Breastfeeding Promotion

By promoting healthy lifestyles and nutrition choices your work in the WIC Program will make a difference in the lives of many mothers and children. After pregnancy, breastfeeding is an important next step toward a healthy infant. Breastfeeding also contributes to development of the brain and has lifelong health and developmental benefits.

The information in this module provides a start to learning about breastfeeding and how we can help more mothers and babies breastfeed. There are many opportunities for additional learning. Talk to your WIC coordinator to find out about them.

The terms in this module refer to women. We acknowledge that not everyone identifies as a woman and there are other terms that can be used. There can be other terms that many be used relating to infant feeding including chestfeeding, bodyfeeding, lactation, or nursing. Use a participant and family’s preferred pronouns and terms when working with them.

Objectives

After completing this lesson, you will be able to:

▪ Explain the reasons WIC promotes and supports breastfeeding
▪ State WIC’s role and WIC staff roles in breastfeeding promotion and support
▪ Explain the health risks of not breastfeeding.
▪ Explain the importance of exclusive or full breastfeeding.
▪ State the American Academy of Pediatrics (AAP) recommendations for breastfeeding.
▪ Use positive breastfeeding messages when talking with participants.

Overview

Breastfeeding is the natural way to feed a baby and the healthiest feeding choice for both the mother and the baby. AAP considers breastfeeding the foundation of good feeding practices.

Breast milk is the intended food for a baby. Not breastfeeding has potential negative consequences for the baby, the mother, and society.

Why Breastfeed?

Simply put, breastfeeding is nothing more than normal. Mother’s milk is made specifically to meet infants’ nutritional needs, and it changes as her baby grows to meet the baby’s changing nutritional needs. Human milk has over 1000 components – most of these are not available in any other infant feeding.
Breastmilk provides more than nutrition. Components in breastmilk help protect the baby against illness and help with development. Breastfeeding also provides warmth and closeness for mother and baby.

Over the past 25 years, research has continued to show that infant formula is inferior to breastmilk. In fact, more studies are released each year showing that there are health risks to the baby and the mother when they do not breastfeed.

**Infant formula is not equivalent to human milk.** While an alternative and “safety net” for the small number of babies who cannot breastfeed, it is not an equivalent replacement.

Health Risks for Babies Who are NOT Breastfed: *(This is only a partial list.)*

- Increased risk of ear infections.
- Increased risk of diarrhea.
- Increased risk of bacterial infections needing hospitalization.
- Increased risk of childhood obesity.
- Increased risk of Type I Diabetes
- Increased risk of allergies and asthma.

Health Risks for Mothers Who Do NOT Breastfeed: *(This is only a partial list.)*

- Uterus takes longer to return to normal size.
- Greater risk of blood loss after birth.
- Earlier return of fertility in most women.
- Increased need for insulin in diabetic mothers.
- Slower weight loss after birth.
- Increased risk of breast, ovarian, and endometrial cancers.

**How Breastfeeding Works**

Mom’s first milk, also called colostrum, is ALL that a baby needs at birth. It is thick, yellow milk that is made during the last part of pregnancy and continues for a few days after the baby is born. Colostrum is the **perfect food** for newborns because it contains antibodies that protect the baby from illnesses.
Mothers sometimes worry that the small amount of colostrum is not enough for their baby. They may not realize that the newborn’s tummy is very small. It can only hold about a teaspoon at a time! As the baby begins to nurse more, the amount of milk Mom’s body produces increases. In other words, Mom’s milk supply depends on how often her baby breastfeeds: the more baby nurse, the more milk mom makes.

Providing supplemental formula to a newborn is a problem for several reasons:

▪ Early cow’s milk or soy-based feedings can lead to baby developing allergies.
▪ Mom’s body is signaled to produce less milk.
▪ Baby may learn to feed differently if given a bottle early.

Exclusively breastfeeding is the best way to develop mom’s milk supply and is important for the health of both baby and mom. It also simplifies feeding – no bottles to wash or prepare, and no running to the store to buy formula! Best of all, breastfeeding provides mom and baby with an opportunity to be close to each other.

**WIC’s Role in Promoting and Supporting Breastfeeding**

WIC is a health and nutrition program. We know that breastfeeding is important for infant nutrition and health, and for the health of the mother, too. All WIC staff have important roles in promoting and supporting breastfeeding. We need to make sure that nothing is said or done (even unintentionally) that may interfere with breastfeeding. That is why WIC clinics should not have infant formula or materials promoting or depicting infant formula posted or displayed. If a CPA has determined, by assessment, that there is a need for education related to infant formula, they can use materials related to infant formula with the individual participant, putting them back out of site when done with the education.

**Providing a Positive Clinic Environment**

One of the important ways that WIC communicates its support of breastfeeding is by creating a breastfeeding-positive clinic environment. The message should be clear to everyone who enters the clinic that WIC promotes health and nutrition, and breastfeeding is the best nutrition for babies. Providing free advertising for formula companies in WIC clinic is inappropriate.

**WIC provides a positive clinic environment by:**

▪ Displaying warm & appealing breastfeeding promotion posters and materials.
▪ Communicating a positive attitude towards breastfeeding.
▪ Letting participants know they are welcome to breastfeed anywhere. Consider a sign such as:
Breastfeeding Promotion

Hungry babies need to eat!
You are welcome to breastfeed anywhere.
If you would prefer a more private place, just ask.
-WIC

- Providing a comfortable, private place to breastfeed or pump breastmilk.
- Using only educational materials and office supplies without formula product names.
- Keeping samples of infant formula and bottles out of sight.
- Refusing free formula samples for personal use by clinic staff.
- Refusing free formula or related materials to distribute to participants and encouraging the agency in which WIC is located to do the same.

Breastfeeding Positive Messages

Never underestimate the power of a positive comment!

Participants remember when they hear comments such as “It’s great that you’re breastfeeding!”

Front line staff have an important role in ensuring that the first thing participants see and hear when they enter the clinic is supportive of breastfeeding. They can say kind and supportive words and ensure that the WIC clinic environment makes a positive statement about breastfeeding.

If a participant shares concerns about breastfeeding or wants to use infant formula, staff will refer the participant to a CPA for further discussion. A great example of this would be: “Susan is finishing up an appointment and will be available to talk with you about that. She has helped lots of women with similar concerns.” or “I’ll let Susan know that you would like to talk with her about formula, she should be available in about 10 minutes.”

No matter what your role in WIC, you are important in promoting breastfeeding. Your actions are important and so are your words. Here are some positive messages that will help you promote breastfeeding.

Use positive breastfeeding messages:

- Please call us if you have questions about breastfeeding.
- Tell me what you have heard about breastfeeding.
- Tell me what breastfeeding support looks like?
- What are your breastfeeding goals?
- How is breastfeeding going?
Instead of:

- Do you need any formula just in case?
- Are you going to breast or bottle feed?
- Are you still breastfeeding?
- Do you need formula today?
- Do you have problems with breastfeeding?

Informed Decision

For some people, it is difficult at first to talk to parents about the risks of not breastfeeding, because they don’t want parents to “feel guilty” if they choose to use infant formula. Others feel that it is the parents’ right to choose how they will feed their baby. It is, but WIC can help parents choose by providing accurate information and an opportunity to talk through their questions and concerns.

Because WIC is a health and nutrition program, it is our job is to provide accurate information to families so they can make an “informed decision”. Parents need to know the risks of not breastfeeding and the risks of using infant formula.

Sometimes women have concerns about breastfeeding or their ability to make sufficient breastmilk. They may have other concerns or “barriers” that can keep them from breastfeeding (for example, going back to work or feeling embarrassed). For this reason, it is important for CPAs to start any discussion of breastfeeding with an open-ended question that doesn’t require an infant feeding decision. Starting with an open-ended question before talking about reasons to breastfeed will provide women the opportunity to share and discuss their unique situation. This can be followed up with an affirmation. Affirmations empower women to feel more confident in their words and actions and often times will encourage them to share more about their experience. Once you have a better understanding of where the participant is at, you can offer education that best meets their specific need.

Examples of open-ended questions

- What are your breastfeeding goals?
- How do you plan to feed your baby?
- What has your healthcare provider shared with you about infant feeding?

Examples of affirmations

- Many parents wonder what breastfeeding will be like.
- It’s great that you are planning to breastfeed! Your baby is lucky to have a parent who wants to give them the best.
It’s great that you are asking questions about feeding now. Being prepared makes a big difference in reaching your goals.

Once parents have had a chance to meet with a CPA to address any concerns or misinformation, they can make the informed choice that is best for their family.

Continue to the next page for a practice activity
## Practice Activity-A

How would you respond to a mom who has questions about formula?

Read the question on the left and practice what you might say before reading the answer on the right.

<table>
<thead>
<tr>
<th>Mom’s Question:</th>
<th>What you might say:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isn’t formula just as good as breastfeeding now that they’ve added those new things to it?</td>
<td>Formula can provide some of the same nutrition as breastmilk, but it can’t protect babies from illness like breastmilk can. Babies who are formula fed have more risk of getting ear infections, diarrhea and other illnesses. Clerk: [CPA name] can talk to you more about this.</td>
</tr>
<tr>
<td>I gave my other baby formula, and he was healthy.</td>
<td>I’m glad he was healthy. Every year, scientists and doctors know more and more about how breastmilk keeps babies healthy. Breastmilk will give your baby the best protection from illness. Clerk: [CPA name] can talk to you more about this.</td>
</tr>
<tr>
<td>If formula is so bad, why do you give it at WIC?</td>
<td>Most babies in Minnesota are breastfed. WIC encourages all moms to breastfeed, and most do. But some moms decide not to, and a few moms can’t breastfeed. Formula is an alternative for babies who don’t receive breastmilk. Clerk: [CPA name] can talk to you more about this.</td>
</tr>
<tr>
<td>I know breastfeeding is best, but I just don’t want to. I’m going to use formula.</td>
<td>It’s your job as the mom to decide what to feed your baby. If you ever want to talk more that, the counselors at WIC can help you. If you change your mind and want to breastfeed, you can! Clerk: [CPA name] can talk to you more about this.</td>
</tr>
</tbody>
</table>
Social and Economic Benefits of Breastfeeding

In addition to the health benefits for moms and babies, breastfeeding has other benefits to families and the community.

- **Families benefit**
  - Families save several hundred dollars when the cost of breastfeeding is compared to the cost of using formula.
  - When children are healthier, parents lose less sleep caring for a sick child.
  - When children are healthier parents lose less time away from work.
  - Breastfeeding provides a great beginning toward the hopes and dreams that parent’s wish for their children.

- **Employers benefit** because mothers of breastfed children take fewer sick days and are absent from work less.

- **Reduced health care costs** since breastfed babies usually require fewer sick care visits, prescriptions, and hospitalizations.

**Skill Check- #1**

Write some ideas on a note card or the paper below about what you might say to a mom who asks: “Isn’t formula just as good as breastfeeding now that they’ve added those new things to it?”

- Using your notes, practice aloud to yourself or with a friend or coworker.
- Refer to your notes when talking with participants.
What Do Other Organizations Recommend?

- The **American Academy of Pediatrics (AAP)** recommends exclusive breastfeeding for the first six months of life, followed by continued breastfeeding with the gradual introduction of solid foods in the second six months of life. AAP recommends breastfeeding beyond the first year as long as mutually desired by both the mother and the baby.

- The **Academy of Nutrition and Dietetics (AND)** recommends exclusive breastfeeding for the first 6 months of life and breastfeeding with complementary foods from 6 months to at least 12 months in order to provide optimal nutrition and health protection.

- The **World Health Organization (WHO)** recommends exclusive breastfeeding for the first 6 months. Then infants should receive complementary foods while breastfeeding continues for the first two years of life or longer.

- **Healthy People 2030** set benchmarks that at least 42.4% of infants will be exclusively breastfed through 6 months of age and at least 54.1% of infants will be breastfeed up to 1 year of age.

**NOTE:** Exclusive breastfeeding means the baby receives only breastmilk with no other liquids or solids offered to the infant.

WIC’s Role in Breastfeeding Support

As a **public health and nutrition program**, WIC promotes and supports breastfeeding.

**WIC supports breastfeeding by:**

- Creating a clinic environment that demonstrates that WIC is “The Breastfeeding Program.

- Providing counseling and education about breastfeeding, both during pregnancy and after delivery.

- Providing support and counseling to women with breastfeeding questions, problems, and concerns.

- Participating in community efforts to support breastfeeding.

- Providing more food to women who are exclusively breastfeeding.

- Providing breast pumps to women who need to pump their milk.

- Never offering formula to a participant unless a CPA has had the opportunity to assess and counsel the participant regarding formula.
The National WIC Association’s Statement on Breastfeeding

The National WIC Association (NWA) endorses the American Academy of Pediatrics' (AAP) and the Academy of Breastfeeding Medicine (AMB) Policy Statements on Breastfeeding.

The AAP policy statement “Breastfeeding and the Use of Human Milk” (2012) states, “Breastfeeding and human milk are the normative standards for all infant feeding and nutrition. Given the documented short and long-term medical and neurodevelopment advantages of breastfeeding, infant nutrition should be considered a public health issue not only a lifestyle choice.”

The AMB policy statement “Position of Breastfeeding” (2015) states, “Suboptimal breastfeeding practices are unequivocally associated with a greater risk of infant morbidity and mortality not only in developing countries, but also in industrialized countries. Increasing breastfeeding rates is one of the most important behaviors we can promote to decrease infant death and illness worldwide.”

NWA promotes exclusive breastfeeding for infant feeding through the first year of life and beyond, with the addition of appropriate complementary foods when the infant is developmentally ready, usually around six months of age. All WIC staff have a role in promoting and providing support for the successful initiation and continuation of breastfeeding.

The Federal Regulations for the WIC Program state that “all pregnant participants shall be encouraged to breastfeed unless contraindicated for health reasons.”

In addition, the WIC Federal Regulations require the Minnesota WIC Program to:

- Create a positive clinic environment which endorses breastfeeding as the preferred method of infant feeding.
- Train staff on breastfeeding promotion and support.
- Ensure that women have access to breastfeeding information during pregnancy and after birth.

What is Your Role?

Each member of the WIC team has a role in breastfeeding promotion. Your role as a WIC employee is to endorse breastfeeding as the preferred way to feed babies. You also play an important role in assuring that the WIC clinic setting portrays positive messages about breastfeeding and the opportunity for parents to learn.

However, your role is to accept and respect the few that will choose not to breastfeed. WIC’s job is to provide breastfeeding information and a breastfeeding-positive environment. When a woman who has been given accurate information about breastfeeding and an opportunity to talk through her concerns, still chooses to use infant formula, she has made an “informed choice”. We must respect each family’s choice and continue to provide them with support for caring and feeding their children.

A woman has the opportunity to make an informed choice only after she has been given the opportunity to discuss breastfeeding and any barriers or concerns, she might have. This
opportunity is provided when WIC CPAs use open ended questions to identify and address any concerns, misconceptions or barriers that might keep her from breastfeeding; affirmations that her concerns are understandable; and with counseling to help overcome those barriers and get breastfeeding off to a great start.

**Practice Activity- B**

Walk around your clinic and write down 5 ways that your clinic positively promotes breastfeeding.

Do you have suggestions for more ways your clinic could promote breastfeeding? If so, share your ideas with your Breastfeeding Coordinator.

**Skill Check- #2**

1. How long does the AAP recommend that moms and babies continue breastfeeding?

2. When does the AAP recommend that babies start eating solid foods?

3. Practice saying positive breastfeeding messages. Practice aloud to yourself or with a friend or coworker.
When Breastfeeding is NOT Recommended

Although breastmilk is the best food for babies, there are occasionally situations in which a woman should not breastfeed for health reasons. There are many reasons that women might think they shouldn’t breastfeed, but very few situations when breastfeeding is not recommended.

Breastfeeding is not recommended when:

▪ A woman is using drugs that are known to enter the breast milk and be harmful to the baby. Examples include:
  o Heroin
  o Cocaine and crack
  o Methamphetamine and other amphetamines
  o Hallucinogens (LSD, Ecstasy, mushrooms)

▪ A mother is taking medications known to cause harm to the breastfed infant, such as:
  ▪ Anticancer drugs
  ▪ Radioactive substances (stop breastfeeding temporarily)
  ▪ A mother has tested positive for HIV (human immunodeficiency virus).
  ▪ An infant has galactosemia (inability to metabolize galactose, a rare condition).
  ▪ A mother has T-cell leukemia virus type 1 (HTLV-1).
  ▪ A mother has untreated active tuberculosis.

WIC CPAs will work with participants to determine if a health care professional has recommended the mother not breastfeed, or to inform women when they should discuss breastfeeding with their health care provider.

What WIC staff do does make a difference!

Breastfeeding initiation rates in the Minnesota WIC Program were dropping until about 1990. At that time most Minnesota local WIC Programs changed the way they promoted and supported breastfeeding, and since then breastfeeding initiation has steadily increased. Now about 80.5% (2020) of Minnesota WIC participants initiate breastfeeding. With all of us working together more babies and moms will get off to this great start. Welcome to WIC. Your work will make a difference!
Final Skills Check

1. Breastfeeding is considered by many to be the foundation of good feeding practices.
   T   F
2. Most of the components found in breastmilk are now duplicated in infant formula.
   T   F
3. Infant formula can be seen as an equal replacement for breast milk.
   T   F
4. Babies who are not breastfed have an increased risk for many infections.
   T   F
5. Babies who are not breastfed have an increased risk of allergies and asthma.
   T   F
6. Mothers who do not breastfeed have an increased risk of breast, ovarian, and endometrial cancers.
   T   F
7. The World Health Organization recommends breastfeeding continue for the first two years of life or longer.
   T   F
8. Using pens provided by a formula company is ok because participants can’t really read the printing on it.
   T   F
   T   F
10. Breastfeeding is not recommended when a woman has tested positive for HIV.
    T   F
11. Breastfeeding is not recommended when a woman is using tobacco products.
    T   F

Training Module Answer Keys
(https://www.health.state.mn.us/people/wic/localagency/training/nutrition/nst/answerkeys.html)

Minnesota Department of Health - WIC Program, 85 E 7th Place, PO BOX 64882, ST PAUL MN 55164-0882; 1-800-657-3942, health.wic@state.mn.us, www.health.state.mn.us; to obtain this information in a different format, call: 1-800-657-3942.

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