



U.S. Department  
of Veterans Affairs

## Using Telehealth Tools and Technology to Support Women Veterans: Focus on Childbearing Age Women

### Presenters:

Ashley M. Lauria, MA, RD, LDN, IBCLC  
*International Board-Certified Lactation Consultant,  
Erie VAMC Maternity Care Coordinator  
VISN 4 Lactation Consultant*

*Partner with Office of Women's Health VACO – Subject Matter Expert in Lactation*

Nadean Sitter, MEd, BSN, RN  
*Women Veterans Program Manager – Erie VAMC*

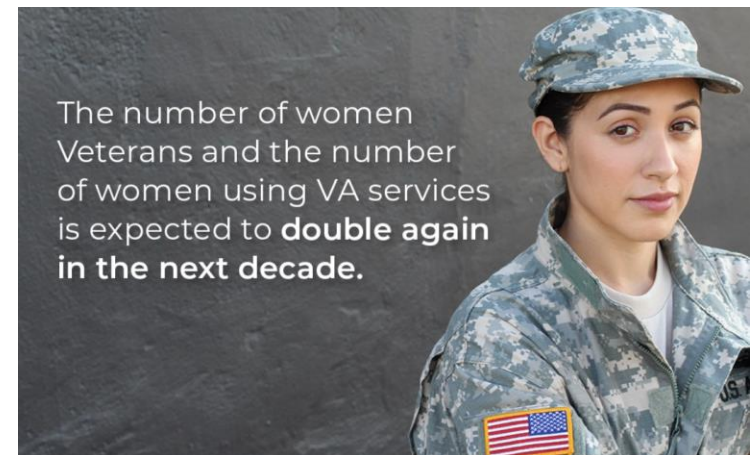


# Women Veterans – By the numbers

- FY 21 Uniques by Age Group
  - 225,722 between the ages of 25 and 44
  - 366,372 between the ages of 45 and 85+

65,169 women Veterans were seen for Gynecological or Obstetrical encounters in FY21

Facility (District)	Age	FY21
		All Patients
All	All Age	592,094
	<25	8,811
	25-34	87,272
	35-44	129,639
	45-54	119,133
	55-64	138,727
	65-74	82,667
	75-84	18,017
	85+	7,826
	Unknown	2



22% of women Veterans who delivered babies in FY21 live in rural areas



# Caring for Women Veterans <44 years of age AKA Childbearing Age

- Infertility
- Whole Health Needs
- Contraception
- Maternity care
- Working women
- Multiple roles - children
- Mental health needs
- Service-connected disabilities
- More Frequent encounters
- *Access to Lactation Support*





# Connecting with Women Veterans <44 years of age AKA Childbearing Age

- VA Video Connect - Veteran
- Virtual Care Manager-Provider
- Mobile Apps – 1 example
  - VA Mindfulness Coaching App
- Phone Appointments
- Secure Messaging
- Online Apps
- Annie
- Telehealth IFCs across the country

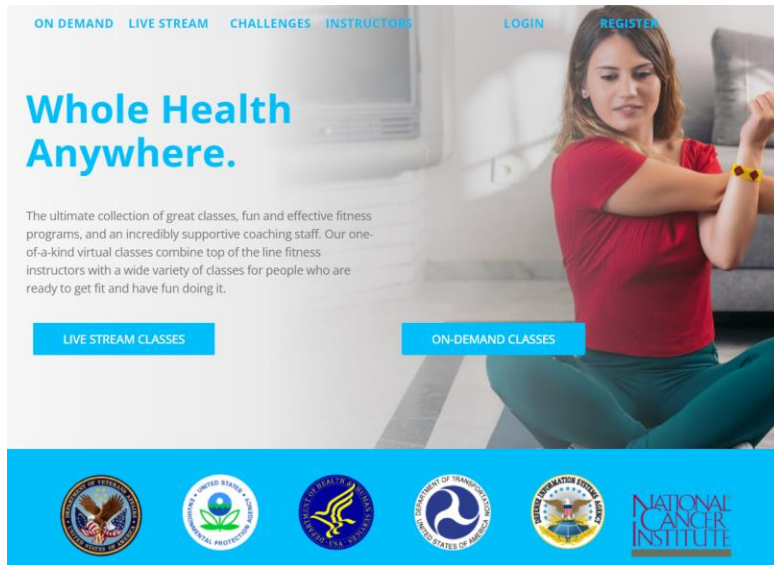
**VA** *Mobile*



 **VA Telehealth**



# Online app example available in VISN 4



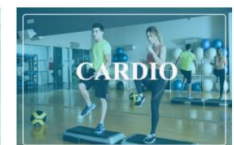
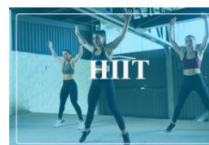
## Virtual Classes – Millennium Health and Fitness



### Mindbody Classes



### Specialty Classes



Lee Mills





# Recognized Needs/Barriers/Solutions to Lactation Support

- Breastfeeding/Chestfeeding education and support is a covered service noted in VHA Directive 1330.03 – Maternity Care Coordination
- Noted barrier to pregnant Veterans accessing community prenatal lactation education classes due to payment issues and third-party credentialing.
- Lack of post-delivery lactation support after hospital discharge from either hospital staff or a credentialed lactation consultant.
- Ashley was on staff as a dietician, had lactation consultant credentials – In July 2016 - mapped to provide lactation support for 8 – 12 hours per week- Noted as VISN 4 best practice in FY17.



# Exponential Growth

- Women's Health Innovation & Staffing Enhancements (WH-ISE) provided funding support for Women's Health personnel, programming and equipment beginning in FY 21.
  - Lactation support brought under women's health with this funding. 20 hours per week is to provide Lactation support via consults, education and support groups. Balance of her week is 20 hours with the office of women's health (OWH) VACO for national program build
  - Increased access to lactation support provided to women Veterans showed to a **460%** increase in lactation consults to Ashely
    - 20 Consults in FY20
    - 112 consults in FY21





# Inclusive Language



- **We support all family units to fulfill their feeding goals.**
- **We acknowledge that not everybody finds the term breastfeeding appropriate. Throughout the presentation, please substitute your term of choice such as chest feeding or human milk feeding if that feels more comfortable for you.**
- **The language in this presentation aims to be inclusive. However, there are slides that may contain non-inclusive language based on the reference/source the information was taken from.**





# Did you know?

**In the US, over 80% of infants start out receiving human milk.**

**The American Academy of Pediatrics recommends human milk exclusively for the first 6 months of life, but only 25% of individuals meet this goal.**

**57.6% of infants are fed through a combination of human milk and formula by the age of 6 months.**

**60% of individuals stop lactating sooner than they planned or would have liked to.**

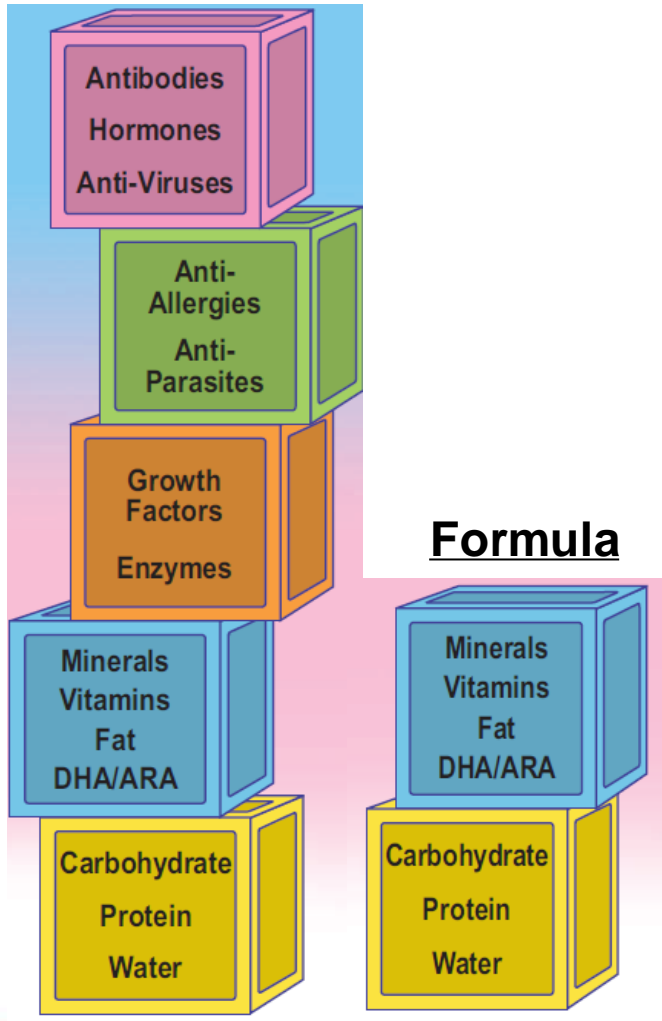
**In 2018, it FINALLY became legal to nurse in public across all 50 states!**





# Benefits of Human Milk

## Human Milk



## Formula

- Human milk fed infants are less likely to have one or more of the following:
  - Fussiness
  - Constipation
  - Colic
  - Vomiting
  - Allergies
  - Asthma
  - Infections
  - Cancer
  - Diabetes
  - Obesity
  - SIDS
  - Lower IQ
- Parents who offer human milk are less likely to have:
  - Breast Cancer
  - Uterine Cancer
  - Osteoporosis
  - Anemia
  - Post-partum Depression
  - Obesity



**Early cessation of breastfeeding, can also increase the risk of post-partum depression. In addition, women Veterans and partners of deployed Veterans have a statistically higher incidence of post-partum depression. (Rychnovsky, J., and Cheryl T. Beck. "Screening for Postpartum Depression in Military Women." Military Medicine Nov. 2006: 1100-104).**



# History



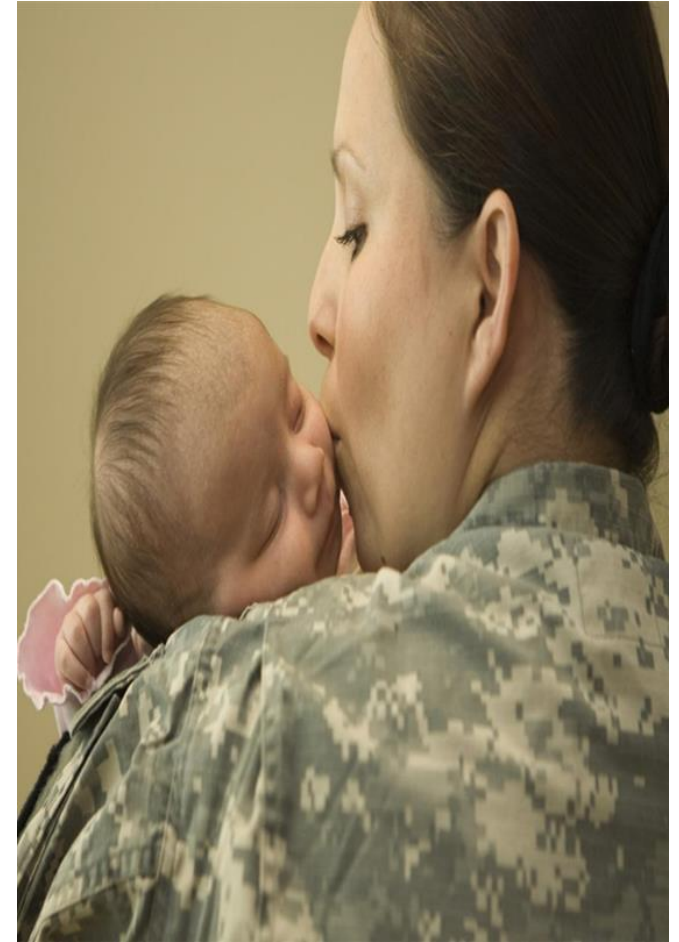
- Growing population of Veterans of childbearing age.
- No clear process in VHA for lactation.
  - Challenges with reimbursement.
  - Utilization of benefits.
- Limited options in the community.





# Purpose of Lactation Support

- Support Veterans
- Improve overall healthcare
- Increase access/prevent barriers to care
- Deliver economic benefits
- Reimbursable Service for VA
- Improve lactation rates for Veteran population







# SERVICES PROVIDED TO VETERANS

## How does VA support Lactation?

- Pre-conception Education and Support
- Prenatal Education and Support
- Lactation Support for the first year and beyond
- Medication Safety and Lactation
- Relactation
- Inducing Lactation
- Return to Work or School
- Exclusively Pumping
- Assistance with weaning
- Troubleshooting when challenges or problems occur
- Assistance when milk comes in and an individual does not want to breastfeed
- Adoption and Surrogacy
- Nutrition Education for Pregnancy and Lactation
- Support Groups
- **And MORE!** 😊





# How is Connected Care Utilized?

- Support Groups
  - Group Classes



- Individual Assessments and Follow-up





# How has Connected Care Changed?

- Services provided ahead of the pandemic.
  - Expanded options across all of VA.
- Continued growth of lactation providers and services.





# Case Study 1 – Connected Care Assist

- Trans woman wanting to induce lactation
- Spouse trans male carried and birthed the child
- Veteran continued to be seen at the Portland VA, then relocated to Southern Arizona VA
- Veteran with hx of anorexia, mental health disorders, Crohn's Disease.
- Veteran on Eligard – Testosterone blocker, often used for treatment of prostate cancer, can cause pituitary gland problems.



# Case Study 2- Connected Care Assist



- Latch problems.
- Veteran having pain with nursing.
- Misshaped nipples after nursing.
- Infant not gaining weight appropriately.
- Supplementing with formula.
- 3<sup>rd</sup> infant for parents, previous children nursed successfully with no complications





*healthy family,*  
**HAPPY LIFE**

