



Brief Description

A workshop to understand normal baby feeding behavior and learn tips to help families successfully breastfeed. We will discuss the basics of breastfeeding and how to help families understand breastfeeding as a preventative health strategy. You will leave with a better understanding of the importance of language, messaging, and counseling strategies when meeting with new client families. As a result, you'll be able to use the intake process and health histories to provide targeted education and understand typical infant behaviors and breastfeeding. You will understand when to make referrals for expert lactation assistance.



Home Visiting Support for Breastfeeding

Strategies for Success



Jarene Fleming, IBCLC RLC
State Breastfeeding Coordinator
VDH Office of Family Health Services, Div. of Community Nutrition



Home Visiting is Key!



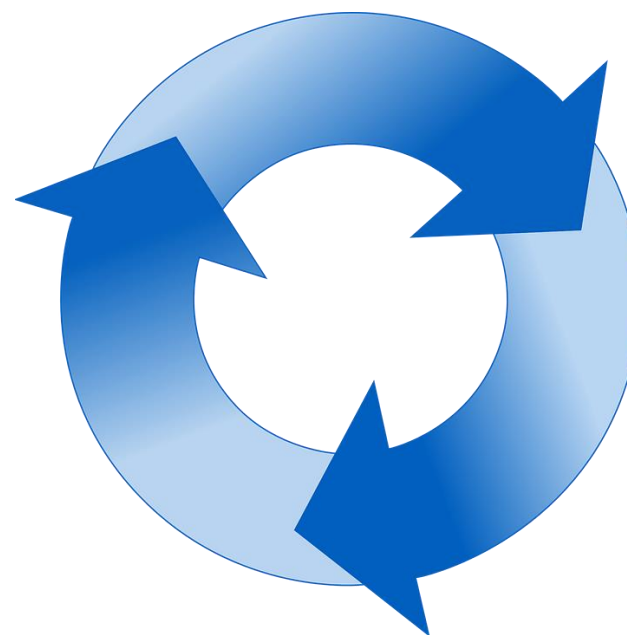
Objectives

- Understand that breastfeeding is a public health strategy
- Understand the importance of language framing and messaging
- Describe counseling strategies to use the intake process and health history to help families understand protective factors of breastfeeding
- Understand normal feeding patterns and when to make referrals
- Describe community resources



Breastfeeding is the Nutritional Standard for Infant and Young Child Feeding

Breastfeeding is one of the most effective ways to ensure child health and survival.



World Health Organization Retrieved from <http://www.who.int/features/factfiles/breastfeeding/en/>



Glossary

- ***breast milk*** - commonly spoken and written term used interchangeably here with the terms ***human milk*** or ***mother's own milk***
- ***breastfeeding*** - the act of transferring human milk to an infant at the breast.
- ***human milk feeding*** - inclusive term to include various feeding methods of human milk (syringe, spoon, cup, bottle...)
- ***lactation*** - the physiologic process of producing human milk.



Glossary

- ***milk expression*** - the process of removing milk from the breast
- ***commercial milk formula*** - formula, artificial milk
- ***pasteurized donor human milk (PDHM)***- donated human milk that has been heat treated, homogenized, sealed and labeled
- ***gender-neutral or gender - inclusive language*** - avoids bias towards a particular sex or social gender.



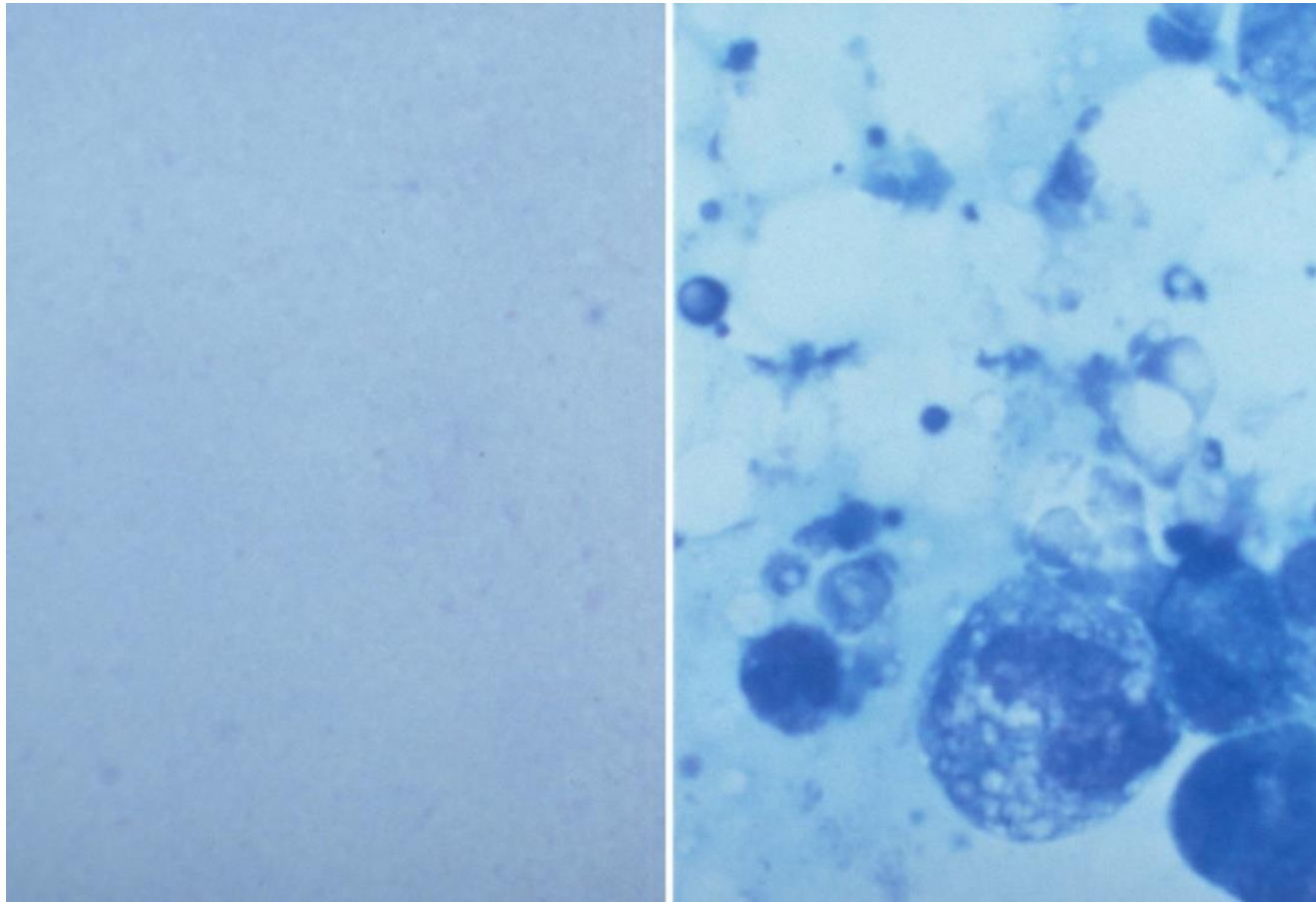
The Impact of Human Milk Feeding





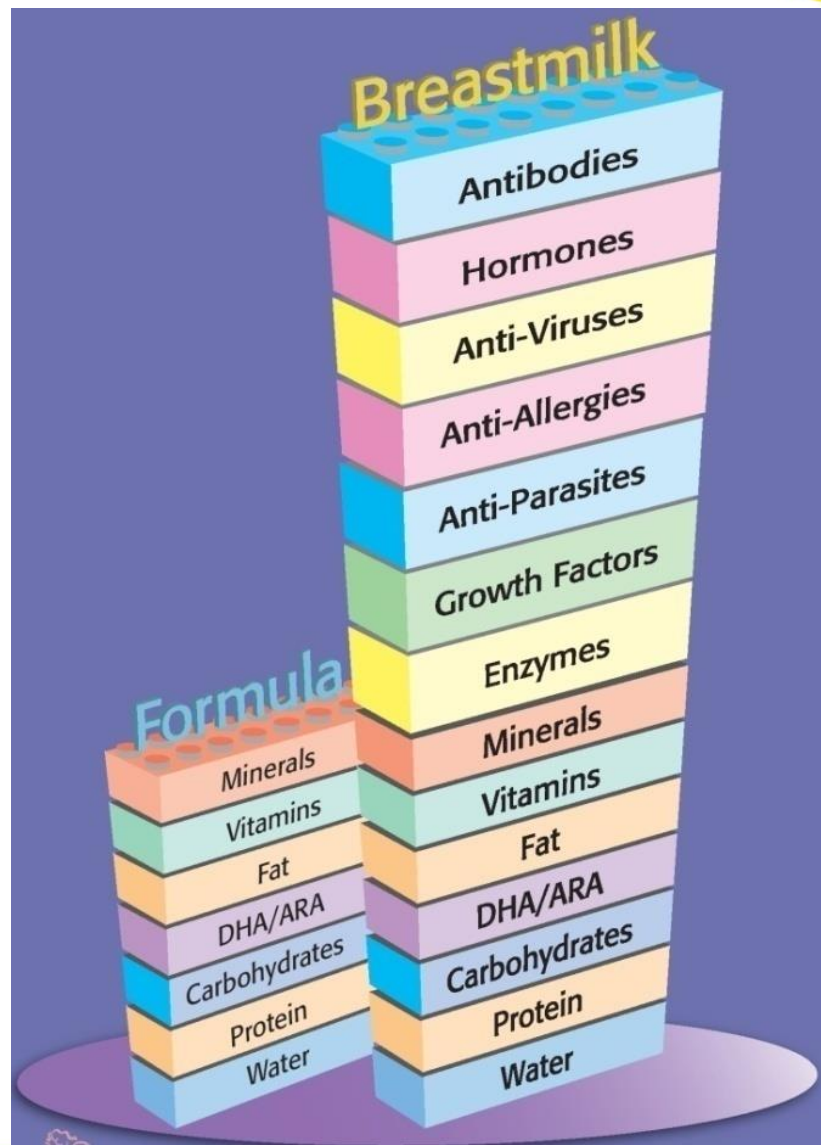


Marvelous Human Milk





Human Milk: The Standard by Which Everything Else is Measured



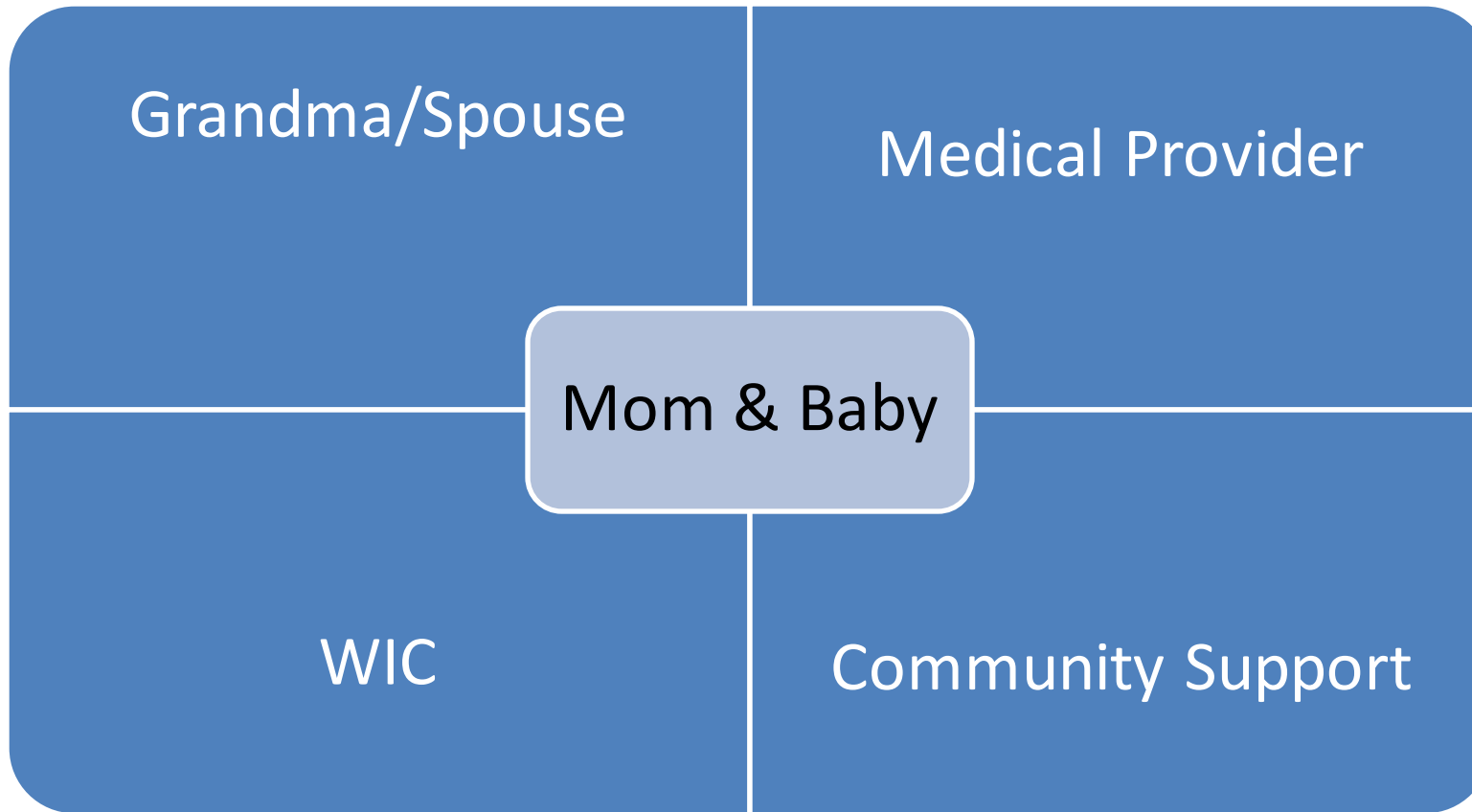


Breastfeeding Is Good for Mothers





Holistic Approach to Educate and Encourage





Support Team





Watch Your Language

2022 Breastfeeding Report Card

83.2%
of U.S. mothers
initiated breastfeeding



55.6%
of U.S. mothers still
breastfed at 6 months



24.9%
of U.S. mothers
exclusively breastfed
at 6 months





Adult Learners & Effective Frequency

Curiosity, recognition, decision.

First time you hear/ see something

"What *is* it?"

Anything new no matter how uninteresting...

The second time

"What *of* it?"

Is it important to me, what is the personal relevance?

The third contact brings it home. . .

"This *is* important!"



LOVE Counseling



Listening

Open-ended questions

Validate

Empower



Practical Tips to Manage Life and Breastfeeding





Breastfeeding and the Law

2022 Fair Labor Standards Act (FLSA), most employees have the right to reasonable break time and space for lactation. For more information about FLSA coverage, see [Fact Sheet #14](#)

2020 Pregnant Workers Fairness Act, *Code of Virginia* § [2.2-3905](#) requires employers to make reasonable accommodations for lactating workers

2019 [Va. Code Ann. § 2.2-1201](#) directs the Department of Human Resource Management to develop state personnel policies that provide break time for nursing mothers to express...

2015 Right to breastfeed *Code of Virginia* § [32.1-370](#) states in relevant part, "A mother may breastfeed in any place where the mother is lawfully present."

2014 *Code of Virginia* § [22.1-79.6](#) requires school boards to adopt a policy to provide lactation accommodations for *employees and students*.

2010 Break Time for Nursing Mothers Section 7 of the FLSA Department of Labor Provision require employers to provide a nursing mother reasonable break time to express breast milk after the birth of her child.



VDH Public Breastfeeding Law Cards



VIRGINIA RIGHT TO BREASTFEED IN PUBLIC

A mother may breastfeed in any place where the mother is lawfully present, including any location where she would otherwise be allowed...
VA Code § 32.1-370 (2015) in relevant part.

WH01 | 12-2016

**I have the legal right to
breastfeed my baby.
My baby and I will enjoy
many benefits from breastfeeding.**

**Thank you for helping families
feel welcome here.**

Questions or concerns, email:
vabreastfeeds@vdh.virginia.gov



Any questions or concerns about the public breastfeeding law may be addressed to:

vabreastfeeds@vdh.virginia.gov



Plan Ahead

If you fail
to plan,
you are planning
to fail





Think Outside the Box



[Supporting Nursing Moms at Work: Employer Solutions](#)



Before Returning to Work or School

the MORE
YOU PRACTICE
THE PRACTICE
BETTER
YOU GET



Support Lactating Families





Anticipatory Guidance





Infant Feeding Patterns

- Strong Start
 - Frequency
 - Avoid supplements and pacifiers





Know When to Refer and Issues to Watch For





Connect Families to Lactation Support





Practical Change Strategies





Resources and Additional Reading

surgeongeneral.gov/library/calls/breastfeeding/calltoactiontosupportbreastfeeding.pdf

<https://wicworks.fns.usda.gov/breastfeeding>

<https://www.womenshealth.gov/breastfeeding/employer-solutions/industry.html>
<http://www.womenshealth.gov/>

<https://www.womenshealth.gov/patient-materials/resource/guides>

Returning to work or school <http://www.vdh.virginia.gov/breastfeeding/resources/>

https://www.gutmicrobiotaforhealth.com/en/a-new-study-sheds-light-on-maternal-and-infant-factors-that-shape-breast-milk-microbiome/?fbclid=IwAR0Pb-ATa3d0VR7_Yi4meISmxzvQ9CYg8zOmVdhGmSXGafkVCFWW8WesHcM

Watch Your Language! Article by Diane Wiessinger, MS, IBCLC

https://en.wikipedia.org/wiki/Effective_frequency

Plan, Do, Study, Act

<https://www.health.state.mn.us/communities/practice/resources/phqitoolbox/pdsa.html#:~:text=More%20information-,What%20is%20PDSA%3F,works%20and%20what%20doesn't.>



Resources and Additional Reading

National Breastfeeding Helpline 800-994-9662

Virginia WIC Helpline 888-942-3663

ABN Helpline - After-Hours Breastfeeding Helpline

Open 4:30 p.m. to 8:30 a.m. 888-588-3423

National Perinatal HIV/AIDS Hotline 888-448-8765

Postpartum Support Virginia Warmline 703-829-7152

CDC's Work to Support & Promote Breastfeeding

<https://www.cdc.gov/breastfeeding/pdf/breastfeeding-cdcs-work-508.pdf>


<https://www.dol.gov/agencies/whd/pump-at-work>

VDH Reference Materials

Breastfeeding


Protect your baby from tobacco exposure

FACT SHEET




Infants exposed to tobacco are at high risk for Sudden Infant Death Syndrome (SIDS). Exclusive breastfeeding can reduce the risk by 50 percent. Here's how to reduce exposure:

- ✓ Never expose your baby to secondhand smoke. Do not allow smoking in your home or car.
- ✓ Breastfeed your baby before smoking or vaping.
- ✓ Go outside to smoke at least 25 feet away from a door or window.
- ✓ Wear a designated smoking coat.
- ✓ Remove coat and wash exposed skin before breastfeeding.
- ✓ Wait 90 minutes before breastfeeding again.
- ✓ Always have a separate sleep space for your baby.



Human milk can protect your baby from serious illnesses. If you have not been able to quit smoking, you should still breastfeed.



Call 1-800-QuitNow to receive FREE tobacco cessation services. You will receive a personalized quit plan, self-help materials, and more.

VDH VIRGINIA DEPARTMENT OF HEALTH This institution is an equal opportunity provider.

WIC Virginia Wholesome Informed Choices

Quit Now Virginia Tobacco User Quitline

VDHLiveWell

SMOKING AND PREGNANCY

What are your risks?

Effects on Your Health

- Difficult getting pregnant
- Placenta separates from the womb too early, causing bleeding
- Placenta covers the cervix, causing problems
- Water breaks too early
- Pregnancy occurs outside the womb
- Miscarriage

Effects on Your Baby

- Baby born too small
- Baby born too early
- Cleft lip/palate
- Still birth
- Sudden Infant Death Syndrome



Quitting is Hard. We're Here to Help.
Call 1-800-QUITNOW (1-800-784-8669).

VDH VIRGINIA DEPARTMENT OF HEALTH **QuitNow.net/Virginia** **Quit Now** Virginia Wholesome Informed Choices



VDH Reference Materials


"Dígale a WIC"

CÓMO SERVIRLE MEJOR
LLAME A:
1-877-TELL-WIC (835-5942)

o escriba a
TELLWIC@vdh.virginia.gov



Servicios de WIC
y Nutrición
Comunitaria



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WICVA.com

WIC 541/5 WIC 12/1-2018



Reasons for relactation may include medical conditions, changes in work or homelife, disappointment in early weaning, if you can't find formula, or baby tummy troubles. Reestablishing milk production which has decreased or dried up after weeks or months of not breastfeeding is **relactation**. It is important to have support while relactating. Your WIC Breastfeeding Peer Counselor (BFPC) and WIC Designated Breastfeeding Expert (DBE) can help.

Why Do You Want To Relactate?

Relactation is challenging but doable. Reestablishing milk supply for a younger baby is usually faster. It is easier to relactate for someone who breastfed some and decided to stop than for someone who had low milk production or never started. Talk to your WIC BFPC or DBE to learn more.

Is It Too Late?

- Mothers with babies under 3 months old have the fastest results, but older babies can be successful too.
- Babies who have previously breastfed are more willing to return to the breast.

How Long Will It Take?

Commit to at least 2 weeks of latching baby and/or pumping every 2-3 hours. Expect a few drops in the beginning and a slow increase.

Changes Moms May Experience During Relactation:

Breasts may become more full and tender and areolas may get darker. You may experience mood changes due to hormones as well as changes in your menstrual (period) cycle.

FOR MORE INFORMATION
888.942.3663

Will I Be Able To Make Enough Milk?

How much milk you produce will depend upon several things:

- Frequency of milk removal
- How happy baby is feeding at the breast
- How well the baby is removing milk
- How often the breast is stimulated

Frequent use of an effective pump can help too. Each person's response to breast stimulation is unique, so the time needed breastfeeding or expressing milk will vary. Ask about WIC breast pumps!

Frequent removal + Effective stimulation = More Milk

Important Information To Track:

1. **Keep track of how often and how long the baby breastfeeds.**
2. **Track the amount of formula or expressed breast milk being offered and how it was given.**
3. **Track wet diapers. Baby should have at least six heavy wet diapers in 24 hours.**
4. **Track baby's bowel movements. These get softer, lighter color, and have less odor as the amount of breast milk increases.**
5. **Have weekly weight and growth checks. You can do this at your WIC clinic or Pediatrician office.**



VAWIC.COM/BREASTFEEDING

This institution is an equal opportunity provider.

WIC 33| 3-2022





<http://www.vdh.virginia.gov/vdhlivewell-infographics/vdhlivewell-brochures/>

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BREASTFEEDING
AND
RETURNING TO WORK OR SCHOOL

VDH VIRGINIA DEPARTMENT OF HEALTH



VDHLiveWell.com/breastfeeding

FEEDING
AND
WORK OR SCHOOL

Feed after returning to work or school gives them a special time to bond. It's important now that you continue breastfeeding at the breast while you maintain a good milk supply. School administrators should know about breastfeeding often, which means less time

come to breastfeeding. It counts!

BREAST WHEN YOU CAN:

Encourage caregivers to breastfeed during breaks. Support your breastfeeding plan. Supplement with formula.



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<https://www.vdh.virginia.gov/content/uploads/sites/118/2018/10/Breastfeeding-BacktoWorkENG-2018.pdf>

USDA Resources



- [Posters](#)
- [Educational materials](#)
- [Videos](#)
- [Social Media Toolkit](#)
- and resources for moms and moms' support network, including materials and information for [dads](#) and [grandparents](#)

<https://www.fns.usda.gov/tn/breastfed-babies-welcome-here>



Questions?

Jarene.fleming@vdh.virginia.gov

(804) 864-7109



Time Permitting

Lessons in Baby Behaviors



Baby Behaviors





Baby's Senses





States of Consciousness:





I need a break





I want to be near you





Crying





Irritable



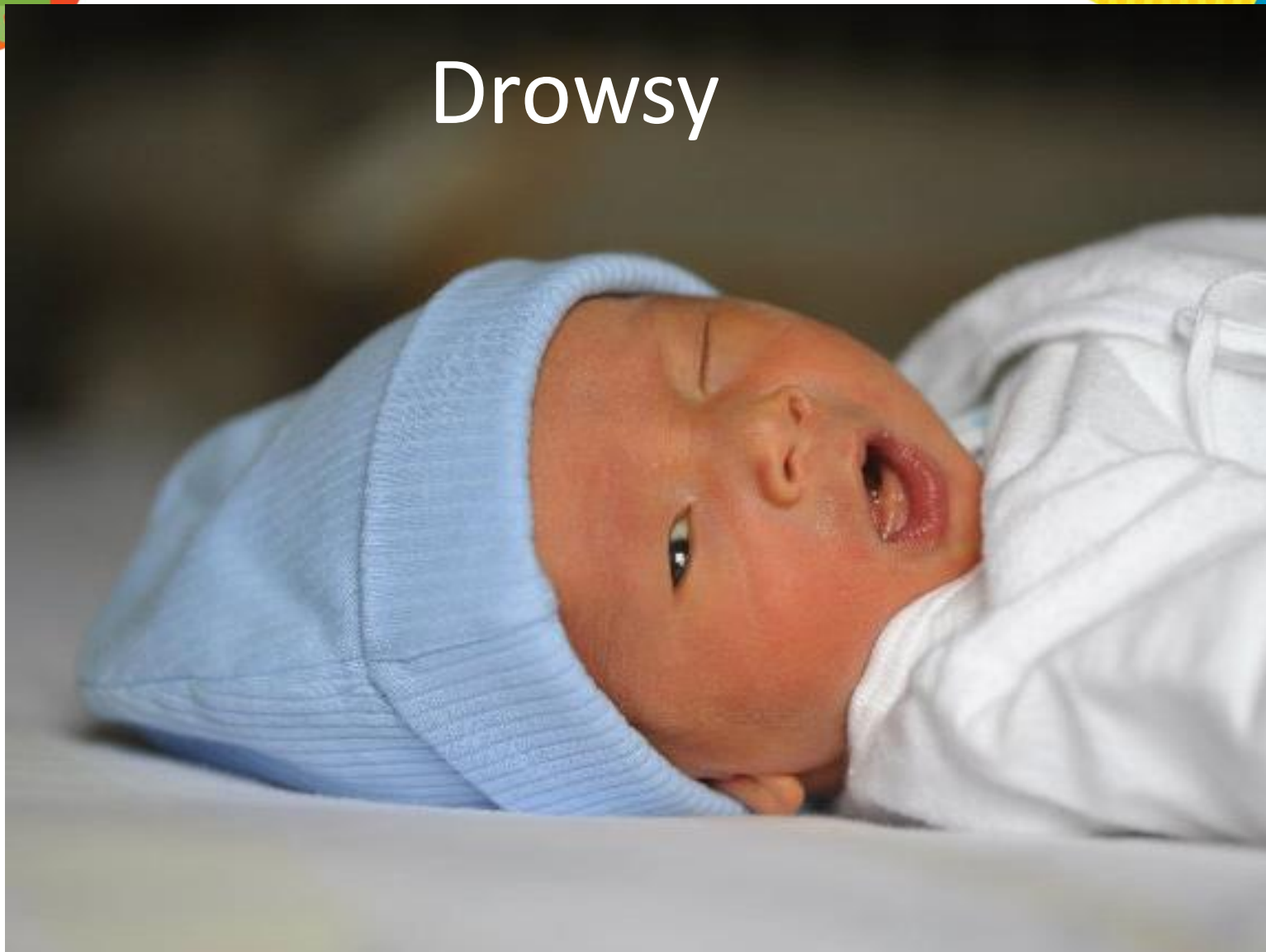


Quiet alert





Drowsy





Active sleep





Quiet sleep





Why Babies Cry





Persistent Crying





Sleep

Hospital Practices that Support Breastfeeding



Skin-to-Skin



Rooming In



Avoid Pacifiers & Bottles



Limit the Visitors



Signs that Baby Is Getting Enough



Infant Feeding Plan



My name is _____ and my goal is to exclusively breastfeed my baby.

The benefits of breastfeeding are very important to me and my baby. I request that these guidelines be supported as long as it is medically safe for me and my baby.

If I am unable to answer questions about the chosen infant feeding practice, please speak with my birthing partner _____ or my doctor _____ who are both supportive of my decision to breastfeed.

CHECK ALL THAT APPLY:

- EXCLUSIVE BREASTFEEDING**
My goal is to exclusively breastfeed my baby. Please do not give my baby any supplements before speaking to me or my birthing partner. I need all of my baby's suckling to be at my breast in order for me to establish a good milk supply.
- NO BOTTLES OR PACIFIERS**
Please do not give my baby artificial nipples including pacifiers or any types of bottles with formula, water, or glucose water. If there is a medical reason for supplementation, I would first like to speak with a lactation consultant or pediatrician about trying alternate feeding methods with expressed milk.
- SKIN-TO-SKIN**
When my baby is born, I would like to have him/her placed on my chest, skin-to-skin with me for at least thirty minutes. If possible, please perform routine newborn evaluations with my baby on my chest. Throughout our stay, I want to be able to hold my baby skin-to-skin as much as possible.
A blanket may be placed over us, but not between us, if extra warmth is necessary.
- FIRST HOUR**
Please help me initiate breastfeeding within 30-minutes-to-1-hour of delivery. This means placing my baby skin-to-skin as soon as possible after birth offering help to begin breastfeeding when my baby seems ready (e.g. rooting, licking lips, etc.) Please do not force my baby to take the breast if he/she is not showing signs of readiness. Instead, keep my baby skin-to-skin with me until he/she is ready to try to latch.
- ROUTINE EXAMS**
Please examine my baby in my presence and do not take him/her away from me unless he/she requires medical treatment that cannot be done in my room.
- EMERGENCY CESAREAN**
If I have a cesarean, I would like to hold my baby skin-to-skin as soon as possible after the operation. If I am unable to for some time after the delivery, then please allow my partner to hold my baby skin-to-skin.
- ROOMING IN**
I would like to room in with my baby 24 hours a day to give my baby plenty of skin-to-skin time and so I can learn my baby's feeding cues and feed him at his first sign of hunger. If for some reason my baby and I are not in the same room, please bring him/her to me at the earliest hunger cues, such as sucking on hands, making sucking noises, rapid eye movement, or rooting.
- BREASTFEEDING ASSISTANCE**
Please teach me how to identify a good latch and how to correct my baby's positioning and latch if improvement is needed. Please teach me how to recognize my baby's early hunger cues and how to tell if my baby is breastfeeding well.
- BREAST PUMPS**
If my baby is unable to breastfeed or is separated from me due to medical reasons, I want to be able to use a breast pump within 6 hours of delivery. If you think I am going to need a pump longer than my hospital stay or if there is not a double electric breast pump available, please remind me to call my WIC office.
- DISCHARGE BAGS**
Please do not give me a discharge bag containing formula or show me any promotional or marketing materials concerning artificial baby milk.
- BREASTFEEDING SUPPORT AFTER DISCHARGE**
I would like to receive contact information for breastfeeding support in case I need help with breastfeeding after my baby and I are at home.

Used with permission from Texas Department of State Health Services and Texas WIC

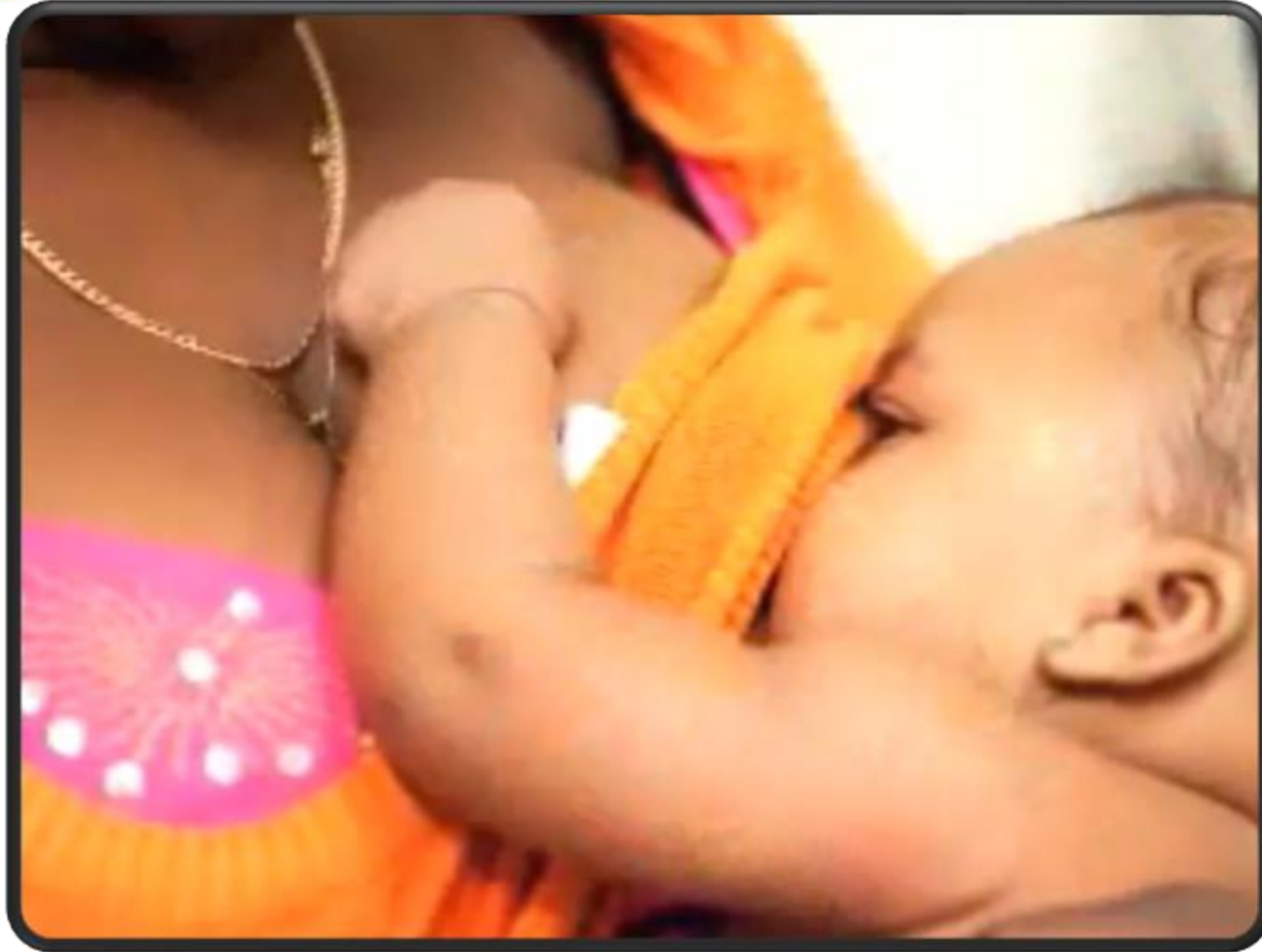
What is stressful about being a new parent?



Know where to go for help...



Setting Goals



Knowing what to expect...



When To Call the Doctor



It will get easier!



