

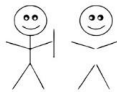
Culture, mental health, and communities in the breastfeeding journey



After this session participants will be able to:

1. Provide practical guidance to mothers returning to school or work.
2. Understand steps to support a mother through weaning process.
3. Understand cultural implications in breastfeeding.
4. Understand the importance of
5. Maternal and Infant Mental Health.

Don't worry.



We Got Your Back!

What works for WIC moms

“Mothers participating in WIC continue to display lower rates of breastfeeding on a national scale in comparison with nonparticipants” (Houghtaling, Shanks, and Jenkins, 2017)

Other studies:

- Barriers (Hedberg, 2013)
- Effect of food package (Shutz et al. 2015)



Houghtaling, Shanks, and Jenkins (2017) studies the factors associated with an increased likelihood of breastfeeding.

Socio demographics and Health Characteristics
 Environment and Media Support
 Government policy
 Intention to Breastfeed
 Knowledge and Attitudes Toward Breastfeeding
 Health Care Provider and Social Support
 Time to Exposure to WIC

Sociodemographic and Health Characteristics

Absence of depression	Marriage
Age	More years of education
Decreased body mass index	Not receiving food stamps
Decreased time in the US	Non-smoking
Delayed return to work	Number of prior children
Increased income	Planned pregnancy
Larger weight infants	Prenatal care
Geographic locations	Spanish speaking
Cohabitation with baby's father	Taking multivitamins
Lower birth-weight infants	Unemployed or working part-time
	Urban residency
	Ethnicity/race

Individual Level Strategies

- *Additional services related to health outcomes
 - *Mental Health Support
 - *Weight management
 - *Addictions treatment
 - *Couple counseling
 - *Family planning
- *Approach personal barriers - culture
- *Capacity among providers
- *Prenatal education- key point!

Mental Health

- Pregnancy related depression (PRD) occurs while a woman is pregnant or within one year of delivery or miscarriage.
- Postpartum Depressive Symptoms (PDS) occur after a delivery or miscarriage.

- Facts:**
- Depression is the most common complication of pregnancy
 - Maternal & paternal mental health affect child health & development



LET'S TALK ABOUT THE ELEPHANT IN THE ROOM

- Helpful Lactation & Drug Exposure Resources:**
- LactMed: <http://toxnet.nlm.nih.gov/cgi-bin/sis/htmlgen?LACT>
 - Motherisk.org
 - Infantrisk.org

Background

<p>Protective Factors</p> <ul style="list-style-type: none"> Balanced nutrition, physical activity and healthy sleep Family planning for an intended pregnancy Perceived & intact social and maternal support Parenting confidence Recognition of traditional postpartum cultural practices Positive parenting role models Support of breastfeeding decision Healthy co-parent involvement 	<p>Risk Factors</p> <ul style="list-style-type: none"> Personal history of major or postpartum depression Family history of postpartum depression Teen pregnancy History of substance use or interperinatal violence Unplanned/unwanted pregnancy Complications of pregnancy, labor/delivery, or infant's health Fetal/Newborn loss Infant relinquishment Difficulty breastfeeding Sleep deprivation Major life stressors
---	---

Always address lifestyle for prevention and treatment.

“What things could be contributing to how you’re feeling?”

“Untreated depression may be harmful to mom and baby.”

“Treatment and recovery times vary.”

“All medications have benefit and risk considerations.”

“What challenges may make it difficult to follow this treatment plan?”

Adapted from HealthTeamWorks®

Beyond how are you?

YOU ARE NOT ALONE

PostpartumDads
Helping Families Overcome Postpartum Depression (PPD)

Colorado Resources: DadsOnly and Denver Metro

LookingCaring
www.lookingcaring.org

1-800-CHILDREN
1-800-424-2263

Family Network Colorado
www.familynetworkcolorado.org

Social Level Strategies

- Peer counselor for each participant
 - WIC fathers
- Culture- Las Dos?



Culture

- Las dos misconceptions
 - Vitamins
 - Mixed Messages from Healthcare Providers
 - Breastfeeding is Natural but Difficult
 - Spoiled Milk
 - Lack of knowledge and effective support

(<https://cobfc.org/families/#losdos>)

- Modesty
- Trauma
- Culture of poverty
- Social proof



Environmental Level Strategies

- Limit formula advertisement (WHO Code)
- Respect and care for breastfeeding moms
- Facility lay-outs
- Baby friendly hospitals
- Childcare recognitions



Policy Level Strategies

- Positive effect of food packages
- Laws
- Maternity leave?
- Family friendly work policies?





Colorado Laws Support Breastfeeding
 Your Right to Express Breast Milk at Work
 Finding Breastfeeding Friendly Child Care
 Breastfeeding and Swimming Pools
 Jury Duty Postponement

Working or school

- Pumping
- Continue breastfeeding
- Pace feeding
- Development/Growth



Which pump for which mother

Meier et al. 2016
Adapted from a presentation by Sue Petraceck, Bsed, IBCLC, April 12, 20017

Infant is more efficient than pump
 Healthy infant removes 80% of available milk in 5 minutes
 Efficient pump removed 85% of available milk in 15 minutes

Levels of dependency

Minimal	Partial	Complete
Pump replaces less than half of feedings	Building up breastfeeding relationship	Baby's inability o mother's choice
Mostly baby, baby nurses well	Some baby, some pump	Pump only

Stages of Lactation

	Mother	Milk	Baby	
Initiation	Hormonal, anatomical changes	composition	Learning to suck	Time
Coming to volume	4-7 post birth Endocrine to autocrine control	500-600 ml volume per 24 hours	Starts gaining weight	Milk must be removed
Maintaining	Needs anticipatory guidance and realistic expectations	463- 1370 ml	Healthy grow	Dyad specific Volume variability

Initiation

Pump dependency	Minimal	Partial	Complete
No pump	Healthy term nursing baby		
Double personal			
Hospital Grade		Late preterm, sleepy, multiples	Mom's choice, NICU baby, illness

Coming to volume

Pump dependency	Minimal	Partial	Complete
No pump	Healthy term nursing baby		
Double personal	Healthy term nursing baby, engorged		
Hospital Grade		Late preterm, sleepy, multiples	Mom's choice, NICU baby, illness

Maintaining Lactation

Pump dependency	Minimal	Partial	Complete
No pump	Healthy term nursing baby		
Double personal	Healthy term nursing baby	Separation <80% feeds	Used <50% of pumping
Hospital Grade		Separation <80% feeds	Mom's choice, NICU baby, illness

Working and breastfeeding

- Babies drink between 24-30 oz of milk per day from ages 1-6 months. 3-4 oz per feeding
- Frequent removal - *galactagos*
- About 8 times a day
- Night feedings
- Starting solids



Is it all about the milk?



Everything good comes to an end... for something better

- Weaning involves: food, liquid, love
- Slow process
- New relationship
- Engage in developmental needs
- Limits are OK
- Support from others



Conclusions

- WIC participants have specific needs.
- Supporting the whole family is central to success.
- Don't be afraid to explore barriers.
- Lactation is part of development.

What did you learn today?

References:

Houghtaling, B., Shanks, C. B., & Jenkins, M. (2017). Likelihood of Breastfeeding Within the USDA's Food and Nutrition Service Special Supplemental Nutrition Program for Women, Infants, and Children Population. *Journal of Human Lactation*, 33(1), 83-97. doi:10.1177/0890334416679619

Hedberg, I.C. (2013). Barriers to breastfeeding in the WIC population. *The American Journal of Maternal/Child Nursing*, 38 (4), 244-249. doi:10.1097/NMC.0b013e3182836ca2

Shultz, D.J., Byker Shanks, C. & Houghtaling, B. (2015). The Impact of the 2009 Special Supplemental Nutrition Program for Women, Infants, and Children Food Package Revisions on Participants: A Systematic Review. *Journal of the Academy of Nutrition and Dietetics*, 115 (11), 1832-1846. <http://dx.doi.org/10.1016/j.jand.2015.06.381>

Meier, P. P., Patel, A. L., Hoban, R., & Engstrom, J. L. (2016). Which Breast Pump for Which Mother: An Evidenced-Based Approach to Individualizing Breast Pump Technology. *Journal of Perinatology : Official Journal of the California Perinatal Association*, 36(7), 493-499. <http://doi.org/10.1038/jp.2016.14>

<https://www.colorado.gov/pacific/cdphe/pregnancy-related-depression>

<http://www.postpartum.net/locations/colorado/>

<https://cobfc.org/>

<http://postpartumdads.org/>
