

The background of the slide is a painting of two women. The woman on the left is seen from the back, wearing a white long-sleeved shirt. The woman on the right is shown from the front, also in a white long-sleeved shirt, breastfeeding an infant who is lying on her chest. The painting is done in a soft, sketchy style with warm, muted colors. The text is overlaid on the central part of the image.

Breastfeeding: A Call to Action

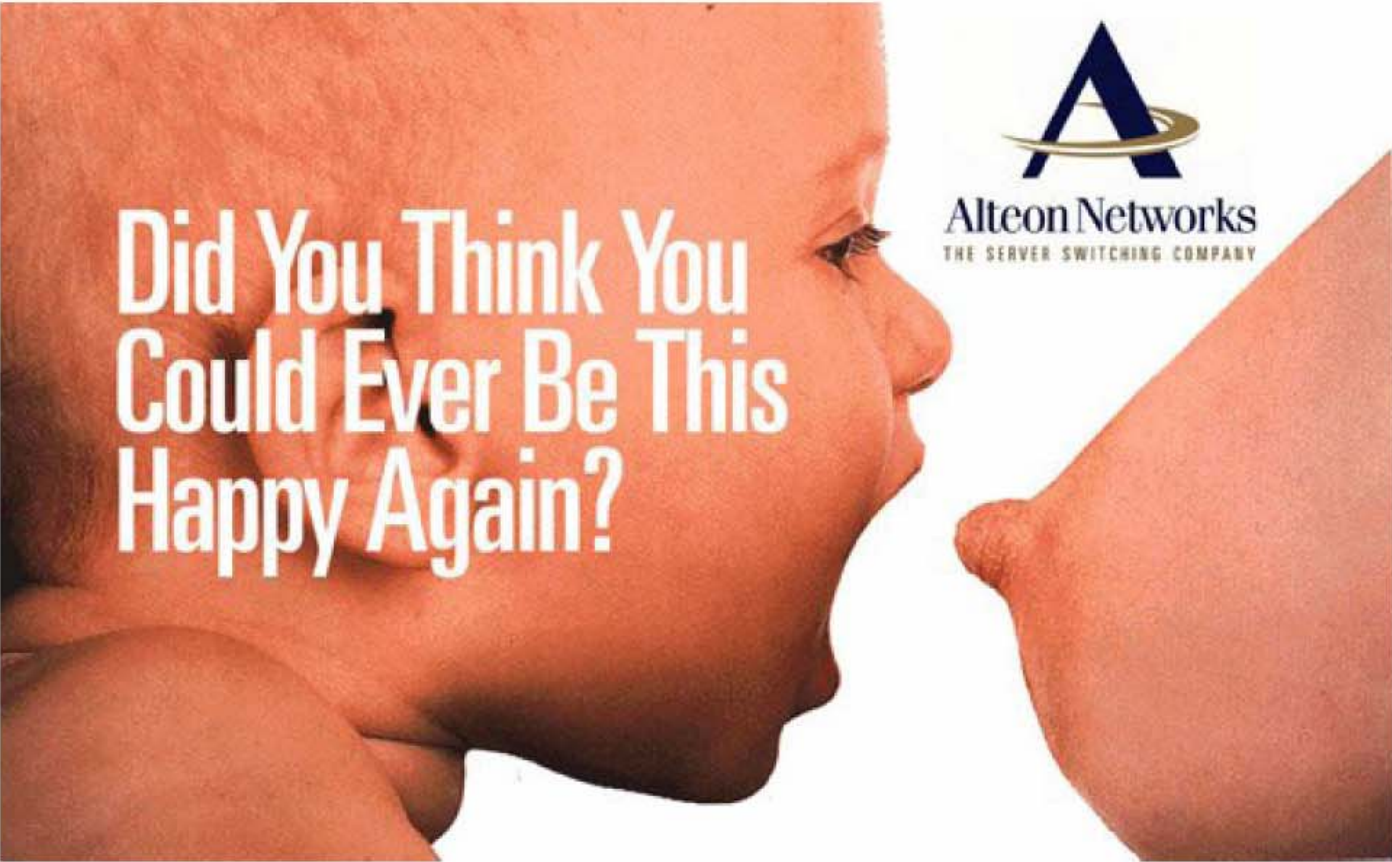
A workshop for Public Health Students, Professionals
and Community Members

February 2007

Presented by Ashley Chin, PhD, MPH, MA

Objectives

- Provide an overview of why breastfeeding is an important public health topic.
- Present current breastfeeding practices and policies of the United States and selected other countries.
- Discuss barriers to breastfeeding
- Generate ideas for breastfeeding advocacy within hospitals, communities, families, and work places



Did You Think You
Could Ever Be This
Happy Again?



Alteon Networks
THE SERVER SWITCHING COMPANY

“There are 4,000 species of mammals and they all make a different milk. Human milk is made for human infants and it meets their specific nutrient needs.”

Ruth Lawrence, MD

Professor of pediatrics and obstetrics
University of Rochester School of Medicine.

Uniqueness of Milk

- All mammals have unique milk specific to their young
- For humans, mother's milk changes to accommodate the needs of the child
 - age
 - illness
- Contains over 100 ingredients not found in any formula

The Gold Standard: Mothers Milk

- Women produce milk that is uniquely created for their infant
- Protects against illness and allergy
- Nursing promotes bonding
- Complete nutritional needs for first six months of an infant's life
- Offers health benefits to the mother

Benefits for Breastfed Infants

- Reduced risk of:
 - Infection, illness and allergies
 - Diabetes mellitus
 - Childhood cancer
 - Crohn's disease
 - SIDS
 - Hodgkin's disease
- Enhanced:
 - Development and intelligence
 - Dental health
 - Toddler health

Benefits for Breastfeeding Mothers

- Reduction in pre-menopausal breast cancer
- Increased bone density
- Reduction in postpartum bleeding
- Diminished risk of ovarian and endometrial cancer
- Increased child spacing due to decreased fertility from lactation amenorrhea
- Improved psychological bonding with child



Benefits of Breastfeeding to Society

- Reduced health care costs, \$3.6 billion savings
- Benefits employers through reduced employee absence
- Prevents loss of income by reducing parental absenteeism from work
- Improved vaccine effectiveness
- Possibly lowers incidence of child abuse

Breastfeeding in Developing Countries

- Breastfeeding and HIV/AIDS
 - Formula vs. exclusive breastfeeding
 - Infant mortality vs. HIV transmission
- Breastfeeding in resource poor countries
 - Effect on infant mortality
- Breastfeeding and disasters/conflict
 - Availability of clean water, bottles vs. food for mother

Why is
Breastfeeding
an Important
Public Health
Issue Now?



Breastfeeding Around the World, 2003

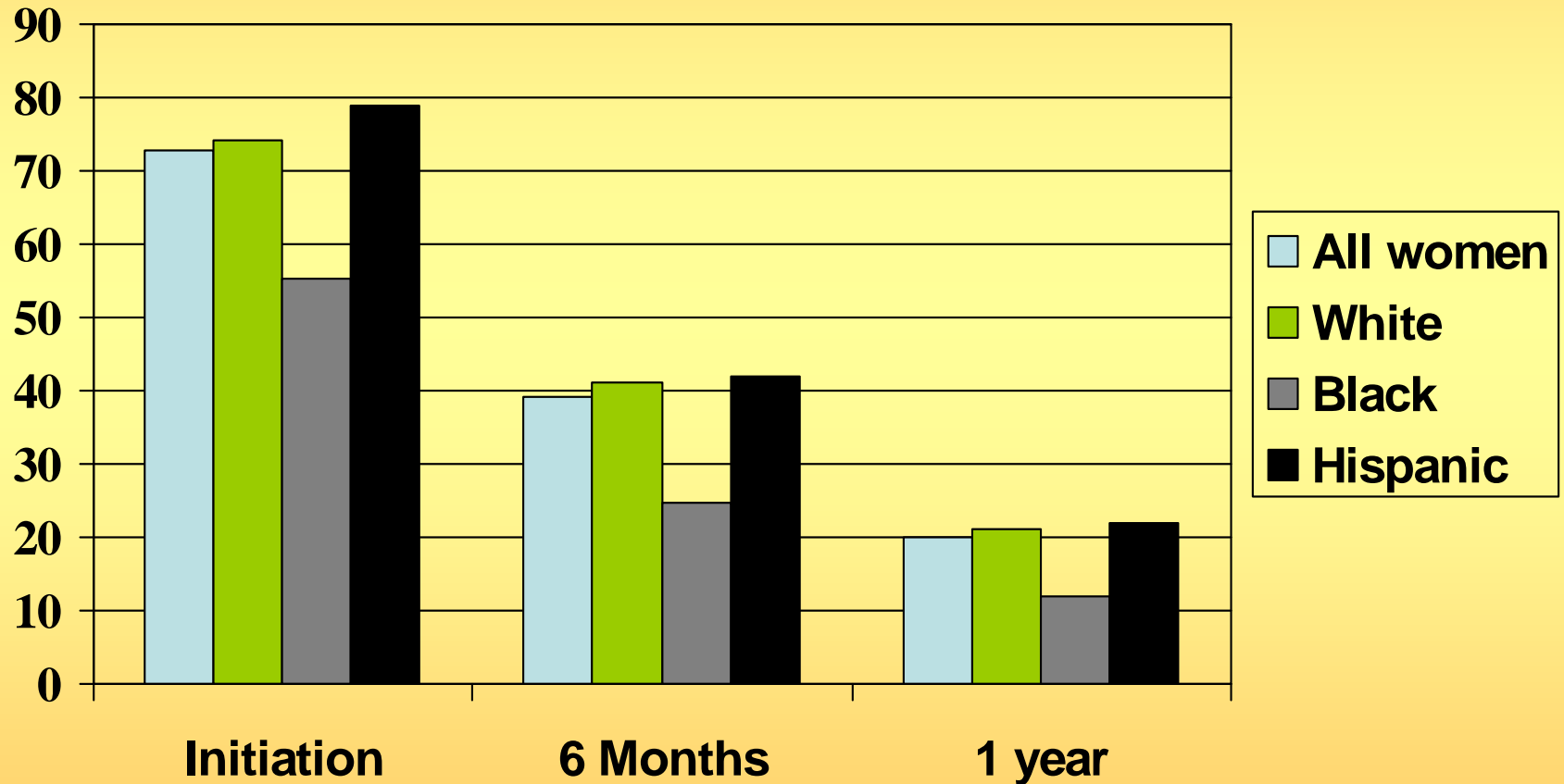
Country	% initiation	% 4-6 months
Norway	99	-
Sweden	97	-
New Zealand	94	56
Netherlands	75	37
Canada	72	31
England/Wales	71	29
United States	70	33

America's Goal Healthy People 2010

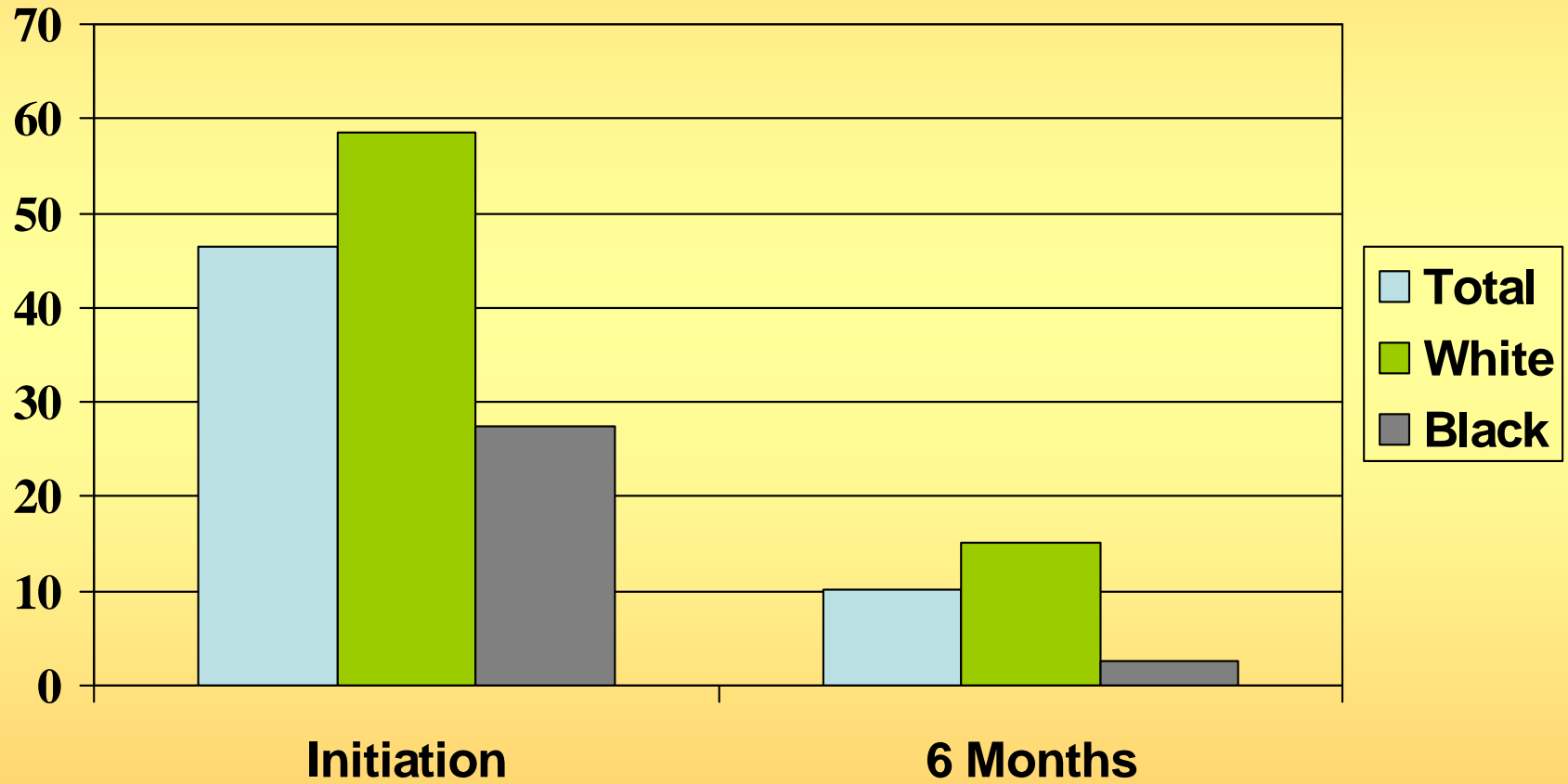
To increase the numbers of mothers who
breastfeed:

- 75% in the early post partum period
(initiation)
- 50% continue to 6 months
- 25% continue to 1 year

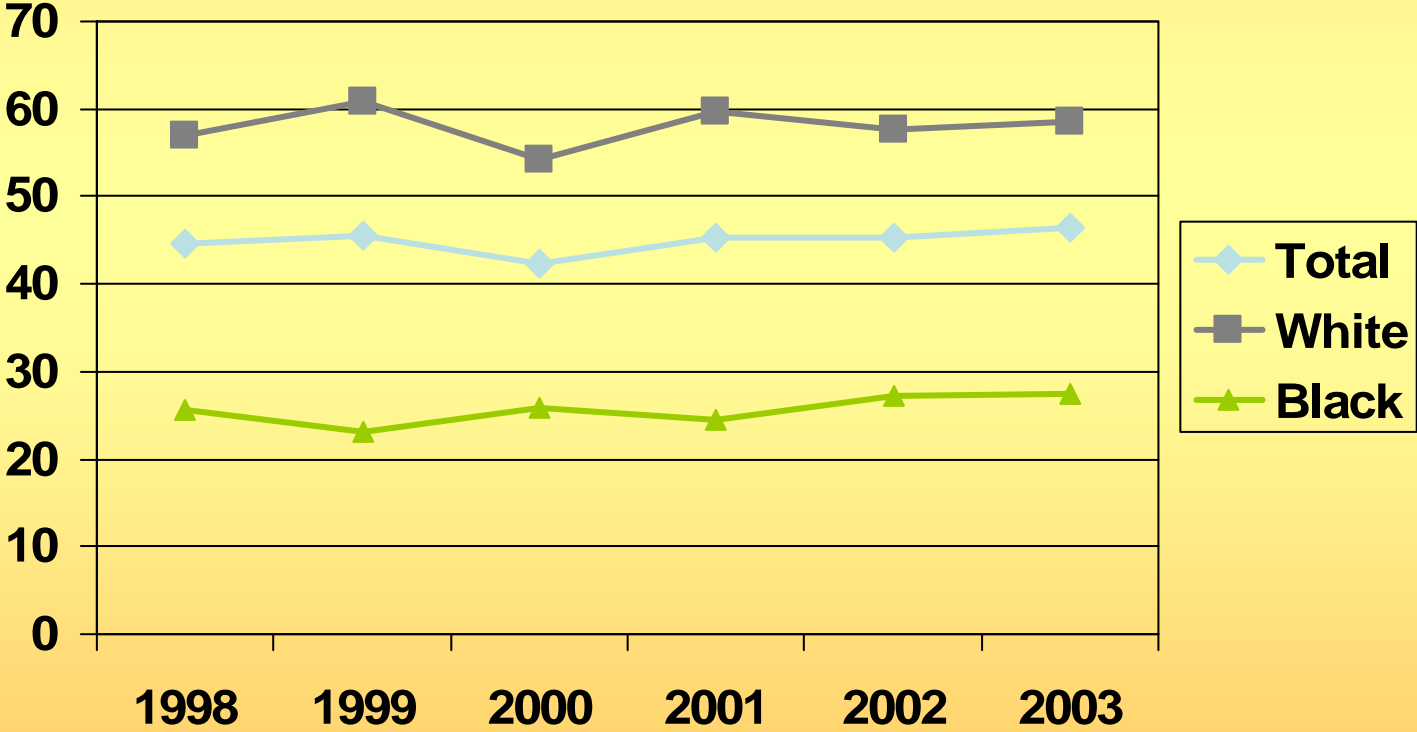
Racial and Ethnic Disparities in US Breastfeeding Rates, 2005



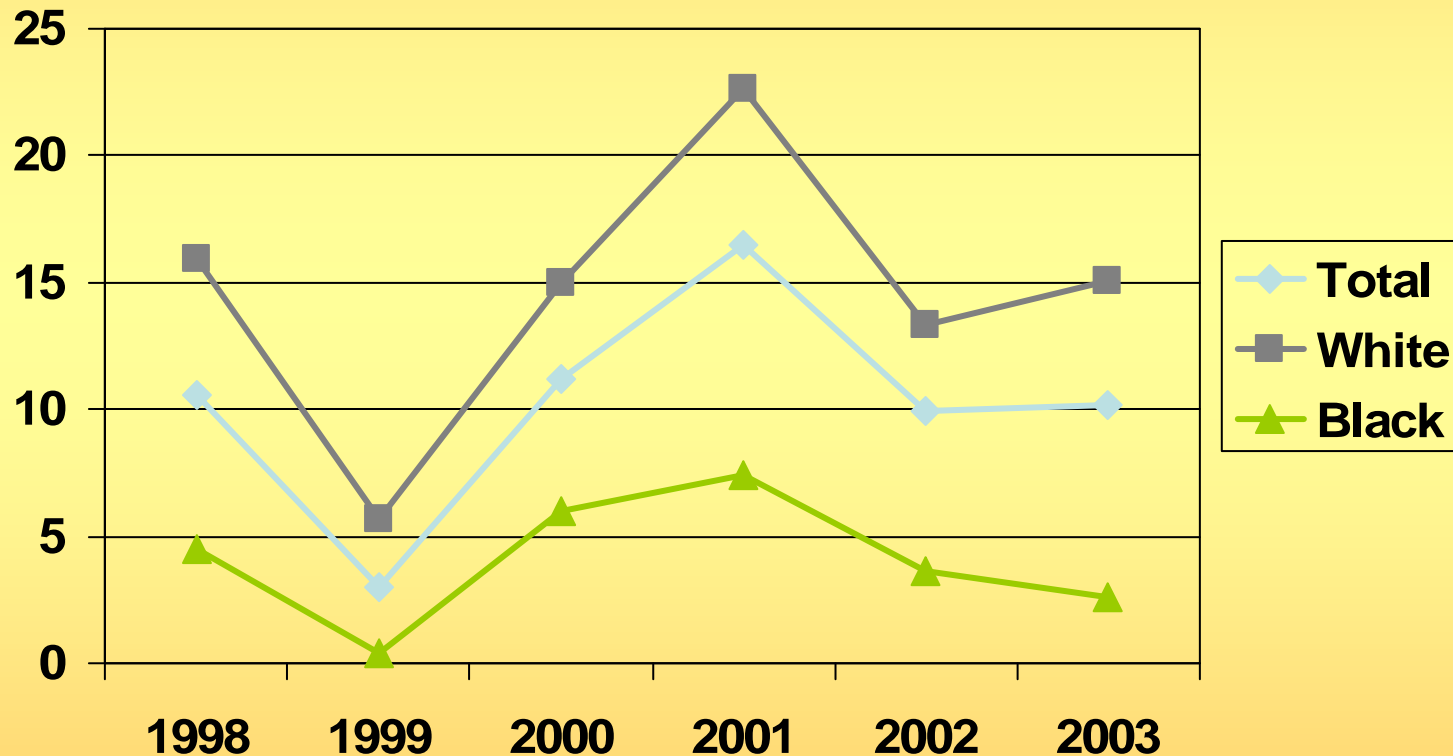
Breastfeeding in Louisiana



Breastfeeding In Louisiana: Trends in Initiation



Breastfeeding in Louisiana: Trends in Duration



Breastfeeding: A Brief History

“To lessen baby deaths let us
have more mother-fed babies.
You can’t improve on God’s plan.
For your baby’s sake – nurse it!”

*Bulletin: Chicago School of
Sanitary Instruction 14
(June 3, 1911): back page.*

A time gone by. . .



Cultural Transition

- In the 1880's supplementation using cow's milk began.
- Upper class women "knew nothing about feeding them (babies)."
- Middle class women's "connection with their husband's began to eclipse their relationship with their infant."
- Working class women who had to work outside the home had no choice but to artificially feed their children.

Recognizing the Problem

- 1897: Chicago Department of Public Health estimated that 15 *handfed* babies were dying for every 1 breastfed baby
- 1912: Dr. Henry Coit discovered that newborn animals fed the milk of another species “were inferior to the breast-fed animals, both at the time of the experiment and afterwards.”
- As early as the 1910s it was widely recognized that artificial feeding was a major cause of infant mortality and morbidity.

Breastfeeding as the Answer

- 1912: National campaign to prevent infant mortality
 - In Minnesota, Dr. Julius P. Sedgwick called for a focus on breastfeeding.
 - Every new mother met a public health worker directly after birth and continued over the child's first 9 months.
- The home visits aided in the promotion of self efficacy and increased breastfeeding duration.
- 1924: Other doctors urged for the adoption of the Minnesota model.

Maybe Not

- 1930's: With the advent of pasteurization doctors began to see breast milk as “nothing sacred.”
- 1930-1970: Breastfeeding rates continued to fall.
- 1950's: Introduction of “scientific infant formula” that was marketed as superior to breast milk.
- 1950's-1970's: Breastfeeding was only for those who couldn't afford formula.
- 1971: Breastfeeding initiation reached an all time low of 24%.

Breastfeeding Rates: Waxing and Waning

- In 1984 the Surgeon General's office held the first workshop on breastfeeding and human lactation. Recommendations included:
 - Strengthen the support of breastfeeding in the health care system
 - Improve professional education in human lactation and breastfeeding
 - Develop public education and promotional efforts
 - Develop a broad range of support services in the community
 - Initiate a national breastfeeding promotion effort directed at working women
 - Expand research on human lactation and breastfeeding.

Innocenti Declaration

- 1990: United States signs the *Innocenti Declaration on the Protection, Promotion and Support of Breastfeeding*:

“As a global goal for optimal maternal and child health and nutrition, all women should be enabled to practise exclusive breastfeeding and all infants should be fed exclusively on breastmilk from birth to 4-6 months of age.”

HHS Blueprint for Action on Breastfeeding

- Describes breastfeeding as a public health challenge
- Reviews the benefits of breastfeeding
- Cautions when not to breastfeed
- Lists HHS breastfeeding activities of the 1990's
- Details the blueprint for action to include:
 - Healthcare system
 - Family and Community
 - Research
 - Workplace

National Breastfeeding Awareness Campaign 2002-2004

- Ad Council created media spots to inform the public of the importance of breastfeeding
- Focused on the RISK of not breastfeeding
- Launch date for the ads were delayed due to protests from formula companies who do not support the strong statements around risk

American Academy of Pediatrics (AAP) Policy Statement on Breastfeeding

- “Pediatricians and other health care professionals should recommend human milk for all infants in whom breastfeeding is not specifically contraindicated and provide parents with complete, current information on the benefits and techniques of breastfeeding to ensure that their feeding decision is a fully informed one.”

Associations with Breastfeeding Policies Similar to AAP

- American Academy of Family Physicians
- American Dietetic Association
- American College of Obstetricians and Gynecologists
- The American College of Nurse-Midwives
- American Public Health Association

UNICEF/WHO The Baby-Friendly Hospital Initiative (BFHI) 1991

- Goal is to recognize hospitals and birth centers that provide an optimal environment for breastfeeding.
- Approximately 15,000 hospitals globally have this prestigious award.
- As of Sept. 2006 only 55 out of in the US were certified as Baby Friendly

BFHI- The Ten Steps to Successful Breastfeeding

1. A written breastfeeding (BF) policy routinely communicated to all health care staff.
2. Train all healthcare staff in skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of BF.
4. Help mothers initiate BF within an hour of birth.
5. Show mothers how to BF and how to maintain lactation, even if they away from their babies.

BFHI- The Ten Steps to Successful Breastfeeding cont.

6. Give newborn infants no food or drink other than breast milk, unless medically indicated.
7. Practice "rooming in" by allowing mothers and infants to remain together 24 hours a day.
8. Encourage BF on demand.
9. Give no artificial teats, pacifiers, dummies, or soothers to BF infants.
10. Foster the establishment of BF support groups and refer mothers to them on discharge from the hospital or birthing center.

Louisiana's GIFT Program

Guided Infant Feeding Techniques

- A certification program that recognizes Louisiana hospitals that protect, promote and support breastfeeding
- *Based on the WHO/UNICEF 10 steps*
- To become certified a hospital must implement all 10 steps, submit an application and host a site visit
- First GIFT certified hospital, West Jefferson Medical Center, Jan. 26, 2007

For additional information and brochures, contact Marci Brewer at marcibrewer@gmail.com.

Mothers' and Babies' Rights in Louisiana

- A mother has the right to breastfeed her baby in any “public accommodations, resort or amusement” where she is otherwise allowed to be.
- Any discriminatory practices against a mother breastfeeding her child in public is prohibited.
- Breastfeeding in any location, whether public or private, is not a violation of the law.

A painting in a soft, painterly style with a warm, golden-brown color palette. It depicts two women. The woman on the left is shown in profile, facing right, with her hair pulled back. The woman on the right is seated and holding a baby in her arms, looking down at the child. The overall mood is intimate and tender. The text 'Breastfeeding Barriers: Overcoming Obstacles' is centered over the image in a bold, black, sans-serif font.

Breastfeeding Barriers: Overcoming Obstacles

How Long to Breastfeed?

- Exclusively for about the first 6 months of life
- Continuing for at least the first year of life, with addition of solids
- **Thereafter, for as long as mutually desired by mother and child**



Photo © Joan Meek, MD, FAAP

Maternal Factors That Support Optimal Lactation

- Normal breast anatomy
- Intact neuroendocrine reflex
- Good general health and nutritional status
- Effective support system

Barriers to Breastfeeding

- Working or attending school
- Having other children to care for
- Lack of support
- Lack of knowledge
- Smoking/alcohol use/drug use
- Lack of self efficacy

Return to the Workplace or School

- Continued breastfeeding is feasible and desirable for mother and infant.
- Prepare ahead by discussing with the employer or school personnel.
- Delay introduction of bottles until milk supply well established at 3–4 weeks.

Working Moms: Workplace Support

- Breaks for feeding/expressing
- Private, clean place to pump
- Refrigerator or cooler with ice packs to store and transport milk



Photo © Joan Meek, MD, FAAP

Adolescents and Breastfeeding

- Highly recommended for adolescent mothers.
- Prenatal education and postpartum support are essential.
- Arrange with school personnel to express milk at school or use on-site child care program, if available.
- Maintain healthy diet with adequate calories, 1,300 mg calcium per day, 15 mg iron, and a daily multivitamin.

Medications and Breastfeeding

- Any over the counter medications should be discussed with a physician or pharmacist
- Medications and Mothers Milk by Thomas W. Hale is an excellent resource on medications during breastfeeding.
(Resource used by physicians, lactation consultants, LLL leaders)

Louisiana and NOLA

- Why do you think Louisiana is ranked the lowest in all 50 states for initiation of breastfeeding?
- What do you think hinders the women and families here in New Orleans?
- What makes women in the northwest more likely to breastfeed than the women in the south?

What Moms Say “Can’t”

- “I tried it but it hurt the first time he latched on and it was all over after that.”
- “I went back to work.”
- “I need my freedom.”
- “I just didn’t want to.”
- “I never thought of it.”
- “Nobody I knew had ever breastfed.”

What Moms Say “Can”

- “I really wanted to breastfeed.”
- “It never hurt, and it was no problem to pump at work.”
- “Breast milk is free!”
- “I had a lot of support from my family.”
- “I found a fantastic lactation counselor.”
- “My cousin is breastfeeding too.”

Top 4 Reasons for Not Breastfeeding

- Had other children to take care of
- Went back to work or school
- Other
- I didn't like breastfeeding

Top 4 Predictors of Breastfeeding

- Exposure to a breastfeeding friend.
- Being married.
- Exposure to a breastfeeding close relative.
- Health education on the importance of breastfeeding.

Other Strong Predictors of Breastfeeding

- Support from health care providers.
- Community role-models.
- Partner support.
- Adequate maternity leave.
- Supportive work environment.
- Comfort with breastfeeding in public.

An illustration in a soft, painterly style showing two women. The woman on the right is seated and breastfeeding an infant who is lying on her lap. The woman on the left is standing and looking towards the other woman. The background is a warm, light brown color. The text 'Breastfeeding: Ideas for Action' is centered over the image.

**Breastfeeding:
Ideas for Action**

Hospitals & Health Care Professionals

- Parents trust physician guidance and advice
- Hospital policies and practices which impact feeding practices include:
 - Rooming in (mothers and infants share a room)
 - Breastfeeding initiated within first hour
 - Lactation consultant availability
- The GIFT Program

Promotion of Breastfeeding in Hospitals

- The initial expense is the conversion to BFH
 - Success is Boston Medical Center
- Train nurses to do lactation consulting for every mother
- Have infants room with mothers and breastfeed within 1st hour
- Create a latch campaign
- Have posters of breastfeeding families and not formula advertisements on OB and Labor Floors

Promotion of Breastfeeding in the Workplace

- On-site nursery for the baby and regular break times for the mother to nurse her baby
- Private place for pumping
- Appropriate storage for pumped milk and pump
- Access to clean running water
- Co-workers that are breastfeeding parents

Promotion of Breastfeeding in the Workplace

- Allow babies to accompany mothers to work
- Support flex schedules, part-time or job sharing
- Breastfeeding Mother Friendly Employer Project- Portland Oregon HHS

<http://oregon.gov/DHS/ph/bf/working.shtml>

Promotion of Breastfeeding in Communities

- Media Campaigns
- Public Policies
- Educational Workshops
- Restaurant/Café/Park that hosts BF group
- Normalization of breastfeeding
- Breastfeeding support networks
 - WARMLINE 1-800-251-BABY

Promotion of Breastfeeding Within Families

- Breastfeeding newsletters, classes or support groups for fathers
- Prenatal breastfeeding information seminar for families
- Support and information for grandmothers, aunts and other influential female family members

A photograph of two women sitting on the floor, facing each other. They are wearing traditional Indian clothing, including a pink and white sari. The woman on the right is holding a book or a document. The background is a plain, light-colored wall. The word "Resources" is overlaid in the center of the image.

Resources

Community Resource Slide

- WIC programs
- La Leche League International
- Lactation specialists
- World Health Organization's website



Louisiana Breastfeeding Warmline

1-800-251-BABY

Breastfeeding
Support
& Information
24 hours a day
7 days a week



Other Local Resources

- WIC
- LLL
- Central Louisiana Breastfeeding Coalition
<http://www.cenlabreastfeeding.org/news.php>
- Greater New Orleans Breastfeeding Awareness Coalition (GNOBAC)

Acknowledgements

Jeanette Magnus, MD, PhD

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Promotional package- American Academy of Pediatrics (2002). Breastfeeding Support and Promotion. CD-ROM

Our Breastfeeding Supportive Family

