

# 2019 SOCIAL IMPACT ANNUAL REPORT



## **Chocolate Milk®: The Documentary**

*Exploring how factors of race and sex influence birth and breastfeeding outcomes for black mothers in America.*

# ACKNOWLEDGEMENTS

## Team

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Soul Food For Your Baby  
Reaching Our Sisters Everywhere  
Black Mothers Breastfeeding Association  
National Medical Association  
BreastfeedLA  
La Leche League  
National WIC Association

*graybayne film/media* is the production company Elizabeth Bayne launched two years before starting *Chocolate Milk*. Fresh out of film school, Bayne was eager to bridge her two loves, public health and media, to improve health outcomes for underserved communities, women and girls. The company—focused at the intersection of social impact and film—strives to tell stories for a healthier world, collaborating with nonprofits organizations, government agencies and artists from around the world.

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# EXECUTIVE SUMMARY

Chocolate Milk is a graybayne film/media production, directed and produced by Elizabeth Gray Bayne. The project began in 2014 as a digital storytelling project in which the personal breastfeeding stories of African American mothers were collected and hosted on a YouTube channel called *Chocolate Milk: The Documentary Series*. Over the course of three seasons, the series became a tool for health centers and physicians' offices across the United States.

After working closely with community stakeholders to better understand the racial breastfeeding disparities affecting black mothers in the U.S., the team set about producing *Chocolate Milk: The Documentary*, a 90-minute film with a primary target audience of African American women ages 18 through 34 and a secondary audience of family members, health providers and

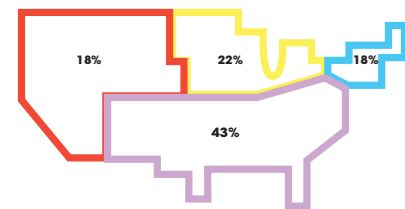
the general public. An early cut of the film, which follows three African American women, a new mother, a homebirth midwife and WIC lactation expert, was previewed in 200 communities nationwide during National Breastfeeding Month and Black Breastfeeding Week in August 2019.

These community screenings demonstrated the effectiveness of *Chocolate Milk: The Documentary* in increasing community support for black breastfeeding mothers by galvanizing organizations, the public, and policymakers. In this report, the results of an audience survey and the overall findings from the national social impact campaign for the film will be presented, demonstrating the value of narrative in raising awareness and community support for breastfeeding.

## WHO SAW CHOCOLATE MILK?

**200 PARTICIPATING ORGANIZATIONS HOSTED 253 COMMUNITY SCREENINGS ACROSS 36 STATES**

### REGIONS WITH THE MOST SCREENINGS



### NUMBER OF ORGANIZATIONS BY REGION



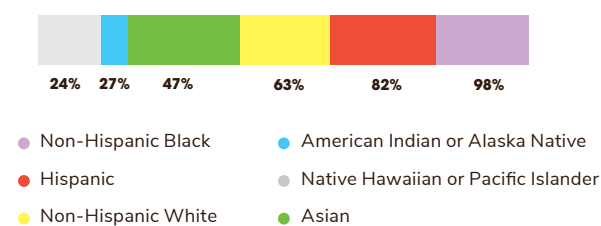
### STATES WITH 10 OR MORE PARTICIPATING ORGS



**>90%** of organizations serve women aged 18-34

**63%** of organizations serve households making less than \$35,000 annually

### RACIAL DEMOGRAPHICS OF POPULATIONS SERVED



## ACTIVITIES THIS PERIOD

- FILM PRODUCTION:** Completed production on a 90-minute feature film designed to entertain and engage target audiences of African American women (18 to 34) and a secondary audience of family, health providers and the general public.
- SOCIAL IMPACT CAMPAIGN:** Held over 200 community screenings of *Chocolate Milk* across the country during National Breastfeeding Month.

## OUTCOMES THIS PERIOD

- CHANGING MINDS:** raised awareness and deepened understanding about the racial disparities in breastfeeding, while elevating black breastfeeding as a symbol for reproductive justice.
- CHANGING BEHAVIOR:** increased active support of breastfeeding mothers, mobilized public engagement and inspired audiences to take individual action.
- CHANGING COMMUNITIES:** created network of support around the film, supported grassroots organizations, and offered tool they could use to strengthen communities and grow the movement.
- CHANGING STRUCTURES:** made progress towards improving how black women are treated in healthcare settings, unlocking resources for black families and aspiring lactation workers, and inspiring policies to protect breastfeeding.

## Film Synopsis



Breastfeeding is a beautiful act that forms an intimate bond between mother and child while providing crucial nourishment. Yet in America today, many African American mothers struggle with the decision to breastfeed and breastfeed at significantly lower rates (69%) compared to White (86%) and Hispanic (85%) mothers. This puts their infants at greater risk for long-term health conditions like asthma, obesity, diabetes, cancer and other chronic diseases. *Chocolate Milk* explores how the factors of race and sex influence poor birth and breastfeeding outcomes for black mothers in America by following the stories of three black women - a new mom, a midwife and a WIC employee in South Central Los Angeles.



TAMI is a first time mother who wants to breastfeed, but has no family history of breastfeeding and only a basic knowledge of what to expect with giving birth. RACHA is a third generation midwife who supports breastfeeding and natural birth for low-income families, but is forced to close her birth center after clients abuse the sliding pay scale. LYDIA is a lactation educator who provides basic breastfeeding support as a WIC (Women Infant and Children) employee, but dreams of becoming licensed to provide more advanced care for her clients.



By following these three women, *Chocolate Milk* hopes to shed light on the reproductive justice challenges faced by black mothers, breastfeeding's decline in Black America, and the undue health burden this places on black infants. The film uses the issue of breastfeeding disparities in the black community and the struggle to bring it back as a cultural norm to explore the history of institutionalized racism and sexism in the United States and its role in the poor healthcare outcomes, access, and practices that limit black women's reproductive choice.

"We loved hosting this documentary, and would happily do it again. It was great to have a positive and personal spin on the perspectives of the breastfeeding parents... We love the work you're doing and hope to partner and support in any way we can. Thank you for the opportunity!"

Emily Little, Nurturely, Eugene, OR





# CAMPAIGN OVERVIEW

The team built on lessons from the series and refined the approach to storytelling and community engagement to increase the reach and effectiveness of the film. Fundraising involved donations from individuals and partner organizations through early production until grant funding was awarded by the Center for Cultural Innovation to continue production and the W.K. Kellogg Foundation to complete the film. The documentary is uniquely designed to inspire dialogue about how to better support black women in birth and breastfeeding for target audiences, ranging from black women and their families to health professionals whose implicit bias may influence a mother's decision to breastfeed.

A soft launch of the film campaign began with screenings of the work-in-progress at five national breastfeeding conferences in 2017. As the film entered post-production in early 2019, organizations were invited via social media, email and phone to sign up to host community screenings of an early cut. Because of the network and credibility built from the series, organizations were willing to sign up without seeing the film in advance. Audience surveys were conducted during many of the screenings to collect viewers' baseline knowledge of breastfeeding and barriers to breastfeeding for black mothers and shifts in attitudes and behavior after seeing the film.

## Campaign Objectives

The Doc Society\* framework for mapping impact strategies has four quadrants, depending on the story environment of a film, i.e., if an issue is known or unknown or if there is weak or strong opposition to the message. *Chocolate Milk* is about a known issue with strong opposition in the form of African American mothers who may believe they cannot breastfeed and health providers who presume they do not want to. Because of this, the film puts a spotlight on black mothers who find support to successfully breastfeed, to not only humanize the issue but also provide a model for mothers and the health providers on which they rely for support.

### FRESH: REVEAL

An unknown issue (to your target audience) and little or weak opposition may favor films that dramatically REVEAL what's going on.

### FAMILIAR: SPOTLIGHT

A known issue that still has little or weak opposition often calls for films that can put the SPOTLIGHT on a tired issue.

### HIDDEN: INVESTIGATE

An unknown issue (to your target audience) but with strong and organized opposition may require your film to prove the case - to INVESTIGATE

### ENTRENCHED: HUMANIZE

A known issue (with possible fatigue from target audience) with strong opposition may not need to offer new facts, but simply to HUMANIZE the affected communities.

\* The Doc Society is a non-profit founded in 2005 committed to enabling great documentary films and connecting them to global audiences. Their Impact Field Guide & Toolkit was designed to support documentary filmmakers as a resource for improving the impact of their films. While the campaign strategy for *Chocolate Milk* was developed independently of this resource, the terminology used within it provides an effective framework to discuss this film.

## Campaign Tracking

Several measures were identified to help track the campaign's impact during and after the community screenings held in August 2019. Those measures fall under the three categories of audience reach, community engagement, and public influence.

### REACH

- Tracked number of screenings using digital registration forms
- Collected qualitative audience surveys before and after screenings
- Tracked DVD and screening requests after campaign
- Collected anecdotes of audience reactions via email and social media
- Tracked audience turnout from estimates made during digital registration

### ENGAGEMENT

- Moderated audience discussions after community screenings
- Observed audience engagement during screening events
- Developed theory of change inputs and expected outcomes
- Developed M&E framework and impact assessment tools
- Tracked click-thru rate for emails and downloads of the toolkit and webinar training
- Tracked email newsletter sign ups
- Tracked social media presence
- Collected statements from organizations and advocates

### INFLUENCE

- Tracked press coverage and social media mentions using service
- Tracked legislators at community screening events
- Tracked organizations shifting to a storytelling approach for their public outreach strategy



## Story Environment

Breastfeeding rates for African American women have been significantly lower compared to other racial and ethnic groups in the U.S. for the better of three decades, with black mothers' initiating breastfeeding at rates 17% lower than Non-Hispanic white mothers. While there is no public opposition to black women breastfeeding, systemic challenges and misperceptions combined with low awareness contribute to the long-standing disparity. Unfortunately, health providers and political officials have been slow to respond with policies that would protect a mother's decision to breastfeed at home, at work or in public. Furthermore, black women and their children bear the burden due to their increased social and economic vulnerability. It is critical to increase awareness and sensitivity to the needs of black mothers if their breastfeeding rates are to improve.

*Chocolate Milk* emerges in a social context in which maternal mortality rates for African American women are closer to national averages of developing countries, like Thailand, Argentina and Samoa, and over three times that of Non-Hispanic white women in the U.S. There is little to no funding for content on this subject and available funding tends to come from the infant formula industry, leading to concerns about bias towards an industry agenda. In addition, despite women making up half the U.S. population, motherhood is still considered a niche issue. Focusing on black mothers further limited the film's perceived audience and made it less appealing to traditional funding institutions. To develop a fundraising and distribution strategy, the film's team had to get creative.

### CHALLENGES

While initiation rates for black mothers have improved, the gap between black and white mothers who breastfeed exclusively at 6 and 12 months has actually widened since 2009, largely due to the perception that black mothers do not breastfeed. This misperception leads health providers to assume that a black family is either disinterested in breastfeeding or not worth the investment of lactation support. In addition, employment barriers for black mothers mean they are more likely to return to work earlier, have shorter maternity leaves, less flexible hours and insufficient break time to express or pump breastmilk. The consequences of not addressing these systemic inequities mean black mothers and infants are unable to benefit from the protective effects of breastfeeding which reduces the risk of breast and ovarian cancer, hypertension, and type-2 diabetes for mothers and antibodies against ear infections and gastrointestinal diseases for infants, as well as asthma, diabetes, obesity and cancer later in life.



### OPPORTUNITIES

As an often underserved community and niche issue, maternal and infant health organizations are hungry to support content that serves their mission to increase breastfeeding rates in the U.S. Rather than focusing immediately on funding, the filmmaker started by building deep community and organizational relationships. Through the production of *Chocolate Milk: The Documentary Series* the filmmaker gained early access and insight to the subject and earned trust and credibility within the black breastfeeding community. *Chocolate Milk* is uniquely placed to counter the misperception that black mothers do not breastfeed and illustrates the racial stigma and employment barriers that black mothers must overcome to successfully breastfeed their children. By sharing the real stories and voices of black women, the film humanizes the issue with humor, heart and optimism, pushing the issue to the forefront of the reproductive justice movement with new voices that offer very real and tangible community-based solutions.





## Campaign Strategy

In order to connect the social marketing and entertainment education roots on which Chocolate Milk was founded with contemporary practices in social impact filmmaking, we are applying Doc Society's Four Impact Dynamics. This tool encompasses four broad categories for analyzing campaign strategies and the kinds of change that films can make. These four dynamics align closely with the four outcomes of our film campaign:

### CHANGING MINDS

Raise awareness and deepen understanding about racial disparities in breastfeeding and elevate black breastfeeding as a symbol for reproductive justice.

#### TARGET AUDIENCE

Mothers, families, health providers and the general public.

### CHANGING BEHAVIOR

Increase active support of breastfeeding mothers, mobilize public engagement and inspire audiences to take individual action.

#### TARGET AUDIENCE

Mothers, families, health providers and the general public

### CHANGING COMMUNITIES

Create network of support around the film, support grassroots organizations, and offer tool they can use to strengthen communities and grow the movement.

#### TARGET AUDIENCE

Organizations, health providers, health advocates and the public.

### CHANGING STRUCTURES:

Improve how black women are treated in healthcare settings, unlock resources for black families and aspiring lactation workers, and inspire policies to protect breastfeeding.

#### TARGET AUDIENCE:

Hospital administrators, medical institutions and policymakers.



## SOCIAL BEHAVIOR THEORY

Despite the documented benefits and recommendations from the Surgeon General, World Health Organization and the Centers for Disease Control (CDC), there are still many African American women who have never seen another woman breastfeed. While promotional materials and national programs exist encouraging mothers to breastfeed, very few specifically target black mothers. With cultural barriers, such as limited media depiction, aggressive marketing of infant formula, detrimental welfare policy, lack of baby-friendly neighborhoods or workplaces, and misinformed cultural norms and individual beliefs about breastfeeding, more content is needed to specifically address the needs of black women. Given the complex barriers that keep many African American mothers from breastfeeding, any outreach directed towards this audience requires in-depth consideration to the method of communication. To develop the film's approach, two programs in particular were investigated as case studies: The National Breastfeeding Awareness Campaign and It's Only Natural.

### Previous Breastfeeding Campaigns

The National Breastfeeding Awareness Campaign

In 2004, the Office of Women's Health (OWH) launched a National Breastfeeding Awareness Campaign in partnership with The Ad Council to empower women to commit to breastfeeding by highlighting new research showing the benefits to babies. Local promotion included sixteen community-based demonstration projects (CDPs) throughout the country to educate women about the benefits of breastfeeding, to show that breastfeeding is normal, and to ensure access to culturally tailored lactation services. The campaign increased breastfeeding awareness and the belief that breastfeeding was the best way to feed a baby by 10%, but did not address practical barriers to breastfeeding or the especially low rates among African American women. The campaign may have also had the unintended consequence of increasing guilt mothers felt for not meeting their breastfeeding goals.

It's Only Natural

In 2013, the Department of Health and Human Services (DHHS) launched It's Only Natural, a campaign specifically targeting African American women to promote exclusive breastfeeding for the first six months of an infant's life. The campaign featured videos in which African American mothers and experts discuss the common issues that make breastfeeding challenging for any new mother. These videos were supplemented by guidebooks, fact sheets and a series of radio PSAs. However, the materials did not acknowledge or reference the unique conditions that make breastfeeding particularly challenging for black mothers, did not contribute to the sense of public and familial responsibility to support mothers and there was no follow-up analysis to evaluate the effectiveness of the campaign.

The film sought to build on these two campaigns by shifting responsibility for breastfeeding from solely on mothers to their partners, families, communities and health providers to create a supportive baby-friendly environment for mothers and infants to thrive. Several theories were incorporated in the film, including the Individual Differences and Diffusion of Innovation theories and the Social Norms and Extended Elaboration Likelihood models. Individual Differences theory moves beyond simply using images of black women to actually acknowledging the cultural differences that make breastfeeding challenging. Diffusion of Innovation allows early adopters, such as the doulas, midwives and lactation consultants who champion breastfeeding, to use the film as an educational tool in their respective social systems and communities. The Social Norms model reframes breastfeeding as an accepted practice and lost tradition of black society that must be protected and supported by a mother's family, partner and peers. And finally, the Extended Elaboration Likelihood model creates an engrossing narrative about the relationship between black mothers and the health providers who guide them through the challenges of breastfeeding to engage audiences, who will identify with and be transported by the message.

### SOCIAL MARKETING AND ENTERTAINMENT EDUCATION

Social marketing is the use of commercial marketing principles and techniques to address the health, social and economic issues that affect people. It is a carefully planned, long-term approach to changing human behavior. Entertainment education is a communication strategy that utilizes entertainment to educate the public. The narrative approach to Chocolate Milk draws from both practices which use social behavior theory, a learning theory based on the idea that people learn by observing others.

### ETHICAL CONSIDERATION

Careful consideration was given to the individuals chosen to represent African American women in the film and how they would be depicted. Chocolate Milk incorporated checks and balances at every stage to ensure the subjects reflected a range of birth and breastfeeding experiences for black women and were depicted with truth, dignity and respect, including: 1) a stakeholder focus group at the start of the web series, 2) direct referrals from local breastfeeding organizations for mothers to interview, 3) ethnographic interviews with actual black mothers and 4) an extended three-year immersion period with the black breastfeeding community to ensure the subjects chosen for the film best reflected the issues that made breastfeeding both challenging and rewarding for black mothers in the U.S.



New Orleans Breastfeeding Center Community Screening of Chocolate Milk  
Photo Credits: NOLA Baby Cafe



# TIMELINE

## 2014

### April 12, 2014

Held focus group with stakeholders from the black breastfeeding community in Southern California

### May 23, 2014

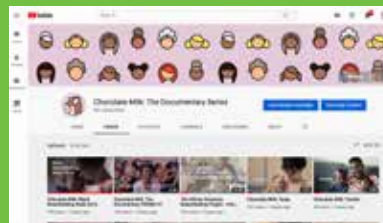
Filmed first ethnographic interview with Jasmine, a mother of two from Compton, CA



Jasmine

### June 5, 2014

Released first episode of the web series which ran from 2014-2016 on YouTube.



### August 3, 2014

Premiered mini documentary entitled the African American Breastfeeding Project at the National Medical Association (NMA) 112th Annual Convention & Scientific Assembly in Honolulu, HI

### August 25, 2014

Released mini documentary entitled the African American Breastfeeding Project on YouTube for Black Breastfeeding Week (9.9K views)



Naheema

## 2015

### January 29-30, 2015

Presentations and screenings of the web series:

- **January 29-30, 2015**  
5th Annual California Breastfeeding Summit in Anaheim, CA
- **April 14, 2015**  
BreastfeedLA Community Meeting in Inglewood, CA
- **October 14, 2015**  
Oral presentation and screening of web series at California State University - Northridge, Lactation Education Course in Northridge, CA
- **November 4, 2015**  
American Public Health Association (APHA) 143rd Meeting & Exposition in Chicago, IL



Essence



Cambreisha



Tanya

### August 26, 2015

Released first PSA and promotional video for the documentary for Black Breastfeeding Week (3.5K and 10.4K views)



## 2016

### February 14, 2016

Began production on the feature film entitled *Chocolate Milk: The Documentary*

### April 7, 2016

Presentations and screenings of the third season of the web series:

- **April 7, 2016**  
UCLA Public Health Week in Los Angeles
- **April 18, 2016**  
National Association of County and City Health Officials (NACCHO) Grantee Closing Meeting in Baltimore, MD
- **June 30, 2016**  
BreastfeedLA Seminar in Inglewood, CA
- **July 29, 2016**  
Reaching Our Sisters Everywhere (ROSE) 5th Annual Breastfeeding Summit in New Orleans, LA
- **August 1, 2016**  
National Medical Association (NMA) 114th Annual Convention & Scientific Assembly in Los Angeles, CA
- **October 14, 2016**  
7th Annual Black Mothers' Breastfeeding Association Seminar in Detroit, MI

### August 24, 2016

Released second PSA for Black Breastfeeding Week on the official Black Breastfeeding Week Facebook page and the *Chocolate Milk: The Documentary Series* Youtube Channel (109.1K views).



Tanya



Tanefer

## 2017

### April 13, 2017

Screened documentary work-in-progress:

- **April 13, 2017**  
Yale School of Public Health Film Series in New Haven, CT



Pictured from left to right: Dean Sten Vermund, Elizabeth Bayne (film director), and Linda Bergonzi-King at the Yale University School of Public Health

- **August 4, 2017**  
2nd Annual RVA Breastfeeding Symposium in Richmond, VA
- **October 31, 2017**  
Virginia WIC Annual Conference in Glen Allen, VA

### August 1, 2017

Oral presentation and screening of web series:

- **August 1, 2017**  
Auxiliary to the National Medical Association Annual Convention in Philadelphia, PA

### August 27, 2017

Media coverage of *Chocolate Milk*:

- **August 27, 2017**  
The Pregnancy Podcast, "Breastfeeding Challenges in the Real World"
- **September 5, 2017**  
Mothering: The Home for Inclusive Family Living, "Chocolate Milk: An In-Depth Look at Breastfeeding in Black America"
- **September 22, 2017**  
Art Center College of Design: Storyboard, "Chocolate Milk and Other Wonders of Being Human"
- **November 19, 2017**  
Breastfeeding Medicine Podcast, "Interview with Elizabeth Bayne, Producer of the Upcoming Movie 'Chocolate Milk'"
- **December 20, 2017**  
Yale Public Health Magazine, "Alumna launches video series to address racial disparities in breastfeeding"

## 2018

### February 11, 2018

Media coverage of *Chocolate Milk*:

- **February 11, 2018**  
Our Milky Way Blog "Chocolate Milk: The Documentary"

### March 23, 2018

Presentations and screening of documentary work-in-progress:

- **March 23, 2018**  
Breastfeeding and Feminism International Conference in Chapel Hill, NC
- **August 4, 2018**  
US Breastfeeding Coalition's 8th National Breastfeeding Coalitions Convening in Atlanta, GA
- **September 26, 2018**  
National WIC Association Nutrition Education & Breastfeeding Promotion Conference and Exhibits in New Orleans, LA

### August 25, 2018

Oral presentation and screening of web series:

- **August 25, 2018**  
7th Annual Black Mothers' Breastfeeding Summit in Detroit, MI



Photo: Elizabeth Bayne (film director) presenting at the National Women Infant and Children Association



Pictured from left to right: Founding Executive Director Kiddada Green, Elizabeth Bayne (film director), Destiney Mohammed, and Sekeita Lewis Johnson at the Charles H. Wright Museum African American History in Detroit, MI

## 2019

### May 24, 2019

Production wrapped on the feature film

### Jan 9, 2019

First official invitations to host a community screening of an early cut of the film in August 2019 sent to grassroots organizations

### July 24, 2019

Hosted webinar training to prepare organizations interested in conducting audience surveys before and after their community screenings

### July 31, 2019

Digital copies of the screening & survey kit sent to the 200 organizations, schools, and individuals hosting community screenings. Physical kits were mailed later upon request.

### August 1-31, 2019

Community screenings starting on August 1 took place in 36 states (Alabama, Arizona, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Illinois, Indiana, Kansas, Louisiana, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, New Jersey, New York, North Carolina, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Virginia, Washington, Wisconsin and Washington, D.C.... all but 15 states



Instagram posts from participating organizations promoting their community screenings of *Chocolate Milk* in August 2019

### August 20, 2019

Media coverage of *Chocolate Milk*:

- **August 20, 2019**  
Radio interview with film director and The African American Breastfeeding Network on WNOV 860 "The Voice" in Milwaukee, WI
- **August 21, 2019**  
Radio interview with film director and radio host Clovia Lawrence on Radio One in Richmond, VA





# SURVEY OVERVIEW

A mobile audience survey was conducted during community screenings of *Chocolate Milk* hosted by non-profit, community, professional, and student organizations across 36 states in during National Breastfeeding Awareness Month in August 2019. A one-hour training webinar was provided to organizations on how to administer the survey before and after the film screening. All 200 organizations that scheduled a community screening of *Chocolate Milk* received a survey kit consisting of a brief film description, screening and survey guidelines, detailed instructions on how to administer the

survey, and the pre-screening and post-screening survey instruments. A discussion guide for audience engagement was also provided for organizations not participating in the survey. The pre-post study designed measures shifts in awareness, attitudes and intended behavior regarding breastfeeding that resulted from watching *Chocolate Milk*, a 90-minute documentary which explores the racial divide in breastfeeding through the narratives of three African American women, a new mother, a midwife and WIC lactation educator.

## Methodology

### SETTING

The mobile audience survey was conducted during community screening events held by non-profit, community, professional, and student organizations across 36 states in the United States during National Breastfeeding Awareness Month in August 2019. A pre-post study design assessed changes in awareness, attitudes and intended behavior regarding breastfeeding.

### PARTICIPANTS

All organizations willing to administer the survey were welcome to participate. Organizations held community screening events in various locations, from traditional movie theaters and auditoriums, to conference rooms and offices. Audience members with mobile devices were eligible to participate in the pre-post surveys. Participation in the survey was voluntary and not required in order to view to the film. Individuals who did not complete the pre-survey were asked not to participate in the post-survey.

### MEASUREMENT

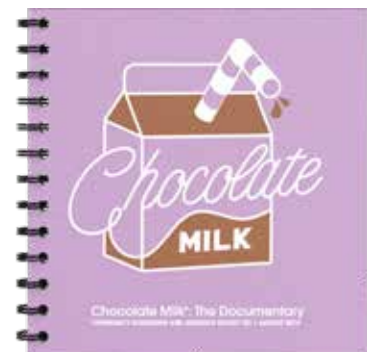
The pre-screening and post-screening survey instruments captured information on demographics (i.e., age, race, occupation, relationship status, education, childbearing and breastfeeding history, recent breastfeeding knowledge); attitudes towards breastfeeding; reasons why black women might not breastfeed; barriers to black women breastfeeding; recommendations on where women should seek breastfeeding support; identification of key items for optimal breastfeeding experience; knowledge about homebirth midwives; and how to support breastfeeding mothers.

### DATA COLLECTION

Each organization was asked to have two individuals facilitate the administration of the survey: one facilitator to read the survey instructions to the audience and the second facilitator to assist the audience with any issues that arose while the survey was implemented. The web-links for two separate

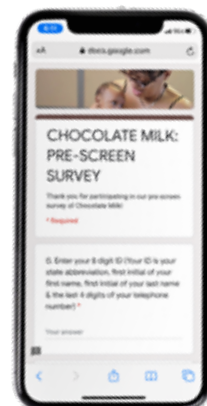
## Objectives

- 1 Gauge baseline knowledge about breastfeeding and measure shifts in attitude after viewing the film.
- 2 Gauge baseline sense of efficacy to support breastfeeding mothers and measure shifts in intended behavior after viewing the film.
- 3 Identify shifts in audience awareness of alternative breastfeeding and birth services outside the hospital system.
- 4 Review elements of the film that most resonated with audiences.



Screening & Survey Kit

User-friendly kit with large type, bold colors, thick pages and spiral binding for facilitators to guide audiences through the survey on-site.



Mobile Audience Survey

Brief online survey that audience members could access by mobile device. Respondents were guided through each survey question by an on-site facilitator.

Google surveys – one for the pre-screening survey and one for the post-screening survey – were provided. The pre-screening survey was completed on audience members' mobile devices before the film started and the post-screening survey was completed immediately after the film ended.

Audience members created a unique 8-digit identification code consisting of 4 letters and 4 numbers: their state abbreviation, the first letter of their first name, the first letter of their last name and the last four digits of their phone numbers. This unique identification code was used to merge the pre- and post-survey completed by each individual audience member.

### STATISTICAL ANALYSIS

Initial analysis assessed differences between audience members who completed both pre and post surveys (n=1,100) and those lost to follow-up between pre and post surveys (e.g., did not complete post survey) (n=454). Attrition was highest among audience members who were: non-Hispanic black (p<0.05), agreed with "Breastfeeding comes naturally to all women (p<0.05)," would recommend "don't give up" to a woman struggling with breastfeeding (p<0.05), and answered "when the baby is born" as the best time to get information about breastfeeding (p<0.05).

Next, descriptive analyses were conducted followed by bivariate analyses to examine changes in outcomes among audience members before and after viewing the film. Generalized estimating equations were used to determine whether changes before and after viewing the film were significant by accounting for within-group correlation structures for panel data and adjusted for clustering at the state-level. Because the majority of respondents were Women (94.8%) and nearly half were White (48.1%), analyses were stratified to capture key populations of interest, namely our primary target audience of Black women and secondary audience of health providers:

1. Black females excluding health professionals;
2. Other participants excluding health professionals;
3. Black lactation specialists or breastfeeding professionals;
4. White lactation specialists or breastfeeding professionals; and
5. Other health professionals excluding Black and White lactation specialists or breastfeeding professionals.

All analyses were conducted using STATA software.

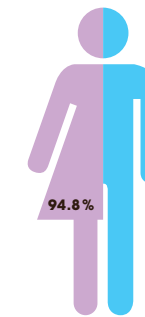
### ETHICAL CONSIDERATIONS

To protect facilitators and survey participants, we did not collect any personal identifying information. Although basic demographic information was collected, we assured facilitators and participants that the names of the organizations involved in the study will not be associated directly with results. All study data were kept in password protected accounts and computer files accessed only by study staff.

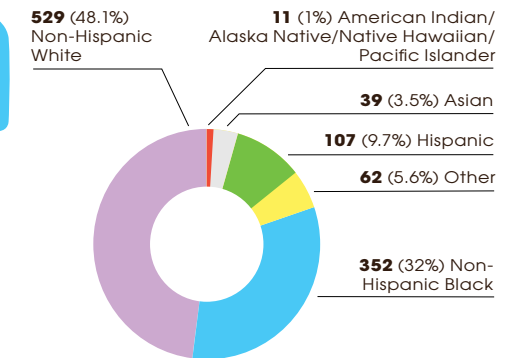
## WHO TOOK THE SURVEY?

1100 AUDIENCE MEMBERS PARTICIPATED IN THE PRE- AND POST- SCREENING MOBILE SURVEY

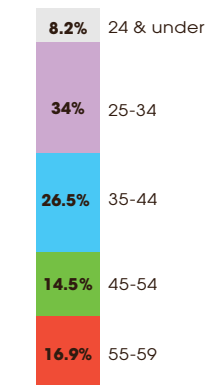
### % FEMALE RESPONDENTS



### RACIAL DEMOGRAPHICS



### RESPONDENTS BY AGE



### RESPONDENTS BY HEALTH PROFESSION



### RESPONDENTS BY HEALTH PROFESSION

- 198 (18%) doctor or nurse
- 310 (28.2%) lactation specialist
- 3 (3%) midwife

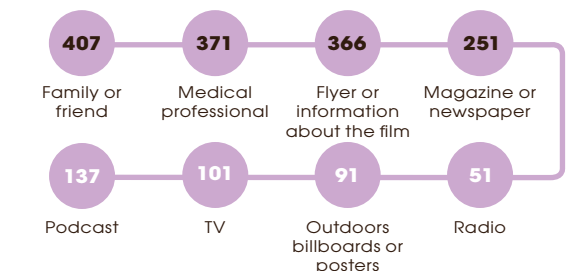
63% of respondents reported being health professionals



73% of respondents had at least one child

92% of respondents with children reported breastfeeding one of more of them

### TOP INFORMATION SOURCES ABOUT SUPPORTING BREASTFEEDING MOTHERS IN THE LAST SIX MONTHS





## Key Findings

Shifts in attitudes, awareness and intended behavior among audience members who participated in the pre- and post-screening surveys.

### OBJECTIVE 1: BASELINE KNOWLEDGE & SHIFTS IN ATTITUDE

1. Less than a fourth of respondents believed at baseline that breastfeeding comes naturally for all women, including Black female non-health professionals (23.9%), Black Lactation professionals (22.7%), Other health professionals (21.4%), and White Lactation professionals (11.6%). Neither group saw much shift after seeing the film. [SEE TABLE 1.1]
2. With a 10.1% increase, the number of Black female non-health professionals who believed that the birth experience has a lot or some influence on a mother's ability to initiate breastfeeding saw the biggest shift of any group. [SEE TABLE 1.2]
3. The majority of respondents at baseline would have recommended that "During the prenatal stage" is the best time for a family to seek breastfeeding information and there was little change in post. [SEE TABLE 1.3]
4. There were significant increases in knowledge among all respondents for the reasons why black mothers might not breastfeed.
  - Black female non-health professionals saw significant increase in all indicators, with the greatest increase in "post-partum depression" (27.6%), "fear baby is not getting enough milk" (26.9%) and "pumping is too hard" (23.2%).
  - Lactation and Other health professionals, saw the greatest percentage point increase in "post-partum depression" (29-34%). White Lactation and Other health professionals saw the second greatest increase in "Pumping is too hard" (28.7 and 26.8%). Black Lactation professionals saw the second greatest increase in "Too expensive" (21.6%) and "Tired" (20.4%). [SEE TABLE 1.4]
5. There were significant increases in knowledge among all respondents about the keys to an optimal breastfeeding experience, but there was considerable variation across subgroups on all but two items — "Good nutrition" and "Lactation support" — which were already high at baseline.
  - Black female non-health professionals saw the greatest increase in "Job security" (17.4%), "Reliable housing" (10.9%), and "Help around the house" (9.4%).
  - Baseline measures were highest for "Encouragement" (94.2%), "Good nutrition" (92%), and "Lactation support" (90.6%) and saw the least change.
  - "Job security" saw the greatest increase among Black Lactation (22.7%), White Lactation (18.2%)

- and Other health professionals (22.3%).
- Baseline measures were highest for "Encouragement" (95.5-96.9%) and "Lactation support" (96.5-98.9%) and saw the least change. [SEE TABLE 1.5]
6. Knowledge about the listed barriers to breastfeeding increased significantly across all respondents with the exception of "Lack of family support" which was already high at baseline for Lactation professionals and saw little to no increase.
    - Black female non-health professionals had the greatest increase in identifying "Confidence in their body's capability to produce enough milk" (21.8%), "Access to professional support" (14.5%), and "Partner support" (13.8%) as barriers black mothers face with regards to breastfeeding.
    - Lactation and Other health professionals saw increases in "Confidence in the body's capability to produce enough milk" (9.4-14.6%), "Community support" (7.7-10.2%), and "Access to professional support" (7-8%).
    - Other health professionals were the only audience members to have significant increases in identifying "Health providers' assumption about black mothers' disinterest in breastfeeding" (11.9%) and "Short or no maternity leave" (8.7%).
    - Baseline measures "Formula marketing to low income and/or black communities" (1.2-2.8%) was relatively high for all health professionals and saw the least increase. [SEE TABLE 1.6]

### OBJECTIVE 2: BASELINE EFFICACY & SHIFTS IN INTENDED BEHAVIOR

7. Over 95% of respondents stated learning something new about supporting breastfeeding from watching *Chocolate Milk*, with the exception of Black Lactation professionals who at 91% were likely the most well-versed in this subject at baseline.
8. The majority of respondents across subgroups would have recommended that a mother struggling with breastfeeding should "Ask for help" at baseline, but there was a significant increase in respondents recommending "Don't give up" in post. This shift was greatest among Black female non-health professionals (17.4%) and Black Lactation professionals (11.3%). [SEE TABLE 1.7]
9. The majority of respondents would have recommended that a mother seek breastfeeding support from a "Breast-feeding circle or support group" or "Lactation professional" at baseline.
  - Black female non-health professionals, Black and White Lactation, and Other health professionals saw the greatest increase in "Midwife" (19.6%), "WIC center staff" (17.4%), and "Her partner" (10.9%).
  - While there were significant increases in all listed

options, the likelihood of recommending "Hospital staff" was the only option that saw a significant decrease across subgroups, with the greatest decline for Black female non-health professionals at -11.6%. [SEE TABLE 1.8]

10. All respondents saw an increase in the actions they intended to take in the next six months to support a breastfeeding mother. Each listed action saw a significant increase with the exception of "Offer words of encouragement" among Lactation and Other health professionals, which was already high at baseline (91.7-96.6%) and saw the least change. "Deliver prepared meals" saw a decline among White Lactation professionals (-6%).
  - Black female non-health professionals and Other health professionals saw the greatest increase in "Deliver prepared meals" (28.2 and 18.8%), "Household chores" (19.5 and 14.6%), and "Offer a pillow" (18.1 and 14.1%).
  - White Lactation professionals saw the greatest increase in "Babysit the children" (32.6%), "Babysit the other children in the household" (13.2%), and "Household chores" (10.5%).
  - Black Lactation professionals saw the greatest increase in "Deliver prepared meals" (17.1%), "Offer a pillow" (11.4%), and "Babysit the baby" (7.9%).

### OBJECTIVE 3: AWARENESS OF ALTERNATIVE SERVICES

11. There was an increase in knowledge that homebirth midwives are "qualified professional healthcare providers" among all respondents.
  - Black female non-health professionals and Other

health professionals, saw the greatest gains in knowledge, including that homebirth midwives are "qualified professional healthcare providers" ( 4.6 and 8.1%), "provide intimate and individualized care" (3.8 and 2.2%) and "do a home visit 24 to 48 hours after birth and again at 2 weeks" (3.2 and 2.4%). [SEE TABLE 1.10-12]

### OBJECTIVE 4: NARRATIVE ELEMENTS THAT RESONATED

12. 95.7% of Black female non-health professionals and 97.7% of Black Lactation professionals agreed that the film accurately depicts the lives and experiences of black mothers.
13. The majority of respondents in all subgroups stated personally experiencing the issues depicted in the film or knowing someone else who has, including 80.4% of Black female non-health professionals, 95.5% of Black Lactation professionals, 80.7% of White Lactation professionals, and 71.6% of Other health professionals.
14. Black female non-health professionals found Tami's character and story the most relatable at 63% out of the three main characters. While Black Lactation (50%), White Lactation (65.7%) and Other health professionals (41.5%) found Lydia, the WIC center employee, to be the most relatable character. [SEE TABLE 1.13]
  - Black female non-health professionals and Other health professionals, saw the greatest gains in knowledge, including that homebirth midwives are "qualified professional healthcare providers" ( 4.6 and 8.1%), "provide intimate and individualized care" (3.8 and 2.2%) and "do a home visit 24 to 48 hours after birth and again at 2 weeks" (3.2 and 2.4%). [SEE TABLE 1.10-12]



Table 1.0 Audience Demographics (n=1100)		
	N	%
<b>Gender</b>		
Female	1,043	94.8
Male	48	4.4
Other	9	0.8
<b>Age</b>		
24 & under	90	8.2
25-34	374	34
35-44	291	26.5
45-54	159	14.5
55-59	186	16.9
<b>Race/Ethnicity</b>		
American Indian/ Alaska Native/Native Hawaiian/ Pacific Islander	11	1.0
Asian	39	3.5
Hispanic	107	9.7
Other	62	5.6
non-Hispanic Black	352	32.0
non-Hispanic White	529	48.1
<b>Relationship Status</b>		
Divorced	93	8.5
In a relationship	164	14.9
Married	612	55.6
Never married (single)	194	17.6
Other	37	3.4
<b>Education</b>		
Associate degree	129	11.7
Bachelor degree	448	40.7
Graduate-school degree	361	32.8
High school or GED	144	13.1
Less than high school	18	1.6
<b>Health Professional</b>		
No	405	36.8
Yes	695	63.2
<b>Type of health professional</b>		
Doctor or nurse	198	18
Lactation specialist	310	28.2
Advocate	407	37
Midwife	33	3
<b>Number of Children</b>		
0	304	27.6
1	233	21.2
2	307	27.9
3	157	14.3
4+	99	9
<b>Breastfed any child</b>		
No	67	8.3
Yes	739	91.69
<b>Heard, seen, read or learned anything about supporting breastfeeding mothers in the past six months</b>		
No	85	7.7
Yes	1,015	92.3
<b>Where heard, seen, read or learned about supporting breastfeeding mothers?</b>		
Family or friend	407	40.10
Medical professional	371	36.55
Flyer or information about the film	366	36.06
Magazine or newspaper	251	24.73
Podcast	137	13.50
TV	101	9.95
Outdoor billboards or posters	90	8.87
Radio	51	5.02

Table 1.1 Thinks breastfeeding comes naturally for all women.					
		PRE-SCREEN	POST-SCREEN	%-point Difference	p-value
NON-HEALTH PROFESSIONALS	BLACK FEMALE (N=138)	23.9 (33)	26.1 (36)	2.2	0.590
	OTHER (N=255)	22.4 (57)	22.4 (57)	0.0	1.000
HEALTH PROFESSIONALS	BLACK LACTATION PROFESSIONALS (N=88)	22.7 (20)	23.9 (21)	1.2	0.783
	WHITE LACTATION PROFESSIONALS (N=181)	11.6 (21)	14.4 (26)	2.8	0.276
	OTHER HEALTH PROFESSIONALS (N=426)	21.4 (91)	21.8 (93)	0.4	0.793

Table 1.2 Thinks the birth experience has a lot or some influence on a mother's ability to initiate breastfeeding.					
		PRE-SCREEN	POST-SCREEN	%-point Difference	p-value
NON-HEALTH PROFESSIONALS	BLACK FEMALE (N=138)	81.9 (113)	92 (127)	10.1	0.002
	OTHER (N=255)	88.6 (226)	94.5 (241)	5.9	0.004
HEALTH PROFESSIONALS	BLACK LACTATION PROFESSIONALS (N=88)	100 (88)	98.8 (79)	-1.2	1.000
	WHITE LACTATION PROFESSIONALS (N=181)	97.8 (177)	97.3 (178)	-0.5	0.319
	OTHER HEALTH PROFESSIONALS (N=426)	95.6 (407)	97.4 (415)	1.8	0.077

Table 1.3 When is the best time for a family to seek information about breastfeeding?					
		A few days after delivery	During the prenatal stage	When the baby is born	When the mother goes into labor
BLACK FEMALE (N=138)	PRE-SCREEN	1.4 (2)	97.1 (134)	0 (0)	1.4 (2)
	POST-SCREEN	1.4 (2)	96.4 (133)	2.2 (3)	0 (0)
	%-point Difference	0	-0.7	2.2	-1.4
	p-value	0.710			
OTHER (N=255)	PRE-SCREEN	0.8 (2)	95.7 (244)	3.5 (9)	0.4 (1)
	POST-SCREEN	1.6 (4)	94.9 (242)	3.1 (8)	0.4 (1)
	%-point Difference	0.8	-0.8	-0.4	0.4
	p-value	0.848			
BLACK LACTATION PROFESSIONALS (N=88)	PRE-SCREEN		98.9 (87)	1.1 (1)	
	POST-SCREEN		100 (88)		
	%-point Difference	0.00	1.10	-1.10	0.00
	p-value	0.317			
WHITE LACTATION PROFESSIONALS (N=181)	PRE-SCREEN		99.4 (180)		0.6 (1)
	POST-SCREEN		99.4 (180)		0.6 (1)
	%-point Difference	0	0	0	0
	p-value	0.655			
OTHER HEALTH PROFESSIONALS (N=426)	PRE-SCREEN	0.7 (3)	97.7 (416)	1.6 (7)	
	POST-SCREEN	0.7 (3)	97.4 (415)	1.9 (8)	
	%-point Difference	0	-0	0.3	0
	p-value	0.809			

Table 1.4 Why do you think some black mothers might not breastfeed?											
		Post-partum depression	Too expensive	No encouragement from partner	Fear baby not getting enough milk	Thinks it's old fashioned or outdated	Legacy of slavery	Not enough time	Thinks baby will get too attached	Pumping is too hard	Tired
BLACK FEMALE (N=138)	PRE-SCREEN	50.7 (70)	7.2 (10)	66.7 (92)	60.1 (83)	50.7 (70)	27.5 (38)	61.6 (85)	27.5 (38)	52.9 (73)	66.7 (92)
	POST-SCREEN	78.3 (108)	16.7 (23)	81.9 (113)	87 (120)	65.9 (91)	45.7 (63)	81.2 (112)	39.1 (54)	76.1 (105)	81.2 (112)
	%-point Difference	27.6	9.5	15.2	26.9	15.2	18.2	19.6	11.6	23.2	14.5
	p-value	0.000	0.003	0.001	0.000	0.001	0.000	0.000	0.007	0.000	0.000
OTHER (N=255)	PRE-SCREEN	56.1 (143)	12.2 (31)	71 (181)	60.4 (154)	49 (125)	30.6 (78)	58 (148)	29 (74)	48.6 (124)	62 (158)
	POST-SCREEN	85.1 (217)	29 (74)	89 (227)	89 (227)	71 (181)	57.6 (147)	82 (209)	36.9 (94)	78.4 (200)	82.7 (211)
	%-point Difference	29.0	16.8	18.0	28.6	22.0	27.0	24.0	7.9	29.8	20.7
	p-value	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.021	0.000	0.000
BLACK LACTATION PROFESSIONALS (N=88)	PRE-SCREEN	48.9 (43)	4.5 (4)	88.6 (78)	80.7 (71)	62.5 (55)	56.8 (50)	69.3 (61)	77.3 (68)	53.4 (47)	64.8 (57)
	POST-SCREEN	78.4 (69)	26.1 (23)	93.2 (82)	94.3 (83)	68.2 (67)	68.2 (60)	84.1 (74)	77.3 (68)	67 (59)	85.2 (75)
	%-point Difference	29.5	21.6	4.6	13.6	13.6	11.4	14.8	0.0	13.6	20.4
	p-value	0.000	0.000	0.288	0.003	0.009	0.016	0.000	1.000	0.012	0.000
WHITE LACTATION PROFESSIONALS (N=181)	PRE-SCREEN	49.2 (89)	15.5 (28)	85.1 (154)	79.6 (144)	56.4 (102)	55.2 (100)	58 (105)	57.5 (104)	43.1 (78)	61.3 (111)
	POST-SCREEN	83.4 (151)	34.3 (62)	91.7 (166)	95 (172)	72.4 (131)	69.1 (125)	82.9 (150)	59.7 (108)	71.8 (130)	84 (152)
	%-point Difference	34.2	18.8	6.6	15.4	16.0	13.9	24.9	2.2	28.7	22.7
	p-value	0.000	0.000	0.019	0.000	0.000	0.000	0.000	0.494	0.000	0.000
OTHER HEALTH PROFESSIONALS (N=426)	PRE-SCREEN	54.7 (233)	12 (51)	86.2 (367)	73.9 (315)	55.6 (237)	41.5 (177)	62.9 (268)	44.4 (189)	52.3 (223)	68.3 (291)
	POST-SCREEN	84 (358)	28.4 (121)	89.7 (382)	93.4 (398)	73.2 (312)	61 (260)	82.2 (350)	48.1 (205)	79.1 (337)	83.6 (356)
	%-point Difference	29.3	16.4	3.5	19.5	17.6	19.5	19.3	3.7	26.8	15.3
	p-value	0.000	0.000	0.092	0.000	0.000	0.000	0.000	0.113	0.000	0.000

Table 1.5 Which items are key for a mother to have an optimal breastfeeding experience?								
		Self care	Good nutrition	Reliable housing	Job security	Encouragement	Lactation support	Help around the house
BLACK FEMALE (N=138)	PRE-SCREEN	89.9 (124)	92 (127)	68.1 (94)	59.4 (82)	94.2 (130)	90.6 (125)	79.7 (110)
	POST-SCREEN	94.9 (131)	94.9 (131)	79 (109)	76.8 (106)	97.8 (135)	94.2 (130)	89.1 (123)
	%-point Difference	5.0	2.9	10.9	17.4	3.6	3.6	9.4
	p-value	0.054	0.288	0.003	0.000	0.107	0.199	0.020
OTHER (N=255)	PRE-SCREEN	92.2 (235)	94.9 (242)	75.7 (193)	65.1 (166)	94.1 (240)	91.4 (233)	79.6 (203)
	POST-SCREEN	96.5 (246)	93.3 (238)	87.1 (222)	84.7 (216)	98 (250)	98 (250)	92.2 (235)
	%-point Difference	4.3	-1.6	11.4	19.6	3.9	6.6	12.6
	p-value	0.000	0.318	0.000	0.000	0.010	0.001	0.000
BLACK LACTATION PROFESSIONALS (N=88)	PRE-SCREEN	87.5 (77)	69.3 (61)	69.3 (61)	61.4 (54)	95.5 (84)	98.9 (87)	78.4 (69)
	POST-SCREEN	90.9 (80)	78.4 (69)	80.7 (71)	84.1 (74)	97.7 (86)	96.6 (85)	87.5 (77)
	%-point Difference	3.4	9.1	11.4	22.7	2.2	-2.3	9.1
	p-value	0.366	0.057	0.031	0.000	0.422	0.340	0.073
WHITE LACTATION PROFESSIONALS (N=181)	PRE-SCREEN	79.6 (144)	65.2 (118)	73.5 (133)	61.9 (112)	96.7 (175)	97.2 (176)	76.2 (138)
	POST-SCREEN	89.5 (162)	80.1 (145)	86.7 (157)	80.1 (145)	98.3 (178)	98.9 (179)	92.3 (167)
	%-point Difference	9.9	14.9	13.2	18.2	1.6	1.7	16.1
	p-value	0.000	0.000	0.000	0.000	0.327	0.197	0.000
OTHER HEALTH PROFESSIONALS (N=426)	PRE-SCREEN	91.1 (388)	86.2 (367)	73.2 (312)	63.1 (269)	96.9 (413)	96.5 (411)	80.3 (342)
	POST-SCREEN	94.8 (404)	89.7 (382)	86.6 (369)	85.4 (364)	97.4 (415)	97.7 (416)	91.3 (389)
	%-point Difference	3.7	3.5	13.4	22.3	0.5	1.2	11
	p-value	0.006	0.025	0.000	0.000	0.638	0.200	0.000

Table 1.6 Which barriers do black mothers face with regards to breastfeeding?											
		Health providers assumptions about black mothers' disinterest in breastfeeding	Lack of information	Lack of access to professional support	Formula marketing to low income and/or black communities	Lack of confidence that their body is capable of producing enough milk	Lack of partner support	Lack of family support	Lack of community support	Short or no maternity leave	
BLACK FEMALE (N=138)	PRE-SCREEN	71 (98)	90.6 (125)	73.9 (102)	61.6 (85)	63 (87)	71 (98)	78.3 (108)	78.3 (108)	76.8 (106)	
	POST-SCREEN	76.8 (106)	96.4 (133)	88.4 (122)	69.6 (96)	84.8 (117)	84.8 (117)	85.5 (118)	83.3 (115)	83.3 (115)	
	%-point Difference	5.8	5.8	14.5	8.0	21.8	13.8	7.2	5.0	6.5	
	p-value	0.129	0.024	0.001	0.026	0.000	0.001	0.032	0.107	0.059	
OTHER (N=255)	PRE-SCREEN	68.2 (174)	84.7 (216)	78.4 (200)	72.5 (185)	64.7 (165)	80 (204)	78.4 (200)	77.3 (197)	72.9 (186)	
	POST-SCREEN	80.4 (205)	93.7 (239)	93.3 (238)	77.6 (198)	90.2 (230)	90.2 (230)	89.8 (229)	87.8 (228)	87.5 (223)	
	%-point Difference	12.2	9.0	14.9	5.1	25.5	10.2	11.4	10.5	14.6	
	p-value	0.000	0.000	0.000	0.062	0.000	0.000	0.000	0.000	0.000	
BLACK LACTATION PROFESSIONALS (N=88)	PRE-SCREEN	94.3 (83)	93.2 (82)	87.5 (77)	88.6 (78)	87.5 (77)	87.5 (77)	93.2 (82)	81.8 (72)	90.9 (80)	
	POST-SCREEN	97.7 (86)	98.9 (87)	95.5 (84)	89.8 (79)	97.7 (86)	92.0 (81)	92.0 (80)	92.0 (81)	93.2 (82)	
	%-point Difference	3.4	5.7	8	1.2	10.2	4.5	-2.3	10.2	2.3	
	p-value	0.192	0.093	0.059	0.739	0.023	0.320	0.528	0.013	0.565	
WHITE LACTATION PROFESSIONALS (N=181)	PRE-SCREEN	86.7 (157)	90.1 (163)	87.3 (158)	89 (161)	86.2 (156)	87.8 (159)	92.3 (167)	86.2 (156)	91.2 (165)	
	POST-SCREEN	90.1 (163)	95.0 (172)	95.0 (172)	90.6 (164)	95.6 (173)	92.3 (167)	91.7 (166)	93.9 (170)	93.9 (170)	
	%-point Difference	3.4	4.9	7.7	1.6	9.4	4.5	-0.6	7.7	2.7	
	p-value	0.109	0.022	0.002	0.468	0.001	0.060	0.782	0.005	0.133	
OTHER HEALTH PROFESSIONALS (N=426)	PRE-SCREEN	75.4 (321)	91.3 (389)	86.4 (368)	82.4 (351)	78.6 (335)	86.4 (368)	87.8 (374)	81.0 (345)	84.0 (358)	
	POST-SCREEN	87.3 (372)	97.9 (417)	93.4 (398)	85.2 (363)	93.2 (397)	93.2 (388)	91.1 (396)	93.0 (386)	92.7 (395)	
	%-point Difference	11.9	6.6	7	2.8	14.6	4.7	5.2	9.6	8.7	
	p-value	0.000	0.000	0.000	0.070	0.000	0.010	0.003	0.000	0.000	



		Hospital staff	Breastfeeding circle or support group	Health clinic	Online support group	Her partner	WIC center staff	Lactation professional	Midwife	Her family	Her friends
BLACK FEMALE (N=138)	PRE-SCREEN	68.1 (94)	93.5 (129)	55.1 (76)	57.2 (79)	55.8 (77)	70.3 (97)	88.4 (122)	68.8 (95)	69.6 (96)	60.9 (84)
	POST-SCREEN	56.5 (78)	96.4 (133)	63.8 (88)	63 (87)	66.7 (92)	87.7 (121)	94.2 (130)	88.4 (122)	75.4 (104)	71 (98)
	%-point Difference	-11.6	2.9	8.7	5.8	10.9	17.4	5.8	19.6	5.8	10.1
	p-value	0.012	0.291	0.027	0.181	0.012	0.000	0.047	0.000	0.169	0.022
OTHER (N=255)	PRE-SCREEN	78 (199)	92.9 (237)	73.3 (187)	66.3 (169)	60.8 (155)	75.7 (193)	90.2 (230)	71.4 (182)	78.8 (201)	78.4 (200)
	POST-SCREEN	75.3 (192)	97.3 (248)	75.7 (193)	76.1 (194)	78.8 (201)	93.3 (238)	97.6 (249)	93.7 (239)	85.1 (217)	83.1 (212)
	%-point Difference	-2.7	4.4	2.4	9.8	18	17.6	7.4	22.3	6.3	4.7
	p-value	0.327	0.020	0.414	0.000	0.000	0.000	0.001	0.000	0.018	0.083
BLACK LACTATION PROFESSIONALS (N=88)	PRE-SCREEN	81.8 (72)	100 (88)	75 (66)	77.3 (68)	71.6 (63)	92 (81)	97.7 (86)	79.5 (70)	73.9 (65)	68.2 (60)
	POST-SCREEN	78.4 (69)	100 (88)	83 (73)	77.3 (68)	85.2 (75)	97.7 (86)	100 (88)	94.3 (83)	83 (73)	81.8 (72)
	%-point Difference	-3.4	0	8	0	13.6	5.7	2.3	14.8	9.1	13.6
	p-value	0.364	1.000	0.068	1.000	0.006	0.032	1.000	0.002	0.072	0.009
WHITE LACTATION PROFESSIONALS (N=181)	PRE-SCREEN	87.3 (158)	96.7 (175)	75.1 (136)	74.6 (135)	77.3 (140)	95 (172)	98.9 (179)	83.4 (151)	81.8 (148)	80.7 (146)
	POST-SCREEN	85.6 (155)	100 (181)	81.8 (148)	82.3 (149)	86.7 (157)	96.7 (175)	98.9 (179)	97.2 (176)	87.8 (159)	87.3 (158)
	%-point Difference	-1.7	3.3	6.7	7.7	9.4	1.7	0	13.8	6	6.6
	p-value	0.533	1.000	0.033	0.010	0.001	0.260	1.000	0.000	0.011	0.010
OTHER HEALTH PROFESSIONALS (N=426)	PRE-SCREEN	81.7 (348)	96.9 (413)	73 (311)	72.3 (308)	70.7 (301)	87.1 (371)	95.8 (408)	77.9 (332)	76.1 (324)	73 (311)
	POST-SCREEN	79.8 (340)	98.1 (418)	79.6 (339)	79.8 (340)	83.3 (355)	96.5 (411)	96.5 (411)	95.8 (408)	85.4 (364)	83.8 (357)
	%-point Difference	-1.9	1.2	6.6	7.5	12.6	9.4	0.7	17.9	9.3	10.8
	p-value	0.294	0.169	0.001	0.000	0.000	0.000	0.492	0.000	0.000	0.000

Table 1.9 Which of the following are you most likely to do to support breastfeeding mothers in the next six weeks?

		Household chores	Babysit the baby	Deliver prepared meals	Babysit the other children in the household	Offer words of encouragement	Offer a pillow	Offer a glass of water	Assist mom with positioning baby to breastfeed
BLACK FEMALE (N=138)	PRE-SCREEN	37 (51)	26.8 (37)	31.9 (44)	34.1 (47)	85.5 (118)	32.6 (45)	39.9 (55)	47.8 (66)
	POST-SCREEN	56.5 (78)	41.3 (57)	60.1 (83)	46.4 (64)	92.8 (128)	50.7 (70)	55.8 (77)	53.6 (74)
	%-point Difference	19.5	14.5	28.2	12.3	7.3	18.1	15.9	5.8
	p-value	0.000	0.000	0.000	0.002	0.019	0.000	0.000	0.168
OTHER (N=255)	PRE-SCREEN	33.3 (85)	27.5 (70)	39.6 (101)	40.4 (103)	85.9 (219)	36.1 (92)	43.1 (110)	38.8 (99)
	POST-SCREEN	50.2 (128)	40 (102)	60.8 (155)	54.5 (139)	90.6 (231)	45.5 (116)	53.7 (137)	46.7 (119)
	%-point Difference	16.9	12.5	21.2	14.1	4.7	9.4	10.6	7.9
	p-value	0.000	0.000	0.000	0.000	0.034	0.000	0.000	0.002
BLACK LACTATION PROFESSIONALS (N=88)	PRE-SCREEN	42.0 (37)	27.3 (24)	40.9 (36)	42.0 (37)	96.6 (85)	53.4 (47)	62.5 (55)	90.9 (80)
	POST-SCREEN	50.0 (44)	35.2 (31)	58.0 (51)	46.6 (41)	93.2 (82)	64.8 (57)	68.2 (60)	95.5 (84)
	%-point Difference	8	7.9	17.1	4.6	-3.4	11.4	5.7	4.6
	p-value	0.105	0.001	0.048	0.315	0.264	0.006	0.162	0.162
WHITE LACTATION PROFESSIONALS (N=181)	PRE-SCREEN	26.5 (48)	15.5 (28)	29.8 (54)	26.0 (47)	91.7 (166)	48.1 (87)	51.4 (93)	89 (161)
	POST-SCREEN	37 (67)	48.1 (87)	23.8 (43)	39.2 (71)	92.3 (167)	58 (105)	61.3 (111)	90.6 (164)
	%-point Difference	10.5	32.6	-6	13.2	0.6	9.9	9.9	1.6
	p-value	0.000	0.002	0.000	0.000	0.809	0.002	0.002	0.406
OTHER HEALTH PROFESSIONALS (N=426)	PRE-SCREEN	37.3 (159)	26.1 (111)	43.4 (185)	39.4 (168)	93.7 (399)	45.8 (195)	54.2 (231)	72.3 (308)
	POST-SCREEN	51.9 (221)	37.3 (159)	62.2 (265)	51.9 (221)	93.4 (398)	59.9 (255)	65.5 (279)	75.4 (321)
	%-point Difference	14.6	11.2	18.8	12.5	-0.3	14.1	11.3	3.1
	p-value	0.000	0.000	0.000	0.000	0.862	0.000	0.000	0.085

Table 1.10 Agree that homebirth midwives: Are qualified professional healthcare providers.

		PRE-SCREEN	POST-SCREEN	%-point Difference	p-value
NON-HEALTH PROFESSIONALS	BLACK FEMALE (N=138)	89.3 (117)	93.9 (123)	4.6	0.128
	OTHER (N=255)	88 (213)	97.9 (237)	9.9	0.000
HEALTH PROFESSIONALS	BLACK LACTATION PROFESSIONALS (N=88)	95.1 (77)	98.8 (80)	3.7	0.077
	White Lactation Professional (N=181)	94.8 (165)	94.8 (165)	0	0.974
	OTHER HEALTH PROFESSIONALS (N=426)	86.9 (346)	95 (378)	8.1	0.000

Table 1.11 Agree that homebirth midwives: Provide intimate and individual care with appointments sometimes lasting an hour or more.

		PRE-SCREEN	POST-SCREEN	%-point Difference	p-value
NON-HEALTH PROFESSIONALS	BLACK FEMALE (N=138)	96.2 (126)	100 (131)	3.8	0.023
	OTHER (N=255)	93.9 (233)	98.8 (245)	4.9	0.002
HEALTH PROFESSIONALS	BLACK LACTATION PROFESSIONALS (N=88)	97.6 (81)	98.8 (82)	1.2	0.547
	WHITE LACTATION PROFESSIONALS (N=181)	97.7 (172)	99.4 (175)	1.7	0.176
	OTHER HEALTH PROFESSIONALS (N=426)	96.8 (396)	99 (405)	2.2	0.001

Table 1.12 Agree that homebirth midwives: Do a home visit 24 to 48 hours after birth and again at 2 weeks.

		PRE-SCREEN	POST-SCREEN	%-point Difference	p-value
NON-HEALTH PROFESSIONALS	BLACK FEMALE (N=138)	92.9 (118)	96.1 (122)	3.2	0.218
	OTHER (N=255)	90.5 (220)	96.3 (234)	5.8	0.003
HEALTH PROFESSIONALS	BLACK LACTATION PROFESSIONALS (N=88)	93.9 (77)	93.9 (77)	0	0.944
	WHITE LACTATION PROFESSIONALS (N=181)	97.6 (165)	98.8 (167)	1.2	0.152
	OTHER HEALTH PROFESSIONALS (N=426)	93.4 (382)	95.8 (392)	2.4	0.032

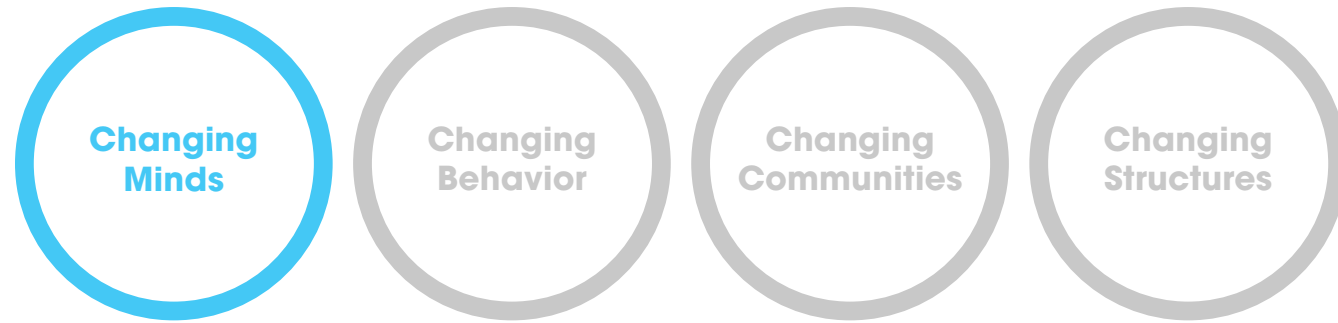
Table 1.13 Which character in the film did you relate to the most?

		Lydia - The Lactation Specialist	Racha - The Midwife	Tami - The New Mom
BLACK FEMALE (N=138)	N	20	31	87
	%	14.5	22.5	63
OTHER (N=255)	N	86	54	115
	%	33.7	21.2	45.1
BLACK LACTATION PROFESSIONALS (N=88)	N	44	26	18
	%	50	29.5	20.5
WHITE LACTATION PROFESSIONALS (N=181)	N	119	29	33
	%	65.7	16	18.2
OTHER HEALTH PROFESSIONALS (N=426)	N	177	106	143
	%	41.5	24.9	33.6

Table 1.14 Depiction of themes and issues in the film

		I have learned something new about supporting breastfeeding from this film.	The film accurately depicts the lives and experiences of black mothers.	I have personally experienced the issues depicted in the film or know someone else who has.
BLACK FEMALE (N=138)	N	131	132	111
	%	94.9	95.7	80.4
OTHER (N=255)	N	247	247	161
	%	96.9	96.9	63.1
BLACK LACTATION PROFESSIONALS (N=88)	N	80	86	84
	%	90.9	97.7	95.5
WHITE LACTATION PROFESSIONALS (N=181)	N	171	178	146
	%	94.5	98.3	80.7
OTHER HEALTH PROFESSIONALS (N=426)	N	403	414	305
	%	94.6	97.2	71.6

## SOCIAL IMPACT



Chocolate Milk: The Documentary was instrumental in changing beliefs about breastfeeding because audiences found the content both realistic, relatable and informative. The majority of our target audience of Black women felt the film accurately depicted the lives and experiences of black mothers and all the survey respondents reported having personally experienced the issues depicted in the film or knowing someone else who had. As a result, the film's narrative was effective in transporting audiences and shifting their attitudes about breastfeeding in several areas: its connection to the birth experience, barriers for black women, and key factors to an optimal experience.

### CONNECTION BETWEEN BIRTH AND BREASTFEEDING

Less than 25% of all survey respondents believed that breastfeeding comes naturally for all women. While this belief went relatively unchanged, there was a 10% increase among Black female non-health professionals who believed the birth experience has a lot or some influence on a mother's ability to initiate breastfeeding.

One goal of the film was to encourage black mothers to stop suffering in isolation after they were discharged from hospitals and to solicit help from community-based resources, as well as their partners and families. After seeing the film, black women's views on where a mother should seek breastfeeding support expanded, with fewer women citing "Hospital staff," which actually declined by 11.6%, and more women citing "Midwives" (19.6%), "WIC staff" (17.4%), "Her partner" (10.9%) and "Her friends" (10.1%).

Additionally, the film raised awareness among black women about alternative birth and breastfeeding services. Increases were modest due to high baseline knowledge, but the number of black women who agreed that homebirth midwives are "Qualified professional healthcare providers" did increase by 4.6%, "Provide intimate and individual care" by 3.8%, and "Do a home visit 24 to 48 hours after birth" by 3.2%.

### BARRIERS TO BREASTFEEDING FOR BLACK WOMEN

There was a considerable increase in awareness among Lactation and Other health professionals for all the reasons listed for why some black mothers may discontinue breastfeeding, with the exception of "No encouragement from partner" and "Thinks baby will get too attached" which

remained relatively constant. The greatest shift in awareness was for "Post-partum depression," which climbed by 34.2% for White Lactation professionals, 29.5% for Black Lactation professionals, and 29.3% for Other health professionals. Other reasons that saw considerable increases were "Pumping is too hard" and "Not enough time," demonstrating that the film was successful in dispelling the myth that black women simply didn't want to breastfeed.

Additionally, while most Lactation and Other health professionals had considerable baseline knowledge of the breastfeeding barriers listed for black women, "Lack of confidence that their body is capable of producing enough milk" and "Lack of community support" saw the greatest increase in awareness growing by as many as 14.6 and 10.2 percentage points, respectively. Black women had less relative baseline knowledge of the breastfeeding barriers for black mothers and saw the greatest shifts in awareness for "Lack of confidence that their body is capable of producing enough milk" by 21.8% and "Lack of access to professional support" by 14.5%.

### KEYS TO AN OPTIMAL BREASTFEEDING EXPERIENCE

Another goal of the film was to equip audiences with knowledge of some key factors that may contribute to a mother's breastfeeding success. Black women saw significant increases in identifying "Job security" (17.4%), "Reliable housing" (10.9%), "Help around the house" (9.4%), and "Self-care" (5%), while others factors remained relatively constant since they were already high at baseline, such as "Encouragement," "Good nutrition" and "Lactation support."

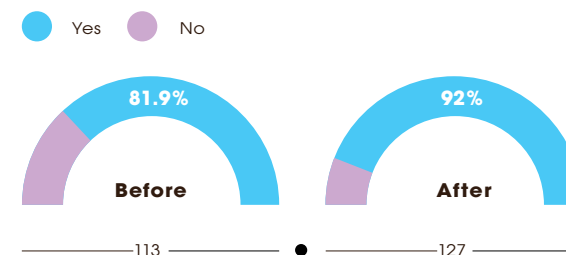
All health professionals had significant increases in identifying "Job security" and "Reliable housing" as key, including Black Lactation professionals (22.7% and 11.4%), White Lactation professionals (18.2% and 13.2%) and Other health professionals (22.3% and 13.4%), respectively. Most health professional groups had high baseline measures for "Encouragement," "Lactation support," and "Self Care," and saw less change, outside of White Lactation professionals who increased agreement with "Self care" by 9.9%.

*"This was a great event: we were able to educate the community about the barriers African American women face day-to-day to meet their breastfeeding goals in our neighborhoods."*

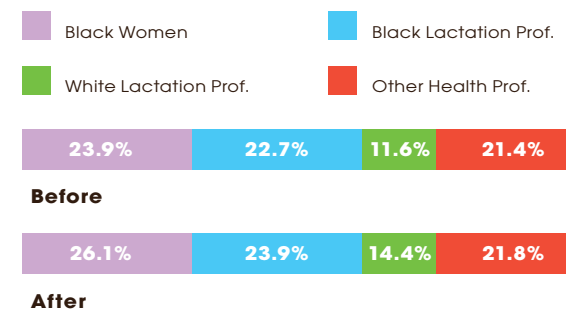
**Patricia Gaige, Florida Department of Health in Orange County WIC Program, Orlando, FL**



### BLACK WOMEN WHO BELIEVE THE BIRTH EXPERIENCE INFLUENCES THE ABILITY TO INITIATE BREASTFEEDING



### RESPONDENTS WHO BELIEVE BREASTFEEDING COMES NATURALLY FOR ALL WOMEN

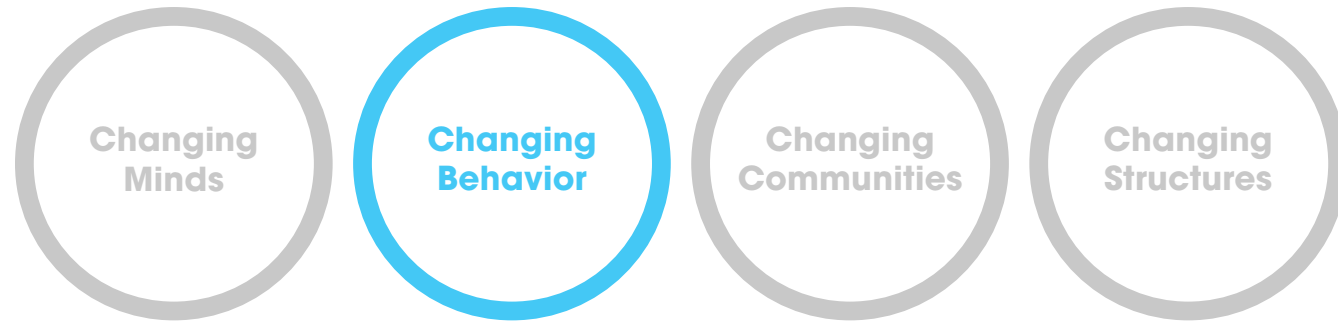


### IMPACT TRACKING

- Increased understanding of the connection between the birth experience and the ability to initiate breastfeeding
- Changed attitudes on the most reliable sources of breastfeeding support for mothers
- Raised awareness about the level of quality care provided by homebirth midwives
- Expanded knowledge about the various barriers to breastfeeding for black mothers
- Highlighted the key factors necessary for an optimal breastfeeding experience



## SOCIAL IMPACT



The film sought to change behavior towards breastfeeding by reframing it as an accepted practice and lost tradition that black communities must protect and support. By depicting real women who sought or received breastfeeding support from their families, friends and community-based birth or breastfeeding workers, the film models actionable steps for how to find or offer assistance. As a result, over 94% of respondents reported learning something new about supporting breastfeeding from watching the film, with the exception of Black Lactation professionals who agreed at 90.9%, likely due to having more baseline knowledge than the average audience member.

### WHEN TO SEEK BREASTFEEDING EDUCATION

Because families often wait until “The baby is born” to seek information about breastfeeding, one objective of the film is to shift behavior towards early education, i.e., seeking breastfeeding information “During the prenatal stage.” However, baseline agreement among target audiences of Black women and health professionals that “During the prenatal stage” is the best time for a family to seek information about breastfeeding was already over 97%, so there was little shift after seeing the film.

### RECOMMENDATIONS FOR BREASTFEEDING MOTHERS

Generally, when a mother struggles with initiating breastfeeding, the typical advice is for her to “Ask for help” or “Use formula.” The latter can lead to a drop in milk supply, while the former may lead to frustration when help is either unavailable or ineffective. However neither suggestion addresses the misconception that breastfeeding should be easy simply because it is natural. To counter this, the film sought to portray breastfeeding as a skill that must be learned. As a result, there was a significant decline in respondents who would recommend “Ask for help,” “Try pumping,” and “Use formula,” while “Don’t give up” was the only recommendation to increase after respondents saw the film, especially among Black women who saw the biggest drop in “Ask for help” (-14.5%) and increase in “Don’t give up” (17.4%).

Before seeing the the film, the most common recommendations for where a mother should seek breastfeeding support was “Breastfeeding circle or support group” and “Lactation professional” across target audiences of Black women and health providers. Interestingly, after seeing the film, “Hospital staff” was the only recommendation to see a decline for all respondents; this change was most significant for Black women at -11.6 percentage points. “Midwife” was the recommendation

which saw the greatest increase across target audiences, increasing the most with Black women by 19.6 percentage points, followed by “WIC center staff” and “Her partner.”

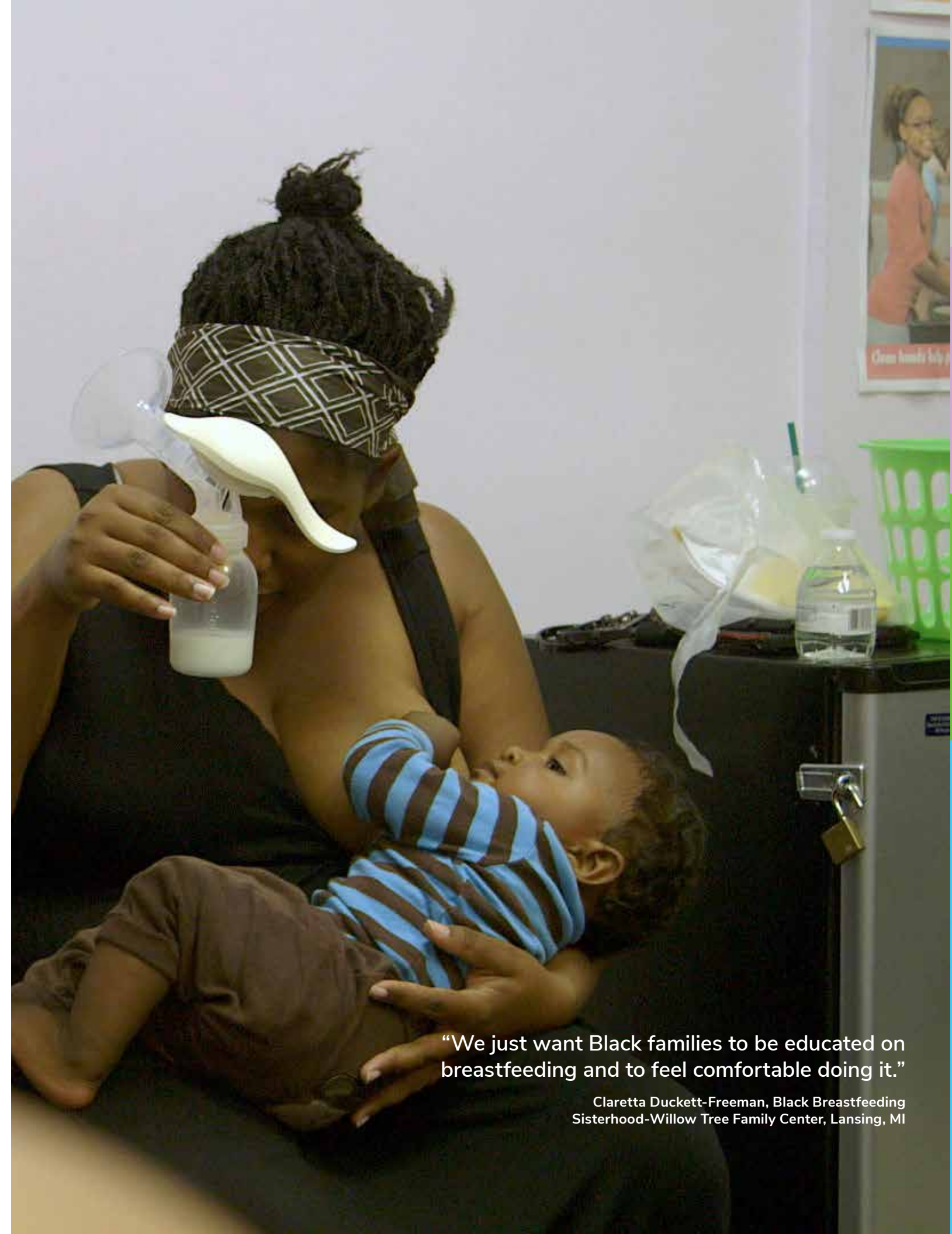
### ACTIONS TO SUPPORT BREASTFEEDING MOTHERS

The ultimate goal of the film was to empower audiences with actionable steps they could take to support black breastfeeding mothers. After viewing the film, most audience members expressed the intention to take more actions to support breastfeeding mothers. Black women had a significant increase in all the listed behaviors they would most likely do to support breastfeeding mothers. The greatest shift was in “Deliver prepared meals” which increased 28.2 percentage points after seeing the film, followed by “Household chores” at 19.5, “Offer a pillow” at 18.1, and “Offer a glass of water” at 15.9.

Aside from “Offer words of encouragement,” which was already over 90% at baseline, Black and White Lactation and Other health professionals had a significant increase in all the listed behaviors they would most likely do to support breastfeeding mothers. The greatest percentage point increase after seeing the film was for “Deliver prepared meals” among Black Lactation professionals (17.1%) and Other health professionals (18.8%) and “Babysit the baby” among White Lactation professionals (32.6%).

### IMPACT TRACKING

- Confirmed most audience members recommend “During prenatal stage” as the best time to seek breastfeeding information
- Shifted what audience members were most likely to recommend to a mother struggling with breastfeeding from “Ask for help” to “Don’t give up”
- Influenced where audience members were likely to recommend a mother find support
- Increased likelihood audience members will take actions to support breastfeeding mothers

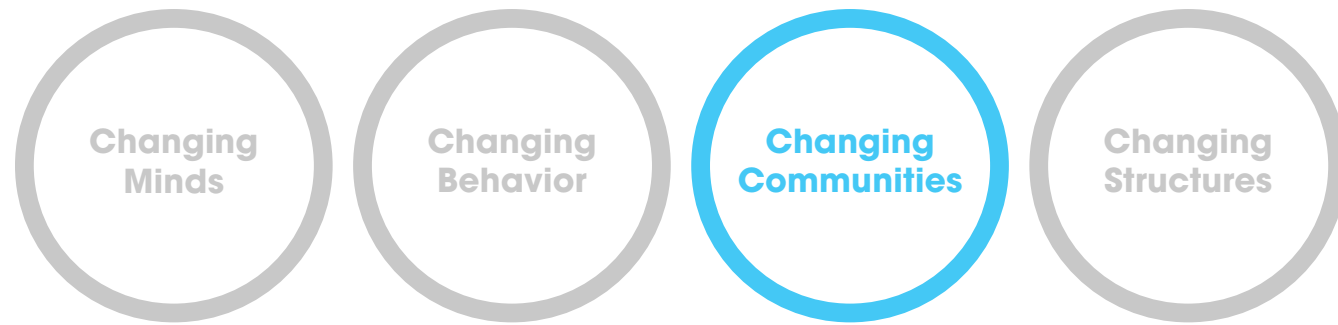


“We just want Black families to be educated on breastfeeding and to feel comfortable doing it.”

Claretta Duckett-Freeman, Black Breastfeeding Sisterhood-Willow Tree Family Center, Lansing, MI



## SOCIAL IMPACT



### ENGAGING INFLUENCERS AT EARLY STAGE

Chocolate Milk developed a grassroots impact strategy early on, starting with a small focus group of black lactation workers and mothers from Southern California in 2014. The session lasted several hours as attendees worked their way through a list of questions regarding the perception of breastfeeding in the African American community.

This early engagement with stakeholders helped build credibility within the target community and led to introductions with mothers willing to share their personal breastfeeding. These on-camera interviews became web episodes for *Chocolate Milk: The Documentary Series*, which along with curated content from news articles and posts from other users, helped build a web presence on several social media platforms for *Chocolate Milk*.

DVDs of the web series were commissioned by the National Medical Association and distributed to 1500 Ob-Gyn medical offices around the country. From 2014 to 2016, episodes from the series were screened at a dozen health conferences around the country. With this exposure, *Chocolate Milk* helped increase normalcy around the issue, contribute to the number of images of black breastfeeding mothers, and introduce the importance of collecting stories as a form of advocacy for reproductive justice.

An email list to share the latest webisodes from the series was created and social media followers grew by word-of-mouth. This organic grassroots approach came to shape the entire campaign strategy for audience development as *Chocolate Milk* evolved from a documentary web series to a feature-length film over five years. Five key components remained consistent features as the campaign evolved:

- A community-based focus
- A word-of-mouth marketing approach
- Clear and distinct branding
- Free and publicly-accessible content
- Centering black mothers' voices and stories

### FINDING AN AUTHENTIC VOICE

*Chocolate Milk: The Documentary Series* served as a form of research and development as the filmmaker interviewed

members of the black breastfeeding community. Drawing on her public health experience in ethnographic research, the filmmaker collected over forty interviews from mothers and lactation experts in cities across the United States, including Los Angeles, Oakland, Detroit, Atlanta, and New Orleans. The documentary series provided critical insight into the range of birth and breastfeeding experiences of black mothers and a deeper understanding of the nuanced factors of sex and race that influence racial breastfeeding disparities. However, after three years of producing the series, the 3-minutes or less format of each episode proved to be too limited to fully explore these nuances and a less restrictive platform was needed.

Positive feedback from the 400,000 plus online viewers and conference attendees who watched the web series convinced the filmmaker that a feature film would be well received. Building on lessons from the series, the filmmaker refined her approach to storytelling and community engagement to increase the reach and effectiveness of the film. The film's main subjects were carefully selected to speak to the different perspectives of the black breastfeeding experience, from new mothers to under-resourced black lactation and birth workers. This approach uniquely positioned the film to inspire dialogue among Black families and the health providers who may influence their decision to breastfeed.

*"We had a great turnout and great discussion that is still continuing months later as a result of this screening... I left feeling energized and motivated to make changes and feel confident that the audience felt the same."*

**Michelle Compton, Peoria City/County Health Department, Peoria, IL**

The filmmaker screened *Chocolate Milk: The Documentary* in various stages of production at five different state and national maternal and infant health conferences to develop word-of-mouth buzz, gauge

reactions and collect immediate feedback from audiences, creating a sense of ownership among stakeholders. Black women became the film's greatest champions through online engagement, sharing the web series and discussing the upcoming film in their social networks. Screenings of the film's work-in-progress allowed the filmmaker to gauge whether audiences felt the content was authentic and engaging. Conference attendees were fiercely supportive, on one occasion even defending the film's artistic approach against an attendee who questioned the authenticity of its depiction of black mothers. This response reassured the filmmaker that not only was the representation of black mothers truthful, but a desperately needed counter to normalized stereotypes.

### MOBILIZING COMMUNITIES TO BYPASS TRADITIONAL DISTRIBUTION

A hybrid distribution model was adopted for *Chocolate Milk*, starting with a semi-theatrical release before pursuing more traditional theatrical and streaming options. The semi-theatrical release (i.e., community screenings) targeted the film's core audience of black mothers and black breastfeeding organizations to mobilize communities to use the film as a tool and resource for public education. Organizations rallied around the film as a celebration of the voices and experiences of black families.

In 2017, the filmmaker began a soft launch of the film campaign with screenings of the work-in-progress for *Chocolate Milk* at five national breastfeeding conferences. These sneak previews raised awareness and anticipation for the film, making it easier to recruit organizations to host community screenings two years later. In 2019, the filmmaker began inviting organizations to host community screenings of an early preview of *Chocolate Milk*. The early preview of the film was essentially an unfinished 90-minute rough cut without music or graphics. By using an unfinished version, the filmmaker was able to preserve *Chocolate Milk's* film festival-eligibility and leave room to incorporate audience feedback. The filmmaker made several stipulations in exchange for providing the film to organizations for free, among them that audiences could not be charged for admission, no photography or recording was permitted, and the screening had to take place in August.

By timing the screenings in August for National Breastfeeding Month and Black Breastfeeding Week, the filmmaker hoped to attract organizations by 1) providing an activity they could add to their event calendar that engaged and excited the public about the issue; 2) limiting access to one month out of the year to increase the film's perceived value; and 3) adding the prestige of "premiering" the early cut of the film for their city or region. By making the film available for free via on-demand streaming, the filmmaker hoped to ensure as many organizations as possible could participate. In February 2019, email invitations to host a free community screening were sent to *Chocolate Milk's* existing network. Two months later, a dedicated Screening & Outreach Coordinator joined the team and began identifying and reaching out to maternal and infant health organizations in every state, as well as community health centers and schools. Organizations were recruited through a combination of emails, phone calls, social media and word-of-mouth. They were provided with guidelines for how to sign up to host a screening and their community demographics were collected to ensure the film would reach its target audience.

By June 2019, the goal of recruiting 200 organizations was reached, with 253 community screenings scheduled in 36 states. Over half of participating organizations anticipated audience sizes ranging from "25 to 50" and "50 or more" attendees. Tip sheets, a training webinar and a screening kit were provided to help organizers prepare. A promotional packet with digital flyers, film stills, and branding assets were provided to help organizers publicize their events. The

flyers had blank spaces where organizations could insert their logos, names and details about their individual screenings. Some neighboring organizations pooled resources to host joint events, while others found sponsors to cover expenses. This decentralized approach allowed the film campaign to reach an estimated 10,000 people across the U.S with minimal expenses outside of hiring a screening & outreach coordinator and third-party vendor to generate encrypted-links to stream the film.

For some organizations, this was their first community screening event and they came away with new skills and experience. *Chocolate Milk* also provided a valuable platform for organizations to draw press coverage, raise funds and increase visibility in their communities. Greater Harrisburg Healthy Start represented the typical community screening event, with free admission to the public, raffles, refreshments, trivia, a Q&A with local lactation consultants about the state of breastfeeding education and support for black mothers, and an appearance from a state

representative. Many organizations reported that attendees were not aware of the community services they provided until attending the screening and expressed a willingness to share the information with others.

*"It was great to see the community coming together to watch the screening. The event was very well received. We engaged with midwives, doulas, IBCLC, CLC and Breastfeeding Peer Counselors and other nearby Health Departments."*

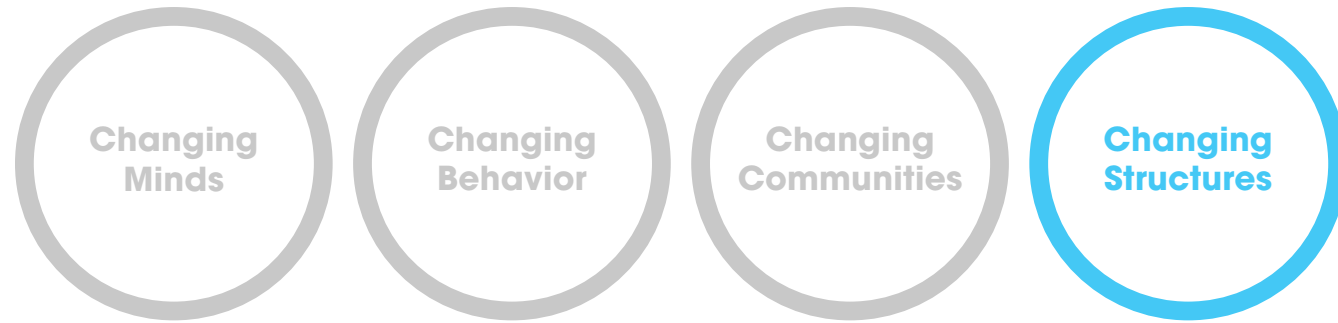
**Patricia Gaige, Florida Department of Health in Orange County WIC Program**



BreastfeedLA Community Screening of *Chocolate Milk*  
Photo Credits: Elizabeth Millay



## SOCIAL IMPACT



### REFRAMING THE NARRATIVE

There is an ongoing debate as to what constitutes breastfeeding success, with exclusive breastfeeding and formula on opposite ends of the spectrum and duration as the only benchmark. But this all-or-nothing perspective leaves mothers feeling guilty for not achieving breastfeeding perfection. To avoid blaming and shaming mothers, the language and tone in *Chocolate Milk* reframed the debate to be about isolation versus support. Mothers in the film discuss their breastfeeding goals, but the focus is less on the duration of exclusive breastfeeding and more on the support they seek to reach these goals.

Another debate in breastfeeding circles is what constitutes exclusive breastfeeding, with many citing nursing directly at the breast as the only acceptable definition. The film's narrative is more inclusive, accepting broader definitions that include bottle feeding breastmilk and even combination feeding with breastmilk and infant formula. Rather than criticize moms for formula use, our goal was to 1) celebrate any breastmilk a baby receives as a success, 2) encourage mothers to do their best and seek support and 3) advocate for communities to take responsibility for providing that support.

Given the disparities black mothers experience, from low breastfeeding initiation rates to high maternal mortality, there was a risk the film would take a somber and even desperate mood. *Chocolate Milk* takes a more uplifting tone, capturing the daily routines and pivotal moments of black families' lives with humor, dignity and joy. Allowing black mothers to tell their own stories helps reframe the narrative and humanize their experience. By centering stories over statistics, *Chocolate Milk* aims to make breastfeeding a mainstream symbol of today's reproductive justice movement.

### MARKETING & PR STRATEGY

In 2016, the director of *Chocolate Milk* began appearing on podcasts and blogs aimed at mothers and maternal health workers to speak about the film. These appearances, along with several screenings of the work-in-progress at maternal and infant health conferences and a press release about a grant awarded by the W.K.Kellogg Foundation, marked *Chocolate Milk's* first engagement with the press.

In 2019, the team mobilized its 200 participating organizations to reach out to local media about their community screenings. Tip sheets with recommendations on when and how to engage the press were shared through weekly e-newsletters along with a press kit with more details for interested reporters. In addition, scheduling the community screenings in August helped make it easier for organizations to pitch media outlets.

*"We loved hosting this documentary, and would happily do it again. It was great to have a positive and personal spin on the perspectives of the breastfeeding parents, rather than just doom and gloom statistics... We love the work you're doing and hope to partner and support in any way we can. Thank you for the opportunity!"*

**Emily Little, Nurturely, Eugene, OR**

Timing the community screenings during August was an effort to build on the breastfeeding community's earlier steps towards public outreach. In 1992, the World Alliance for Breastfeeding Action (WABA) celebrated Word Breastfeeding Week on August 1-7. In 2011, the United States Breastfeeding Committee (USBC) declared that August was National Breastfeeding Month. And in 2013, stakeholders from the black breastfeeding community established August 25-31 as Black Breastfeeding Week.

As a result of these efforts, 40% of organizations who completed an exit interview reported engaging the press. Stories about the work of our participating organizations and their community screenings of *Chocolate Milk* appeared in print, radio and television, including the Orlando Sentinel Newspaper, The Touch 95.5FM in Kalamazoo, MI, On Common Ground News in Dekalb, GA, the Times Herald-Record in Middleton, NY and Fox 11 News in Northern Nevada. 97.3% of organizations who completed the exit survey reported using social media to promote their screening event and 48.6% reported an increase in social media followers and subscriptions to their email list.

### GALVANIZED SUPPORTERS WITH ADDED CONTENT

The tip sheets shared by the *Chocolate Milk* team provided advice on how to: 1) identify venues to hold their community screenings, 2) collaborate with local organizations to host joint screenings, 3) attract sponsors, and 4) promote their screening events to the public. Our more seasoned organizers were even asked to share best practices with the other organizations. Some hosts were inspired to create entire day-long events centered around the film, with family activities, health fairs and panel discussions with experts and policymakers.



20% of organizations who completed exit interviews reported engaging with policymakers about half of organizations who engaged with policymakers reported having a government official, council member, or representative from the mayor's office attend their screening.

The screening & survey kit was available for download and physical copies were mailed on request. The kit was divided into three chapters - introduction, community screening and audience survey. These chapters helped organizers explain the event to their colleagues, troubleshoot issues that may arise with streaming the film, and conduct the audience surveys before and after the film. The kits were user-friendly, with large type, bold colors, thick pages and spiral binding to make them easy for facilitators to hold and use on-site.

### CREATED NATIONAL PLATFORM

The team was able to coordinate community screenings in 36 states by effectively leveraging existing relationships with national organizations like the National Women Infant and Children Association (NWA) and La Leche League to expand their network. As a result, 53 WIC centers and 24 La Leche League groups across the U.S participated, making up a third of our 200 participating organizations. Over half of our participating organizations were maternal and infant health groups (108), with terms like breastfeeding, milk, baby and birth appearing in their names. Additional groups included 83 health and medical centers, followed by 12 universities and schools, demonstrating the campaign's ability to reach beyond the primary target audience of African American women.

The campaign not only raised the profile of the film and the stories of African American mothers, but inspired structural changes as well. Organizations who participated in the exit survey reported creating support groups closer to underserved communities and establishing breastfeeding rooms for families as a result of screening the film. The

filmmaker attended the community screenings of several participating organizations during National Breastfeeding Month, including the New Orleans Breastfeeding Center, BreastfeedLA in Los Angeles, Black Women Birthing Justice (BWBJ) and the Black Cultural Outreach Taskforce (BCOT) in Oakland, and RVA Breastfeeds in Richmond, VA. There have been numerous requests to host additional screenings and have the filmmaker speak in 2020.



RVA Breastfeeds Community Screening of *Chocolate Milk*

Pictured at top from left to right: Daytriel McQuinn-Nzassi, Clovia Lawrence, Chrystal Wells, IBCLC, Elizabeth Bayne, State Senator Jennifer McClellan, Dr. Vanessa Walker Harris (Director of the VDH Office of Family Health Services), Dr. Lauren Powell (VDH Director of the Office of Health Equity), and Jarene Fleming (VDH, State Breastfeeding Coordinator).

Pictured at bottom from left to right: Chrystal Wells, Daytriel McQuinn-Nzassi, Clovia Lawrence, Elizabeth Bayne, and Jarene Fleming.

Photo Credits: Virginia Department of Health

*"I am now hosting monthly breastfeeding talks at the location of the venue."*

**Rose Hurd, Welcome Every Baby, Tulsa, OK**

## CONCLUSION





# ACTIVITIES & OUTCOMES

Chocolate Milk: The Documentary was instrumental in increasing community support for black breastfeeding mothers by galvanizing organizations, the public, and policymakers through the 253 community screenings of the film held in August 2019. The early cut of the film resonated with viewers and successfully changed audience beliefs and intended behaviors around supporting breastfeeding mothers. In addition, the screenings became a rallying point for stakeholders to form partnerships across organizations and engage government officials in dialogue about greater protections for all breastfeeding mothers.

Early research drawn from the documentary series allowed the filmmaker to produce a film that is both realistic, relatable and informative. As a result, the majority of our target audience of Black women felt the film accurately depicted the lives and experiences of black mothers and reported having personally experienced the issues depicted in the film or knowing someone else who had. In addition, secondary audiences of health providers and lactation workers gained greater empathy and understanding of the barriers to breastfeeding for black mothers and reported learning new ways to provide support.

## Production Budget Total: \$186,749

- WK Kellogg Foundation Grant
- Center for Cultural Innovation CEDF Grant
- Reaching Our Sisters Everywhere (ROSE)
- Black Mothers' Breastfeeding Association (BMBFA)
- Healthy Children Project, Center for Breastfeeding
- Deborah Griffiths
- Rebecca Costello
- Theodore Jones
- Dorothy Bourgeois de Apodaca
- Devon Miller
- Chantal Molnar
- Margaret McCann
- Jasmine Sims
- Elizabeth Bayne

### WITH IN-KIND SUPPORT FROM

- Independent Filmmaker Project
- Sandra Valde-Hansen
- Chapman University Entertainment Law Clinic

## Campaign Budget Total: \$30,000

- WK Kellogg Foundation Grant

### WITH IN-KIND SUPPORT FROM

- National WIC Association
- US Breastfeeding Coalition
- Virginia WIC Association
- RVA Breastfeeds
- Breastfeeding & Feminism International Conference

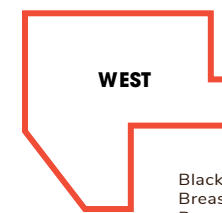
## Future Plans

The specific goals to be accomplished in 2020 are 1) to license community screener versions of the film to organizations by request and 2) to complete the finished version of the film. The finished version will include a revised edit, original music, color correction, and motion graphics. In order to increase the likelihood that the project will be self-sustaining by the end of the grant period, the filmmaker will 1) pursue public television broadcast for the finished version of Chocolate Milk, 2) pursue film festival distribution and 3) ultimately make the film available for download or streaming service online. Due to its focus on collecting individual stories and utilizing social media and local organizations for distribution, the project has a distinctly community-based approach that lends itself to adoption for other health and social issues.

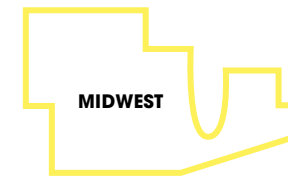
## Dissemination

The evaluation findings from the film's social impact campaign have been summarized in the pages of this report and will be made publicly available and shared with the participating organizations that hosted community screenings in August 2019.

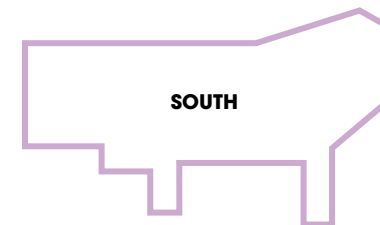
## Participating Organizations



- Black Infant Health Program
- Breastfeeding Hawaii
- BreastfeedLA
- Colorado Breastfeeding Coalition
- Delta Healthcare
- Flourishing Families
- iDREAM for Racial Health Equity
- Kaiser Permanente Antioch Medical Center
- Kijiji Sisterhood
- La Leche League of Steamboat Springs
- Las Vegas Urban League WIC
- Mahogany Moms
- Normalize Breastfeeding
- Nurturely
- RiverStone WIC
- Roots Community Health Center
- Sacramento Breastfeeding Coalition
- Solano County Black Infant Health Program
- South Los Angeles Health Projects LA BioMed WIC
- Southern Nevada Breastfeeding Coalition
- The National Coalition 100 Black Women
- Tri County Health Department
- Washington State WIC Nutrition Program
- Western Slope Breastfeeding Coalition



- Affinia WIC Department
- African American Breastfeeding Network Inc.
- Anoka County Public Health Department
- Black Women's Wealth Alliance, SBC
- Clyde Malone Community Center
- Genesee County Breastfeeding Coalition
- HealthConnect One
- Hennepin County Public Health
- Indiana Breastfeeding Coalition
- Kalamazoo County Breastfeeding Coalition
- Kearney Community Breastfeeding Initiative
- Latch on SA
- Maternal & Child Health Student Org.
- Maya Whyte
- MCDBOH WIC Program
- McLean County Health Department
- Michigan Department of Health & Human Services
- Mother & Child Health Coalition
- Northern Nevada Breastfeeding Coalition
- NWCSA Douglas County WIC
- Peoria City/County Health Department
- Public Health Madison & Dane County
- Racine Kenosha Community Action Agency
- Saline County Health Department
- Shawnee County Health Department
- Southeast Michigan IBCLC's of Color
- St. Bernard Hospital
- St. Francois County Health Center WIC
- Uzazi Village
- Vista Medical Center
- Well Child Center
- Wichita Area Breastfeeding Coalition
- Willow Tree Family Center
- Wyandotte County WIC Program



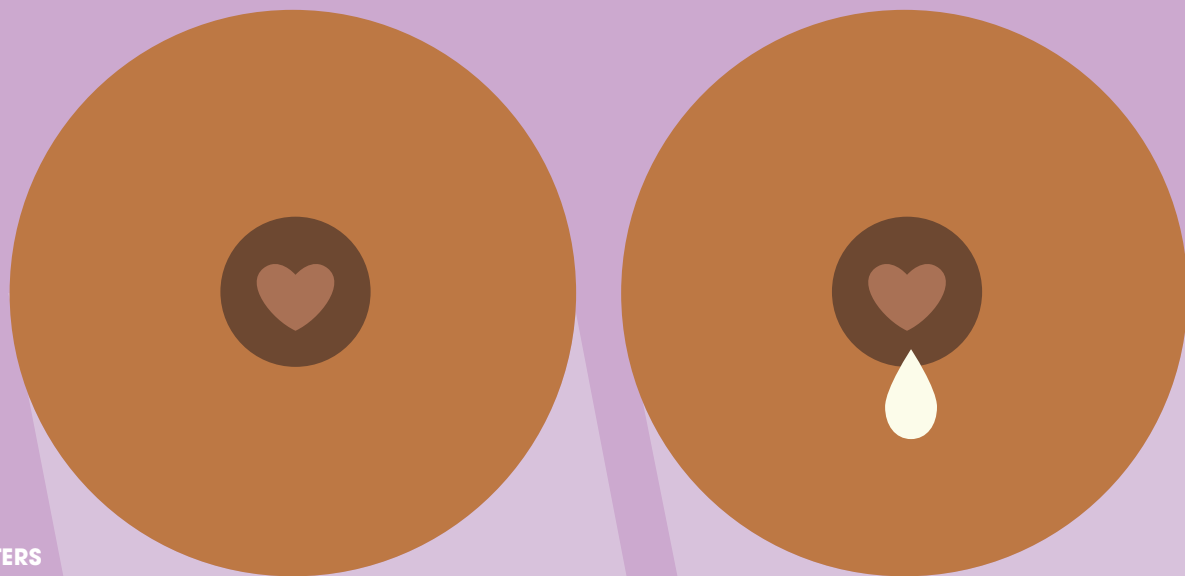
- Advanced Practice Wellness, LLC
- Adventist Healthcare
- BABE Breastfeed Coalition & Carter County Drug Prevention
- Baltimore City WIC Program
- Bell County Public Health District WIC Program
- Birth and Breastfeeding Evidence Based Education and Support (BEBES)
- Black Breastfeeding Mamas Circle La Leche League Hampton Roads
- Black Girls' Breastfeeding Club
- Black Warrior Community Action Team
- CCNCPHD - WIC
- Central Shenandoah Health District/VDH/WIC
- Champaign-Urbana Public Health District
- County of Fresno, Department of Public Health Babies First
- D.C Breastfeeding Coalition
- Dallas Lactation Consultant Association Dallas Area Breastfeeding Alliance
- Fairfax County Health Department WIC Program
- Florida Department of Health, Orange County WIC Program
- Guilford County WIC
- Henry-Martinsville Health Department
- Holi Mamma at The Woman's Earth
- Houston Area Lactation Consultants and Educators Association
- Human Milk Banking Association of North America
- JCSU Lactation Consultant Training Program
- La Leche League Pines and Palmettos
- La Leche League Western Montgomery County
- Lincoln Community Health Center WIC
- LLL of Greater Woodbridge
- LLL of Jefferson
- Madison Hospital
- Mama Sana Vibrant Woman
- Maryland Breastfeeding Coalition
- Maryland WIC Program
- Milk + Honey Co.
- Mom2Mom Jacksonville
- Mother's Milk Bank at Austin
- National Coalition of 100 Black Women Decatur - Dekalb Inc.
- NC WIC Region V Peer Counselor Training

## Participating Organizations Cont'd



- A.G.F.G Meditation and Healing
- Albany Medical Center
- Anjelica Malone
- Association of Maternal and Child Health Programs
- BACE and Vital Village Co-Hosting
- BirthNet
- Breastfeeding Community Action Coalition
- Breastfeeding Resource Center
- Breastfeeding Support Center of WNY
- Brookdale University Hospital Medical Center
- Catholic Charities Rockville Centre, WIC Program
- Central Jersey Family Health Consortium
- Cortland Community Action Program
- Denver Public Health
- Emerging Majority Students Assoc. at the Yale School of Public Health
- Family Wellness Suite
- Health Baby Network
- La Leche League of Greenwich - Stamford
- La Leche League of Rhode Island
- Long Island Federally Qualified WIC Program
- Massachusetts Breastfeeding Coalition
- Maternal Infant Services Network
- Minority Student Organization
- National Association Black Women in Construction New York
- New York Statewide Breastfeeding Coalition
- NORTH, Inc. - Managers of the Philadelphia WIC Program
- Northwell Health
- Northwell Health
- Northwest Mothers Milk Bank
- NYC Baby Cafe
- Optimus Health Care WIC Program
- Public Health Solutions - Neighborhood WIC
- Queen and Baby Box and The Birth Co
- Rockland Count Department of Health WIC
- Ryan Health
- Southern New Jersey Perinatal Cooperative
- St. Bernard Hospital
- Suffolk County Department of Health Services Office of Minority Health
- The Brooklyn Hospital Center
- The City of East Orange WIC Clinic
- Tri-State Breastfeeding Association
- WIC - Petersburg, Virginia

- New Orleans Breastfeeding Center
- Oklahoma State Department of Health WIC Service
- Our Brown Baby
- Pea Pod Nutrition and Lactation Support
- Pearland WIC
- Peninsula Health District - WIC
- Port City Breastfeeding Project
- Prince William Health District WIC
- Reaching Our Sisters Everwhere, Inc.
- Roanoke City Health District WIC Office
- Roseland Community Hospital WIC Program
- SC DHEC/WIC
- Shades of Blue Project International
- South Carolina Department of Health & Environmental Control WIC
- Sweet Bee Services
- Tampa Bay Breastfeeding Task Force
- Tarrant County Breastfeeding Coalition/TXBC
- Texas Breastfeeding Coalition
- Texas Department of State Health Services Region 8
- The Johns Hopkins Hospital - GYN/OB Breastfeeding Committee
- The Professional Doulas of Charleston
- The Wellness Coalition
- The Young Research Group for Maternal & Child Nutrition; Chicago
- Region Breastfeeding Taskforce
- Thomas Jefferson WIC Program
- Tonya Caniel, IBCLC, CA(DONA), LCCE
- Tri-County Breastfeeding Coalition
- Triangle Breastfeeding Alliance
- Tulsa Health Department
- Urban League of Detroit & Southeastern Michigan
- Virginia Department of Health Office of Family Health Services
- WE Baby Welcome Every Baby
- Welcome Every Baby/WE BABY
- West Piedmont WIC - Franklin County Site
- WIC - Corpus Christi Nueces County Public Health District
- Wichita Area Breastfeeding Coalition
- WIC - Brockton, Massachusetts



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