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Introduction: Lesson Plan for Success

Creating a plan for a breastfeeding friendly environment can be relatively simple with clear strategies, proven methods, and helpful resources. This resource kit will help healthcare professionals, community leaders, and citizens accomplish this task.

Alarming trends

- ◆ Breastfeeding duration rates continue to fall significantly short of Healthy People goals.
- ◆ Obesity rates are increasing.
- ◆ Children are acquiring diseases which usually show up in adults later in life such as heart disease, diabetes, etc.

Components of a Breastfeeding Friendly Environment

- ◆ A written policy supporting breastfeeding in hospitals and worksites.
- ◆ Thorough instruction provided to new mothers and their families.
- ◆ Monetary support for lactation services.
- ◆ Adequate breastfeeding education for physicians and other medical professionals.
- ◆ Maternity care practices that mirror the Baby Friendly Hospital Initiative.
- ◆ Community environments supportive of breastfeeding.

Making Changes

- ◆ Gain commitment from stakeholders such as hospital administrators, pediatricians, public health professionals, parents, worksites, and community members.
- ◆ Assess the needs of the environment.
- ◆ Create a team, involving various departments, to develop an action plan to address needs.
- ◆ Determine priorities by setting goals, objectives, and strategies.
- ◆ Work with staff, new mothers, and families to implement the plan.
- ◆ Monitor progress and make necessary changes.
- ◆ Evaluate the plan.
- ◆ Institute an ongoing program to maintain a breastfeeding friendly environment.

Using the Breastfeeding Promotion Resource Kit

- ◆ This kit is divided into four sections: breastfeeding support in the communities, breastfeeding education, breastfeeding friendly environments, and workplace support.
- ◆ Within each section, there are descriptions of specific action steps, including information, and resources on how to implement each action step.
- ◆ Once you have determined priorities, goals and objectives, select specific programs or policies to implement in your setting.

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Section 1: Breastfeeding Support in the Communities

Establish areas of breastfeeding support in communities across Colorado during the prenatal, postpartum, and labor and delivery stages.

Action Steps:

1. Identify and promote national, statewide, and local breastfeeding help lines; publicize in Colorado print and audio media..
2. Identify and disseminate information on existing breastfeeding support groups and resources such as La Leche League and local lactation consultants.
3. Raise awareness in local communities of the importance of supporting the breastfeeding woman.
4. Establish and promote peer-counseling breastfeeding programs in communities.
5. Promote multi-faceted media campaigns supportive of breastfeeding.

1 Identify and promote national, statewide and local breastfeeding help lines; publicize in Colorado print and audio media.

Why: Successful initiation and continuation of breastfeeding requires ongoing support. The U.S. Preventive Services Task Force found evidence that telephone contacts with counselors increased the proportion of women continuing breastfeeding for up to six months. Multi-faceted assistance and education is most effective in support of breastfeeding, but is not available to all Colorado women, because of location or income. Easily accessible, empathetic and bilingual 24-hour assistance coupled with other professional services available to a breastfeeding mother, can be indispensable in her confidence and ability to continue breastfeeding.

How:

- ◆ Locate help lines available to local breastfeeding women (through telephone and/or internet). Note hours of contact for each and qualifications of those offering help. Test each for accessibility and customer service.
- ◆ Provide help line listings to clinics, physician offices, hospital obstetrics floors, and include in all discharge bags.
- ◆ Post help line listing sheets in local places where breastfeeding women would see them: grocery store bulletin boards, laundromats, recreation centers, faith communities, Women, Infants, and Children clinics.
- ◆ Write news releases and offer interviews for print and broadcast media. Make the help line listing sheets and news stories part of World Breastfeeding Week promotion and recognition.

Resources:

- ◆ **Colorado Doula Association:** www.coloradodoulas.com
- ◆ **Denver La Leche League and referrals statewide:** www.llusa.org/COWY/DenverCO.html or call 303-779-6722.
- ◆ **HealthOne Lactation Program:** www.health1.org/lactation.asp or call 303-320-7081
- ◆ **International Lactation Consultant Association:** www.ilca.org or call 1-919-787-5181, ext. 234 (8:45 AM – 4:45 PM Eastern Time)
- ◆ **La Leche League International:** www.lalecheleague.org or call 1-800-525-3243 or 1-847-519-7730
- ◆ **The National Women’s Health Information Center:** www.4woman.gov/breastfeeding, or call 1-800-994-woman

2 Identify and disseminate information on existing breastfeeding support groups and resources such as La Leche League and local lactation consultants.

Why: After a woman has received education and instruction on the benefits and techniques of breastfeeding, support from peers, family and experts can make a significant difference in her initiation and continuation of breastfeeding. The U.S. Preventive Services Task Force (summer, 2003) found evidence that ongoing support through in-person visits or telephone contacts increased the proportion of women continuing breastfeeding for up to six months.

How: Although lactation consultants are more plentiful in metropolitan areas of the state, La Leche League groups, and members can be found throughout Colorado. Certified Lactation Counselors and Educators, as well as International Board Certified Lactation Consultants (lactation experts) can be located through their national organizations. Their instruction and support will provide encouragement and expertise to breastfeeding mothers.

- ◆ Compile, display, and distribute lists of lactation consultants in clinics, medical offices, and hospitals.
- ◆ Support groups can post notices in faith communities, schools, preschools, grocery stores, laundromats, Women, Infants, and Children offices, local businesses and other places where pregnant women and new mothers may see them.
- ◆ Task forces and lactation support groups can contact the local media, especially during World Breastfeeding Week, to do stories on the resources and support groups available to local women.
- ◆ Task forces and lactation support groups can make certain that family help lines (such as the Family Support Line in Denver and the 211 line) have current contact names and phone numbers.
- ◆ If no support groups exists, encourage informal gatherings, or provide an informal atmosphere for mothers to convene.

Resources:

- ◆ **Colorado WIC Program Breastfeeding Coordinator:** www.cdphe.state.co.us/ps/wic/wichom.asp, or call 303-692-2400/1-800-688-7777.
- ◆ **Denver La Leche League and referrals statewide:** 303-779-6722.
- ◆ **Family Support Line:** www.familiesfirstcolorado.org, or call 303-695-7996.
- ◆ **HealthOne Lactation Program:** www.health1.org/lactation.asp, or call 303-320-7081.
- ◆ **International Lactation Consultant Association:** www.ilca.org, or call 1-919-787-5181, ext. 234 (8:45 AM – 4:45 PM Eastern Time).
- ◆ **La Leche League International:** www.la lecheleague.org, or call 1-800-525-3243 or 1-847-519-7730.

Other Resources:

- ◆ Local hospitals
- ◆ Local public health agencies

3 Raise awareness in local communities of the importance of supporting the breastfeeding woman.

Why: Many women discontinue breastfeeding due to lack of support. It is embarrassing and unnerving to be asked to leave an area for breastfeeding in public or made to feel uncomfortable by others. How society views an infant's feeding method has an effect on what a woman chooses. A supportive community environment allows for more women to choose to breastfeed.

How: Form local coalitions to support breastfeeding mothers.

Partner ideas:

- ◆ Identify members who represent the demographic diversity of the community and families served including bilingual members, parents, grandparents, and other family care providers.
- ◆ Identify members with an interest in breastfeeding issues including childcare providers, pre-school teachers, and healthcare providers (pediatricians, family practice, pediatric nurse practitioners, and childcare health consultants).
- ◆ Identify members with expertise in breastfeeding: registered dietitians, registered nurses, International Board Certified Lactation Consultants, etc.
- ◆ Identify members from local organizations and agencies that focus their work on parents and children such as public health, schools, Women, Infants and Children programs, hospitals, community health centers, and other local family centers.
- ◆ Identify members from agencies or organizations with expertise in community health education or publicity strategies such as local public health agencies, universities, public relations and marketing agencies and media groups.
- ◆ Identify good public speakers who can present information for the coalition to community groups.
- ◆ Identify members who will advocate and educate legislators on policies related to breastfeeding.
- ◆ Identify local government officials with ties to health and human services, schools, and childcare.
- ◆ Identify businesses that value health promotion for employees and their families.

Before choosing members:

- ◆ Convene a planning group to draft a coalition mission statement for use in recruiting members.
- ◆ Perform community assessment of existing programs/coalitions that are already addressing the topic. Survey existing resources.
- ◆ Engage a leader with proven coalition-building skills.
- ◆ Determine a reasonable and effective membership size.
- ◆ Develop social support and information resources for breastfeeding women such as hotlines, peer counseling, mother-to-mother support groups, etc.
- ◆ Launch a public health marketing campaign portraying breastfeeding as normal, desirable, and achievable.
- ◆ Encourage the media to portray breastfeeding as normal, desirable, and achievable for women of all cultures and socioeconomic levels.
- ◆ Encourage fathers and other family members to be actively involved throughout the breastfeeding experience.
- ◆ Write letters to government representatives at local and national levels urging them to promote breastfeeding in government offices and improve the support available for women on their staff.

Resources:

- ◆ **Best Start Social Marketing Group:** www.beststart.org/index.html
- ◆ **Breastfeeding:** www.breastfeeding.com
- ◆ **Bright Futures Lactation Research Center:** www.bflrc.com
- ◆ **Noodle Soup:** www.noodlesoup.com
- ◆ **ProMOM:** www.promom.org
- ◆ **WIC Works:** www.nal.usda.gov/wicworks

4 Establish and promote peer-counseling breastfeeding programs in communities.

Why: During pregnancy, peer counselors can provide women with education and encouragement to breastfeed, while also offering support and assistance after delivery to help them initiate and continue breastfeeding. Peer counselors are not health professionals, but typically have personal breastfeeding experience and are trained to provide peer counseling. Generally, peers are similar to the women they serve in terms of residence and demographics. Peer counseling programs use a variety of methods aimed at changing behavior, such as one-on-one counseling, hospital or home visits, group classes, support groups, and referrals to health care.

A review of peer-counseling studies in the U.S. and other countries showed significant, positive impacts on one or more breastfeeding outcomes. Peer counseling, in-person or phone consultation, was found to increase breastfeeding initiation and duration (any breastfeeding and exclusive breastfeeding). Peer counselors are frequently used in the Supplemental Nutrition Program for Women, Infants, and Children and Women, Infants and Children' participants were the target population in over half of the recent studies concerning peer counselors. In Fiscal Year 2004, Congress provided Women Infants and Children programs with almost \$15 million to expand peer counseling efforts.

How:

- ◆ Contact State Women, Infants, and Children Programs with established peer counseling programs for ideas. Colorado WIC provides affordable peer counselors to assist low-income women with breastfeeding, and is expanding its peer counselor program in 2005. California, Mississippi, Missouri, Texas and Utah WIC Programs have conducted evaluations of their long-standing peer counselor programs and have found improved breastfeeding outcomes.
- ◆ Become familiar with La Leche League support groups and activities in the area. La Leche League, a mother-to-mother organization, has worked for over 40 years to offer information and peer support to breastfeeding mothers. Meetings in small groups and educational conferences are held to help breastfeeding mothers and to provide opportunities for women to gather and share breastfeeding experiences.

Establishing a Program:

- ◆ Identify the target population and potential sites.
- ◆ Identify women that have breastfed or are currently breastfeeding with an interest in providing support and instruction to other women.
- ◆ Provide training to peer counselor candidates, their supervisors and managers.
- ◆ Clearly outline roles and responsibilities of the peer counselor for education, support and when to refer. A medical professional (Certified Lactation Consultant, Certified Lactation Educator, and International Board Certified Lactation Consultant), will be able to give information on breastfeeding complications.
- ◆ Develop program policies and referral protocols.
- ◆ Promote the peer-counseling program to staff in your organization, local hospitals, Women, Infants and Children programs, and community groups.

Resources:

- ◆ **Best Start Social Marketing Group:** www.beststart.org/index.html.
- ◆ **California WIC Program:** www.wicworks.ca.gov.

- ◆ **Colorado WIC Program, Breastfeeding Coordinator:**
www.cdphe.state.co.us/ps/wic/wichom.asp, or call 303-692-2400 or 1-800-688-7777.
- ◆ **Denver La Leche League and referrals statewide:**
www.llusa.org/COWY/DenverCO.html, or call 303-779-6722.
- ◆ **La Leche International:** www.lalecheleague.org, or call 1-800-525-3243 or 1-847-519-7730.
- ◆ **National Women, Infants, and Children Association, Breastfeeding Promotion Committee:** Celia Richardson, NWA National office, www.nwica.org, 202-232-5492.
- ◆ **Texas Women, Infants, and Children Program, Peer Counselor Program:**
www.tdh.state.tx.us/lactate/peer.htm, Jewell Stemler, Peer Counselor Coordinator, call 512-341-4444, ext. 2303#.
- ◆ **Utah Women, Infants, and Children Program, Peer Counselor Program:**
www.health.utah.gov, or call 801-538-6101.
- ◆ **WIC Works Resource System:** www.nal.usda.gov/wiccorks

5 Promote multi-faceted media campaigns supportive of breastfeeding.

Why: Disseminating health information has been shown to be most effective if delivered through multiple channels. By using numerous approaches, messages about breastfeeding become highly visible among a community.

How: Here are some suggested approaches and channels through which you can deliver messages on breastfeeding.

- ◆ Focus messages on your target audience (pregnant and breastfeeding women and their families).
- ◆ Provide local angles to national media stories.
- ◆ Radio health shows/interviews.
- ◆ Television (community cable, news stations).
- ◆ Newspapers columns, ads, inserts and letters.
- ◆ Posters/brochures.
- ◆ Movie theaters trailers.
- ◆ Pre-schools and childcare centers:
 - ◆ Breastfeeding promotion for families.
 - ◆ Parent education through group meetings, education sessions, newsletters.
- ◆ Health fairs:
 - ◆ Presentations by local pediatrician, pediatric nurse practitioner or family medicine professionals.
- ◆ Local health clubs that provide childcare.
- ◆ Faith communities.
- ◆ Libraries.
- ◆ Official community web-sites.

Other considerations:

- ◆ Use credible, well-used, and highly visible communication channels.
- ◆ Incorporate ethnic/cultural traditions that reflect your community's diversity.
- ◆ Consider socio-economic factors that affect access to specific approaches.

Resources:

- ◆ **Best Start Social Marketing group:** www.beststart.org/index.html.
- ◆ **Childbirth Graphics:** www.childbirthgraphics.com/Content.html.
- ◆ **Local health clubs**
- ◆ **Local libraries**
- ◆ **Local newspaper**
- ◆ **Local radio stations**

Section 1: Website resource descriptions

Best Start Social Marketing Group: www.beststart.org/index.htm

Provides support for health promotion initiatives to enhance the health of expectant and new parents, newborns and young children.

Breastfeeding.com: www.breastfeeding.com

Provides breastfeeding information, support, nursing humor, stories, art, online videos, advocacy, and links.

Bright Futures Lactation Research Center: www.bflrc.com

Provides people who support breastfeeding with articles, education, and motivational resources for healthcare professionals including doctors, nurses, lactation consultants, peer counselors, peer helpers and others providing parents with infant feeding information.

California WIC Program: www.wicworks.ca.gov

Provides resources for employers, employees, outreach materials, and other breastfeeding resource materials.

Childbirth Graphics: www.childbirthgraphics.com/Content.html

Provides quality childbirth education materials to childbirth educators, lactation consultants, and other healthcare providers.

Colorado Doula Association: www.coloradodoulas.com

A website for parents and doula's living and birthing in Colorado.

Colorado Women, Infants, and Children Program Breastfeeding Coordinator:

www.cdphe.state.co.us/ps/wic/wichom.asp, or call 303-692-2400 or 1-800-688-7777 to find a local WIC Program or to get more information about WIC.

Denver La Leche League and referrals statewide:

www.llusa.org/COWY/DenverCO.html or 303-779-6722.

La Leche League is an international, nonprofit, nonsectarian organization dedicated to providing education, information, support, and encouragement to women who want to breastfeed. All breastfeeding mothers and mothers-to-be interested in breastfeeding are welcome to attend meetings or call for additional information.

Family Support Line: www.familiesfirstcolorado.org, or call 303-695-7996.

Callers experience great comfort being able to discuss problems that appear overwhelming.

HealthOne Lactation Program: www.health1.org/lactation.asp or 303-320-7081.

A nationally recognized center for lactation consultation services, counseling and support services for mothers. The program provides critical education and training to health professionals in breastfeeding management.

International Lactation Consultant Association: www.ilca.org or call 1-919-787-5181, ext. 234 (8:45 AM – 4:45 PM Eastern Time).

A worldwide network of lactation professionals working to advance the profession of lactation consulting worldwide through leadership, advocacy, professional development and research.

La Leche League International: www.lalecheleague.org or call 1-800-525-3243 or 1-847-519-7730.

Provides help to mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education and to promote a better understanding of breastfeeding as an important element in the healthy development of the baby and mother.

National Women, Infants, and Children Association, Breastfeeding Promotion Committee: Celia Richardson, NWA National office, www.fns.usda.gov/wic or call 202-232-5492. WIC is effective in improving the health of pregnant women, new mothers, and their infants.

The National Women’s Health Information Center: www.4woman.gov/breastfeeding or call 1-800-994-woman.

Provides practical, helpful breastfeeding information.

Noodle Soup: www.noodlesoup.com

A graphic design studio that writes, illustrates and produces low literacy materials for perinatal education, postpartum, breastfeeding promotion, infant immunization, early childhood development and the encouragement of good parenting skills.

ProMOM: www.promom.org

A nonprofit organization dedicated to increasing public awareness and public acceptance of breastfeeding.

Texas WIC Program, Peer Counselor Program: www.tdh.state.tx.us/lactate/peer.htm

Jewell Stemler, Peer Counselor Coordinator, Jewell.Stemler@tdh.tx.us, 512-341-4444, ext. 2303#.

The program trains WIC mothers who have successfully breastfed their infants to serve as peer counselors and offer encouragement, information, and support to other WIC mothers.

Utah WIC Program, Peer Counselor Program: www.health.utah.gov, 801-538-6101.

Peer counselors, who are mothers that have breastfed, are available to help.

WIC Works: www.nal.usda.gov/wicworks

This program serves to safeguard the health of low-income women, infants and children up to age 5 who are at nutritional risk by providing nutritious foods to supplement diets, information on healthy eating, and referrals to health care, including breastfeeding promotion and support.

Section 2: Breastfeeding Education

Provide education on the benefits, myths and intricacies of breastfeeding to health professionals, expectant mothers, and their families.

Action Steps:

1. Establish and promote culturally sensitive breastfeeding classes and recommend the inclusion of breastfeeding in prenatal classes and parent programs in high schools.
2. Collaborate with nursing, nutrition and medical schools to incorporate a breastfeeding component in mandatory curricula.
3. Identify and promote an instructor's guide on breastfeeding for physicians, nurses, and midwives that can be used for classes, during counseling and given as handouts to patients.
4. Provide and support medical staff who treat pregnant women and new mothers with appropriate breastfeeding education and consistent messages on a regular basis.

1 Establish and promote culturally sensitive breastfeeding classes and recommend the inclusion of breastfeeding in prenatal classes and parent programs in high schools.

Why: Teaching women how to breastfeed correctly from the beginning increases the chance of successfully breastfeeding. Discussing the “why” and “how to” aspects of breastfeeding during prenatal classes, breastfeeding classes, and parenting programs provides parents many opportunities to make informed decisions and allows them the best possible chance of having a positive experience.

How to plan a class:

- ◆ Determine qualifications of the instructor.
- ◆ Ensure that the instructor speaks to cultural issues.
- ◆ Develop class objectives, outline and content.
- ◆ Determine room size and availability, minimum and maximum class size and cost per person or per couple.
- ◆ Purchase appropriate audiovisual materials: videos, cloth breast, breastfeeding doll, variety of breastpumps, nursing pillow, nursing stool, feeding devices, and breastfeeding comfort devices.
- ◆ Prepare handouts and/or suggested reading list.
- ◆ Advertise via brochures, hospital publications, notices in other classes, flyers to physicians’ offices, etc.
- ◆ Develop an evaluation tool and methods for class revision based on evaluation feedback.
- ◆ Develop an outline of appropriate breastfeeding content to be included in prenatal classes.
- ◆ Educate instructors of other classes regarding breastfeeding content they are required to include and teaching strategies. Prepare teachers to discuss the benefits of breastfeeding.
- ◆ Give yearly reviews and updates for instructors regarding breastfeeding.

Include breastfeeding in the curriculum of prenatal classes:

- ◆ Suggest to managers/coordinators of prenatal education programs to mandate that breastfeeding be discussed as the natural feeding choice.

Focus on:

- ◆ Benefits and myths of breastfeeding.
- ◆ Importance of getting a good latch.
- ◆ Supply and demand.
- ◆ Stooling and urine patterns.
- ◆ Length and frequency of nursing sessions.
- ◆ How to assess milk supply.
- ◆ Growth spurts.

Recommend the inclusion of breastfeeding in parent education programs in high schools:

Invite a lactation expert to:

- ◆ Develop objectives, outline and content for a breastfeeding class appropriate to high school classes and send this to local schools with a letter recommending including the content in appropriate classes – health classes, child growth and development classes, parenting classes and others.
- ◆ Provide qualified guest speakers to teach the breastfeeding portion of high school classes.
- ◆ Provide positive reinforcement and incentives for students who choose to breastfeed.
- ◆ Provide a private room within the school that is furnished with a breastpump for student mothers to feed their babies or pump their milk.
- ◆ Provide coupons to students for a free breastfeeding class at local hospitals or health centers.

- ◆ Provide incentives to students for attending breastfeeding class – free baby sling, nursing pillow or hand pump etc.

Resources:

- ◆ **American Academy of Pediatrics:** www.aap.org/healthtopics/breastfeeding.cfm.org, or call 847-981-7385.
- ◆ **Breastfeeding Basics for Prenatal Classes:** www.coverallsbirthing.com/doula/breastfeeding_classes.htm.
- ◆ **Childbirth Graphics, A division of WRS Group, LTD.:** www.childbirthgraphics.com, or call 800-299-3366 ext. 287.
- ◆ **Injoy Videos:** www.injoyvideos.com, or call 303-447-2082/ 800-326-2082.
- ◆ **International Lactation Consultant Association:** www.ilca.org, or call 919-787-5181.

2 Collaborate with nursing, nutrition, and medical schools to incorporate a breastfeeding component in mandatory curricula.

Why: The 1997 American Academy of Pediatrics Policy Statement on breastfeeding recommended pediatricians actively promote and help manage breastfeeding. Research shows physicians are not adequately prepared for this role. Most do not receive any formal training in medical school or residency and rely on personal or spousal experiences. Generally, urban hospitals where most students and residents train also have low breastfeeding initiation rates with subsequent low exposures to breastfeeding. Community physicians with expertise in breastfeeding are role models for medical students and residents.

How:

- ◆ Include breastfeeding in medical school nutrition courses, newborn nursery rotation, outpatient department, infant/child development rotations, etc.
- ◆ Determine whether an institution requires a permission statement or agreement stating that the learners will be participating in an observational mode of breastfeeding women to avoid liability issues.
- ◆ Utilize videos and books as supplements to courses.
- ◆ Evaluate the learners knowledge in breastfeeding issues.
- ◆ Partner with lactation consultants and La Leche League leaders. They are motivated teachers and view physician education as a good partnership.

Clinical Sites:

- ◆ Observe community hospital postpartum rounds on breastfeeding mothers.
- ◆ Attend a La Leche League in-home meeting – learner will hear new mothers’ issues first hand and be exposed to older infants and children’s breastfeeding challenges.
- ◆ Attend an outpatient lactation consult visit on problem cases.
- ◆ Attend a breastfeeding class for new or pregnant mothers.
- ◆ Attend a home nurse visit for breastfeeding mothers.

Resources:

Contact organizations for interested teachers in your area:

- ◆ **Academy of Breastfeeding Medicine:** www.bfmed.org, or call 877-836-9947.
- ◆ **Breastfeeding Basics:** www.breastfeedingbasics.org.
- ◆ **International Lactation Consultants Association:** www.icla.org, or call 919-787-5181.
- ◆ **La Leche League International:** www.lalecheleague.org, or call 847-519-7730.
- ◆ **University of Medicine and Dentistry of New Jersey:** www.umdnj.edu/lacation.
- ◆ **Vancouver Breastfeeding Centre:** www.breastfeeding1.com.
- ◆ **Wellstart International:** www.wellstart.org.

Local Programs:

- ◆ **Low Risk Breastfeeding Curriculum:** Self-study guide developed to meet competency guidelines for hospital nurses caring for mother-baby couplet hospital. Contact: Karen Musselman 303-420-5929.
- ◆ **University of Colorado Health Science Center:** Breastfeeding Management Course for Fourth Year Medical Students, contact: Dr. Nancy Krebs, 303-315-7037 and Dr. Roxan Witter, 303-315-7605.

3 Identify and promote an instructor’s guide on breastfeeding for physicians, nurses, and midwives that can be used for classes, during counseling and given as handouts to patients.

4 Provide and support medical staff who treat pregnant women and new mothers with appropriate breastfeeding education and consistent messages on a regular basis.

Why: Studies have shown that clinician support and structured education and counseling programs increase the proportion of women who begin and continue to breastfeed their babies. Consistent information given to breastfeeding women is critical during pre- and postnatal periods.

How:

- ◆ Have a written breastfeeding policy that is routinely communicated to staff.
- ◆ Ensure all staff that work with pre- and postnatal women are trained in the basics of lactation so the policy can be implemented. Videos are available on this subject, if needed.
- ◆ Provide culturally appropriate education programs that address the benefits and management of breastfeeding.
- ◆ Provide staff educational materials and textbooks about breastfeeding.
- ◆ Research breastfeeding conferences or programs in your area and sponsor staff participation.

Resources:

- ◆ **American Academy of Pediatrics:** www.aap.org/advocacy/bf/aapbrres.htm.
- ◆ **Baby-Friendly Hospital Initiative:** www.babyfriendlyusa.org.
- ◆ **Centers for Disease Control and Prevention:** www.cdc.gov/breastfeeding.
- ◆ **Colorado Breastfeeding Task Force:** 4545 E. Ninth Avenue, Suite 440, Denver, CO 80220.

Section 2: Website resource descriptions

Academy of Breastfeeding Medicine (Physicians with expertise in breastfeeding):

www.bfmed.org or call 877-836-9947.

A worldwide organization of physicians dedicated to the promotion, protection and support of breastfeeding and human lactation.

American Academy of Pediatrics: www.aap.org/healthtopics/breastfeeding.cfm or www.aap.org/advocacy/bf/aapbrres.htm or call 847-981-7385.

Featured topics include a Women's Guide to Breastfeeding, Breastfeeding Promotion, and Breastfeeding and the Use of Human Milk, plus additional American Academy of Pediatrics resources.

Baby-Friendly Hospital Initiative: www.babyfriendlyusa.org

The Baby-Friendly Hospital Initiative (BFHI) is based on the WHO/UNICEF *Ten Steps to Successful Breastfeeding*, and recognizes hospitals and birth centers that have taken steps to provide an optimal environment for the promotion, protection and support of breastfeeding.

Breastfeeding Basics: www.breastfeedingbasics.org

Interactive tutorial in seven units contains pre- and post-tests. Topics include introduction, basic anatomy, growth and development, breastfeeding couple (mom/baby problems), breastfeeding around the world, term infant cases, medications. Participants can obtain Continuing Medical Education credits from Case Western Reserve University. Written by Dr. Mary O'Connor, Denver Health and Hospitals. No cost.

Breastfeeding Basics for Prenatal Classes:

www.coverallsbirthing.com/doula/breastfeeding_classes.htm

While breastfeeding is the most healthy and natural gift given to the infant and mother, it is a learned skill. Classes are designed for all Moms (planning to breastfeed or not) and their support person. This site covers all the needs of the childbearing family.

Centers for Disease Control and Prevention: www.cdc.gov/breastfeeding

Highlights some of the many programs and services currently promoting and supporting breastfeeding within health care, worksites, and communities nationwide. Learn what is happening within the federal government and in your state and what major policies are influencing breastfeeding promotion throughout the United States.

Childbirth Graphics: www.childbirthgraphics.com/Content.html

Provides quality childbirth education materials to childbirth educators, lactation consultants and other healthcare providers.

Colorado Breastfeeding Task Force: 4545 E. Ninth Avenue, Suite 440, Denver, CO 80220

A volunteer organization whose mission is to ensure optimal health and development of mother infant bonding by increasing Colorado breastfeeding rates, particularly among underserved populations. Membership in CBTF is \$25 annually and includes a 1-year newsletter subscription.

Injoy Videos: www.injoyvideos.com or call 303-447-2082 or 800-326-2082

Video resources for educators and health care professionals addressing childbirth, breastfeeding, parenting, postpartum, prenatal care and more.

International Lactation Consultant Association: www.ilca.org or call 919-787-5181, ext. 234 (8:45 AM – 4:45 PM Eastern Time).

A worldwide network of lactation professionals working to advance the profession of lactation consulting worldwide through leadership, advocacy, professional development, and research.

La Leche League International: www.lalecheleague.org or call 800-525-3243 or 847-519-7730

Provide help mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education and to promote a better understanding of breastfeeding as an important element in the healthy development of the baby and mother.

Vancouver Breastfeeding Centre: www.breastfeeding1.com

Interactive modules on “Clinical Aspects of Breastfeeding”. Content based on clinical case studies. Written by Dr. Verity Livingstone, University of British Columbia.

Wellstart International: www.wellstart.org

Independent study modules in lactation management can be ordered from this organization that has been a leader in medical education in breastfeeding.

University of Medicine and Dentistry of New Jersey: www.umdj.edu/lacation

A web-enhanced and CD ROM hybrid education program for teaching lactation diagnostic and management skills, entitled “Lactation for Clinicians” Written by Dr. Lori Feldman-Winter, et al.

Section 3: Breastfeeding Friendly Environments

Encourage hospitals to adopt breastfeeding friendly environments.

Action Steps:

1. Identify materials and develop systems for providing new mothers with breastfeeding support materials and resources.
2. Identify potential funding sources to create breastfeeding supportive gift bags in Colorado hospitals. Create and distribute to new mothers.
3. Promote in hospital maternity care practices supportive of breastfeeding in line with the Baby Friendly Hospital Initiative.
4. Familiarize Colorado hospital administrators with the Baby Friendly Hospital Initiative.
5. Provide supportive environments for breastfeeding in Neonatal Intensive Care Units.
6. Seek fiscal support for hospitals to provide breastfeeding services to women who do not qualify for other assistance programs and cannot afford services.
7. Research current hospital breastfeeding practices in other states/nations for ideas on implementing breastfeeding support programs.
8. Develop systems for the reimbursement of lactation services, such as through health insurance/HMOs, or hospital services, etc.

1 Identify materials and develop systems for providing new mothers with breastfeeding support materials and resources.

Why: Many new mothers are sent home from the hospital within 24 to 48 hours of delivery and have not had sufficient time to learn the skills necessary to effectively breastfeed their babies and are unaware of resources for breastfeeding assistance. Hospital personnel need to be educated about breastfeeding to relay consistent messages to breastfeeding families and teach and assist breastfeeding pairs in the art of breastfeeding.

How:

Here are ways that hospitals can educate breastfeeding families and provide resources to them at the time of delivery:

- ◆ Train staff to assist with breastfeeding.
- ◆ Provide written brochures, booklets, and leaflets in English and Spanish.
- ◆ Show videos demonstrating breastfeeding techniques.
- ◆ Identify and provide a list of local and state resources for breastfeeding assistance.
- ◆ Develop a system to get information to patients, i.e. prenatal classes, discharge instructions.

Resources:

- ◆ **Bright Future Lactation Resource Centre:** www.bflrc.com.
- ◆ **Centers for Disease Control:** www.cdc.org/breastfeeding.
- ◆ **Colorado Breastfeeding Task Force:** 303-320-7081.
- ◆ **Colorado Women, Infants, and Children Program:** www.cdphe.state.co.us/ps/wic/wicbreast.asp, or call 303-692-2400.
- ◆ **Dr. Jack Newman website for moms:** www.breastfeeding.com.
- ◆ **Dr. Thomas Hale's Pharmacology Medications and Mother's Milk:** www.Breastfeeding.com.
- ◆ **International Lactation Consultant Association:** www.ilca.org.
- ◆ **La Leche League International:** www.lalecheleague.org.
- ◆ **Mother's Milk Bank:** call 303-869-1888 or email mmbank@health1.org.
- ◆ **The National Women's Health Information Center:** www.4woman.gov/Breastfeeding.

Other Resources:

- ◆ Local hospital lactation programs
- ◆ Local mother-to-mother support groups

2 Identify potential funding sources to create breastfeeding supportive gift bags in Colorado hospitals. Create and distribute to new mothers.

Why: While in the hospital, all new mothers receive a gift bag containing a small can of formula, sponsored by a formula company. It is more likely that a mother will give formula substitutions if it is readily available. Providing new mothers a gift bag of items that show support of breastfeeding and do not undermine the woman's attempt to breastfeed may increase breastfeeding initiation and duration rates. Items to consider include: hand-held breastpump, receiving blanket, breast pads, lanolin, diapers, digital thermometer, bibs, granola bars, children's books, etc.

How:

- ◆ Form a committee to address this issue specific to the hospital environment.
- ◆ Research breastfeeding grants available through the federal government such as the Centers for Disease Control and Prevention, National Institutes of Health, etc.
- ◆ Ask local businesses and doctors' organizations for support through monetary or product donations. Including sponsors logo in the gift bag.
- ◆ Research local hospital foundation grants.
- ◆ Present evidence-based studies of hospital discharge bags to hospital administration.
 - ◆ Bergevin et al. Lancet 1983; 1:1148
 - ◆ Frank et al. Pediatrics 1987;80:845
 - ◆ Dungy et al. Pediatrics 1992;90:233
 - ◆ Perez-Escamilla. Am J Public Health 1994;84:89
 - ◆ Cochrane Data Base Systematic Review 2000;2:CD002075
- ◆ Get buy-in from the department heads of pediatrics and obstetrics to use supportive breastfeeding gift bags.

Resources:

- ◆ **Centers for Disease Control and Prevention:** www.cdc.gov/funding.htm.
- ◆ **Healthfinder:** www.healthfinder.gov/ (search for grants).
- ◆ **Health Resources Services Association:** www.hrsa.gov/grants/preview/default.htm.
- ◆ **The National Institutes of Health:** <http://grants1.nih.gov/grants/>.

3 Promote in hospital maternity care practices supportive of breastfeeding in line with the Baby Friendly Hospital Initiative.

Why: There are many practices that impact breastfeeding initiation and duration beginning during the prenatal period and extending beyond hospital discharge. Facilities that want to support breastfeeding can implement research supported practices in line with the Baby Friendly Initiative that will have a positive influence on the health of mothers and babies. Studies have shown there are many strategies that have a positive impact on breastfeeding initiation and duration. Examples of these include provider support and encouragement, education of family members, rooming in, lactation consultant services, early breastfeeding initiation, competent/knowledgeable staff, absence of formula sponsored discharge packs, no unnecessary supplementation, and adequate access to community resources.

How: Hospitals can provide breastfeeding support by adopting one or more of the following:

- ◆ Maintain a written breastfeeding policy that is routinely communicated to all healthcare staff.
- ◆ Train all healthcare staff in skills necessary to implement this policy.
- ◆ Employ an International Board Certified Lactation Consultant.
- ◆ Provide comprehensive prenatal breastfeeding education by knowledgeable professionals and include fathers and significant family and friends. Information should include encouragement from provider to breastfeed based on benefits for mother and baby.
- ◆ Initiate breastfeeding within one hour of delivery
- ◆ Promote 24-hour rooming-in, encouraging families to recognize and respond to baby's cues.
- ◆ Require staff to be knowledgeable about all aspects of breastfeeding and provide consistent, positive information to breastfeeding families.
- ◆ Avoid giving infants fluids or solids other than breast milk unless age-appropriate or medically necessary.
- ◆ Encourage mothers to breastfeed on demand.
- ◆ Avoid giving artificial nipples or pacifiers.
- ◆ Provide a clean, private, comfortable space to pump or breastfeed (not a bathroom); with a sink nearby for washing hands and pump parts.
- ◆ Do not advertise infant formulas, pacifiers, or feeding bottles to the public.
- ◆ Keep promotion of infant feeding products (notepads, booklets, posters etc) out of public view.
- ◆ Provide and refer mothers to breastfeeding support groups when discharged from the hospitals, offices, or clinics.
- ◆ Be aware of and support breastfeeding promotion policies in legislation.
- ◆ Replace formula sponsored discharge packs with breastfeeding support materials.
- ◆ Provide electric breast pumps as indicated.

Resources:

- ◆ **Baby-Friendly Hospital Initiative:** www.babyfriendlyusa.org
- ◆ **Coalition for Improved Maternity Care Practices:** www.sims.org
- ◆ **Colorado Parent:** <http://colorado.parenthood.com>
- ◆ **International Lactation Consultant Association:** www.ilca.org
- ◆ **LaLeche League International:** www.lalecheleague.org
- ◆ **National Women's Health Information Center:** www.4women.gov/breastfeeding
- ◆ **Parents Place:** www.parentsplace.com

- ◆ **United Nations Children’s Fund:** www.unicef.org
- ◆ **United States Breastfeeding Committee:** www.usbreastfeeding.org
- ◆ **Washington Business Group on Health:** www.wbgh.org
- ◆ **World Health Organization:** www.who.int/en

Examples of Baby-Friendly Hospitals

Boston Medical Center: Anne Merewood: anne.merewood@bmc.org

Bobbi Philipp: bobbi.philipp@bmc.org

Evergreen Hospital and Medical Center

Molly Pessl: mpessl@nwlinc.com

References:

- ◆ American Academy of Pediatrics Policy Statement: Breastfeeding and the Use of Human Milk.
- ◆ Dennis, C. “Breastfeeding Initiation and Duration: A 1990-2000 Literature Review.” *JOGNN* 31:1 Jan-Feb 2002.
- ◆ Kovach, A. “Hospital Breastfeeding Policies in the Philadelphia Area: A Comparison with the Ten Steps to Successful Breastfeeding.” *Birth* 24:1 March 1997.
- ◆ Taveras, E. et al. “Clinician Support and Psychological Risk Factors Associated with Breastfeeding Discontinuation” *Pediatrics* 112:1 July 2003.
- ◆ Wright, A. et al. “Changing Hospital Practices to Increase the Duration of Breastfeeding” *Pediatrics* 97:5 May 1996.

4 Familiarize Colorado hospital administrators with the Baby Friendly Hospital Initiative.

Why: Colorado hospital administrators are key to the decision making process regarding policy and/or significant change within their institutions. Individuals who may have a limited knowledge regarding lactation typically hold these positions. Lactation services are often under scrutiny when budget cuts are reviewed. In this uncertain health care market, it is crucial to proactively educate administration regarding the importance of supporting breastfeeding within the context of the Baby Friendly Hospital Initiative. It is vital that key decision makers are aware that the benefits of breastfeeding could translate into millions of dollars in savings to our health care system. This is realized in part through fewer hospitalizations, decreased length of stays, and reduced pediatric clinic visits. It is equally important to increase awareness that the World Health Organization and the United Nations Children’s Fund sponsors the Baby Friendly Hospital Initiative. This initiative, implemented in the U.S. in 1992, encourages and recognizes hospitals and birthing centers that offer an optimal level of care in lactation.

How: To accomplish change of this magnitude, a coordinated approach at all levels must be implemented.

- ◆ Get to know the hospital administrators and network with them.
- ◆ Know the hospitals’ patient satisfaction data regarding lactation support during their hospital stay (Press Ganey Survey or other hard data).
- ◆ Assure that lactation programs incorporate a broad-based approach to lactation including: prenatal breastfeeding classes, inpatient and outpatient lactation support, access to breast pump rental or purchase, and hospital staff education.
- ◆ Increase overall awareness of the need to support breastfeeding through daily communication with everyone with whom you come in contact.
- ◆ Stay current on breastfeeding legislation – utilize the Colorado Breastfeeding Task Force and the Breastfeeding Newsletter.
- ◆ Present data on the cost-benefit analysis of breastfeeding using recent data to hospital administration, the supervisor of the birth center, etc.

Resources:

- ◆ Riordan, Jan, Auerbach, Kathleen. *Work Strategies and The Lactation Consultant: Breastfeeding in Human Lactation*. Sudbury, MA: Jones & Bartlett publishers, (1999): 709-746
- ◆ US Department of Health and Human Services. HHS Blueprint for Action on Breastfeeding, Washington, DC, US Department of Health and Human Services, Office on Women’s Health, 2000; 10.
- ◆ United States Committee For UNICEF. Barriers and Solutions to the Global Ten Steps to Successful Breast-Feeding, A Summary of In-Depth Interviews with Hospitals Participating in the WHO-UNICEF Baby-Friendly Hospital Initiative Interim Program in the US, April 1994.

5 Provide supportive environments for breastfeeding in Neonatal Intensive Care Units.

Why: Survival rates for pre-term infants are improving and quality of survival through optimal nutrition management must also improve. For premature babies, receiving their mothers milk can be critical. Breast milk offers significant nutritional advantages, is easier to digest than formula, and protects against infection. Premature birth can make breastfeeding more challenging. Family members and health care providers sometimes discourage these mothers from initiating breastfeeding. They fear breastfeeding might cause added stress to the mother or that her condition may preclude her from lactating. Several studies show that mothers who provide breast milk for their babies have a sense of control and are better able to cope with the stress of their infant being in the Neonatal Intensive Care Unit. Providing breast milk is something only the mother can do.

How:

- ◆ Have the healthcare team reinforce the importance of breast milk in a pre-term or sick infant and that early and frequent pumping is key.
- ◆ The first contact with the neonatologist should include a discussion on the benefits and importance of breast milk for the preterm infant.
- ◆ Have an experienced International Board Certified Lactation Consultant and a standing order to include a lactation consultant on admission to the in the Neonatal Intensive Care Unit.
- ◆ Provide breast pumps at the bedside with clear instructions for usage.
- ◆ Create breastfeeding policies including milk collection, storage and transportation in all Neonatal Intensive Care Units.
- ◆ Donor milk information should be provided as needed.
- ◆ Host weekly Neonatal Intensive Care Unit breastfeeding support group meetings.
- ◆ Train all staff on the importance of breast milk for the pre-term infant.
- ◆ Offer kangaroo care {skin-to-skin} to all stable infants.
- ◆ Request that the physician write a prescription for a hospital-grade electric pump for possible reimbursement from the insurance company.

References:

1. American Academy of Pediatrics Policy Statement: Breastfeeding and the Use of Human Milk.
2. Bell RP, McGrath JM. "Implementing a research-based kangaroo care program in the NICU." *Nurs Clin North Am* 1997 31:387-403.
3. Furman L, Minich NM, Hack M. "Breastfeeding of very low birth weight infants." *J Hum Lact* 14:1 (1998):29-34.
4. Meier PP. "Supporting Lactation in Mothers With Very Low Birth Weight Infants." *Pediatric Annals*, 32:5 (1990):317-325.
5. Yip E, Lee J, Sheehy Y. "Breastfeeding in the neonatal intensive care." *J Pediatric Child Health* 32 (1996): 296-298.

6 Seek fiscal support for hospitals to provide breastfeeding services to women who do not qualify for other assistance programs and cannot afford services.

Why: There is a subset of the population that is not served and cannot afford services for lactation assistance. The charge for lactation services can range from \$35-\$75 an hour. Providing lactation support services is a way to ensure the success of the patient.

How:

- ◆ Obtain buy-in and support from administration for the program.
- ◆ Research and apply for grants. Check to see if a grant writer is employed at your facility or if there is an employee experienced in grant writing.
- ◆ Check into auxiliary programs and foundations that support this type of program.
- ◆ Begin/sustain a breastfeeding support group. Consider fundraising such as bake sales, silent auctions, bowl-a-thons, and 5K runs.
- ◆ Establish a breastfeeding support fund from direct donations.
- ◆ Provide phone consults when possible to decrease total costs.

Resources:

- ◆ **Community Resource Center: Success Strategies for Colorado Nonprofit Organizations:** www.crcamerica.org/index.htm
- ◆ **Foundations.org:** www.foundations.org
- ◆ **National Institutes of Health: Grants guide:** www.grants.nih.gov/grants/
- ◆ **Robert Wood Johnson Foundation:** www.rwjf.org/index.jsp

7 Research current hospital breastfeeding practices in other states/nations for ideas on implementing breastfeeding support programs.

Why: Researching breastfeeding practices in other institutions, states, and nations will assist the planning and organizing of quality lactation services. Discovering other's successes and lessons learned will allow for an easier and more efficient path to the end goal.

How:

- ◆ Contact the International Lactation Consultant Organization for links to other hospitals, contact names, and phone numbers.
- ◆ Contact the Centers for Disease Control and Prevention for the latest breastfeeding and lactation services interventions.
- ◆ Contact local and state task forces in other areas.
- ◆ Check the current Pregnancy Risk Assessment Monitoring System data.
- ◆ Contact National Hospital corporations.
- ◆ Contact the Catholic Healthcare Partners.
- ◆ Contact the American Hospital Association.
- ◆ Visit a baby friendly hospital or a hospital that is known for its promotion of breastfeeding.

Resources:

- ◆ **American Hospital Association:** www.hospitalconnect.com/DesktopServlet
- ◆ **Catholic Healthcare Partners:** www.health-partners.org/default_flash.asp
- ◆ **Centers for Disease Control and Prevention:** www.cdc.org
- ◆ **Colorado Pregnancy Risk Assessment Monitoring System:** www.cdphe.state.co.us/hs/prams
- ◆ **International Lactation Consultant Association:** www.ilca.org
- ◆ **World Alliance for Breastfeeding Action:** www.waba.org.my/

8 Develop systems for the reimbursement of lactation services, such as through health insurance/HMOs or hospital services, etc.

Why: Health insurance companies are key in encouraging women to initiate and continue breastfeeding. Support can be offered in a variety of ways: prenatal patient education and counseling, postpartum inpatient and outpatient breastfeeding support programs, home care, provider education, and assistance with returning to work. Breastfeeding can provide economic benefits to individual families and health plans. For families who choose breastfeeding, costs of infant feeding are substantially reduced. Babies that are breastfed are healthier than non-breastfed babies. Breastfed infants require fewer sick-care visits, prescriptions and hospitalizations, which lead to reduced health care expenditures. Employers also benefit since breastfed infants are sick less often; therefore maternal absenteeism from work is significantly lower in companies with established lactation programs.

How:

- ◆ Provide research to HMOs regarding cost savings to insurers.
- ◆ Advocate for lactation services to be covered under insurance policies.

Getting Reimbursed

- ◆ Send a letter requesting reimbursement.
- ◆ Submit an invoice for equipment such as breastpumps.
- ◆ Provide a prescription form including the baby's name and signed by the neonatologist.

Resources:

Health plans that have lactation support:

- ◆ **Healthpartners:** Teresa Kovarik, M.D.: (651) 641-6217, teresa.f.kovarik@healthpartners.com, www.healthpartners.com
- ◆ **Independent Health:** Jane Stoeckl RNC, CCM: (716) 635-3915, jstoeckl@independenthealth.com
- ◆ **Kaiser Permanente Northwest:** Carol Tracy: (503) 571-6185, carol.tracy@kp.org

Other Resources:

- ◆ Contact your local government leadership requesting support
- ◆ Contact local health maintenance organizations

Section 3: Website resource descriptions

American Hospital Association: www.hospitalconnect.com/DesktopServlet

Hospital connect is a place where health care leaders can meet, learn, and grow.

Baby-Friendly Hospital Initiative: www.babyfriendlyusa.org

The Baby-Friendly Hospital Initiative is based on the WHO/UNICEF *Ten Steps to Successful Breastfeeding*, and recognizes hospitals and birth centers that have taken steps to provide an optimal environment for the promotion, protection and support of breastfeeding.

Bright Future Lactation Resource Center: www.bflrc.com

Provides people who support breastfeeding with articles, education and motivation resources for healthcare professionals including doctors, nurses, lactation consultants, peer counselors, peer helpers and others providing parents with infant feeding information.

Catholic Healthcare Partners: www.health-partners.org/default_flash.asp

Catholic Healthcare Partner networks offer extensive opportunities to share knowledge and efforts with others, strengthening participants and enabling them to do together what they cannot do alone.

Centers for Disease Control and Prevention, Breastfeeding Information:

www.cdc.org/breastfeeding

Highlights some of the many programs and services currently promoting and supporting breastfeeding within health care, worksites, and communities nationwide. Learn what's happening within the federal government and in your state and what major policies are influencing breastfeeding promotion throughout the United States.

Centers for Disease Control and Prevention, funding information:

www.cdc.gov/funding.htm

Provides information on funding opportunities through government grants.

Coalition for Improved Maternity Care Practices: www.motherfriendly.org/

Coalition for Improved Maternity Care Practices is a coalition of individuals and organizations with concern for the care and well-being of mothers, babies, and families.

Colorado Breastfeeding Task Force: 4545 E. Ninth Avenue, Suite 440, Denver, CO 80220

A volunteer organization whose mission is to ensure optimal health and development of mother infant bonding by increasing Colorado breastfeeding rates, particularly among underserved populations. Membership is \$25 annually and includes a 1-year newsletter subscription.

Colorado Parent: <http://colorado.parenthood.com>

Colorado Parent Magazine is the region's premier monthly magazine dedicated to serving and empowering area parents.

Colorado Pregnancy Risk Assessment Monitoring System:

www.cdphe.state.co.us/hs/prams

A population-based risk factor surveillance system designed to identify and monitor behaviors and experiences of women before, during, and after pregnancy. Findings from the survey are used to develop and assess perinatal health programs in public and private health care settings.

Colorado Women, Infant, and Children Program:

www.cdphe.state.co.us/ps/wic/wicbreast.asp, 303-692-2400.

This site discusses program participants' breastfeeding rates and breastfeeding resources.

Community Resource Center: Success Strategies for Colorado Nonprofit Organizations: www.crcamerica.org/index.htm

The 2003-04 edition of the Colorado Grants Guide is the most essential and up-to-date fundraising tool for nonprofit and community-based organizations in Colorado.

Bright Future Lactation Research Center Ltd: www.bflrc.com/newman/articles.htm

Provides a variety of information on breastfeeding including recommendations for products and resources.

Dr. Thomas Hale's Pharmacology Medications and Mother's Milk:

<http://neonatal.ttuhscc.edu/lact/>

Provides updates on medications and environmental factors and their effect on mother's milk.

Foundations.org: www.foundations.org

Provides information on foundations and grant applications..

Healthfinder: www.healthfinder.gov/

Search for "grants" for a listing of current, available grant opportunities.

Health Resources Services Association: www.hrsa.gov/grants/preview/default.htm

Provides up-to-date information on available grant monies.

International Lactation Consultant Association www.ilca.org or call 1-919-787-5181, ext. 23.

A worldwide network of lactation professionals working to advance the profession of lactation consulting through leadership, advocacy, professional development, and research.

La Leche League International: www.la lecheleague.org or call 1-800-525-3243.

Provide help mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education to promote a better understanding of breastfeeding as an important element in the healthy development of baby and mother.

Mother's Milk Bank: www.health1.org/milkbank.asp or call 303-869-1888.

Mothers' Milk Bank is a non-profit community bank based at Presbyterian/St. Luke's Medical Center, 1719 East 19th Avenue Denver, Colorado 80218. Contact Laraine Borman, International Board Certified Lactation Consultant, Director, mmilkbank@health1.org.

Parents Place: www.parentsplace.com

This site provides a variety of information on pregnancy and breastfeeding. It includes an experts section, chat rooms, and coupons/discounts.

Robert Wood Johnson Foundation: www.rwjf.org/index.jsp

A funding program that seeks to improve the health and health care of all Americans.

The National Institutes of Health: <http://grants1.nih.gov/grants/>

The Office of Extramural Research is the focal point for National Institutes of Health medical and behavioral research grant policies, guidelines, and funding opportunities.

The National Women's Health Information Center: www.4woman.gov/Breastfeeding or call 1-800-994-woman.

This site provides practical, helpful breastfeeding information. Dive into the resources to find out how breastfeeding can be one of the most important things you do for both you and baby!

United States Breastfeeding Committee: www.usbreastfeeding.org

The mission of the US Breastfeeding Committee is to collaboratively protect, promote, and support breastfeeding.

United Nations Children's Fund: www.unicef.org

Provides information on the world-wide effort to protect, promote, and support breastfeeding.

Washington Business Group on Health: www.wbgh.com

The Washington Business Group on Health, established in 1974, is a nonprofit 501(C)(3) organization that works to stimulate and foster corporate leadership and partnership in promoting performance-driven health care systems. In partnership with the Maternal and Child Health Bureau, Department of Health and Human Services, the Washington Business Group on Health has implemented a number of innovative programs to foster communication and collaboration between the traditional maternal and child health community and corporate America.

World Alliance for Breastfeeding Action: www.waba.org.my/

The World Alliance for Breastfeeding Action is a global network of individuals and organizations concerned with the protection, support, and promotion of breastfeeding.

World Health Organization: www.who.int/en

Provides links to descriptions of activities, reports, news and events, as well as contacts and cooperating partners in the various World Health Organization programs and offices working on breastfeeding.

Section 4: Workplace support

Increase protection, promotion and support for breastfeeding mothers in the work force.

Action Steps:

1. Advocate for mandating breastfeeding friendly policies in worksites such as allowing for midday breaks and providing private rooms, along with flexible work schedules.
2. Utilize existing materials that support breastfeeding employees in the workplace.
3. Recognize local businesses that promote and support breastfeeding.
4. Educate women in recognizing characteristics of breastfeeding friendly childcare environments.
5. Apply for funding to purchase breast pumps for breastfeeding women returning to work.
6. Educate women to recognize family-friendly workplaces.

1 Advocate for mandating breastfeeding friendly policies in worksites such as allowing for midday breaks and providing private rooms, along with flexible work schedules.

Why:

- ◆ Reduces turnover; women are more likely to return to work after having a baby.
- ◆ Reduces sick time; breastfed babies are less likely to be ill.
- ◆ Improves productivity, loyalty, employee satisfaction, and morale.
- ◆ Enjoy a reputation of a company concerned for the health and wellness of its employees.
- ◆ Recruitment incentive for women.
- ◆ Lower health care costs (average of \$400 per baby over first year).
- ◆ Decreases cost of health insurance.

How:

- ◆ Contact the human resources director and president/director of the company to set up a meeting involving the health of the company's employees.
- ◆ Prepare for the meeting by researching the benefits of supporting breastfeeding to the company.
- ◆ Research the relative cost savings and benefits to the company with breastfeeding support policies.
- ◆ Provide information in a concise, professional manner to the human resource director and president/director of the company; provide graphs, flow charts, etc. as supporting material if available.

Colorado Breastfeeding Friendly Businesses:

- ◆ **USAA, Colorado Springs:** provides onsite childcare, lactation room with Medela electric pumps, videos, and instruction booklets.
- ◆ **Coors Brewing Company:** provides lactation rooms with refrigerators, electric pumps, and sells kits to employees.
- ◆ **United States Department of Agriculture, Food and Nutrition Service:** provides a lactation room with Medela electric pumps.

Resources:

- ◆ **Congresswoman Carolyn Maloney addresses federal breastfeeding legislation:** www.house.gov/maloney/issues/breastfeeding
- ◆ **International Lactation Consultant Association:** www.ilca.org
- ◆ **Great Western Life:** Kay Velasquez, Employee Health Benefits
- ◆ **LaLeche League International:** www.lalecheleague.org
- ◆ **National Women's Health Information Center:** www.4woman.gov/Breastfeeding
- ◆ **United States Breastfeeding Committee:** www.usbreastfeeding.org/StratPlan.html
- ◆ **Washington Business Group on Health:** www.wbgh.org

2 Utilize existing materials that support breastfeeding employees in the workplace.

Why:

- ◆ Shows support to breastfeeding women.
- ◆ Knowledge gained from materials may help with choosing to breastfeed and increasing the duration of breastfeeding.

How:

- ◆ Have a library of breastfeeding books/videos available to employees.
- ◆ Have “lunch and learn” presentations from credible sources on breastfeeding issues.
- ◆ Have pamphlets and handouts available discussing key topics such as:
 - ◆ Breastfeeding benefits
 - ◆ Storage and handling of breastmilk
 - ◆ Breastpumps
 - ◆ Working and breastfeeding

Resources:

- ◆ **LaLeche League International:** www.la lecheleague.org
- ◆ **Medela:** www.medela.com
- ◆ **National Women’s Health Information Center:** www.4women.gov/breastfeeding
- ◆ **Washington Business Group on Health:** www.wbgh.org

3 Recognize local businesses that promote and support breastfeeding.

Why: If recognized, businesses will reap rewards for promoting and supporting breastfeeding. Perception of this activity as a benefit to the organization will encourage more businesses to incorporate breastfeeding-friendly practices into the work environment.

How:

- ◆ Establish criteria for determining whether a business is breastfeeding-friendly.
- ◆ Survey local businesses on what breastfeeding-friendly practices they currently have.
- ◆ Recognize the top breastfeeding-friendly businesses with press releases, television spotlights, during breastfeeding conferences, etc.
- ◆ Create a list of compliant businesses and make it available to breastfeeding support organizations.

Resources:

- ◆ **Colorado Women, Infant, and Children Program:** www.cdphe.state.co.us, or contact 1-800-688-7777.
- ◆ **Creative Research Systems – Survey Design:** www.surveysystem.com/sdesign.htm
- ◆ **Workplace Breastfeeding Support:** www.usbreastfeeding.org/Issue-Papers/Workplace.pdf

4 Educate women in recognizing characteristics of breastfeeding-friendly childcare environments.

Why: To be breastfeeding-friendly, the childcare environment must meet the needs of the baby, the mother, and the staff or caregivers. When choosing a childcare environment that provides infant care, the center should be pleased the infant is being breastfed. The staff should encourage the mother to breastfeed, even after she returns to work or school.

Childcare is offered in a variety of settings. Some extended family members care for the children. This is usually a very nurturing environment but family caregivers may not have information on how to support a mother who is breastfeeding when she returns to work or school. In this instance, the mother may have to provide her own information to the caregiver.

Childcare is also given in private homes. These environments may be licensed or unlicensed and may, or may not, have trained pro-breastfeeding staff. Many women who provide daycare in their own homes have breastfed their own children. However, daycare providers may not have experience with breastfeeding while working outside the home. Breastfeeding mothers may then have to obtain information and support in another manner. A breastfeeding mother should ask what experience the caregivers have with breastfeeding infants in her care.

Childcare centers usually have staff, in the infant room, that have had specialized training to care for infants. For a center to be able to care for infants, the center is required to be licensed, the staff must meet minimum requirements, and there must be appropriate staff/child ratios. In Colorado, it is a Department of Human Services' regulation that infant care centers contract with a licensed nurse to consult with, and monitor, staff, and infant status.

How:

- ◆ The environment should encourage mothers to breastfeed their infants at the childcare setting and offer a quiet, private, clean, and comfortable location to breastfeed.
- ◆ The environment should provide a separate area in the refrigerator and freezer to be used for appropriate storage of expressed breast milk. Each infant's breast milk must be labeled with the infant's name and date the milk was expressed.
- ◆ The environment should have a breastfeeding support training program for all staff that cares for infants. The curriculum developed by the Colorado Child and Adult Care Food Program is used by many centers.
- ◆ Mothers should be given information that helps them transition their infant from home breastfeeding to childcare feeding of breast milk.
- ◆ The infants should be offered breast milk at every feeding, even if some of the feeding has to be formula. Many breast milk benefits continue, as long as the infant is receiving some breast milk.
- ◆ The staff should recognize the advantages to the infant and to themselves, of caring for a breastfed infant.
- ◆ The childcare environment may offer other educational materials or support groups for the breastfeeding mother. Information is available to find resources for breast pumps. The best scenario is that the childcare setting will provide breast pumps for the mothers to use while their child is cared for at the site.

Resources:

- ◆ Dietz, William H., PH.D., F.A.A.P., and Loraine Stern, M.D., F.A.A.P., Editors. *American Academy of Pediatrics Guide to Your Child's Nutrition*.
- ◆ **United States Breastfeeding Committee - Breastfeeding and Child Care:**
www.usbreastfeeding.org
- ◆ **Colorado Department of Public Health and Environment, Child and Adult Care Food Program, *The Breastfed Infant in the Child Care Setting*.** E-mail: Karen.Runner@state.co.us
- ◆ Price, Anne and Nancy Bamford. *The Breastfeeding Guide for the Working Woman*.

5 Apply for funding to purchase breast pumps for breastfeeding women returning to work.

Why: Most employed women (70 percent) with children less than three years of age work full-time. Many times women choose not to continue breastfeeding because they do not have the means to continue. Breast pumps are expensive, costing approximately \$250 for a single-use pump or \$2 a day to rent.

Providing a breast pump to employees returning to work can significantly improve the duration that person chooses to breastfeed.

How:

- ◆ Research mini-grants available to companies for breastfeeding support.
- ◆ Contact the local La Leche League.
- ◆ Contact the local public health department.
- ◆ Contact the state health department.
- ◆ Contact the human resources office to see if breastfeeding is covered in the health insurance plan. If not, how could it be?
- ◆ If you are a non-profit organization, try to have a breastpump donated to your company, check with Medela, Ameda Egnell, diaper companies, etc.
- ◆ Provide low-cost breast pumps for women returning to work.

Resources:

- ◆ **Ameda/Egnell:** www.ameda.com
- ◆ **Medela:** www.medela.com
- ◆ **La Leche League:** www.lalecheleague.org

6 Educate women to recognize family-friendly workplaces.

Why: A woman who decides to work and continue to breastfeed wants to be productive and profitable. In order for this to happen she needs support at home and at work. Women report that working for a family-friendly company helped make their transition back to work easier, made them feel more positive about their employer and they worried less about their family. Studies have also shown that employers who support family values, including the choice to breastfeed, experience better employee morale and loyalty, fewer turnovers, faster return from maternity leave, less employee absenteeism, reduced overtime or temporary worker costs, and lower utilization of employee benefits.

How: Here are some ways to help recognize family-friendly workplaces.

- ◆ The company offers health benefits for the employee and her family that includes lactation support services.
- ◆ The company has a policy in place that allows for adequate time off including maternity leave, sick leave, vacation leave, jury duty, community service leave, and sabbaticals.
- ◆ The company offers telework, flexible work schedules, job sharing or part-time employment.
- ◆ The company provides childcare services that range from on-site child care centers to emergency or back-up childcare to resource materials for new parents.
- ◆ The company supports breastfeeding by allowing a 20-30 minute break both morning and afternoon for a mother to nurse her infant or express her milk.
- ◆ The company provides a private, clean area for breastfeeding or milk expression.
- ◆ The company provides a safe, clean and cool place or container to store expressed milk and has a clean, safe water source and sink nearby for washing hands and equipment.

Resources:

- ◆ **Work Friendly:** www.workfriendly.org
- ◆ **Canada Labor Program:** www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/labour.shtml
- ◆ **Work and Family Balance:** www.workandfamilybalance.com/

Section 4: Website resource descriptions

Ameda/Egnell: <http://ameda.com/index.asp>

Contains information on where to purchase or rent breastpumps, breastfeeding education, and breastfeeding accessories.

Canada Labor Program: http://www.hrsdc.gc.ca/en/gateways/nav/top_nav/program/labour.shtml

The objective of the Labor Program is to promote a fair, safe, healthy, stable, cooperative and productive work environment, which contributes to the social and economic well-being of all Canadians.

Colorado Department of Public Health and Environment, Child and Adult Care Food Program, *The Breastfed Infant in the Child Care Setting*. E-mail: Karen Runner@state.co.us

Colorado WIC Program, Breastfeeding Coordinator: www.cdphe.state.co.us, 1-800-688-7777. Find a local WIC Program or to get more information about WIC and /or breastfeeding.

Congresswoman Carolyn Maloney addresses federal breastfeeding legislation:

www.house.gov/maloney/issues/breastfeeding

This site provides information on legislation for breastfeeding issues.

Creative Research Systems – Survey Design: www.surveysystem.com/sdesign.htm

This site discusses options and provides suggestions on how to design and conduct a successful survey project. It does not provide instruction on using specific parts of The Survey System, although it mentions parts of the program that can help you with certain tasks.

International Lactation Consultant Association: www.ilca.org

A worldwide network of lactation professionals working to advance the profession of lactation consulting through leadership, advocacy, professional development, and research

LaLeche League International: www.lalecheleague.org

Provides help to mothers worldwide to breastfeed through mother-to-mother support, encouragement, information, and education to promote a better understanding of breastfeeding as an important element in the healthy development of baby and mother.

Medela: www.medela.com

Breastfeeding products and information.

National Women’s Health Information Center: www.4woman.gov/Breastfeeding

This site provides practical, helpful breastfeeding information.

Washington Business Group on Health: www.wbgh.org

The Washington Business Group on Health (WBGH), established in 1974, is a nonprofit 501(C)(3) organization that works to stimulate and foster corporate leadership and partnership in promoting performance-driven health care systems. In partnership with the Maternal and Child Health Bureau, Department of Health and Human Services, the Washington Business Group on Health has implemented a number of innovative programs to foster communication and collaboration between the traditional maternal and child health community and corporate America.

Work Place Breastfeeding Support: www.usbreastfeeding.org/Issue-Papers/Workplace.pdf

A guide outlining the importance of supporting breastfeeding in the workplace, includes information on how to set up a supportive environment and resources.

Work and Family Balance: www.workandfamilybalance.com/

Information on setting up a family-friendly workplace.

Work Friendly: www.workfriendly.org

Work Friendly's mission is to educate employers about the benefits of work/life programs for their organization, their employees, and the community.

United States Breastfeeding Committee - Breastfeeding and Child Care:

www.usbreastfeeding.org

Contains information about the USBC, events and news, related resources, and contact information.

United States Breastfeeding Committee: www.usbreastfeeding.org/StratPlan.html

Outlines the USBC's strategic goals for breastfeeding in the United States.

Section 5: Research

Conduct research that assesses the current status of support of the breastfeeding mother in Colorado.

Action Steps:

1. Help to formally evaluate programs breastfeeding action steps before and after implementation to measure their effects on breastfeeding rates in Colorado.
2. Explore racial disparities among women in Colorado and support research regarding practical interventions in this area towards reaching Healthy People 2010 breastfeeding goals.
3. Continue to survey the delivery nurseries in this state as to best breastfeeding practices.

1 Help to formally evaluate programs and breastfeeding action steps before and after implementation to measure their effects on breastfeeding rates in Colorado.

Why: Evaluation is needed to provide evidence that a program or action taken is working well, or to suggest strategies for improvement. Information obtained can be used to help identify gaps in services, to guide planning or revision of needed interventions for a cost/benefit analysis and to inform policy decisions that will support breastfeeding. Program evaluation is also essential for grant funding efforts.

How:

- ◆ Monitor current breastfeeding initiation and duration rates in Colorado using Colorado Pregnancy Risk Assessment Monitoring System data and Colorado Women, Infants and Children data. Pregnancy Risk Assessment Monitoring System data can also be used to examine maternal experiences of hospital practices and policies related to breastfeeding, as well as barriers to breastfeeding.
- ◆ Make use of data from existing and planned state and national infant feeding surveys to assess the status of the population in Colorado.
- ◆ Qualitative data, such as observations and focus groups, can also be used.
- ◆ Carry out surveys to address Colorado-specific breastfeeding questions that emerge.
- ◆ Collaborate with faculty and students from Colorado universities for survey development, implementation, and data analysis.
- ◆ Disseminate research findings on a state and national level. Consider submission of research to peer-reviewed journals.
- ◆ A smaller organization can contact the Colorado Breastfeeding Task Force or local colleges for direction and help with the evaluation process.

Resources:

- ◆ **Colorado Department of Public Health and Environment, Health Statistics Section. PRAMS and other state epidemiological resources.** www.cdphe.state.co.us/hs/hsshom.asp
- ◆ **Colorado State University, Department of Food Science and Human Nutrition; other university contacts and programs.**
- ◆ **Colorado WIC Program, Breastfeeding Coordinator:** www.cdphe.state.co.us, 303-692-2400/1-800-688-7777
- ◆ **Centers for Disease Control and Prevention:** www.cdc.gov/breastfeeding
- ◆ **Maternal and Child Health Bureau:** www.mchb.hrsa.gov/

Potential funding sources:

- ◆ United States Department of Agriculture grants
- ◆ Maternal and Child Health Bureau
- ◆ Colorado Breastfeeding Task Force

2 Explore racial disparities among women in Colorado and support research regarding practical interventions in this area towards reaching Healthy People 2010 breastfeeding goals.

Why: Breastfeeding rates are the lowest within specific ethnic groups. Research is needed to better understand current racial disparities related to breastfeeding among women in Colorado and its communities. Information gathered will identify needs for interventions, programs, and policies to help eliminate racial disparities.

How:

- ◆ Make use of data from existing Pregnancy Risk Assessment Monitoring Data and planned state and national infant feeding surveys to assess the status of the population in Colorado.
- ◆ Carry out surveys to address Colorado-specific questions that emerge.
- ◆ Collaborate with faculty and students from Colorado universities for survey development, implementation, data analysis and dissemination of research findings.
- ◆ Develop an intervention based on the research findings.
- ◆ Pilot your intervention in hospitals, physician offices, public health departments or other community programs.
- ◆ Publish and disseminate findings.

Resources:

- ◆ **Colorado Department of Public Health and Environment, Health Statistics Section. PRAMS and other state epidemiological resources.** www.cdphe.state.co.us/hs/hsshom.asp
- ◆ **Colorado State University, Department of Food Science and Human Nutrition:** www.cahs.colostate.edu/fshn

Other Epidemiological Resources for Colorado:

- ◆ **Centers for Disease Control and Prevention:** www.cdc.gov/breastfeeding
- ◆ **Maternal and Child Health Bureau:** www.mchb.hrsa.gov/

3 Continue to survey the delivery nurseries in Colorado as to best breastfeeding practices.

Why: Expansion of practices and policies supportive of breastfeeding is needed in all Colorado hospitals to promote breastfeeding initiation and continuation. Ongoing surveillance of hospital infant feeding practices and policies can help identify breastfeeding promotion and support for Colorado delivery nurseries. Data collected from Colorado hospitals can be compared to other state and national data.

How:

- ◆ Utilize existing and future state and national surveys to assess hospital policies and practices that support breastfeeding.
- ◆ Monitor changes in hospital practices and policies that support breastfeeding. Assess the relationship between policy change and breastfeeding rates.
- ◆ Pregnancy Risk Assessment Monitoring System data can be used to examine maternal experiences of hospital practices and policies related to breastfeeding.
- ◆ Disseminate research findings on the local, state, and national levels to support efforts to encourage more “Baby-Friendly” hospital policies and practices.

Resources:

- ◆ **Baby Friendly Hospital Initiative:** www.babyfriendlyusa.org
- ◆ **Centers for Disease Control and Prevention:** www.cdc.gov/breastfeeding
- ◆ **Colorado Department of Public Health and Environment, Health Statistics Section. PRAMS and other state epidemiological resources.** www.cdphe.state.co.us/hs/hsshom.asp
- ◆ **Colorado State University, Department of Food Science and Human Nutrition:** www.cahs.colostate.edu/fshn
- ◆ Naylor A. “Baby friendly hospital initiative.” *Pediatr Clin North Am.* 48:2 (2001): 475-83.
- ◆ **Results of survey of Colorado Hospital Policies and Practices that Support Breastfeeding** (carried out in 2003) will be available soon. Contact Liz Adams at liz.adams@colostate.edu.
- ◆ **World Health Organization:** Protecting, Promoting, and Supporting Breastfeeding: The Special Role of Maternity Services. A Joint WHO/UNICEF Statement. Geneva, WHO, 1989.

Section 5: Website resource descriptions

Baby Friendly Hospital Initiative: www.babyfriendlyusa.org

The Baby-Friendly Hospital Initiative (BFHI) is based on the WHO/UNICEF *Ten Steps to Successful Breastfeeding*, and recognizes hospitals and birth centers that have taken steps to provide an optimal environment for the promotion, protection, and support of breastfeeding.

Colorado Department of Public Health and Environment, Health Statistics Section. PRAMS and other state epidemiological resources. www.cdphe.state.co.us/hs/hsshom.asp

The Health Statistics Section promotes understanding and utilization of health status information through the collection, analysis, and dissemination of vital event and health survey data. The section strives to provide accurate, timely, and valuable information in formats that serve the needs of its customers.

Colorado State University, Department of Food Science and Human Nutrition: www.caHS.colostate.edu/fshn/

Provides up-to-date information on the department and its activities.

Colorado WIC Program, Breastfeeding Coordinator: www.cdphe.state.co.us, 303-692-2400/1-800-688-7777

To find a local WIC Program or to get more information about WIC and /or breastfeeding.

Centers for Disease Control and Prevention: www.cdc.gov/breastfeeding

Highlights some of the many programs and services currently promoting and supporting breastfeeding within health care, worksites, and communities nationwide. Learn what's happening within the federal government and in your state and what major policies are influencing breastfeeding promotion throughout the United States.

Maternal and Child Health Bureau: www.mchb.hrsa.gov/

This site provides information about MCHB, funding opportunities, data, and resources and publications.

Results of survey of Colorado Hospital Policies and Practices that Support Breastfeeding (carried out in 2003) will be available soon. Contact Liz Adams at liz.adams@colostate.edu.

World Health Organization: www.who.int/en

Protecting, Promoting, and Supporting Breastfeeding: The Special Role of Maternity Services. A Joint WHO/UNICEF Statement. Geneva, WHO, 1989.

This page provides links to descriptions of activities, reports, news and events, as well as contacts and cooperating partners in the various WHO programs and offices working on breastfeeding.

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Videos on Breastfeeding

For Use With Consumers*

*We provide this list as a service; we do not officially endorse any of these items.
This list is not all encompassing.*

A Healthier Baby by Breastfeeding

Bright Future Lactation Resource Center
6540 Cedarview Ct.
Dayton, OH 45459-1214
Phone: (937) 438-9458
Fax: (937) 438-3229
E-mail: lindaj@bflrc.com
Online: www.bflrc.com
\$24, 20 minutes, 1991
Spanish available

Best Start: For All The Right Reasons

Best Start Social Marketing
4809 E. Busch Blvd., Suite 104
Tampa, FL 33617
Phone: 1-800-277-4975
Fax: (813) 971-2280
E-mail: beststart@beststartinc.org
\$25, 22 minutes, 1990
Spanish available

Nobody Loves Them Like You

Best Start Social Marketing
4809 E. Busch Blvd., Suite 104
Tampa, FL 33617
Phone: 1-800-277-4975
Fax: (813) 971-2280
E-mail: beststart@beststartinc.org
\$25, 22 minutes, 1994
Spanish available

Breastfeeding and Working – It's Worth the Effort

Texas Department of Health
Replicopy (distributor)
8300 Research Boulevard
Austin, TX 78758
Phone: (512) 419-1166
Fax: (512) 419-1168
E-mail: replicopy@austin.rr.com
Online: www.replicopy.com
\$15, 15 minutes, 1994
Spanish available

Breastfeeding Basics

Volume 1-**The Breastfeeding Game**
Volume 2-**Valerie's Diary**
Volume 3-**Straight Talk From Breastfeeding Moms**
Volume 4-**Simple Solutions**
Injoy Videos
1435 Yarmouth, Suite 102-B
Boulder, CO 80304
Phone: 1-800-326-2082
Fax: (303) 449-8788
Online: www.injoyvideos.com
\$149.95 each/\$499.95 for all 4 volumes
22 minutes per volume, 1999

Breastfeeding: Better Beginnings

Injoy Videos
1435 Yarmouth, Suite 102-B
Boulder, CO 80304
Phone: 1-800-326-2082
Fax: (303) 449-8788
Online: www.injoyvideos.com
\$59.95, 20 minutes, 1998
Spanish available

Breastfeeding: Coping With The First Week

Mark-It Television
Childbirth Graphics (distributor)
A division of WRS Group, Inc.
Box 21207
Waco, TX 76702-1207
Phone: 1-800-299-3366, Ext. 295
Fax: 1-888-977-7653
E-mail: sales@wrsgroup.com
Online: www.wrsgroup.com
\$79.95, 30 minutes, 1996

Breastfeeding: A Special Relationship

Childbirth Graphics (distributor)
 P.O. Box 21207
 Waco, TX 76702-1207
 Phone: 1-800-299-3366, Ext. 287
 Fax: 1-888-977-7653
 E-mail: sales@wrsrgroup.com
 Online: www.childbirthgraphics.com
 \$79, 24 minutes, 1999
 Comes with hand-out tear-off pad
 Spanish available

Breastfeeding and Basketball

(a video for dads)
 Injoy Videos
 1435 Yarmouth, Suite 102-B
 Boulder, CO 80304
 Phone 1-800-326-2082
 Fax: (303) 449-8788
 Online: www.injoyvideos.com
 \$79.95, 8 minutes, 1999

Breastfeeding: It's A Mother's Choice

Universal Health Communications, Inc.
 1200 South Federal Highway, Suite 202
 Boynton Beach, FL 33435
 Phone: 1-877-929-0870
 Fax: (561) 731-5877
 E-mail: uho@bellsouth.net
 Online: www.universalhealthonline.com
 \$59, 18 minutes, 1992

Breastfeeding Techniques That Work

Volume 1-First Attachment
 Volume 2-First Attachment In Bed
 Volume 3-First Attachment After a Cesarean
 Volume 4-Burping The Baby
 Volume 5-Successful Working Mothers
 Volume 6-Hand Expression
 Volume 7-Supplemental Nursing System
 Volume 8-The First Week
 Geddes Productions
 Box 41761
 Sunland, CA 91041-0761
 Phone: (818) 951-2809
 Fax: (818) 951-9960
 E-mail: geddespro@aol.com
 Online: www.geddespro.com
 \$39.95 each
 Spanish available for Volumes 1, 4, 6, 7

**Breastfeeding: The How-To Video
and****Breastfeeding: The Why-To Video**

Vida Health Communications
 6 Bigelow Street
 Cambridge, MA 02139
 Phone 1-800-550-7047
 Fax (617) 864-7862
 E-mail: information@vida-health.com
 Online: www.vida-health.com
 \$195 each/\$295 for both videos, 1998
 Why-To video 19 minutes, How-To video 25 minutes

Breastfeeding-The Myths & Barriers

Missouri Department of Health
 Bureau of Nutrition Services & WIC
 Box 570, 930 Wildwood
 Jefferson City, MO 65102-0570
 Phone: (573) 751-6204
 Fax: (573) 526-1470
 E-mail: raymob@mail.health.state.mo.us
 \$18.50, 20 minutes, 1993

Breastfeeding Your Preterm Baby series

Tape 1-You Can Breastfeed Your Preterm Baby
 Tape 2-Expressing Milk for Your Preterm Baby
 Tape 3-Nursing Your Preterm Baby
 Health Sciences Center for Educational Resources,
 Box 357161
 Seattle, WA 98195
 Phone: (206) 685-1186
 Fax: (206) 543-8051
 E-mail: center@u.washington.edu
 \$200 for complete training package,
 \$90 for individual tapes
 3 videos, total time is 38 minutes, 1989

**Double Duty-The Joys and Challenges of Care for
Newborn Twins**

Breastfeeding Support Network, Inc.
 2050 West 9th Ave.
 Oshkosh, WI 549047
 Phone: 1-888-666-7224
 E-mail: toman@momsbags.com
 Online: www.momsbags.com
 \$29.95, 16 minutes, 1998

Giving You the Best That I Got, Baby

Maryland WIC Program
 John Hopkins University
 Center for Communication (distributor)
 Media/Materials Clearinghouse
 111 Market Place, Suite 310
 Baltimore, MD 21202-4024
 Phone: (410) 659-6290
 \$20, 14 minutes, 1994

Infant Cues: A Feeding Guide

Mark-It Television
 Childbirth Graphics (distributor)
 A division of WRS Group, Inc.
 Box 21207
 Waco, TX 76702-1207
 Phone: 800-299-3366, Ext. 295
 E-mail: sales@wrsgroup.com
 Online: www.wrsgroup.com
 \$69.95, 10 minutes, 1998
 English titles, Spanish subtitles, no narration

**Learning How to Breastfeed Your Baby:
Breastfed is Best Fed**

Maryland WIC Program
 Morgan State University (distributor)
 Dr PH Programs
 Jenkins, Room 343
 1700 East Cold Spring Lane
 Baltimore, MD 21251
 Phone: (443) 885-3238
 \$15, 14 minutes, 1997

Teen Breastfeeding: The Natural Choice

Volume I: **Why Breastfeed?**
 Volume II: **Starting Out Right!**
 Injoy Videos
 1435 Yarmouth, Suite 102-B
 Boulder, CO 80304
 Phone: 1-800-326-2082
 Fax: (303) 449-8788
 Online: www.injoyvideos.com
 \$79.95 each/\$139.95 for both volumes
 20 minutes per volume, 1998
 Spanish available

The Benefits of Breastfeeding

Eagle Video Production, Inc
 2201 Woodnell Drive
 Raleigh, NC 27603-5240
 Phone: (919) 779-7891
 Fax: (919) 779-7284
 E-mail: bruce@eaglevideo.com
 Online: www.eaglevideo.com
 \$59, 21 minutes, 1999
 Spanish available

The Case For Breastfeeding

AGC United Learning
 1560 Sherman Avenue, Suite 100
 Evanston, IL 60201
 Phone: 1-800-323-9084
 Fax: (847) 328-6706
 E-mail: info@agcunited.com
 Online: www.agcunited.com
 \$95, 13 minutes, 1992
 Spanish available

The Joy of Breastfeeding

AGC United Learning
 1560 Sherman Avenue
 Evanston, IL 60201
 Phone: 1-800-323-9084
 Fax: (847) 328-6706
 E-mail: info@agcunited.com
 Online: www.agcunited.com
 \$195, 12 minutes, 1994
 Spanish available

**Through Their Eyes: Breastfeeding The Gift for
Life**

Amy Spangler
 Box 501046
 Atlanta, GA 31150-1046
 Phone: 770-913-9332
 Fax: 770-913-0822
 E-mail: amyspangler@daddymommyandme.com
 Online: www.daddymommyandme.com
 \$19.50, 3 minutes, 1997, no narration

Yes, You Can Breastfeed

Texas Department of Health
 Replicopy (distributor)
 8300 Research Boulevard
 Austin, TX 78758
 Phone: (512) 419-1166
 Fax: (512) 419-1168
 E-mail: replicopy@austin.rr.com
 Online: www.replicopy.com
 \$15, 15 minutes, 1989
 Spanish available

14 Steps to Better Breastfeeding

Injoy Videos
 1435 Yarmouth, Suite 102 B
 Boulder, CO 80304
 Phone: 1-800-326-2082
 Fax: (303) 449-8788
 Online: www.injoyvideos.com
 \$99.95, 16 minutes, 2000
 Spanish available

*Some videos may need professional
 interpretation

Compiled and distributed by the Bureau of
 Nutrition and WIC-Iowa Department of Public
 Health

Updated March 2001

“Breastfeeding in the Informational Age” Websites for Health Care Providers

Academy of Breastfeeding Medicine:

<http://www.bfmed.org>

- Worldwide organization of physicians dedicated to supporting breastfeeding
- Quarterly newsletter with clinically useful, current breastfeeding management information.

American Academy of Pediatrics:

<http://www.aap.org>

- Networking and breastfeeding educational opportunities for AAP members
- Recommended Breastfeeding Pediatric Office Practices
- Breastfeeding Position Statement

Dr. Thomas Hale’s Pharmacology:

<http://neonatal.ttuhscc.edu/lact/index.html>

- Information on medications and breastfeeding
- 2500 frequently asked questions about breastfeeding
- Ask your lactation consultant forum

Breastfeeding Online:

<http://www.breastfeedingonline.com>

- Geared towards parents though includes practical articles by Dr. Jack Newman on multiple breastfeeding topics
- Frequently asked questions and online bookstore

Bright Future Lactation Resource Centre:

<http://www.bflrc.com>

- Resources and information for health care providers and lactation consultants
- Exam preparation course for lactation consultant certification
- Patient educational handouts and promotional products

Breastfeeding Basics:

www.breastfeedingbasics.org

- Interactive academic short course on the fundamentals of breastfeeding geared primarily for the medical practitioner, although anyone can take the course.
- CME credit available

International Lactation Consultant Association:

<http://www.ilca.org>

- Membership, conferences, publications for lactation consultants

La Leche League International:

<http://www.lalecheleague.org>

- Practical breastfeeding information arranged by topics
- Frequently asked questions
- Locate a La Leche League support group for breastfeeding mothers

Nursing Mothers Association of Australia:

<http://www.nmaa.asn.au>

- Information for professionals and parents
- Pamphlets available to order

World Alliance for Breastfeeding Action:

<http://www.waba.org.br>

- Information about world breastfeeding week
- Political site for breastfeeding advocacy

Congresswoman Carolyn B. Maloney:

<http://www.house.gov/maloney>

- Breastfeeding legislation
- Corporation lactation support
- Economic benefits of breastfeeding

Other Important Resources

Breastfeeding Classes for Mothers

Example of 90 minute class, notes and outline (5 pages) <http://transitiontoparenthood.com//ttp/foreducators/outlines/BF90.htm>

Curriculum development and education resources for health professionals

Wellstart website link:

Resources are well outlined at www.wellstart.org/resources.html in area on "Curriculum development resources for health care provider educators"©.

Unicef, World Health Organization Baby-Friendly Ten Steps Initiative

Ten Step Initiative available to download from this link: www.unicef.org/newsline/tenstps.htm

National Ad Council Campaign

"Babies were born to be breastfed" Go to: www.4woman.gov

View Commercials, print media and hear radio spots, and public information
1-800-4WOMAN Breastfeeding Support Line

Best Start Social Marketing

Request Final Research Brief

Using Loving Support to Supplement Best Practices in Peer Counseling. FNS Contact 58-3198-1-050 June 2004. Contact Information: Beststart Social Marketing, Tampa, FL 33617
Phone (800) 277-4975 Toll Free

Peer Counselor Programs

WIC Learning Center link: http://www.nal.usda.gov/wicworks/Learning_Center/support_faq2.html

Specific Examples:

Texas: www.tdh.state.tx.us/lactate/2003over.htm

Mississippi: Mississippi State Department of Health, 570 East Woodrow Wilson Drive
P.O. Box 1700, Jackson, MS 39215, Telephone: (601) 576-7100 or

Toll-free in-state: 1-800-489-7670

Breastfeeding in the Workplace

CDC Link: <http://www.cdc.gov/breastfeeding/support-workplace.htm>

Breast Pump Insurance Letter

Nutrition in the Very Low Birth Weight (VLBW) Infant in CPQCC Toolkit www.cpqcc.org

Breastfeeding Legislation

La Leche League International

www.lalecheleague.org/newlinks.html

Information on the status of breastfeeding legislation

www.lalecheleague.org/ed/PhysSem04.html

Use the practical experiences gained in the passage of legislation

www.lalecheleague.org/05conf/speakers.html

Legal Issues in Breastfeeding: Family Law, Legislation, Employment, Nursing

Breastfeeding legislation

Pointers on enacting breastfeeding legislation and how to deal with existing legislation.

www.lalecheleague.org/cbi/journal.html

Implementing legislation

www.lalecheleague.org/Law/summary.html

A Current Summary of Breastfeeding Legislation in the U.S.

Colorado Hospital Survey

Please complete the following information so that we can contact you if we have questions about your survey. This contact information will not be linked with your responses. Your participation is very much appreciated and will be a help to the mothers, infants and families of Colorado!

CONTACT INFORMATION

1. Name and Job Title of person completing survey:

2. Name of Hospital:

3. Address:

4. Telephone Number (Daytime): () _____ - _____ Ext. _____

5. Internet Address: _____

Thank you very much for taking the time to complete this survey.

Please mail your completed survey to:

Colorado Department of Public Health and Environment
WIC Program
4300 Cherry Creek Drive South
Denver, Colorado 80246
ATTN: Jennifer Dellaport

*Survey of Colorado Hospitals - Infant Feeding Policies & Practices***HOSPITAL DATA**

6. How many births take place per year at your hospital?
- Under 300 301 - 499 500 - 999 1000 - 1499
 1500 - 1999 2000 - 2499 2500 - 2999 3000 or over
7. Does your hospital have any licensed NICU beds?
- Yes No
8. Approximately, what percentage of deliveries are covered by Medicaid?
- ≤ 20% 21% - 40% 41% - 60% 61% - 80% > 80%
9. Approximately what percentage of new mothers in your hospital practice exclusive breastfeeding upon discharge?
- ≤ 25% 26% - 50% 51% - 75% >75%

Please provide your best estimate. We know that many hospitals do not have information available to calculate this. What is the source/basis for this estimate? _____

10. Approximately what percentage of new mothers in your hospital practice any form of breastfeeding upon discharge?
- ≤ 25% 26% - 50% 51% - 75% > 75%

What is the source/basis for this estimate? _____

HOSPITAL POLICIES AND PRACTICES

11. Does your hospital have a written policy that promotes and supports breastfeeding?
- Yes No (go to question #12) In progress
- a. If Yes, please send a copy of the policy with your survey response.
- b. If Yes, please check all areas that the policy applies to:
- Entire hospital Postpartum
 L & D NICU
 Nursery Pediatrics
- c. Which of the following staff are involved with breastfeeding policy development and review? (Check all that apply.)
- Hospital Administrator Medical Staff
 Nursing Staff Lactation Specialist(s)
 Nutrition Staff Other: _____
- d. What proportion of your perinatal staff receive standardized training necessary to implement the breastfeeding policy? Please answer for each of the following areas:
- Labor & Delivery:
- 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- Postpartum:
- 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%

- Newborn nursery:
 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- NICU (if applicable):
 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- Pediatrics:
 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%

Hospital Policies and Practices, question 11, continued

- e. Does your hospital perform quality improvement activities related to the breastfeeding policy?
- Yes No
- f. Does your hospital policy specify when breastfeeding should be initiated?
- Yes No
- If Yes, when?
- Within 30 minutes
 Within 1 hour
 Within 2 hours
 Other, please specify _____
- g. Does the hospital policy encourage breastfeeding when the infant shows signs of hunger as opposed to feeding on a schedule?
- Yes No
12. Does your hospital have a written procedure for implementing 24-hour rooming-in? (Rooming-in refers to keeping the mother and infant together throughout the hospital stay, with the infant at the mother's bedside continuously.)
- Yes (go to 12a and 12b) No (go to 12c, 12d, 12e)
- a. If Yes, what is the approximate percentage of mothers in your hospital who participate in 24-hour rooming-in?
- 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- b. If Yes, is rooming-in provided in ALL postpartum rooms?
- Yes No If No, rooming-in is provided in which rooms? (Check all that apply.)
- private room
 shared room (2+ mothers per room)
 shared room only with both/all mother's agreement
- c. If No, what is the approximate percentage of mothers in your hospital who participate in 24-hour rooming-in?
- 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- d. If No, is rooming-in provided at the mother's request?
- Yes No
- e. If No, does your hospital policy provide an opportunity for a mother to request that the infant be brought to her to be breastfed, any time of day or night?
- Yes No

13. When water or glucose water is given to breastfeeding babies, what are the reasons for doing so? (Check all that apply.)
- | | |
|--|---|
| <input type="checkbox"/> Hospital's routine for breastfeeding babies | <input type="checkbox"/> Bottle is given before initial breastfeeding |
| <input type="checkbox"/> At discretion of the nursing staff | <input type="checkbox"/> At mother's request |
| <input type="checkbox"/> Physician's orders in special circumstances | <input type="checkbox"/> At night when the mother is sleeping |
| <input type="checkbox"/> Physician's routine orders | <input type="checkbox"/> Other, please specify _____ |
| <input type="checkbox"/> Not applicable, neither water nor glucose water is given to breastfeeding infants | |
14. When formula is given to breastfeeding infants, what are the reasons for doing so? (Check all that apply.)
- | | |
|--|---|
| <input type="checkbox"/> Hospital routinely supplements breastfeeding babies | <input type="checkbox"/> Bottle is given before initial breastfeeding |
| <input type="checkbox"/> At discretion of the nursing staff | <input type="checkbox"/> At mother's request |
| <input type="checkbox"/> Physician's orders in special circumstances | <input type="checkbox"/> At night when the mother is sleeping |
| <input type="checkbox"/> Physician's routine orders | <input type="checkbox"/> Other, please specify _____ |
| <input type="checkbox"/> Not applicable, formula is not given to breastfeeding infants | |
15. Is soy formula routinely prescribed to infants placed on formula?
- Yes No
16. How does your staff feed breastfed infants that require supplementation? (Check all that apply.)
- | | |
|--------------------------------------|--|
| <input type="checkbox"/> Bottle | <input type="checkbox"/> Cup Feed |
| <input type="checkbox"/> Finger Feed | <input type="checkbox"/> Gavage Feed |
| <input type="checkbox"/> Spoon Feed | <input type="checkbox"/> Supplemental Nursing System |
| <input type="checkbox"/> Dropper | <input type="checkbox"/> Other, please list: _____ |
| <input type="checkbox"/> Syringe | |
17. When pacifiers are given to healthy breastfeeding infants, what are the reasons for doing so? (Check all that apply.)
- | |
|---|
| <input type="checkbox"/> Routine for all newborns |
| <input type="checkbox"/> At mother's request |
| <input type="checkbox"/> Comfort during a painful procedure, such as circumcision or blood draw |
| <input type="checkbox"/> At discretion of nursing staff |
| <input type="checkbox"/> Other, please specify _____ |
| <input type="checkbox"/> Not applicable, pacifiers are not given to breastfeeding infants. |

BREASTFEEDING EDUCATION AND SUPPORT

18. Does your hospital employ a hospital designated lactation coordinator (a person who is trained in breastfeeding physiology and management, and is responsible for ensuring the implementation of a breastfeeding program)?
- Yes No (go to question #19)
- a. If Yes, what are their credentials? (Check all that apply.)
- Registered Nurse (RN) Certified Lactation Educator (CLE)
 IBCLC Certified Lactation Counselor (CLC)
 Registered Dietitian (RD) Other (Please List) _____
 Certified Nurse Midwife (CNM)
- b. How many full time equivalents (FTEs) are exclusively dedicated to lactation support? _____
19. When do nurses recommend that the mother initiate the first feeding after birth for women who have decided to breastfeed?
- In the first 30 minutes In the first hour In the first two hours Other, please specify _____

20. What proportion of your perinatal staff receives standardized training about management of the breastfeeding mother/infant pair? Please answer for each of the following areas:
- Labor & Delivery:
 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- Postpartum:
 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- Newborn nursery:
 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- NICU (if applicable):
 0% 1% - 20% 21% - 40% 41% - 60% 61% - 80% > 80%
- a. What standardized training does your hospital utilize?
- demonstrated competencies Training curriculum Other _____
- b. After training, are staff assessed for their level of competency in the area of breastfeeding management and support?
- Yes No
- c. If yes, what is the means of evaluation?
- Written evaluation Observed checklist Oral exam Other _____
21. Are the mother-baby couples routinely assessed for breastfeeding effectiveness while in the hospital?
- Yes No

22. When a breastfeeding assessment is conducted, is it routinely charted in the medical record?

- Yes No

23. When the mother-baby couple is assessed in the hospital, who is responsible for conducting the breastfeeding assessment? (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Registered Nurse (RN) | <input type="checkbox"/> Certified Lactation Educator (CLE) |
| <input type="checkbox"/> Licensed Vocational Nurse (LVN) | <input type="checkbox"/> Certified Lactation Counselor (CLC) |
| <input type="checkbox"/> Registered Dietitian (RD) | <input type="checkbox"/> IBCLC |
| <input type="checkbox"/> Certified Nurse Midwife | <input type="checkbox"/> Other, please specify: _____ |

24. Does your hospital use a standard tool to assess breastfeeding effectiveness?

- Yes No

If Yes, please attach a copy of the tool to your completed survey.

25. Are mothers advised to limit each breastfeeding session (e.g. nurse for 5, 10 or 15 minutes on each breast)?

- Never Sometimes Always

26. Are mothers helped with breastfeeding while in the hospital following delivery?

- Yes No

If Yes, which mothers?

- All mothers
 Only mothers who choose to breastfeed
 Only mothers who request assistance
 Not routinely done

27. If breastfeedings are incomplete, ineffective or the mother is separated from her infant, is the mother routinely instructed by an experienced staff member to begin regular pumping of her breasts?

- Yes No

If Yes, is continued assistance available from an experienced staff member?

- Yes No

28. Does your hospital provide any of the following to hospital staff who are breastfeeding mothers? (Check all that apply.)

- A room to express milk
 On-site child care for breastfeeding infant of hospital staff
 Electric breast pump for hospital staff use
 Breastfeeding breaks for hospital staff
 Breastfeeding support group for hospital staff

- Maternity or parental leave (please describe):

29. Are discharge packs containing formula or formula coupons given to breastfeeding mothers?

- Yes No

30. What is the source of the patient education materials (i.e. pamphlets, videos, etc.) that your hospital routinely gives to breastfeeding mothers? (Check all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> American Academy of Pediatrics | <input type="checkbox"/> Best Start |
| <input type="checkbox"/> Formula company discharge packs | <input type="checkbox"/> Hospital produced materials |
| <input type="checkbox"/> La Leche League | <input type="checkbox"/> WIC |
| <input type="checkbox"/> Childbirth Graphics | <input type="checkbox"/> American College of Obstetricians and Gynecologists (ACOG) |
| <input type="checkbox"/> Formula company breastfeeding pamphlets or videos | <input type="checkbox"/> International Childbirth Education Association (ICEA) |
| | <input type="checkbox"/> Other, please specify: |

31. Are patient education materials available in more than one language?

- Yes No

32. Do you have a need for breastfeeding education materials in languages other than English?

- Yes No

- a. If Yes, which languages?

- Spanish Chinese Russian Other _____

33. What support does your hospital routinely offer to breastfeeding mothers at discharge? (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Postpartum telephone call by hospital staff | <input type="checkbox"/> Telephone number for patient to call 24 hours/day |
| <input type="checkbox"/> Postpartum follow-up visit < 48 hours | <input type="checkbox"/> Referral to a Public Health Nurse |
| <input type="checkbox"/> Postpartum follow-up visit 48 - 72 hours after discharge | <input type="checkbox"/> Referral to a Lactation Consultant |
| <input type="checkbox"/> Postpartum follow-up visit 3 - 5 days after discharge | <input type="checkbox"/> Referral to WIC |
| <input type="checkbox"/> Postpartum follow-up visit more than 5 days after discharge | <input type="checkbox"/> Referral to other breastfeeding support groups (e.g. La Leche League) |
| <input type="checkbox"/> Home visit after discharge | <input type="checkbox"/> Referral to an outpatient lactation clinic |
| <input type="checkbox"/> Telephone follow-up after discharge | <input type="checkbox"/> List of community resources for breastfeeding help |
| <input type="checkbox"/> Hospital-based breastfeeding support group | <input type="checkbox"/> Breastfeeding assessment sheet |
| ___ For all breastfeeding mothers | <input type="checkbox"/> Other _____ |
| ___ For high risk breastfeeding cases only | |
| ___ Other | <input type="checkbox"/> None |

Professional Credentials and Descriptions

- **IBCLC** - International Board Certified Lactation Consultant. An IBCLC is a health care professional who specializes in the clinical management of breastfeeding. IBCLCs are certified by the International Board of Lactation Consultant Examiners under the direction of the US National Commission for Certifying Agencies. An IBCLC has had extensive formal lactation education and clinical training, has passed an international certification exam and has continuing education requirements in lactation. May also use term “Registered” (RLC).

Some breastfeeding specialists carry other credentials such as:

- **CLC** (Certified Lactation Counselor or Certified Lactation Consultant)
- **CLE** (Certified Lactation Educator)
- **CBE** (Certified Breastfeeding Educator), etc.

The above credentials mean that the person has taken additional training in lactation management but is not nationally certified.

Volunteer Organization Accreditation

- **LLLL** - La Leche League Leader. An LLLL is an experienced breastfeeding mother, familiar with research and current findings dealing with breastfeeding, who offers practical information and encouragement to nursing mothers through monthly meeting and one-to-one help. An LLLL has completed specific reading and introspection and has finished the extensive written training curriculum and other accreditation requirements established by La Leche League International.

Other Professional Credentials

BA/ BS/ BSN - Bachelor of Arts/Science/Nursing
 CBE - Childbirth Educator
 CCE - Certified Childbirth Educator
 CD - Certified Doula
 CHES - Certified Health Education Specialist
 CMT - Certified Massage Therapist
 CNM - Certified Nurse Midwife
 CNS - Certified Nutrition Specialist
 FACCE - Fellow of American College of Childbirth Educators
 ICCE - ICEA Certified Childbirth Educator
 LCCE - Lamaze Certified Childbirth Educator (formerly ACCE)
 LD - Labor Doula
 LM - Licensed Midwife
 LVN - Licensed Vocational Nurse
 MA /MS /MN - Master of Arts /Science /Nursing
 MD - Medical Doctor
 MPH - Master of Public Health
 (CP) NP - (Certified Pediatric) Nurse Practitioner
 OT - Occupational Therapist
 PT - Physical Therapist
 RD - Registered Dietitian
 RN(C) - Registered Nurse (Certified)