Guide to Compass Breastfeeding Reports

August 2013

Compass Breastfeeding Reports

This guide provides individual descriptions for each the breastfeeding reports.

Important points to know:

- Breastfeeding reports are only as good as the data that is entered. The integrity of the reports is dependent on frequent documentation of breastfeeding status (i.e., accuracy of food/liquid introduction and breastfeeding description), equipment issuance and peer counselor contacts.
- These reports will provide baseline data using Compass data collection and reporting systems. The data may not be comparable with the previous ASPENS WIC data collection and CDC PedNSS reporting system.
- Breastfeeding reports that include participant names and/or identification numbers must be kept confidential.
- Reports that describe breastfeeding rates by participant characteristics do not control for other factors that can possibly produce the same effect. We cannot say that because of "X", the breastfeeding rates "went up." There are many factors that can influence breastfeeding rates.
- All reports can be exported and saved as an Excel file should you want to analyze the data using other ways.
- NOTE: Exclusively breastfed reporting will not be accurate until staff members have been entering data in the added Nutrition Interview fields regarding the rare versus regular issuance of something other than breast milk for a 12 month period.

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BF PC Contacts Detail by Topic

Description

Summarizes, by Breastfeeding Peer Counselor (BF PC) staff member, during a specific date range:

- the number of contacts, the types of topics (prenatal and postpartum) selected, and referrals made to a lactation specialist

Aggregates agency and clinic data for a specific date range.

Data Source

Data entered in Prenatal and Postpartum Topics portions of the BF PC Documentation Screen

Comments/Uses

- Reference for BF PC coordinator and management staff to understand how peer counselors are documenting the topics discussed with mothers and the referrals made to lactation specialists during the prenatal and postpartum periods.
- Coaching tool for BF PC coordinator to use with a BF PC who may need guidance to discuss a variety of topics, rather than only those with which she is comfortable, or how to identify which situations should be referred to lactation specialists.

BF PC Contacts Detail by Topic

Start Date 1/1/2013 End Date 6/30/2013

State Totals Yes

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BF PC Contacts Detail by Topic

01/01/2013 - 06/30/2013

Print Date: 07/17/2013

State Totals	Prenatal	Ref to Lact Spec	Post-Partum	Ref to Lact Spec
	10250	869	15711	3083

Local Agency/Clinic	BF PC	Topics	Prenatal	Ref to Lact Spec	Post-Partum	Ref to Lact Spec
10 Bear River Health Department			238	1	187	27
21001 Logan			136	1	138	27
	Susana Arredondo	BF Techniques/Latch	1	1		
		Hand Expression	1			
		Unable to Contact	1			
	Sandy Ballard	Appetite/Growth Spurts			2	
		Baby's Feeding Pattern	2		4	
		BF Barriers/Anticipatory Guidance	1		4	
		BF Frequency/Milk Supply	4		7	
		BF Technique/Position/Latch	3		4	7
		Call Planning			6	
		Engorgement/Prevention	3		4	7
		First Few Days	2		2	
		First Few Weeks			1	
		Hand Expression/Pumping	1		7	
		How Do I Know Baby's Getting Enough	1		2	
		Hunger/Satiety Signs			2	

BF PC Contacts Summary Report

Description

Summarizes, by agency and clinic, for a selected time frame (any number of weeks, months, or years):

- The combined Breastfeeding Peer Counselor (BF PC) number of participant contacts by type of contact both attempted communication (e.g., No answer, Mailing) and two-way communication (e.g., telephone support, home visit, clinic visit) and the frequency of the contacts made by BF PC.
- The combined BF PC number of participant contacts made during the Prenatal and Postpartum periods.

Summarizes by BP PC staff member, during a selected time frame:

- The number of participant contacts made by type of contact both attempted (e.g., No answer, Mailing) and actual (e.g., telephone support, home visit, clinic visit, peer support group, hospital visit)
- The number of participant contacts made during the Prenatal and Postpartum periods.
- The number of participants who were referred to Lactation Specialists

Data Source

Data entered in "Type of Contact" portion of the BF PC Documentation Screen

Comments/Uses

- Data reported on *Colorado WIC Program Local Agency BF PC Program Summary Form*. Agencies produce for each monthly and average for a year.
- Reference for the BF PC coordinator and management staff to understand how and how often peer counselors are contacting mothers.
- Compare how BF PC reach out to mothers within an agency's clinics and compare data among other clinics and agencies.
- Data may be useful with determining staffing needs and caseload.

BF PC Contacts Summary

Start Date 1/1/2013 End Date 6/30/2013

State Totals Yes

1 of 12 100% Find | Next

BF PC Contacts Summary Report Print Date: 07/18/2013

01/01/2013 - 06/30/2013

State Totals	No Answer	Telephone Support	Clinic Visit	Peer Support Group	Home Visit	Hospital Visit	Mailing	Other	Prenatal	Postpartum
	2168	18201	2956	151	53	97	499	1836	10250	15711

Local Agency/Clinic	BF PC Name	No Answer	Telephone Support	Clinic Visit	Peer Support Group	Home Visit	Hospital Visit	Mailing	Other	Prenatal	Postpartum
10 Bear River Health Department		35	188	2	0	6	0	116	78	238	187
21001 Logan		35	78	2	0	6	0	75	78	136	138
	Susana Arredondo	1	1	0	0	0	0	0	0	2	0
	Sandy Ballard	0	11	2	0	2	0	0	1	6	10
	Chartina Cordingley	34	66	0	0	4	0	75	77	128	128
21002 Brigham City		0	95	0	0	0	0	34	0	88	41
	Emily Bingham	0	95	0	0	0	0	34	0	88	41
21003 Tremonton		0	15	0	0	0	0	7	0	14	8
	Emily Bingham	0	15	0	0	0	0	7	0	14	8

Breastfeeding Duration by BF PC Contacts

Description

For an individual local agency, report describes a 12 month time frame (user selects ending month and year), the breastfeeding duration of an infant (at the time the report is run) whose mother had contact(s) with a BF PC.

Report lists for each BF PC on agency's staff the prenatal/postpartum breastfeeding participants with whom she made attempted and/or two-way communication (contact). The report describes for each woman participant:

- her person ID
- the number of BF PC contacts she received (during the prenatal and postpartum period)
- when her initial (certification) visit was
- the duration in weeks her infant has breastfed based on the most recent information recorded in the infant interview at **the time the report is run**
- the number of cans of powdered formula the infant received in the **most recent** food package

Report lists portions of contacts that occur prenatally and postpartum

Data Source

- All infants whose mothers indicated "Yes, interested in BF PC" on the prenatal interview or breastfeeding interview within the 12 month date range.
- Prenatal contact and postpartum contact data entered in "Type of Contact" portion of the BF PC Documentation Screen summed. Note: The contacts are reported based on the clinic that the participant belonged to at the time of the BF PC Contact.
- Total Contacts (number) = Prenatal + Post-Partum
- Total Contacts (percentage) within the Local Agency = Total Contacts for a BF PC/Total Contacts for the Local Agency
- The initial visit recorded is the certification visit and appears on report only if the woman was on WIC during pregnancy. Women who were first certified on WIC as a postpartum breastfeeding women will have a blank field.
- Duration = BF Duration calculation is (Started Date associated with most recent BF Description) minus the Actual Delivery Date/7. Displayed as whole numbers of weeks and not rounded up.
- Formula (Cans) = Total quantity of cans of **powdered** formula in current food package.

Comments/Uses

View formula issuance to breastfed infants whose mothers currently have or had contact with a BF PC.
There are limitations to this report. It **does not:**

- tell you how long the infant ultimately breastfed for or when the infant first received formula
- adjust for potential confounders (e.g., one cannot assume that an infant with a long duration was successful due entirely to the fact she had a certain number of BF PC contacts
- include women who had contact with a BFPC and didn't initiate breastfeeding
- distinguish type of contact (e.g., No Answer and Other are included in the total number of contacts)
- provide the reasons some mothers requested formula
- show information for infants whose mothers have stopped breastfeeding
- Identify age of infant
- provide the corresponding age for when the first can(s) of powdered formula were issued. Refer to last bullet under description above.
- provide the infant infant's age attained at the duration listed

Breastfeeding Duration by BF PC Contacts

Local Agency: 10 Bear River Health Departme

Ending Month: June

Ending Year: 2013

1 of 1 100% Find | Next

Breastfeeding Duration by BF PC Contacts

Print Date: 07/18/2013

July 2012 - June 2013

Local Agency/Clinic	BF PC	Participant Name	Person ID	Prenatal Contacts	PP Contacts	Total Contacts	Initial Visit	Duration (Wks)	Formula (Cans)
10 Bear River Health Department				80.00%	20.00%	100.00%			
				8	2	10			
21001 Logan									
	No BF PC Assigned			0.00%	0.00%	0.00%			
				0	0	0			
		Cecelia Alder	580518	0	0	0		23	7.00
		ANGELA P ELWOOD	201363	0	0	0		37	4.00
		Jessica Hylton	611428	0	0	0		44	
		HANNAH M ZARRABAL	204705	0	0	0		42	7.00
21002 Brigham City									
	Emily Bingham			4.49%	1.12%	5.62%			
				8	2	10			
		Jesika Taylor	604997	3	1	4	01/08/2013	14	4.00
		Pauliann Wilkerson	575695	5	1	6		30	7.00

Breastfeeding Equipment Due

Description

Identifies, by a selected agency, women participants currently assigned serialized breastfeeding equipment (essentially only hospital grade electric breast pumps are serialized).

- Lists by clinic the contact/return date, date issued, endorser name, family ID, home phone number, equipment type, serial number and reason issued.
- Note: Shows all serialized breastfeeding equipment due within the current calendar month or equipment that is past due; does not report information for the next month.

Data Source

Data from the BF Equipment screen on which the Serialized Inventory Item Disposition field, Contact/Return Date, serial number and an issuance reason are all populated by staff.

Comments/Uses

- To follow up (with phone calls or at WIC appt) and provide counseling to promote exclusive breastfeeding and transition to breast for "at breastfeeding."
- To assess with participants their pump needs and schedule follow up appts with LMS staff if needed.
- To ensure timely return of pumps not in use.
- To identify pumps to request be returned for higher priority participants.
- To understand why pumps are being issued. If there are many selected as "Other," review notes to understand these issues

Breastfeeding Equipment Due

Local Agency 10 Bear River Health Departme

1 of 1 100% Find | Next

Breastfeeding Equipment Due Report Print Date: 07/18/2013

Local Agency/Clinic	Contact/Return Date	Date Issued	Endorser Name	Family ID	Home Phone	Equip Type	Serial #	Reason Issued
10 Bear River Health Department								
21001 Logan								
	08/10/2012	08/07/2012	Lindsay Meinders	526265	(435) 563-6349	Medela - Pedal Pump	BR11	Work
	09/13/2012	09/06/2012	DANIELLE BAKER	76948	(435) 755-7061	Bailey - Nurture III	AIG11300	Medical Condition
	11/26/2012	11/19/2012	SEANTAE J JACKSON	74797	(435) 213-6208	Medela - Lactina Select	959972	Multiples
	12/03/2012	11/26/2012	Montana Delao	537811	(208) 680-7446	Medela - Lactina Select	920371	Prematurity
	12/06/2012	12/04/2012	ANGELA M VENTURA	74551	(435) 755-8077	Medela - Lactina Select	952088	Medical Condition
	12/07/2012	12/04/2012	MICHELLE M SIGNORELLI	76844	(435) 535-5365	Medela - Lactina Select	849707	Sore/Cracked Nipples

Breastfeeding Equipment Issued

Description

Identifies the type of breastfeeding equipment (both serialized and nonserialized) issued during a selected time period (user selects a begin and end date)

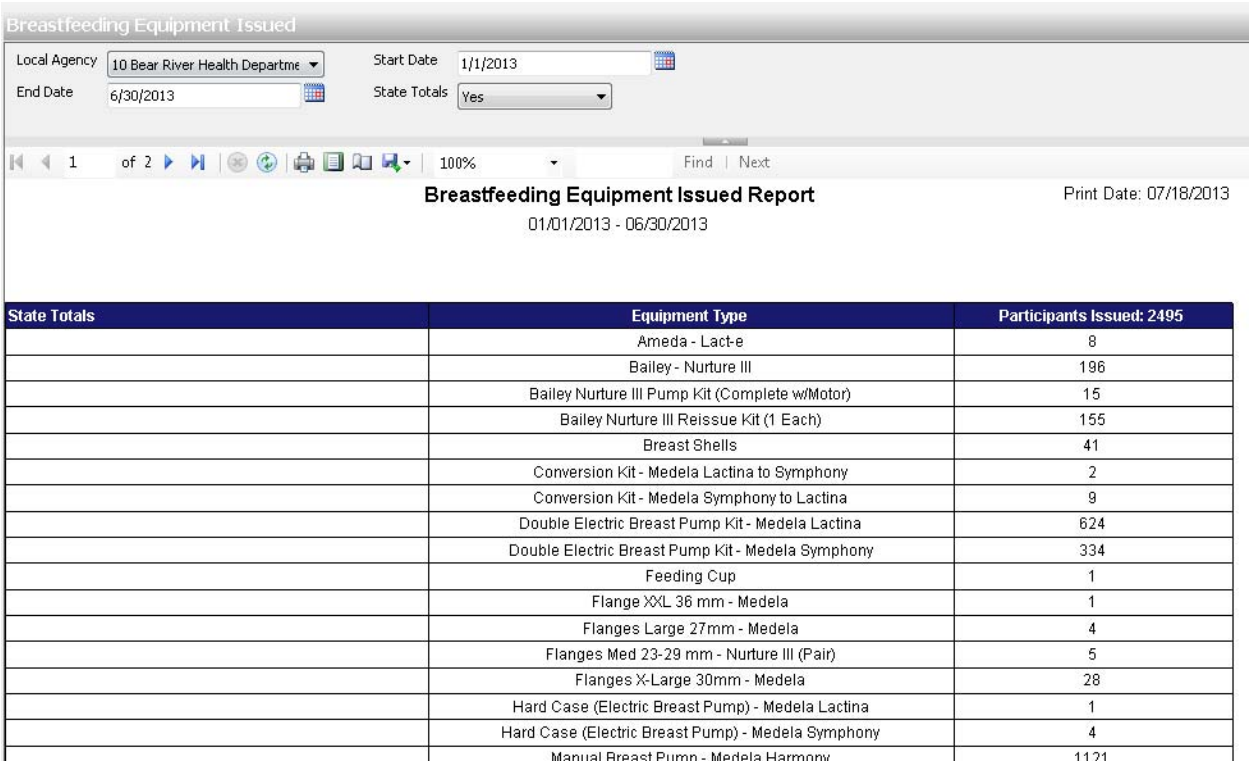
- Provides totals summing the type of equpment issued by clinic and agency.
- Note: a participant may be counted twice if they received a collection kit and a loaned electric pump.

Data Source

- Data from the BF Equipment screen on which the Serialized and Non-Serialized Item Disposition fields
- Count of breastfeeding equipment (serialized and non-serialized) by type that has been issued during the time period.
- Rows of the report are the type of breastfeeding equipment.

Comments/Uses

- Does not compute totals when pumps are added to inventory, issued, or returned by participants. Agencies must maintain a separate breastfeeding equipment tracking/ inventory system.
- Use to track pump issuance and assist with clinic/agency inventory of equipment and projection of equipment ordering needs.
- Provides overall glimpse of a clinic's pump issuance which may be helpful with identifying staff training needs (e.g., if large numbers of manual pumps being issued, educate on appropriate reasons to issue a manual pump).
- At least quarterly, meet with staff who issue breast pumps to ensure non-serialized equipment, such as double collection kits, in addition to a loaned electric pump are being "issued" and signatures are captured in Compass.
- Useful for tracking nonserialized inventory such as WIC-in-Style pumps and to use to project needs when ordering equipment.
- Number of participants issued breastfeeding equipment by type of equipment.



State Totals	Equipment Type	Participants Issued: 2495
	Ameda - Lact-e	8
	Bailey - Nurture III	196
	Bailey Nurture III Pump Kit (Complete w/Motor)	15
	Bailey Nurture III Reissue Kit (1 Each)	155
	Breast Shells	41
	Conversion Kit - Medela Lactina to Symphony	2
	Conversion Kit - Medela Symphony to Lactina	9
	Double Electric Breast Pump Kit - Medela Lactina	624
	Double Electric Breast Pump Kit - Medela Symphony	334
	Feeding Cup	1
	Flange XXL 36 mm - Medela	1
	Flanges Large 27mm - Medela	4
	Flanges Med 23-29 mm - Nurture III (Pair)	5
	Flanges X-Large 30mm - Medela	28
	Hard Case (Electric Breast Pump) - Medela Lactina	1
	Hard Case (Electric Breast Pump) - Medela Symphony	4
	Manual Breast Pump - Medela Harmony	1121

Breastfeeding Prevalence Report

Description

Use to evaluate the number and proportion of infants/children who exclusively breastfed and partially breastfed at different points in time. Use to evaluate the age to which breastfeeding continued during infancy and childhood and to track trends.

- Includes three categories of columns: Exclusively Breastfed, Ever Breastfed, and Breastfeeding Duration.
- Exclusively Breastfed category groups infants with a breastfeeding description of: Exclusively, Primarily Exclusive/ No Formula Package, Primarily Exclusive/ Complementary Foods.
- Exclusively Breastfed is reported at the first week [i.e., if an infant was fed something else besides breast milk on a *regular* basis (not *rare* feeding*)* it occurred after the first week of age], at 3 months and 6 months of age.
- Ever Breastfed combines Exclusively Breastfed categories and Partially Breastfed and are reported at 1, 2, 3 ,4, 5, and 6 weeks and 2, 3, 6, 9, 12, 18 and 24 months of life.
- Breastfeeding Duration reflects Exclusively Breastfed categories and Partially Breastfed and is dependent upon when the last nutrition interview was recorded. A participant may be counted in more than one age category based on age reached by/on their date of visit. An infant with a descripton of No Longer BF at his most recent visit, e.g., at 9 months, who was exclusively breastfeeding at 3 months, partially breastfeeding at 7 months during the reporting period will appear as exclusively breastfeeding in the first week of life and at three months and in breastfeeding duration columns through 6 months.

Data Source

- Selects data from most recent nutrition interview for infant or child where the breastfeeding description is Excl BF, Prim Excl/No F Pkg, Prim Excl/Comp, Part BF, No Longer BF, BF Child to identify breastfeeding information and calculates the proportion of these infants/children breastfeeding to all the infants in the age grouping (i.e., all the infants listed Excl BF, Prim Excl/No F Pkg, Prim Excl/Comp, Part BF, No Longer BF, BF Child AND those Never BF)
- Nutrition interview fields used to determine if infant will be measured as exclusively breastfeeding or partially breastfeed include: “What besides breast milk has baby received? If response is something (therefore not exclusively breastfed), question follows to determines to determine if rare (Primarily Excl BF) or regular basis (Partially BF).
- Nutrition interview field used to determine timing of introduction of something other than breast milk for Exclusively Breastfed categories are entries in “How old was baby when he/she was fed something else on a regular basis?”
- Nutrition interview field “Breastfeeding Description” is used to identify which infants/children are in contained in numerator and denominator for calculating breastfeeding rates.

Comments/Uses

- User enters ending month and year of a 12 month period. It is not necessary to follow calendar or fiscal year.
- Weeks are defined as: 1 Wk – means day of life: 0 (day born) - 6 days,
  2Wk = 7-13 days
  3Wk = 14-20 days
  4Wk = 21-27 days
  5Wk = 28-34 days
  6Wk = 35-41 days
  2M = 9 weeks
  3M = 13 weeks
  6M = 26 weeks
  9M = 39 weeks
  12M = 52 weeks
  18M = 78 weeks
  24M =104 weeks

- **NOTE: Exclusively breastfed reporting will not be accurate until staff members have been entering data in the added Nutrition Interview fields regarding the rare versus regular issuance of something other than breast milk for a 12 month period.**

Breastfeeding Prevalence

Local Agency: 10 Bear River Health Departme
Ending Month: June
Ending Year: 2013
State Totals: Yes

1 of 1 100% Find | Next

Breastfeeding Prevalence

Print Date: 07/18/2013

July 2012 - June 2013

State Totals	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6M	9M	12M	18M	24M
	8%	4%	3%	74%	68%	65%	62%	58%	56%	54%	49%	44%	32%	25%	25%	6%	2%
	5573	2640	1696	50334	45881	42493	39912	36589	35072	33474	29692	25866	17504	11966	6710	2276	675

Local Agency/Clinic	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6M	9M	12M	18M	24M
10 Bear River Health Department	10%	5%	4%	77%	71%	68%	66%	61%	60%	58%	54%	49%	37%	30%	15%	4%	1%
	464	218	137	3631	3323	3091	2929	2681	2589	2479	2248	2004	1392	998	497	113	22
21001 Logan	11%	6%	4%	78%	72%	69%	67%	62%	61%	59%	55%	50%	38%	32%	17%	5%	1%
	370	178	108	2652	2403	2248	2128	1955	1888	1811	1651	1492	1038	757	386	91	19
21002 Brigham City	7%	4%	3%	76%	71%	67%	65%	60%	58%	56%	51%	43%	32%	26%	13%	3%	0%
	66	30	22	688	646	595	565	508	486	462	412	345	242	165	82	18	2
21003 Tremonton	7%	3%	2%	74%	69%	65%	63%	59%	58%	56%	50%	45%	33%	25%	10%	2%	1%
	25	9	7	260	243	219	207	189	186	177	156	140	97	63	24	4	1
21004 Randolph	6%	0%	0%	65%	69%	69%	69%	73%	73%	73%	73%	71%	62%	62%	18%	0%	0%
	1	0	0	11	11	11	11	11	11	11	11	10	8	8	2	0	0
21005 Garden City	6%	3%	0%	61%	61%	55%	55%	55%	55%	55%	56%	55%	23%	17%	11%	0%	0%
	2	1	0	20	20	18	18	18	18	18	18	17	7	5	3	0	0

Breastfeeding Prevalence with BF PC Contacts Report

Description

Shows the number and proportion of infants who exclusively breastfed and partially breastfed at different points in time whose mothers have had at least one prenatal or postpartum Breastfeeding Peer Counselor (BF PC) contact documented compared to the number and proportion of infants whose mothers didn't have a document contact with a BF PC.

- Looks at mothers who had and did not have a BF PC contact during the 8 months prior to delivery to 3 months after delivery.
- Use to evaluate the age to which breastfeeding continued during infancy and childhood and to track trends.
- **Breastfeeding categories reported are identical to the Breastfeeding Prevalence Report.**

Data Source

- Selects infants and children who met the age requirement of the column heading at the time of the parameter end date and had an interview recorded during the 12 month time period of the report.
- Selects mother's record as having a BF PC contact defined as: BF PC = Y and there was at least one documented counseling contact, specifically Home, Hospital, Telephone, Support Group, during the 8 months prior to her delivery through 3 months after delivery.
- Selects mother's records as not having a BF PC contact defined as: BF PC = N if there was no contact documented between the 8 months prior to her delivery through 3 months after delivery or there was a contact documented but the record had only No Answer, Mail or Other.
- Selects from Mother's Nutrition Interview risk entry of 602
- Selects from Infant's Nutrition Interview risk entry of 603

Comments/Uses

- User enters end month and year of a 12 month period
- Selects data from most recent nutrition interview for infant or child, uses breastfeeding description, when something other than breast milk was introduced and with what regularity, and risk factor data; and selects mother's BF PC (Yes or No) data and contact data to distill into number and rate calculations as described in Breastfeeding Prevalence Report.
- Reports breastfeeding numbers and rates for infants whose mothers had a BF PC contact in rows labeled: BF PC = Yes % (percentage); BF PC = Yes # (total number)
- Reports breastfeeding numbers and rates for infants who had a breastfeeding risk factor (603) or whose mother had a breastfeeding risk factor (602) in rows labeled: Risk 602 = % (percentage); Risk 602 = # (total number); Risk 603 = % (percentage); Risk 603 = # (total number)
- Reports breastfeeding numbers and rates for infants whose mothers did not have a BF PC contact in rows labeled: BF PC = No % (percentage); BF PC = No # (total number)
- Includes state totals
- Limitations to reports include it does not:
  - adjust for potential confounders
  - include women who had contact with a BFPC and didn't initiate breastfeeding
  - separate whether a mother had one or ten contacts
  - separate type of contact
  - take in to consideration reasons some mothers don't select a BFPC (e.g., they have prior successful breastfeeding experience)

Breastfeeding Prevalence with BF PC Contacts

Local Agency: 10 Bear River Health Departme
Ending Month: June
Ending Year: 2013
State Totals: Yes

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Breastfeeding Prevalence with BF PC Contacts

Print Date: 07/18/2013

July 2012 - June 2013

State Totals	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6M	9M	12M	18M	24M
BF PC = Y	5%	2%	2%	22%	20%	19%	17%	16%	15%	14%	12%	11%	7%	4%	3%	1%	0%
BF PC = Y	3238	1380	911	15072	13626	12279	11112	9942	9285	8663	7373	6249	3898	2034	1170	242	16
Risk 602	0%	0%	0%	2%	2%	1%	1%	1%	1%	1%	1%	1%	1%	0%	0%	0%	0%
Risk 602	195	78	45	1116	1072	977	898	804	747	696	576	505	318	195	127	36	3
Risk 603	0%	0%	0%	1%	1%	1%	1%	1%	1%	1%	1%	1%	0%	0%	0%	0%	0%
Risk 603	131	62	35	996	952	843	765	666	603	561	462	372	208	123	64	9	1
BF PC = N	3%	2%	1%	52%	48%	46%	45%	42%	41%	40%	37%	33%	25%	21%	12%	5%	2%
BF PC = N	2335	1260	785	35262	32255	30214	28800	26647	25787	24811	22319	19617	13606	9932	5540	2034	659

Local Agency/Clinic	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6M	9M	12M	18M	24M
10 Bear River Health Department																	
BF PC = Y	3%	2%	1%	11%	10%	10%	9%	8%	8%	8%	7%	6%	5%	3%	2%	0%	0%
BF PC = Y	137	65	45	510	510	434	406	368	355	340	303	266	266	109	69	5	0
Risk 602	0%	0%	0%	1%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Risk 602	4	1	1	26	21	20	20	16	16	15	14	13	9	6	5	0	0
Risk 603	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Risk 603	1	1	1	23	22	19	19	17	17	15	14	11	7	6	2	0	0
BF PC = N	7%	4%	2%	66%	61%	59%	57%	53%	52%	50%	47%	42%	32%	27%	13%	4%	1%

Breastfeeding Prevalence by Equipment Issuance

Description

Shows the number and proportion of infants who exclusively breastfed and partially breastfed at different points in time whose mothers were not issued or were issued breastfeeding equipment by the type of serialized (e.g., loaned electric pumps) or non-serialized equipment (e.g., hand pumps, collection kits).

- Looks at mothers who were and were not issued breastfeeding equipment from infant's birth through 6 months postpartum.
- Use to evaluate the age to which breastfeeding continued during infancy and childhood and to track trends with breastfeeding equipment use.
- **Breastfeeding categories reported are identical to the Breastfeeding Prevalence Report.**

Data Source

- Selects infants and children who met the age requirement of the column heading at the time of the parameter end date and had an interview recorded during the 12 month time period of the report.
- Selects mother's record if documented issuance of serialized or non-serialized equipment during her infant's birth through 6 months of life.
- For a comparison group, selects records of mothers without documentation of being issued equipment.

Comments/Uses

- User enters end month and year of a 12 month period
- Selects data from most recent nutrition interview for infant or child, uses breastfeeding description, when something other than breast milk was introduced and with what regularity, and links with mother's documented issuance of equipment or none documented to distill into number and rate calculations as described in Breastfeeding Prevalence Report.
- Reports breastfeeding numbers and rates for infants whose mothers had breastfeeding equipment issued in rows labeled:

  Equipment Issued #

  Serialized #

  Type 1 %

  Type 1 #

  Type 2%, etc.

  Type 2 #, etc.

  Non-serialized #

  Type 1 %

  Type 1 #

  Type 2%, etc.

  Type 2 #, etc.
- Reports breastfeeding numbers and rates for infants whose mothers did not have breastfeeding equipment issued in rows labeled:

  No Equip Issued #
- Includes state totals
- Limitations to this report:
  - the data is not correlated to the reason the mother was issued the equipment
  - a mother's actual usage of pump isn't recorded e.g., the mother may have used the pump once or regularly
  - the pump may have been intended for short term use or long term use
  - mothers who don't use a WIC pump or equipment may already have one or have no need for one.
- Can state the rate of breastfeeding for women who received a certain type of equipment, such as, "50% of WIC mothers at xx clinic who received a WIC-in-Style were breastfeeding at 6 months postpartum."

Breastfeeding Prevalence by Equipment Issuance Report

Print Date: 05/16/2013

March 2012 - February 2013

State Totals	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6M	9M	12M	18M	24M
Equipment Issued	2123	1044	638	11339	10390	9419	8481	7563	7038	6506	5500	4411	2365	1082	519	88	1
Serialized	877	429	261	5623	5138	4673	4201	3717	3437	3151	2620	2058	1070	503	236	45	1
Lactina Electric Pump	1%	0%	0%	5%	5%	4%	4%	3%	3%	3%	3%	2%	1%	1%	1%	0%	0%
Lactina Electric Pump	808	393	241	5171	4722	4288	3855	3408	3155	2887	2405	1898	997	470	221	42	1
Pedal Pump	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Pedal Pump	33	20	9	193	179	167	151	138	132	128	108	85	41	18	10	3	0
Symphony Electric Pump	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Symphony Electric Pump	36	16	11	259	237	218	195	171	150	136	107	75	32	15	5	0	0
Non-Serialized	1246	615	377	5716	5252	4746	4280	3846	3601	3355	2880	2353	1295	579	283	43	0
Breast Shells	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Breast Shells	2	0	0	7	5	5	4	2	1	1	1	0	0	0	0	0	0
Double Collection Kit	1%	0%	0%	3%	3%	3%	2%	2%	2%	2%	2%	1%	1%	0%	0%	0%	0%
Double Collection Kit	558	251	148	3170	2897	2611	2322	2051	1897	1744	1451	1122	568	249	116	21	0
Harmony One-Hand Breast Pump	0%	0%	0%	1%	1%	1%	1%	1%	1%	1%	1%	1%	0%	0%	0%	0%	0%
Harmony One-Hand Breast Pump	319	154	95	1346	1234	1110	1022	927	872	823	709	594	334	156	75	10	0
Lactina to Symphony Conversion Kit	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Lactina to Symphony Conversion Kit	2	0	0	6	5	4	3	2	2	1	1	0	0	0	0	0	0
Large Breastshields (30 mm)	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Large Breastshields (																	
Medium Breastshields																	
Medium Breastshields																	

Breastfeeding Prevalence by Equipment Issuance Report

Print Date: 05/16/2013

March 2012 - February 2013

State Totals	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6M	9M	12M	18M	24M
Nursing Supplementers	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Nursing Supplementers	0	0	0	10	10	9	8	7	6	6	3	2	1	1	0	0	0
Personal Fit Connectors	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Personal Fit Connectors	2	1	1	13	11	9	9	7	7	7	4	3	1	0	0	0	0
Single User Electric Pump	0%	0%	0%	1%	1%	1%	1%	1%	1%	1%	0%	0%	0%	0%	0%	0%	0%
Single User Electric Pump	242	156	93	622	598	562	531	515	508	492	468	431	280	121	63	7	0
Small Breastshields (21 mm)	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Small Breastshields (21 mm)	1	0	0	15	13	13	13	11	11	10	8	6	3	1	0	0	0
Spring Express Manual Breast Pump	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Spring Express Manual Breast Pump	100	50	38	436	399	356	315	276	253	231	204	171	98	46	27	4	0
Symphony to Lactina Conversion Kit	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Symphony to Lactina Conversion Kit	7	0	0	15	15	11	6	5	5	3	2	0	0	0	0	0	0
X-Large Breastshields (36 mm)	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
X-Large Breastshields (36 mm)	1	0	0	7	7	5	5	4	4	3	2	2	1	1	0	0	0
No Equip Issued	3981	2031	1301	72388	61233	55650	51973	46682	44697	42468	36865	30755	19603	13549	6960	2613	772

Local Agency/Clinic	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6M	9M	12M	18M	24M
3 Tri-County Health Department																	
Equipment Issued	693	300	178	3613	3293	2944	2621	2312	2129	1939	1601	1226	617	251	96	11	1

Breastfeeding Prevalence by Maternal Characteristics

Description

Shows the number and proportion of infants who exclusively breastfed and partially breastfed at different points in time by mother and infant characteristics.

- Looks at mother's age, education, work or going to school more than 10 hours/week, previous breastfeeding experience, race/ethnicity, and infant's birth weight if low.
- Use to evaluate the age to which breastfeeding continued during infancy and childhood and to track breastfeeding trends among mothers by specific characteristics.
- **Breastfeeding categories reported are identical to the Breastfeeding Prevalence Report.**

Data Source

- Selects infants and children who met the age requirement of the column heading at the time of the parameter end date and had an interview recorded during the 12 month time period of the report.
- Selects mother's age based on the age of the mother at the time the breastfeeding description was recorded and puts in categories of age: 15-19 years, 20-24 years, 25-34 years, and 35+ years.
- Selects mother's education based on the current education level of the mother and puts in categories of years: <9 years, 9-12 years, and >12 years.
- Selects entry regarding Work/School >10 hrs/Wk? (Yes or No) based on the response in the first Breastfeeding Interview for the mother after the infant was born.
- Selects entry regarding BF Experience? (Yes or No) based on the last pregnancy interview for the mother before the date of birth of the infant.
- Selects entry regarding Race/Ethnicity based on the current Race and Ethnicity responses for the mother and puts in categories: White, Not Hispanic; Black, Not Hispanic; Hispanic; Am Ind/Alaskan Native; and Asian/Pacific Islander.
- Selects entry regarding LBW Infant? based on the risk records for the infant/child. (Any record found with 141A or 141B, then LBW Infant = Yes. If no records with 141A or 141B, then LBW Infant = No).

Comments/Uses

- User enters end month and year of a 12 month period
- Selects data from most recent nutrition interview for infant or child, uses breastfeeding description, when something other than breast milk was introduced and with what regularity, and links with mother's maternal characteristics to distill into number and rate calculations as described in Breastfeeding Prevalence Report.
- Includes state totals
- Useful to answer questions such as, Are older or younger mothers in our WIC agency more likely to breastfeed to six months? How do the breastfeeding rates of women who work more than 10 hours a week compare with those who work fewer than 10 hours a week or not at all?
- Useful for targeting breastfeeding interventions for specific groups

Breastfeeding Prevalence by Maternal Characteristics

Local Agency: 10 Bear River Health Departme
Ending Month: June
Ending Year: 2013
State Totals: Yes

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Breastfeeding Prevalence by Maternal Characteristics

Print Date: 07/18/2013

July 2012 - June 2013

State Totals	Excl BF 1 Wk	Excl BF 3 mo	Excl BF 6 mo	Ever BF	1Wk	2Wk	3Wk	4Wk	5Wk	6Wk	2M	3M	6M	9M	12M	18M	24M
Age																	
15-19 Years	0%	0%	0%	2%	2%	2%	2%	1%	1%	1%	1%	1%	0%	0%	0%	0%	0%
15-19 Years	175	50	36	1659	1356	1165	995	817	725	654	504	349	171	86	52	15	5
20-24 Years	2%	1%	1%	15%	13%	12%	11%	10%	9%	9%	7%	6%	4%	2%	2%	0%	0%
20-24 Years	1467	612	376	10345	8978	7915	7116	6186	5739	5316	4390	3559	2019	1094	584	159	46
25-34 Years	5%	3%	2%	32%	29%	28%	27%	25%	25%	24%	22%	19%	14%	11%	11%	2%	1%
25-34 Years	3331	1681	1084	21650	19836	18415	17256	15933	15273	14575	12989	11500	7899	5193	2852	869	265
35+ Years	1%	0%	0%	7%	6%	6%	6%	6%	6%	5%	5%	5%	4%	3%	3%	1%	1%
35+ Years	443	217	150	4600	4259	4042	3827	3594	3481	3356	3066	2736	1987	1456	972	424	162
Education																	
<9 Years	0%	0%	0%	4%	4%	4%	4%	4%	4%	4%	3%	3%	2%	2%	1%	1%	0%
<9 Years	152	70	57	3004	2759	2600	2498	2324	2253	2195	1992	1754	1237	890	588	298	100
9-12 Years	3%	2%	1%	40%	36%	34%	32%	29%	28%	27%	23%	20%	13%	10%	6%	3%	1%
9-12 Years	2264	988	652	27367	24223	22049	20388	18302	17369	16404	14070	11737	7362	4879	2827	1044	334
>12 Years	5%	3%	2%	28%	27%	26%	26%	24%	24%	23%	22%	20%	16%	13%	7%	2%	1%
>12 Years	3110	1556	972	19231	18229	17220	16440	15419	14925	14365	13184	11998	8643	5990	3168	880	223
Work/School > 10 hrs/wk?																	
Yes	1%	0%	0%	8%	8%	8%	7%	7%	7%	7%	6%	5%	4%	3%	2%	1%	0%
Yes	475	222	134	5542	5256	4976	4753	4411	4241	4070	3640	3148	2050	1426	805	312	117
No	3%	2%	1%	23%	22%	22%	21%	20%	19%	19%	17%	15%	12%	9%	6%	3%	1%
No	2328	1071	662	15741	15039	14222	13449	12506	11968	11482	10265	9078	6353	4457	2634	981	370

Exclusively Breastfeeding and Formula issuance Report

Description

Shows WIC clinic/agency formula issuance trend data for infants initially described as exclusively, primarily exclusive/no formula package and primarily exclusive/complementary food.

- Identifies infants who had a description of exclusively breastfeeding infants at their first certification visit, tracks them, and captures when any of those infants first receive a voucher with powdered formula **from WIC** and the quantity (in cans) of formula provided.
- Displays infants receiving formula (as a portion of all exclusively breastfeed infants) by percentage based on the number of cans at each age in months.

Data Source

- Selects infants with a Breastfeeding Description of for exclusively, primarily exclusive/no formula package and primarily exclusive/complementary at their certification visit.
- Selects when food packages are issued that contain powdered formula. Note: concentrate and RTF formulas are not included.
- Uses infant's date of birth and date the formula package is prescribed (on the food package panel) to assign an age to infant as formula "first issuance." Note: This is an Amendment 7 change. Previously the date of first use on the voucher was used instead.

Comments

- User enters end month and year of a 12 month period to receive clinic and agency data. Can compare trends among different clinics and to state averages.
- Infant is only counted in the first month when the first food package was issued containing powdered formula.
- Rows are numbered by cans of powdered formula issued: 0, 1 through 15. Rows are not displayed unless there is data for the row.
- Use this report to answer the question, "What portion of infants start out exclusively breastfeeding in our clinic and receive a full formula package by 6 months of age?" and "What portion of infants start out exclusively breastfeeding in our clinic and receive a full formula package by 6 months of age?"
- Calculation used is the percentage of infants (with EXCL, PRIM or COMP at first WIC visit) that were issued powdered formula by month of age and recorded by number of cans.
  Age is defined as: < 1 Month – <4 weeks
  1 Month - ≥4 weeks and ≤8 weeks
  2 Months - ≥9 weeks and ≤12 weeks
  3 Months - ≥13 weeks and ≤16 weeks
  4 Months - ≥17 weeks and ≤21 weeks
  5 Months - ≥22 weeks and ≤25 weeks
  6 Months - ≥26 weeks and ≤29 weeks
  7 Months - ≥30 weeks and ≤34 weeks
  8 Months - ≥35 weeks and ≤38 weeks
  9 Months - ≥39 weeks and ≤42 weeks
  10 Months - ≥43 weeks and ≤47 weeks
  11 Months - ≥48 weeks and ≤51 weeks
  12 Months - ≥52 weeks
- The number of cans is based on the month's food package ssuance or on a full proration food package.

Exclusively Breastfeeding and Formula Issuance

Local Agency: 10 Bear River Health Departme
Month: June
Year: 2013
State Totals: Yes

1 of 2 100% Find | Next

Exclusively Breastfeeding and Formula Issuance Report

Print Date: 07/18/2013

July, 2012 — June, 2013

State Totals	Cans	< 1 Month	1 Month	2 Months	3 Months	4 Months	5 Months	6 Months	7 Months	8 Months	9 Months	10 Months	11 Months	12 Months
	1 Can	0.30%	0.72%	0.49%	0.42%	0.17%	0.09%	0.06%	0.04%	0.00%	0.04%	0.02%	0.00%	0.02%
	2 Cans	0.11%	0.62%	0.43%	0.36%	0.45%	0.30%	0.47%	0.42%	0.21%	0.13%	0.11%	0.00%	0.00%
	3 Cans	0.93%	1.51%	1.28%	0.87%	0.83%	0.45%	0.38%	0.11%	0.09%	0.08%	0.02%	0.00%	0.00%
	4 Cans	0.30%	1.77%	1.57%	1.81%	0.59%	0.28%	1.02%	1.23%	0.79%	0.43%	0.30%	0.08%	0.00%
	5 Cans	0.11%	0.23%	0.28%	0.26%	1.89%	1.45%	0.40%	0.13%	0.13%	0.13%	0.11%	0.02%	0.00%
	6 Cans	0.59%	1.25%	0.77%	0.64%	0.32%	0.17%	0.15%	0.13%	0.13%	0.13%	0.09%	0.04%	0.00%
	7 Cans	0.09%	0.17%	0.21%	0.26%	0.49%	0.53%	6.04%	7.40%	4.47%	3.47%	2.81%	0.79%	0.09%
	8 Cans	0.04%	0.25%	0.21%	0.11%	0.21%	0.09%	0.30%	0.38%	0.23%	0.28%	0.15%	0.04%	0.00%
	9 Cans	0.79%	5.89%	6.83%	7.61%	1.98%	0.59%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	10 Cans	0.02%	0.25%	0.19%	0.32%	7.12%	6.12%	0.60%	0.04%	0.02%	0.02%	0.04%	0.00%	0.04%
	11 Cans	0.04%	0.00%	0.00%	0.00%	0.30%	0.25%	0.06%	0.02%	0.02%	0.00%	0.00%	0.00%	0.00%
	12 Cans	0.00%	0.04%	0.02%	0.00%	0.02%	0.04%	0.02%	0.02%	0.04%	0.02%	0.02%	0.00%	0.00%
	13 Cans	0.00%	0.02%	0.00%	0.00%	0.00%	0.00%	0.02%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	14 Cans	0.00%	0.00%	0.02%	0.02%	0.04%	0.06%	0.32%	0.62%	0.64%	0.72%	0.60%	0.25%	0.02%
	15 Cans	0.02%	0.00%	0.00%	0.00%	0.02%	0.00%	0.02%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Local Agency/Clinic	Cans	< 1 Month	1 Month	2 Months	3 Months	4 Months	5 Months	6 Months	7 Months	8 Months	9 Months	10 Months	11 Months	12 Months
10 Bear River Health Department														
21001 Logan														
	1 Can	0.44%	0.44%	0.29%	0.29%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%	0.15%	0.00%	0.00%
	2 Cans	0.88%	0.15%	0.29%	0.00%	0.88%	0.29%	0.59%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
	3 Cans	0.74%	1.47%	0.59%	0.44%	0.44%	0.29%	0.29%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%

Formula First Introduced to Breastfed Infants Report

Description

Shows WIC clinic/agency formula issuance trend data for infants initially described with *any* breastfeeding and when formula was first introduced. This report differentiates by addressing *any* breastfeeding from the Exclusively Breastfeeding and Formula Issuance report.

- Displayed as percentages by age in weeks 1-3 and months 1, 2, 3, 4, 5, 6, 7-9 (grouped), and 10-12 (grouped) when formula was first issued from WIC.
- Identifies infants who were any breastfeeding description their first certification visit, tracks them, and captures when any of those infants first receive a voucher with powdered formula **from WIC**. Partially breastfeeding infants (already drinking formula) at their first WIC visit and requiring formula will show up in the age in weeks (or months) at that first visit.

Data Source

User provides the last month of a 12 month period

- Infant nutrition interview field of "How old was baby when he/she was first fed formula?"

Comments/Uses

- Recognize that the report describes first issuance of formula from WIC. Infants may have been introduced to formula from another source at an earlier time.

Formula First Introduced to Breastfed Infants

July, 2011 — June, 2012

Print Date: 03/29/2013

State Totals	1 Wk	2 Wk	3 Wk	1 Mo	2 Mo	3 Mo	4 Mo	5 Mo	6 Mo	7-9 Mo	10-12 Mo
	27.84%	3.12%	1.61%	4.43%	1.79%	1.27%	1.25%	1.42%	1.16%	0.60%	0.00%
	12433	1394	720	1979	798	568	557	636	516	267	2

Local Agency/Clinic	1 Wk	2 Wk	3 Wk	1 Mo	2 Mo	3 Mo	4 Mo	5 Mo	6 Mo	7-9 Mo	10-12 Mo
10 - Bear River	29.73%	3.11%	1.33%	3.52%	1.33%	1.01%	2.06%	2.19%	1.43%	0.76%	0.00%
	938	98	42	111	42	32	65	69	45	24	0
21001 - Logan	29.00%	3.00%	1.00%	3.00%	1.00%	1.00%	2.00%	3.00%	1.00%	1.00%	0.00%
	679	64	32	75	30	25	57	59	34	17	0
21002 - Brigham City	32.00%	4.00%	1.00%	4.00%	1.00%	1.00%	1.00%	1.00%	1.00%	1.00%	0.00%
	256	31	10	34	11	7	6	10	11	7	0
21004 - Randolph	0.00%	8.00%	0.00%	8.00%	0.00%	0.00%	8.00%	0.00%	0.00%	0.00%	0.00%
	0	1	0	1	0	0	1	0	0	0	0
21005 - Garden City	20.00%	13.00%	0.00%	7.00%	7.00%	0.00%	7.00%	0.00%	0.00%	0.00%	0.00%
	3	2	0	1	1	0	1	0	0	0	0
21 - Weber-Morgan	44.41%	2.45%	1.81%	4.14%	1.08%	1.25%	1.11%	1.11%	2.22%	0.58%	0.00%
	1598	88	65	149	39	45	40	40	80	21	0
22101 - Ogden	44.00%	2.00%	2.00%	4.00%	1.00%	1.00%	1.00%	1.00%	2.00%	1.00%	0.00%
	1583	87	64	148	38	45	40	39	80	21	0
22102 - Morgan	38.00%	3.00%	3.00%	3.00%	3.00%	0.00%	0.00%	3.00%	0.00%	0.00%	0.00%
	15	1	1	1	1	0	0	1	0	0	0
22 - Davis County	18.93%	3.25%	2.05%	4.60%	2.34%	1.81%	1.78%	2.02%	1.01%	0.79%	0.00%
	786	135	85	191	97	75	74	84	42	33	0
22201 - Clearfield	22.00%	3.00%	2.00%	5.00%	2.00%	1.00%	2.00%	2.00%	1.00%	1.00%	0.00%

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Rev: 2/8/2013 5:31:58 PM

Reasons Ceased Breastfeeding Report

Description

Used to review breastfeeding data on infants and children who "ever breastfed." Selects infants who began breastfeeding and stopped, and the reported reason for stopping.

- Reports the number of infants who ceased breastfeeding during a specific time frame by cease reason as well as a total number of infants ceasing for the same reason in a user selected time frame.
- Reported at state, agency and clinic level

Data Source

- Uses infant nutrition interview Breastfeeding Description of "No Longer BF."
- Uses age in weeks entered in "How old was baby when he/she completely stopped breastfeeding or being fed breast milk?"
- Uses drop down box of selections to "What was your reason for stopping breastfeeding?"

Comments

- Use this report to rank the reasons women offer for why they stop breastfeeding.
- Use this report to train staff to use anticipatory guidance with specific breastfeeding cease trends. For example, if the majority of women in a clinic stop breastfeeding by 2 weeks postpartum because of "Milk supply/mom perceives poor quantity/quality," review with staff how to talk about milk supply late in prenatal and early postpartum periods.

Reason Ceased Breastfeeding

Local Agency: 10 Bear River Health Departme | Start Date: 1/1/2013
End Date: 6/30/2013 | State Totals: Yes

1 of 2 | 100% | Find | Next

Reason Ceased Breastfeeding Report

01/01/2013 - 06/30/2013

Print Date: 07/18/2013

State Totals	Total	1 Wk	2 Wks	3 Wks	1 Mo	2 Mos	3 Mos	4 Mos	5 Mos	6 Mos	9 Mos	12 Mos	18 Mos	24 Mos
Baby Led Weaning	125	0	1	2	1	4	3	5	9	24	33	38	5	0
Baby Old Enough to Quit	418	0	0	0	0	1	1	0	1	4	57	265	89	0
Breast Problem: mastitis/engorged/surgery/abscess	87	28	10	5	20	7	2	2	7	3	2	0	1	0
Contraindicated Medication (mother/infant)	125	17	11	11	28	17	5	4	8	15	6	2	1	0
Health Care Provider Advise	107	19	8	10	29	7	6	2	6	8	7	5	0	0
Infant Anatomical Problem (cleft palate, surgery,	5	1	1	0	0	1	0	1	0	0	1	0	0	0
Infant Inadequate Weight Gain/Weight Loss	43	5	6	5	10	4	1	0	4	7	1	0	0	0
Infant Medical Cond: sick/premature/CP/jaundice/SF	92	16	11	12	19	15	7	4	1	4	2	1	0	0
Infant Refused / Baby didn't want	514	159	47	25	56	31	41	34	30	49	37	5	0	0
Infant Teeting/bite	62	1	0	0	0	0	4	1	6	30	16	4	0	0
Jaundice	3	1	1	1	0	0	0	0	0	0	0	0	0	0
Lack of Support from Family/Friends	15	4	2	1	2	0	2	0	1	0	1	1	1	0
Latch-On/Sucking Problems	130	79	13	10	15	2	6	1	3	1	0	0	0	0
Milk Supply/Baby Not Satisfied	2,345	354	224	194	417	278	241	133	181	215	93	12	3	0
Mom Ill	127	26	9	9	22	13	8	8	7	13	10	2	0	0
Mom Pregnant Again	72	0	0	0	0	0	2	5	7	19	19	14	6	0
Mother Led Weaning/Overwhelmed	303	57	30	21	53	18	30	16	20	28	23	7	0	0
Mother Overwhelmed/Fatigued	70	20	2	1	18	5	9	2	3	8	2	0	0	0
Nipple Issues: pain/cracked/bleeding/flat/inverted	56	17	6	13	9	1	3	3	0	2	2	0	0	0
Oral Contraceptives	4	0	0	0	0	1	0	0	0	1	1	0	1	0