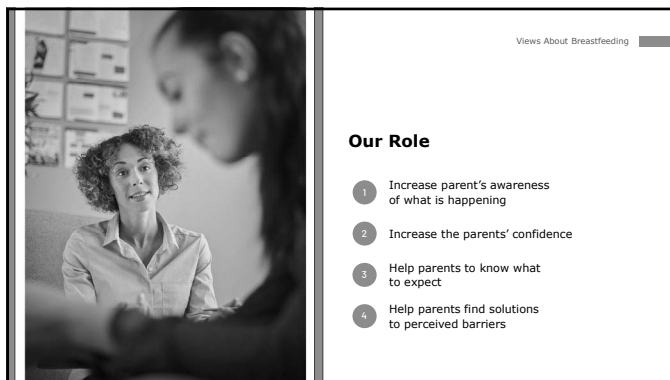
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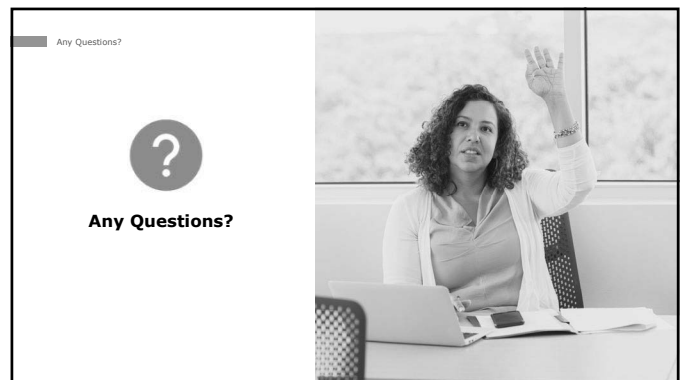
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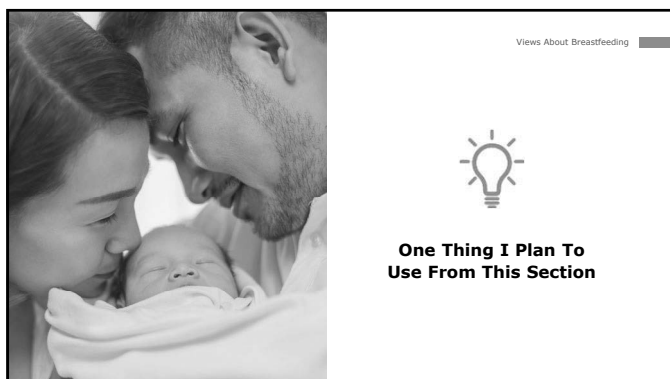
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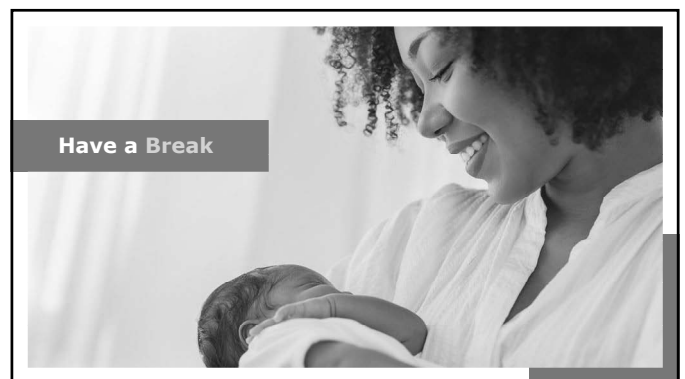
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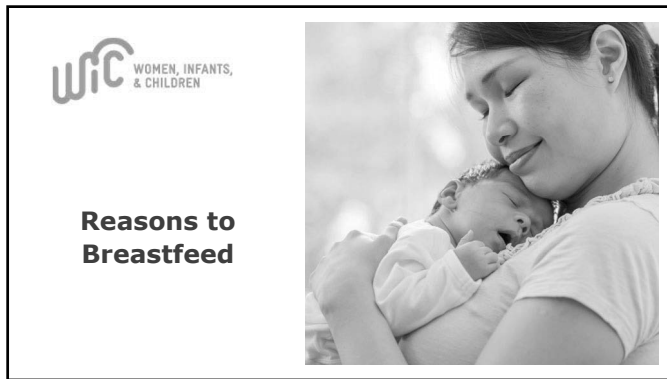
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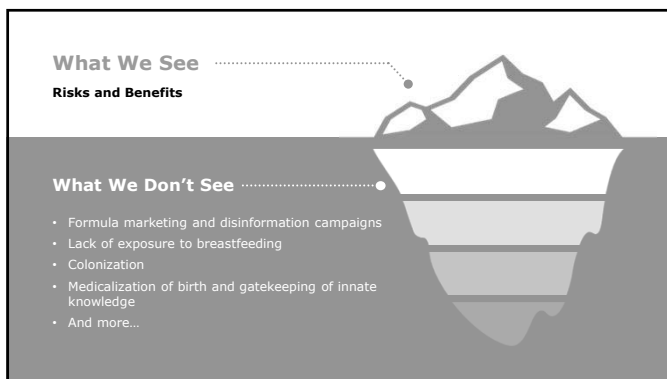
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Reasons to Breastfeed





Benefits of Breastfeeding



7

Reasons to Breastfeed

Infants who are not breastfed have a greater incidence of all these conditions except...

8

Reasons to Breastfeed



The Debate is Over

Breast and Chestfeeding Protects Babies from Illnesses Including:

- Gastroenteritis (diarrhea)²
- Severe lower respiratory infections³
- Ear infections¹
- Atopic dermatitis¹⁰
- Asthma¹

Surgeon General's Call to Action to Support Breastfeeding, 2011

9

But, Wait!
There's More...

Breast and Chestfeeding Protects Babies From:

- Childhood obesity⁶
- Type 2 Diabetes⁵
- Childhood leukemia^{1,5}
- Sudden Infant Death Syndrome¹
- Necrotizing Enterocolitis¹

Surgeon General's Call to Action to Support Breastfeeding, 2011



10


Reasons to Breastfeed

People who do not breastfeed have a greater incidence of what conditions?




11

Reasons to Breastfeed



And Still!

Lactating People Have Increased Protections From:

- Breast cancer⁷
- Ovarian cancer⁴
- Postpartum depression¹⁵⁻¹⁷
- Cardiovascular disease¹⁶

12

Reasons to Breastfeed





Human Milk is Not Just a Preferred Food Source!

Breast and Chestfeeding is:

- Cultural revitalization
- Passing down family wisdom
- Introducing family foods
- Connection
- Relationship

13

Reasons to Breastfeed

Impact of Not Breastfeeding

14

The Formula Crisis




The Pandemic Amplified Numerous Breakdowns in the System:

- A shortage of 10-30% is considered normal at any given time in the US
- WIC families may be more vulnerable to formula shortages

15

Financial Impact




Formula: \$1200 to \$1500/Year¹⁹

Hospitalizations²

Doctors Visits & Prescriptions²²

Wages Lost While Staying Home With Sick Baby²²




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Reasons to Breastfeed

Environmental Impact


For every one million formula-fed babies



150 million containers of formula used²⁵

Many of these containers end up in landfills

Transportation costs related to making and selling formula



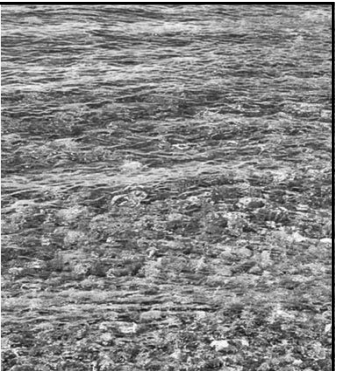
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Reasons to Breastfeed

Water is Life

Formula Feeding and Water Usage:

- Washing bottles
- Making formula in the factory
- Ongoing water crises in Michigan and across the country



18



Reasons to Breastfeed

Choices in Infant Feeding

WHO Recommendations:

- 1 Body feed: latch directly
- 2 Expressed milk from the birthing person
- 3 Donated human milk
- 4 Formula

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ALL Infant Feeding Methods Are Work!

Families Deserve SUPPORT!





- Washing bottles and pump parts
- Baby's reactions to formula
- Combo feeding is grueling both mentally and physically



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Effective Interventions

-  Address real and perceived barriers
-  Rooted in community context
-  Unconditional support
-  START prenatally!

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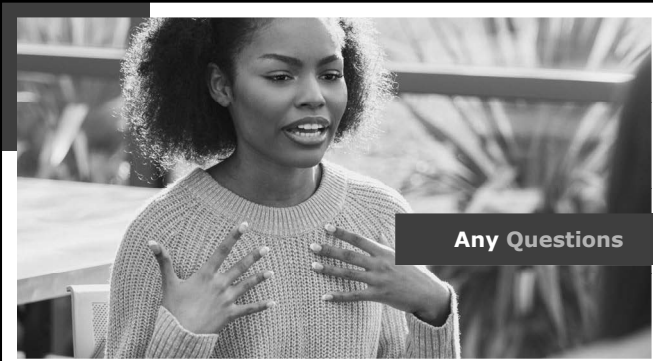


Infant Feeding is Personal, Political, and Cultural

"Colonization is a primary disruptor of bonding, lactation, and parenting. Lactation is more than just feeding a baby. Lactation care is more than just feeding support."

—
ELIZABETH MONTEZ GIRAS, IBCLC
Little Traverse Bay Band Odawa

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Any Questions

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Reasons to Breastfeed

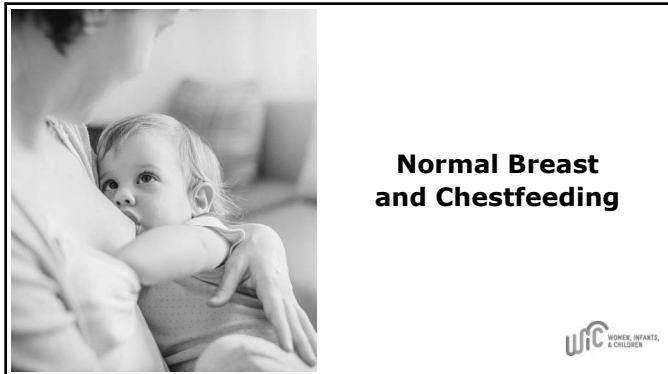


One Thing I Plan To Use From This Section

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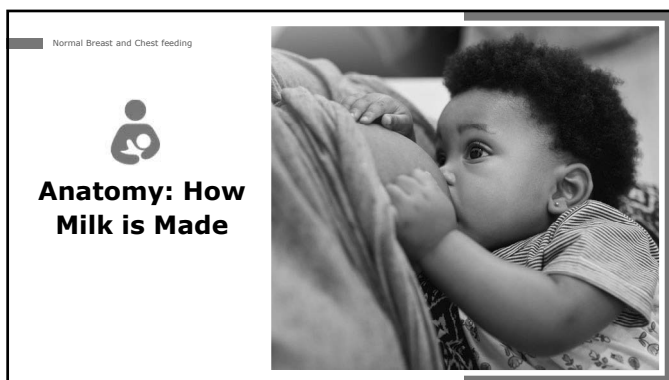
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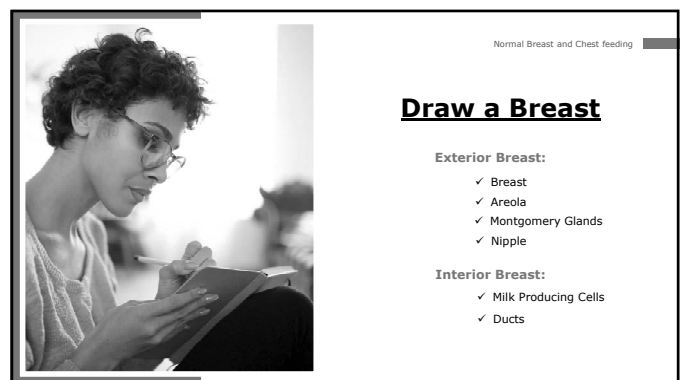
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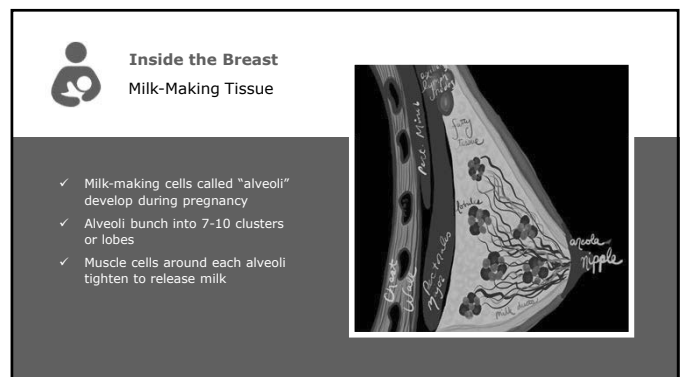
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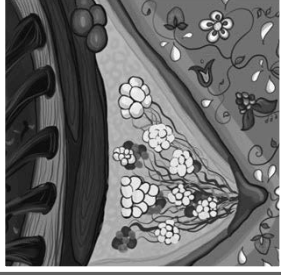


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Inside the Breast
The Milk Highway System

- ✓ Milk making cells "alveoli"....
- ✓ Connect with milk ducts....
- ✓ Connect to larger ducts....
- ✓ Milk flows out the nipple



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Recipe:
Human Milk

Ingredients:

- ✓ Breast
- ✓ Pregnancy-colostrum

8



Normal Breast and Chestfeeding

Milk Production
Begins During Pregnancy:


- ✓ Milk making tissue develops
- ✓ Colostrum available around 16-18 weeks
- ✓ Based on hormonal response

9


Normal Breast and Chest feeding

Colostrum

- ✓ Low volume
- ✓ Contains high levels of antibodies
- ✓ More protein and vitamins than mature milk
- ✓ Less fat, carbohydrates
- ✓ Has laxative effect & coats baby's gut
- ✓ Is not appreciated in all cultures



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Normal Breast and Chest feeding

The Placenta

- ✓ Makes a Hormone
- ✓ Delivery of the Placenta
- ✓ Milk Changes

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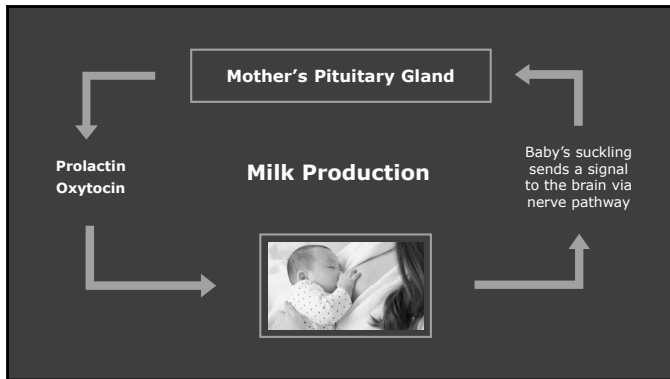


Normal Breast and Chest feeding

Milk Production
After Baby is Born

- ✓ Prolactin surge at 30-72 hours
- ✓ Milk volume increases
- ✓ Oxytocin helps milk to flow

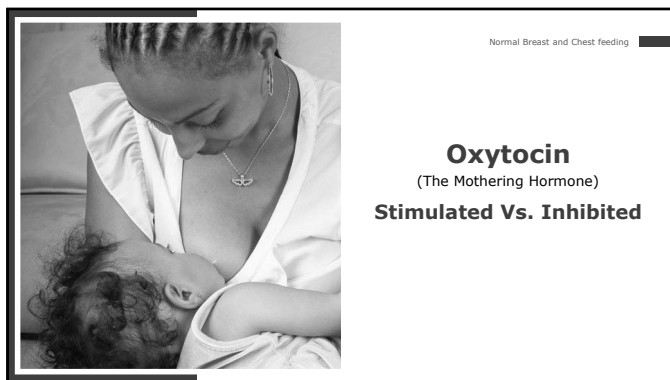
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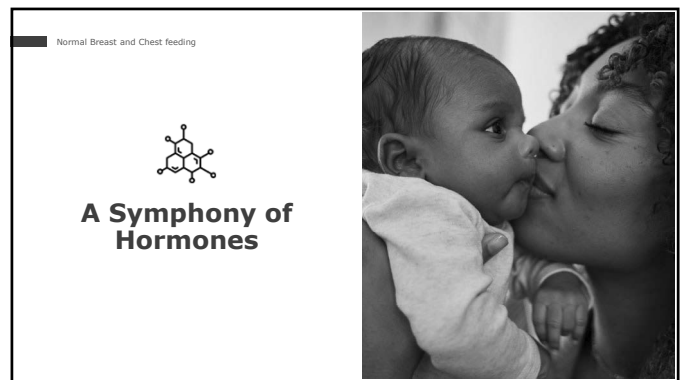
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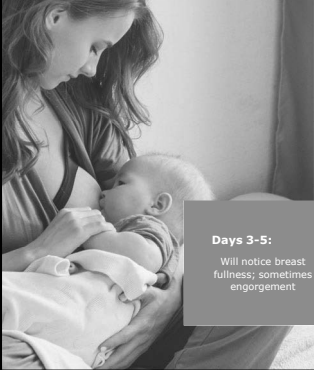
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Normal Breast and Chest feeding



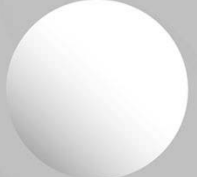
Breast Changes



Days 3-5: Will notice breast fullness; sometimes engorgement	First Month: Fullness on and off	After First Month: Fullness appears to go away as production matches baby's needs
--	--	---

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Stomach size on Day 1 Stomach size on Day 3 Stomach size on Day 10

Marble  1-1 ½ teaspoons or 5-7 ml per feeding (just sips)	Ping Pong Ball  about 4 ½ - 5 ½ teaspoons or 22-27 ml per feeding	Extra Large Chicken Egg  12-16 teaspoons, 60-81 ml or 2-2 ¾ ounces per feeding
---	---	--

Stomach size grows slower after Day 10, reaching 4 ounces (118 ml) per feeding usually by three or four months.

20

Normal Breast and Chest feeding

Storage Capacity

- ✓ 25-35 oz of milk per day, during months 1-6 when breastfeeding exclusively
- ✓ capacity is not determined by breast size



21



Other Ways to Express Milk:

- ✓ Hand Expression
- ✓ Breast Pump

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Normal Breast and Chest feeding



Weaning


- ✓ A process
- ✓ Food other than milk

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Normal Breast and Chest feeding

Cross-Culturally

The average age of weaning is 3-4 years.



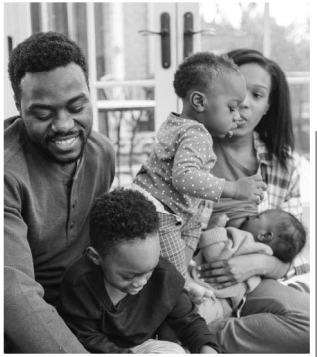
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WHO & AAP Recommendations


- ✓ Exclusively breastfeed for the first 6 months of life.
- ✓ From the age of 6 months, begin complimentary foods while continuing to breastfeed up to 2 years and beyond.

Source: World Health Organization
2022 American Academy of Pediatrics Policy Statement




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Normal Breast and Chest feeding



Any Questions?



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Normal Breast and Chest feeding



One Thing I Plan To Use From This Section

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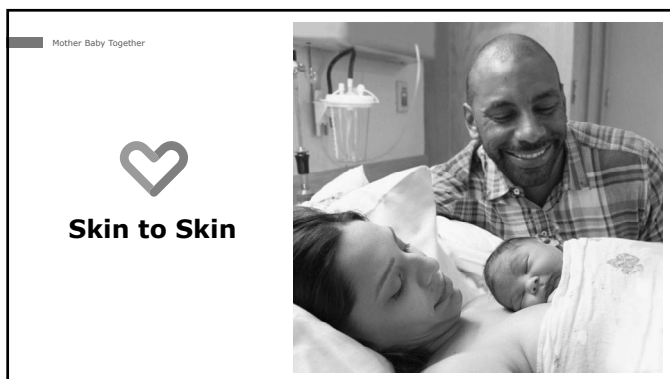
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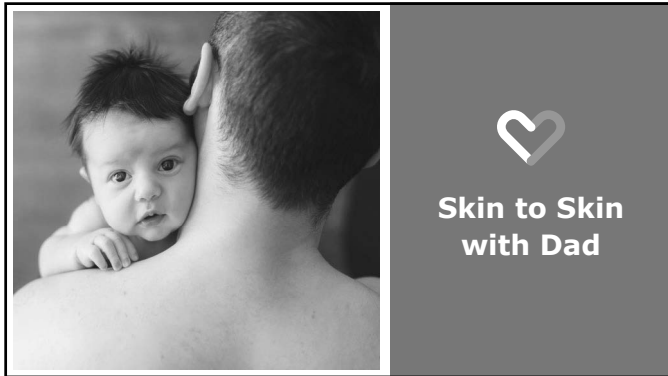
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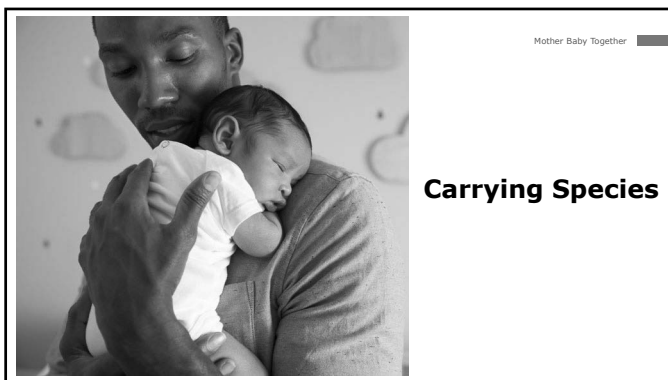
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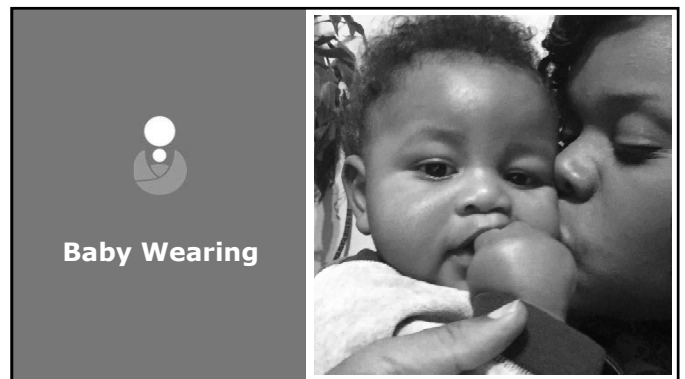
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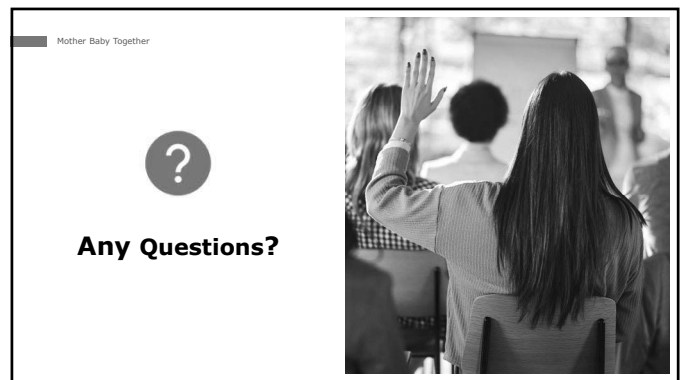
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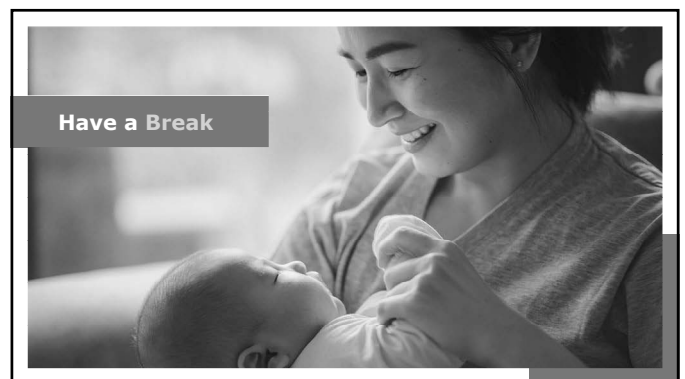
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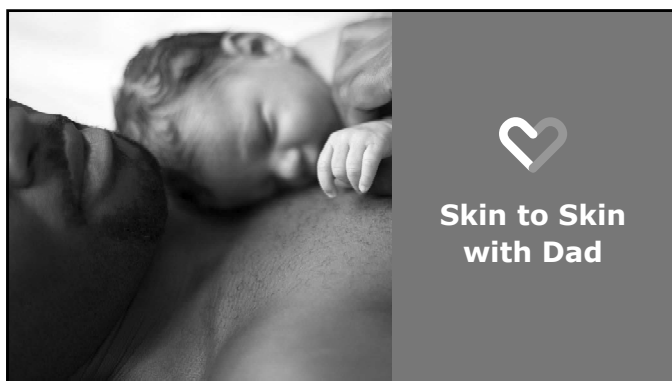
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**Behavior:
Latching, Feeding
and More**




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Behavior: Latching, Feeding and More



**What Is the Number
One Concern Parents
Have Regarding Breast
Feeding?**



2

Am I Making Enough Milk?

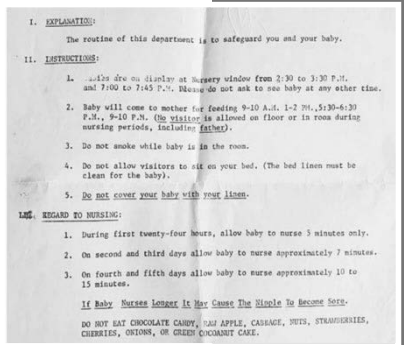
- Perceived low milk supply is extremely common
- New parents will often introduce supplemental formula or give up breastfeeding altogether



3

?

**How Did We
Get Here?**



4



5

Behavior: Latching, Feeding and More



**How To Know if Baby
Is Getting Enough Milk**

Education and Support on the Following Topics:

- Infant latch and attachment
- Infant behaviors before, during, and after feeding
- Lactating person's experience
- Growth and elimination/output

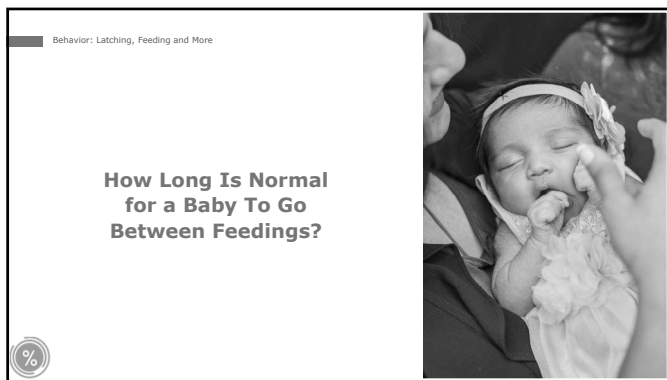
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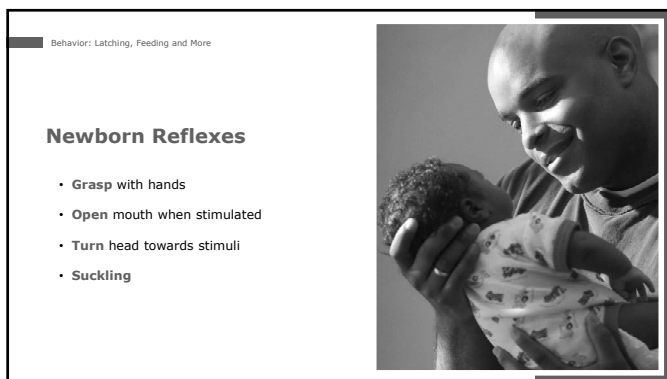
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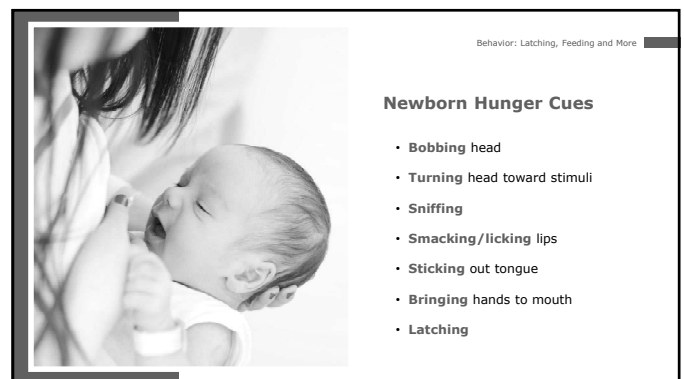
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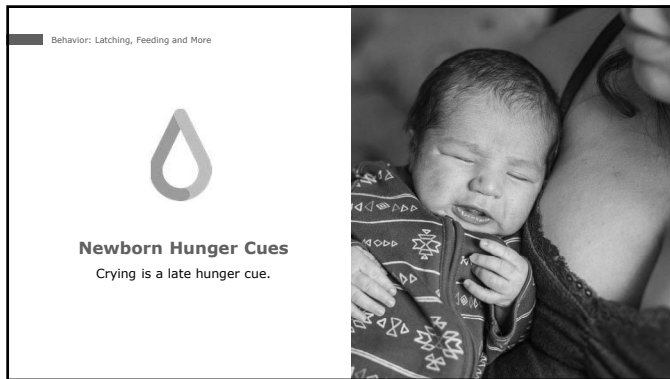
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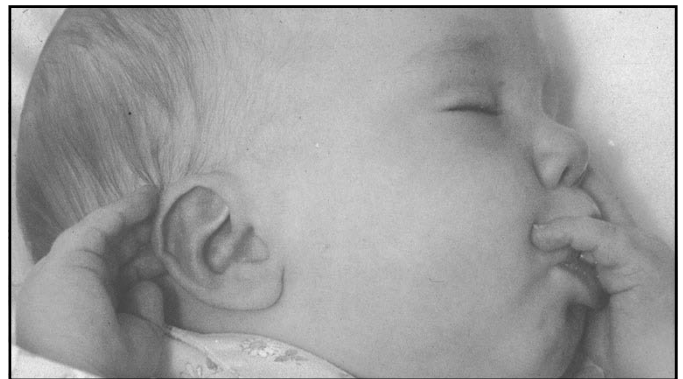
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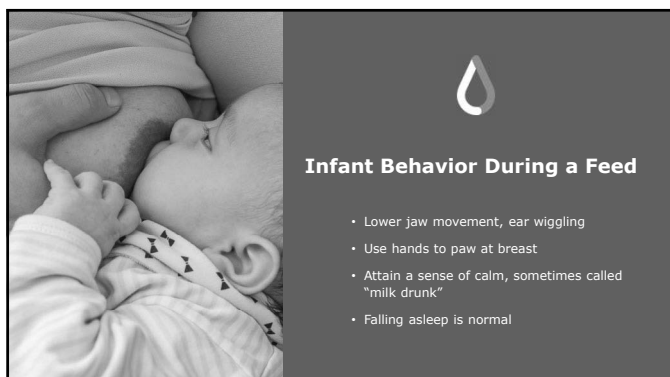
Baby's Hungry, Now What?
Steps to getting baby latched

- Calm a fussing baby
- Take a deep breath
- Get in a comfortable position
- Cesarean healing: use a rolled-up towel or blanket to cover incision
- Optional: unswaddle baby, remove hat and gloves
- Bring baby to breast, belly to belly



This slide contains a list of steps for getting a baby latched. On the right, there is a black and white photograph of a mother breastfeeding her baby.

16



17



18

Behavior: Latching, Feeding and More

Is Breastfeeding Supposed To Be Painful?

Initial Latch

Comfort and Sensation




19

Behavior: Latching, Feeding and More

Lactating Person's Experience



20

Behavior: Latching, Feeding and More

Uterine Cramping aka "After Pains"




21

Behavior: Latching, Feeding and More

Growth and Weight

- Healthy, full-term newborns typically follow a pattern of weight fluctuations
- 5-7% weight loss in the first 4 days is considered normal
- 10% loss is considered on the high-end
- Return to birth weight by 2 weeks of age



22

WET DIAPER TRACKING

24 HOUR INCREMENTS

AT LEAST 1 BOWEL MOVEMENT DAILY - FROM MECONIUM TO YELLOW, SEEDY

DAY 1	DAY 2	DAY 3	DAY 4	DAY 5	DAY 6+

23

Diapers of the Breastfed Baby

Looking at a baby's poop and pee can help you tell if your baby is getting enough to eat.

The baby's poop should change color from black to yellow during the first 5 days after birth.

The baby's first poop is black and sticky.	The poop turns green by Day 2 or 3.	The poop should turn yellow by Day 4 or 5.
Poop can look milky.	Poop can look milky.	Diapers, nappies, or wipes can cause block in poop (not common).
Babies make some large and some small poops every day. Only count poops larger than this.	By Day 4, most breastfed babies make 3 or 4 sloppy diapers every day.	By Day 5 or 6, most babies make 3 or 4 wet diapers with pee that looks like clear water.
By Day 5 or 6, most babies make 3 or 4 sloppy diapers every day.	By Day 5 or 6, most babies make 3 or 4 sloppy diapers every day.	A wet diaper is as heavy as 10-15 drops of water.

24

Breakout Rooms

How would you respond?

"I'm not making enough milk."



25

Behavior: Latching, Feeding and More

But, What About?

"Help! My baby still cries after she has eaten. I'm afraid she's not getting enough milk?"



26

Behavior: Latching, Feeding and More

But, What About?

"Help! My baby gets fussy so much and cries every night. I think he's not getting enough milk!"



27

Behavior: Latching, Feeding and More

But, What About?

"Help! My breasts don't get totally drained after a feed. I'm afraid that my baby is not getting enough milk!"



28

Behavior: Latching, Feeding and More

But, What About?

"Help! My baby wants to immediately drink from the other breast as soon as they're done feeding. I'm worried that she's not getting enough milk!"

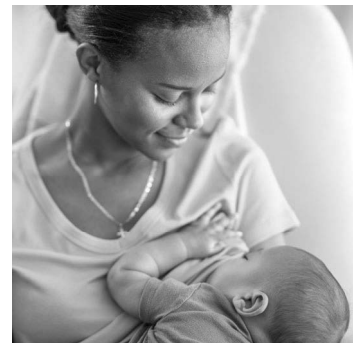


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Behavior: Latching, Feeding and More

But, What About?

"Help! My baby just wants to keep latching SO much all of a sudden. I'm so tired and I'm worried that I'm not producing enough milk!"



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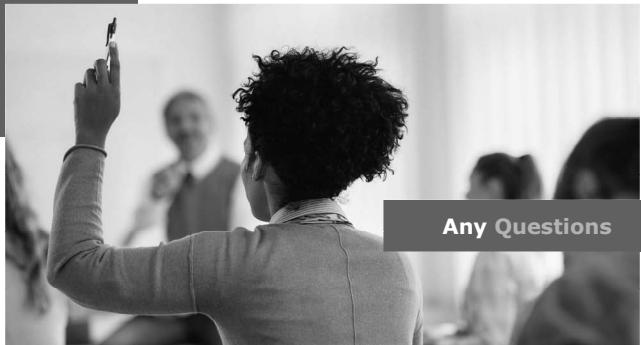


Behavior: Latching, Feeding and More

But, What About?

"Help! My baby just finished breastfeeding but then drank an entire 2 oz bottle of formula. I think she's still hungry because I'm not making enough milk!"

31



Any Questions

32




Communicating with Families



One Thing I Plan To Use From This Section

33



Have a Break

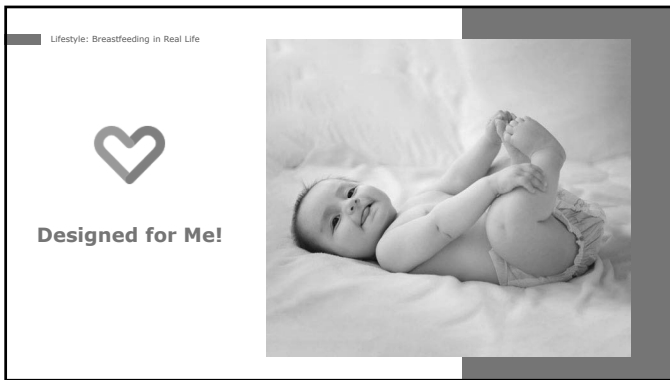
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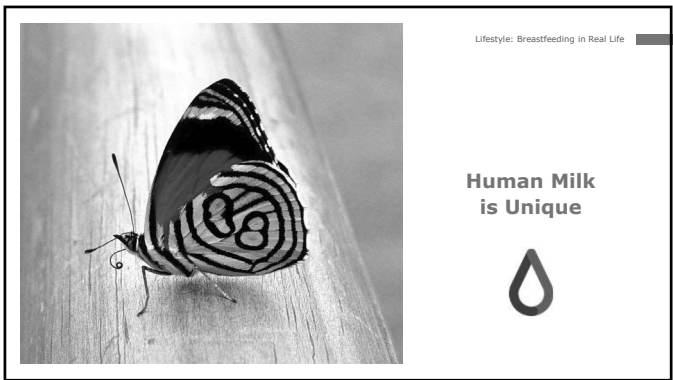
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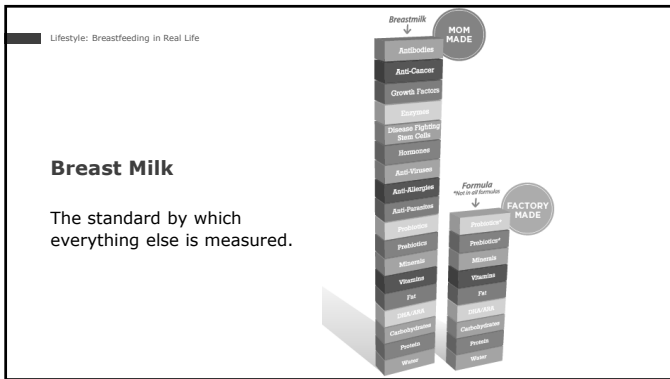
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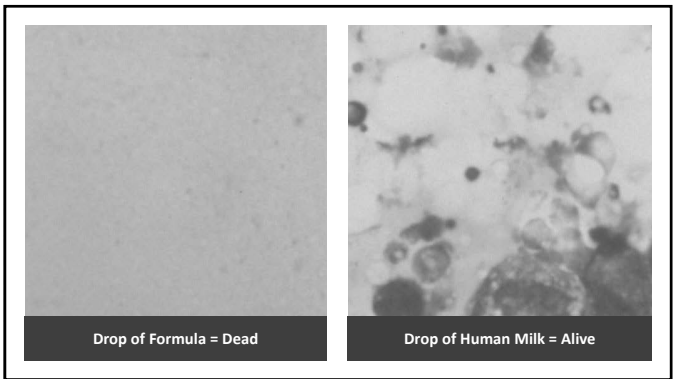
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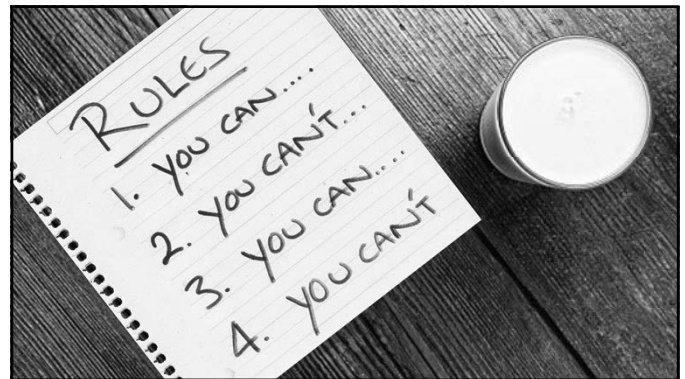
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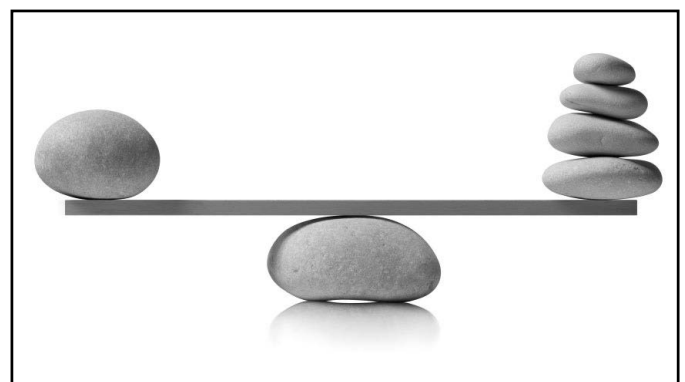
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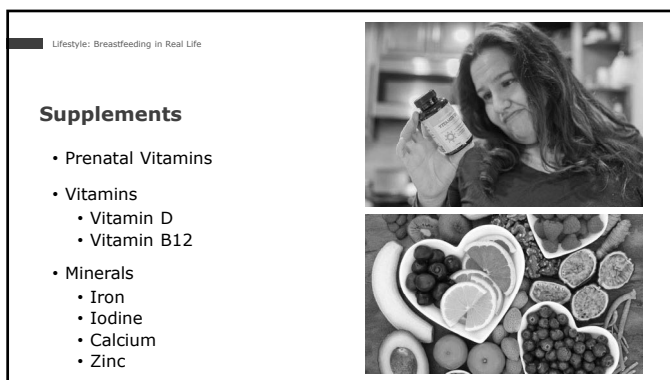
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Lifestyle: Breastfeeding in Real Life



Don't Stop Breastfeeding Because You Smoke


It is safer, for the baby, to continue breastfeeding rather than using formula.

21




22

Lifestyle: Breastfeeding in Real Life




Pregnancy and Lead Exposure

- Home inspection
- Identify any cravings such as eating dirt or clay
- Coordinate with healthcare providers




23

Lifestyle: Breastfeeding in Real Life



Breastfeeding and Lead Exposure

- Careful consideration on a case by case basis...
- Weigh risks of exposure to risk of not breastfeeding...
- Breastfeeding is recommended...
- Unless blood lead levels (BLL) in mother are very high...



24



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LifeStyle: Breastfeeding in Real Life

CDC Contraindications to Breastfeeding

<p>NO breastfeeding or feeding expressed breast milk to infant:</p> <ul style="list-style-type: none"> • Galactosemia • HIV Positive, not on ART, and/or does not have a suppressed viral load (see CDC site) • Human T-cell lymphotropic virus type I or II • Using drugs of abuse • Ebola virus disease 	<p>TEMPORARILY NO breastfeeding or feeding expressed breast milk to infant:</p> <ul style="list-style-type: none"> • Untreated brucellosis • Certain medications • Active herpes simplex virus infections with lesions on breast • Mother has Monkeypox (Mpox) virus infection 	<p>TEMPORARILY NO breastfeeding, but CAN feed expressed breast milk:</p> <ul style="list-style-type: none"> • Untreated, active tuberculosis • Active varicella
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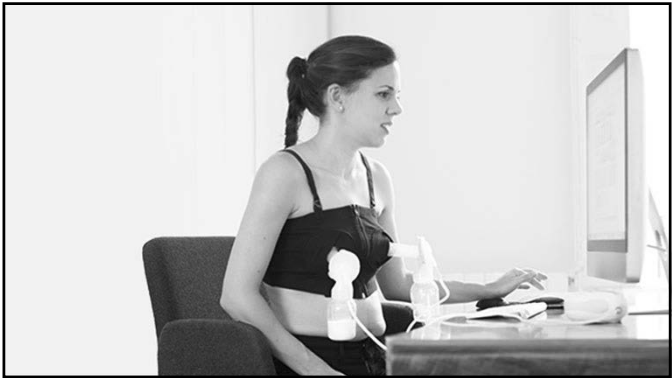
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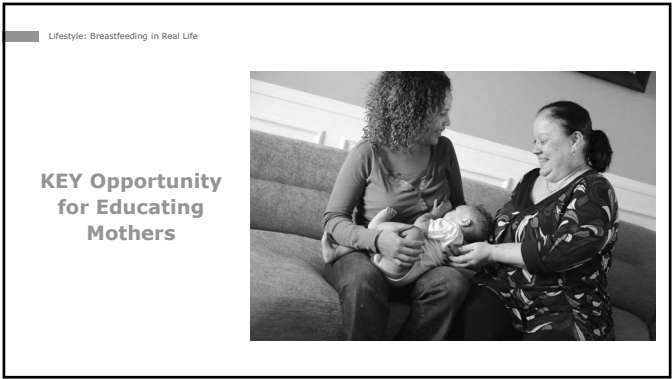
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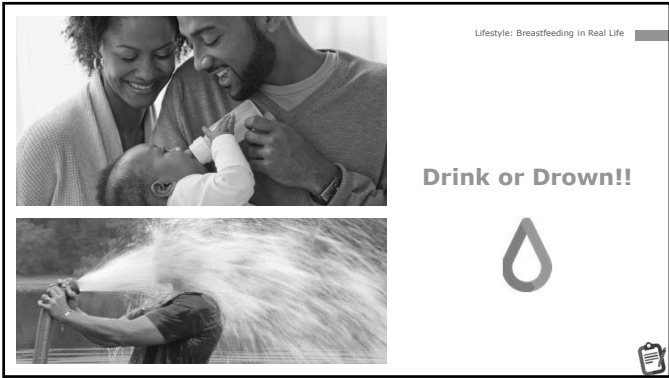
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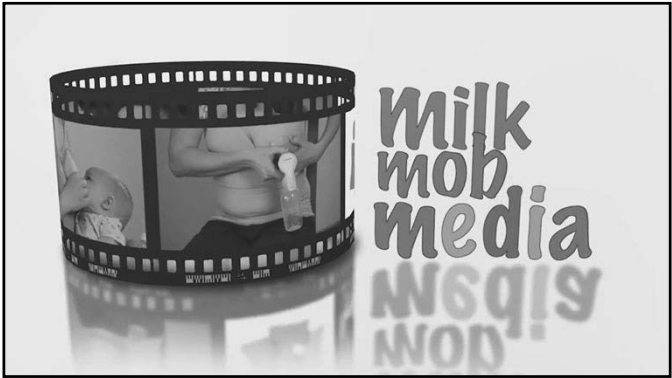
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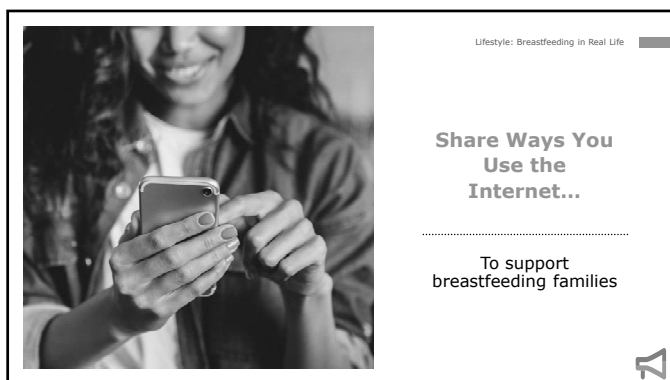
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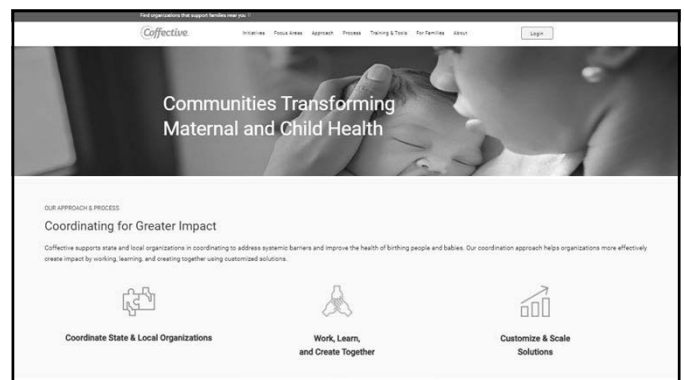
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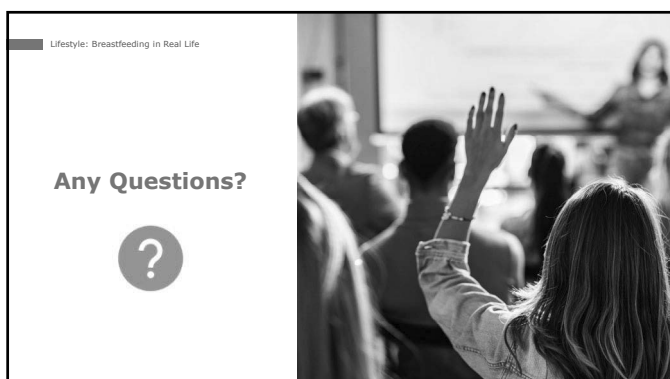
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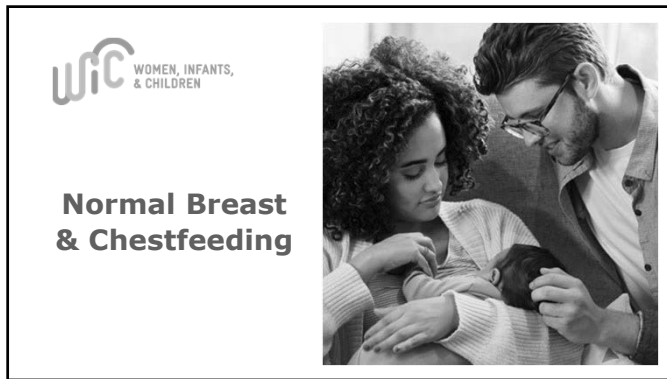
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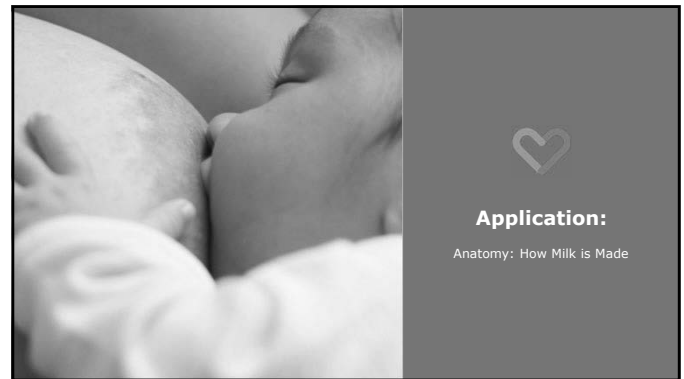
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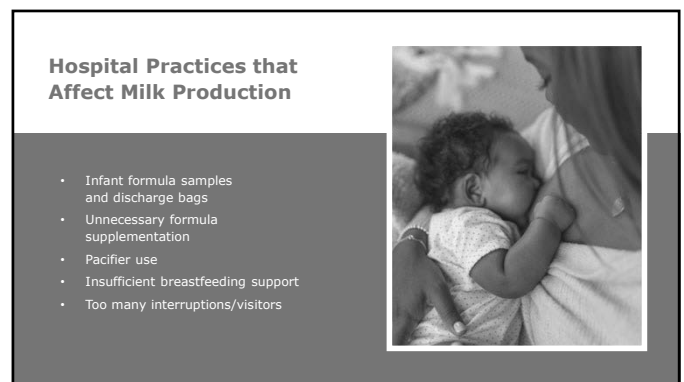
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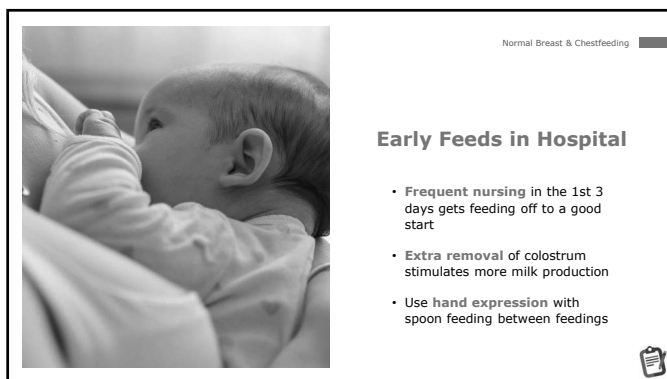
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6

Normal Breast & Chestfeeding

**"Making Enough Milk –
The Key to Successful Breastfeeding"**
– Dr. Jane Morton

.....

To order video:
www.breastmilkolutions.com

To see video on the internet:
<http://med.stanford.edu/newborns/professional-education/breastfeeding/hand-expressing-milk.html>

Hand Expression Steps


7

Normal Breast & Chestfeeding



**Practice
Hand Expression**

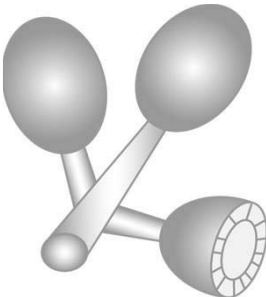
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Maintaining Lactation
The Important 1st Month

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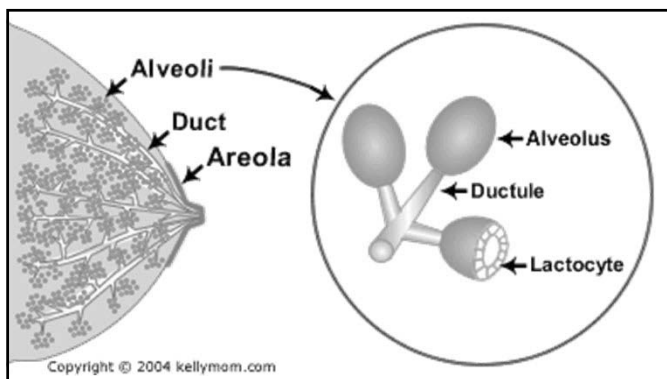
Normal Breast & Chestfeeding



**The Role of
Hormone Receptors**

- Prolactin and Oxytocin receptors
- Created in response to the number of feeds and milk removed
- Formula supplementation and delayed feeds interferes

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Normal Breast & Chestfeeding


Milk Production Changes

- 1 Day 3-5: breast and chest fullness
- 2 First Month: Fullness on and off
- 3 After first month fullness go away as production matches baby's needs



12

Normal Breast & Chestfeeding



Storage Capacity

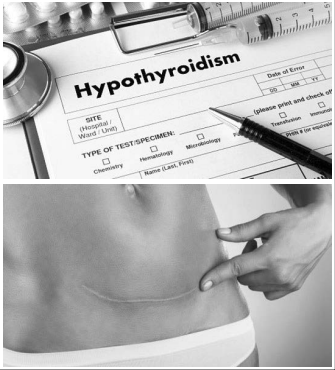
- Not determined by breast size
- Parents make around 25-35 oz per day

13


Normal Breast & Chestfeeding

Risk Factors That May Delay Production

- Cesarean delivery
- Obesity
- Type 1 Diabetes
- Hypothyroidism
- Birthing parent in their 40s
- Retained placental fragments



14




Application


Connection:
Mother Baby Together

15

Normal Breast & Chestfeeding



Laid-Back Breastfeeding



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Normal Breast & Chestfeeding



Biological Nurturing
Laid Back Breastfeeding
by Suzanne Colson

20

Normal Breast & Chestfeeding




Baby-Led Latch

21

Normal Breast & Chestfeeding



Baby-Led Breastfeeding
The Mother-Baby Dance
by Christina Smillie, MD

22

Mother Baby Together




Handling Versus Helping

Increase Confidence!



23

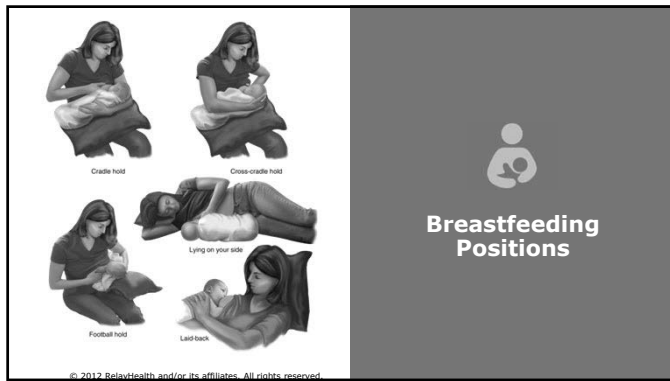
Normal Breast & Chestfeeding



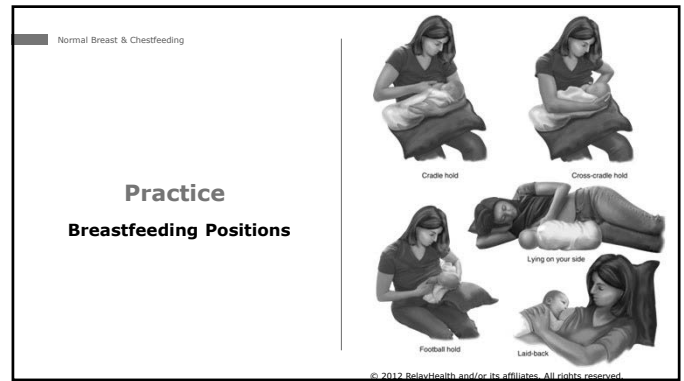
Parents Role in Breast & Chestfeeding



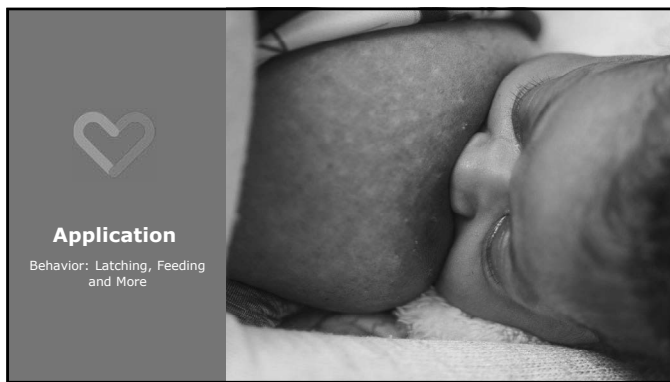
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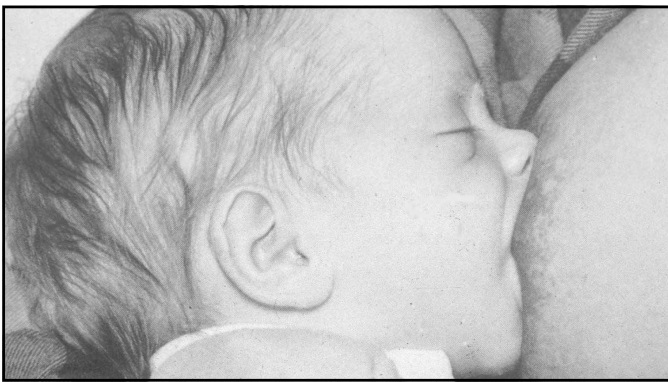
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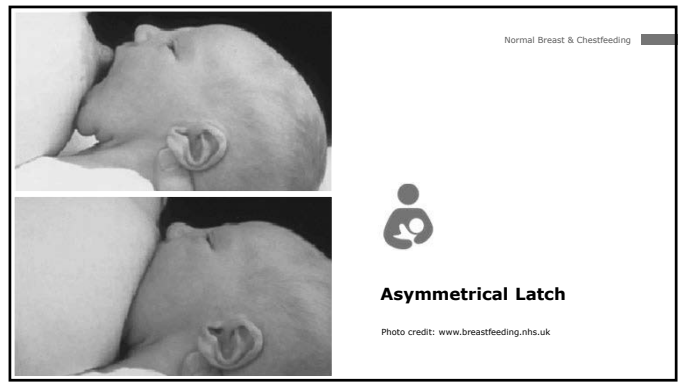
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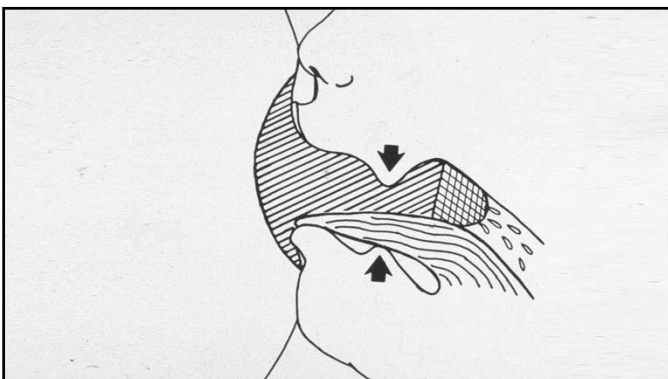
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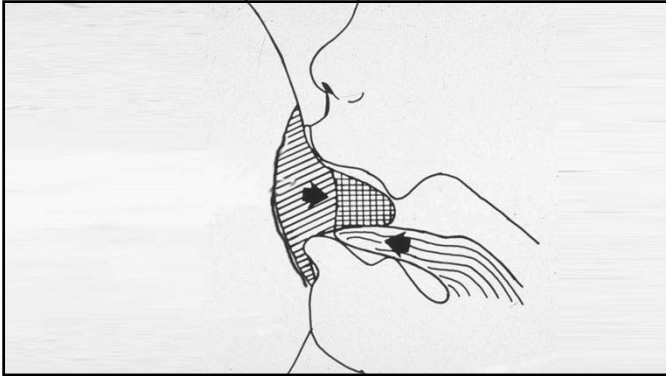
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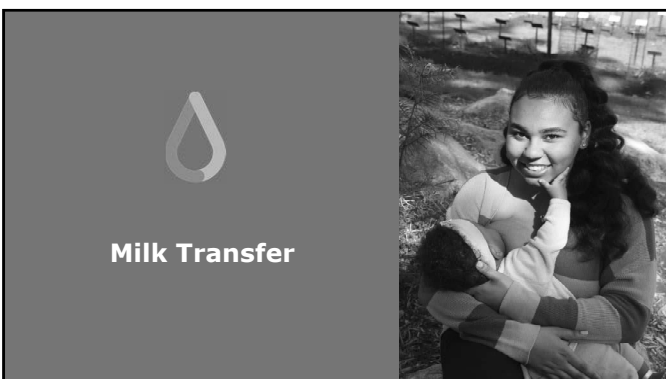
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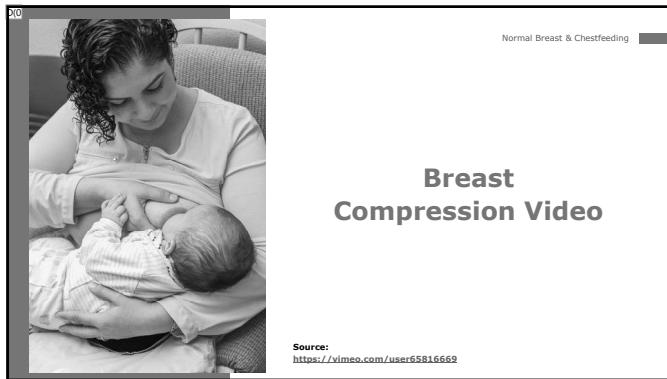
Slide 38

C(0) Why not add "To purchase video..." like what is on slide #7?

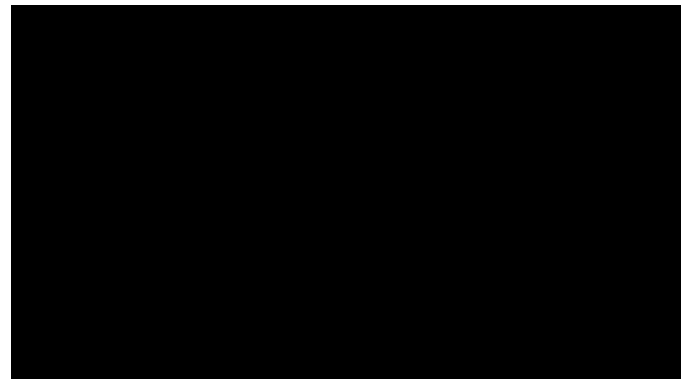
Christensen, Alice (DHHS-Contra, 2023-12-27T22:34:16.561

D(1) Why is the video not on this slide? Keep consistent with slides 21 and 23.

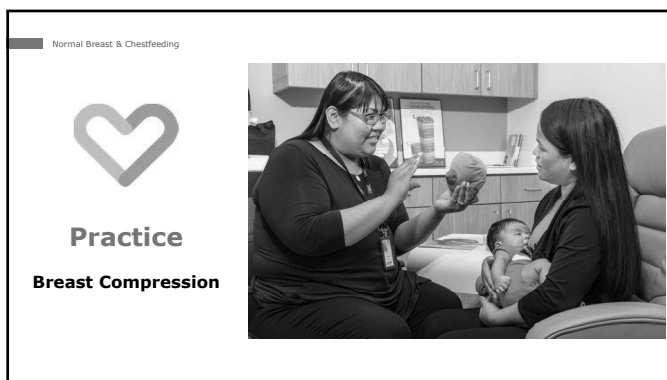
Doyle, Kristina (DHHS-Contracto, 2024-02-07T16:42:00.200



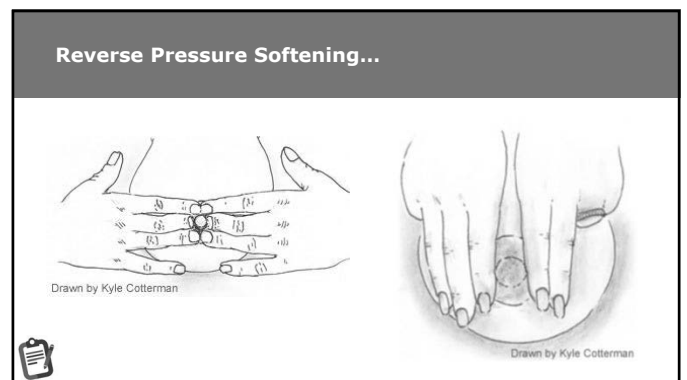
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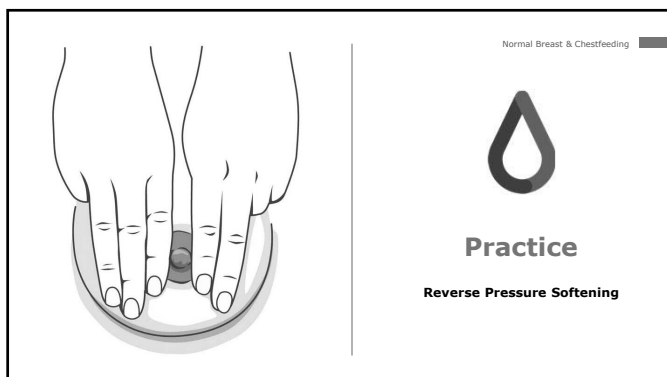
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48


Slide 43

D(0 Transition to video is different than other PPTs. Separate slide vs same slide and image enlarges to full size to show video. Keep consistent with slides 21 and 23.

Doyle, Kristina (DHHS-Contracto, 2024-02-06T16:57:02.919

Summary

- A good latch
- One size does not fit all
- Try a variety of approaches



49




Breast Pumps
MDHHS - WIC Website

50

Normal Breast & Chestfeeding

How Can You Use This Information?





51

Normal Breast & Chestfeeding

For Mom and Baby

Our Role

52

Normal Breast & Chestfeeding



Any Questions?



53

Normal Breast & Chestfeeding

One Thing I Plan To Use From This Section

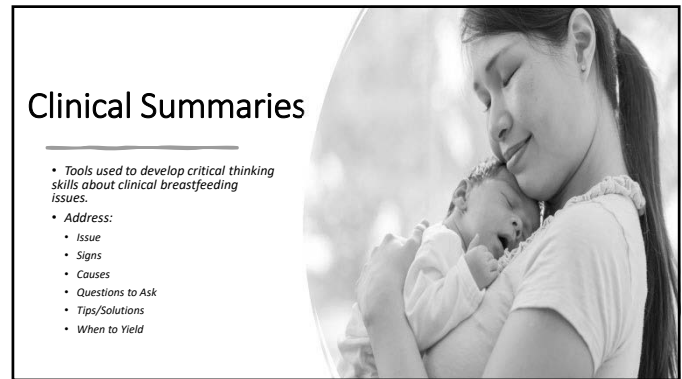
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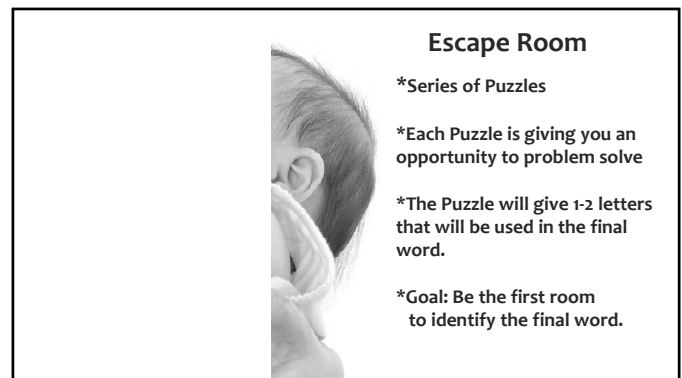
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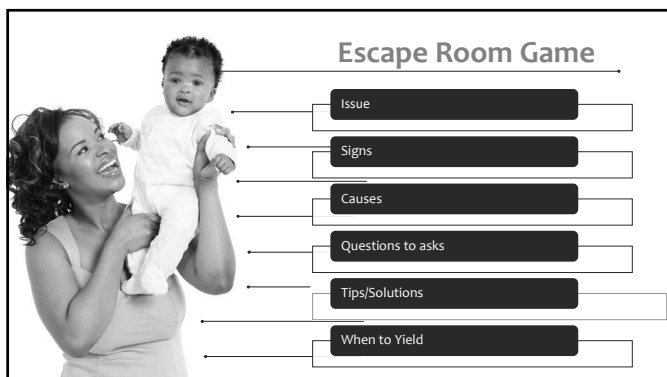
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PROBLEM SOLVING: COMMON INFANT ISSUES HANDOUT: COMMON INFANT ISSUES SUMMARY					
Infant Problem	Signs	Causes	Questions to Ask	Tips/Solutions	When to Yield
Latch Difficulties	Baby might: <ul style="list-style-type: none"> Latch but not stay latched Fall asleep after latching Struggle to latch and cry Turn head and refuse to latch Mom might: <ul style="list-style-type: none"> Be frustrated Have sore nipples Be engorged Have low milk production 	<ul style="list-style-type: none"> Uncomfortable positioning Use of artificial nipples before breastfeeding is established Baby's preference for one breast over the other due to comfort or amount of milk available Overstimulation Baby's congestion Baby is Baby's oral thrust Baby's suckling Obstructability Breast refusal for unknown reason 	<ul style="list-style-type: none"> Tell me how you know when it is time to feed your baby? How are you positioning and latching your baby? On a scale from your baby acts when you try to latch, what have you already tried? What concerns you the most? What else is your baby reaching besides your milk? Are you using bottles or pacifiers? Tell me about your baby's wet and dirty diapers. What are your breastfeeding goals? Who is available to support you? 	<ul style="list-style-type: none"> Review basic positioning and latch Feeling the breast Back/pips in straight line Angled to take in more of the areolar part of areola in mouth, top part of areola (lower part) may be visible Chin touching the breast Nose aligned to nipple Wide open mouth Give skin-to-skin contact Vary breastfeeding positions Start feeding on preferred breast, then side latch over to the other breast Hand express drops of milk Avoid artificial nipples Maintain milk production Address engorgement Minimize distractions Be patient! 	<ul style="list-style-type: none"> Yield to DUE if: <ul style="list-style-type: none"> Basic solutions offered do not improve baby's latch Mom reports unrelieved sore nipples or engorgement Mom wants alternative ways to feed the baby Mom has concerns about anatomical issues Mom is concerned about baby's weight and output
Slow Weight Gain	<ul style="list-style-type: none"> Baby not returned to birth weight by 2 weeks 	<ul style="list-style-type: none"> Baby not feeding often or long enough Poor positioning and latch Maternal factors 	<ul style="list-style-type: none"> Tell me about your baby's feeding patterns How do you know when it's time to feed your baby? 	<ul style="list-style-type: none"> Ensure correct positioning and latch to improve milk transfer Vary positions 	<ul style="list-style-type: none"> Yield to OFA or DUE if: <ul style="list-style-type: none"> Baby gains weight slowly

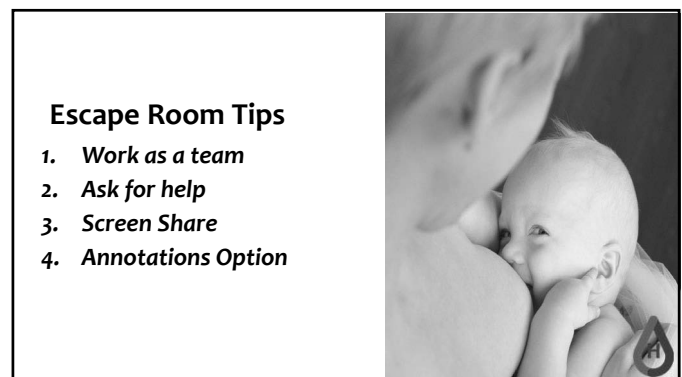
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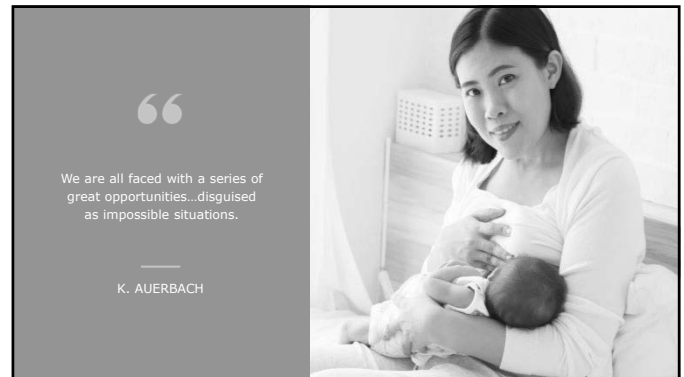
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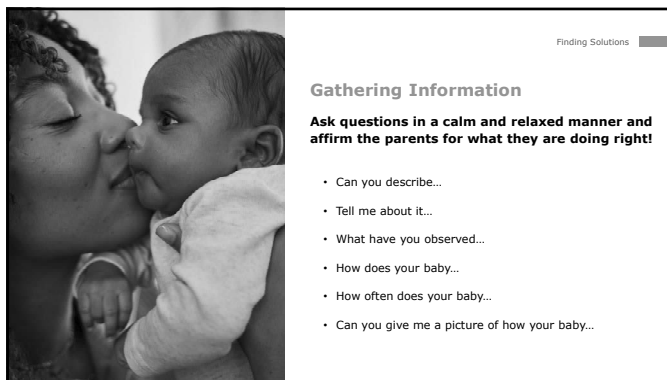
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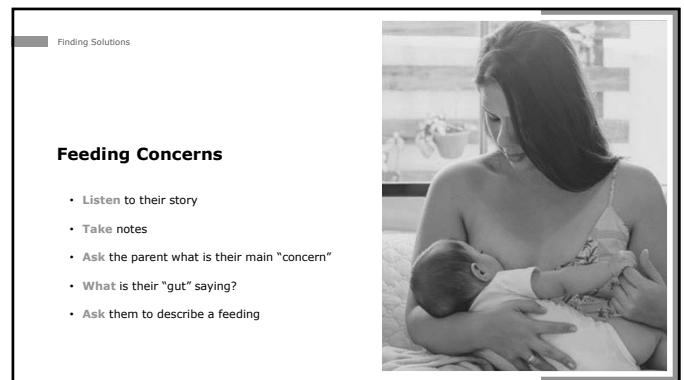
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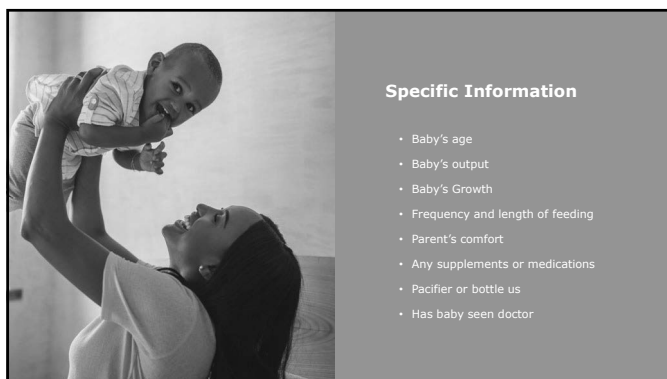
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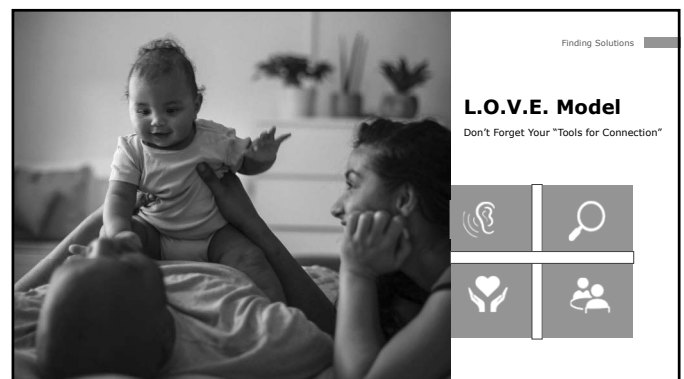
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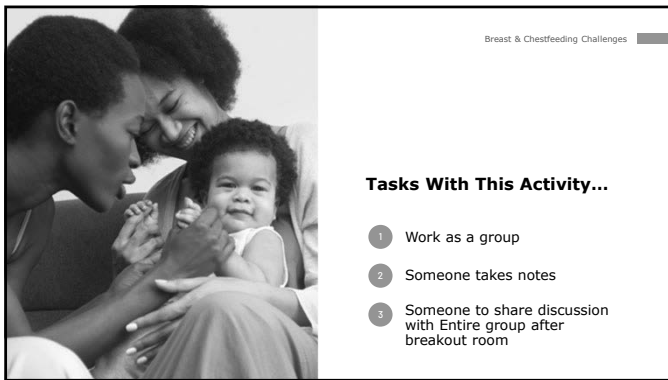
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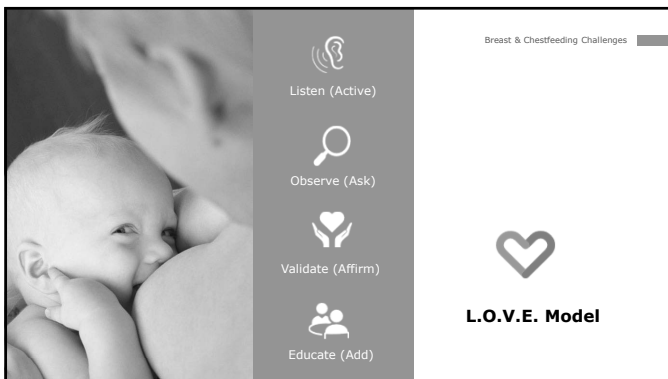
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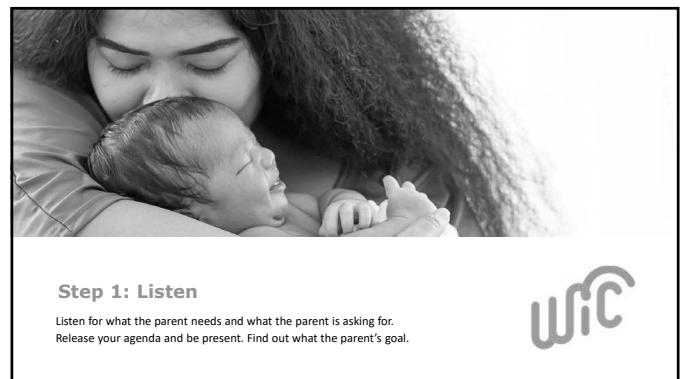
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Step 2: Observe/Open-Ended Questions

Ask permission to assess the situation. What additional information do you need to support their goals? Write 1-2 open-ended questions you could ask.



13




Step 3: Validate/Affirm Feelings

What do you think the parent is feeling? What can you say to acknowledge those feelings? What are the strengths and points of connection?




14




Step 4: Educate

What simple ideas could you share? How would you communicate your suggestions? What resources will you recommend?



15



Finding Solutions

Small Group Case Study Activity

- 1 Each breakout room will have their own case. Breakout Room 1 will have Case Study #1, etc....
- 2 30 minutes to review and discuss case.
- 3 Complete the 3-Step Practice tool.
- 4 Assign a note taker and someone to share your discussion after the breakout room.

16



Breakout Activity Room

17