Breastfeeding and Work—Let’s Make it Work!

Long-term breastfeeding has the greatest impact on health outcomes. However, the US average breastfeeding duration rate of 51.4% at six months of age falls short of the Healthy People 2020 goal of 60.6%. Returning to work is one of the top reasons for premature weaning. Making breastfeeding and work “work” will continue to be a national priority.

The World Alliance for Breastfeeding Action (WABA) declared in 1993, “breastfeeding thrives in family-friendly cultures! To make the changes necessary for long-term social transformation, we need a new way of thinking about work and families.” Twenty-two years later, we know this statement to be as true as ever.

During World Breastfeeding Week, August 1-7, 2015, WABA revisits the theme of breastfeeding support for working mothers with “Breastfeeding and Work—Let’s make it Work!”

Over the last two decades, several global and US breastfeeding support achievements have increased protections for women. In the US, these achievements include the Break Time for Nursing Mothers law, which applies to non-exempt employees, and the passage of the Affordable Care Act (2010), which includes provisions for comprehensive lactation support and consultation, and breastfeeding equipment as part of women’s preventative health care services.

Despite these achievements, there is still a long way to go to ensure all mothers are supported in their commitment to breastfeeding. Support the expansion of maternity protections by learning more about the 2015 WBW goals.

How Does WIC Help Breastfeeding Families?

- Individualized breastfeeding education, assessment and counseling by trained staff
- “Mother to Mother” Breastfeeding Peer Counselors that speak multiple languages
- Access to CLCs (Certified Lactation Counselor) and IBCLCs (International Board Certified Lactation Consultants)
- Assistance in planning to return to work/school
- Assistance in accessing breast pumps
- Culturally and linguistically appropriate educational materials
- Support programs and classes available at many programs

Contact the Massachusetts WIC Program at 1-800-WIC-1007 or visit www.mass.gov/wic for more information.
Massachusetts Breastfeeding Highlights 2015

The Baby-Friendly Hospital Initiative

Currently, Massachusetts has six birthing facilities that are designated as Baby Friendly. At least 21 additional hospitals across the state have committed officially to entering the Baby Friendly 4-D Pathway. This means that approximately 60% of birthing facilities in the Commonwealth are involved with the Baby Friendly Hospital Initiative! To help support this exciting trend, Massachusetts Department of Public Health (MDPH) staff are in the midst of a technical assistance and training project, funded by the Maternal and Child Health Bureau, focused on developing resources to help hospitals that are pursuing the Baby-Friendly designation.

Online Baby-Friendly Training—Opportunity for Maternity Nurses

MDPH has received CDC funding to offer Massachusetts birth hospitals a limited number of scholarships to the “First Latch” Baby Friendly Hospital online training platform. This resource, offered by Lactation Education Resources, provides nurses with the required 20 hours of lactation training. Nurse Managers in maternity care units will be contacted directly about this opportunity. For more information, contact Ellen Tolan at ellen.tolan@state.ma.us.

The Massachusetts WIC Program Promotes and Supports Breastfeeding

Over the past year, Massachusetts WIC has provided breastfeeding promotion, education and support to over 50,000 breastfeeding infants and nursing mothers. Each local WIC program tracks breastfeeding rates as part of WIC’s Performance Management System. All programs who engaged in breastfeeding-specific Quality Improvement (QI) projects achieved their goals of increasing breastfeeding exclusivity and duration rates, and the most recent statewide WIC breastfeeding initiation rate exceeded 80%.

NeoQIC Working to Increase the Use of Human Milk in the NICU

MDPH received funding for the Massachusetts Perinatal and Neonatal Quality Collaborative (MPNQC) to support six QI projects, including one focused on increasing the use of human milk for VLBW infants. NeoQIC (Neonatal Quality Improvement Collaborative of Massachusetts) falls under the MPNQC with a focus on improving health outcomes of mothers and newborns in Massachusetts through open sharing of practices and data. For more information log onto http://www.neoqic.org

2015 Breastfeeding Data

The Centers for Disease Control and Prevention released data from the National Immunization Survey, which reflect breastfeeding practices based on 2012 births. Data are based on a dual-frame sample that includes respondents surveyed on landline or cellular telephones in 2013 and 2014. As you can see, Massachusetts exceeds national data in all breastfeeding metrics.

<table>
<thead>
<tr>
<th>Region</th>
<th>Ever Breastfed</th>
<th>Breastfeeding at 6 months</th>
<th>Breastfeeding at 12 months</th>
<th>Exclusive breastfeeding at 3 months</th>
<th>Exclusive breastfeeding at 6 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>U.S. National</td>
<td>80%</td>
<td>51.4%</td>
<td>29.2%</td>
<td>43.4%</td>
<td>21.9%</td>
</tr>
<tr>
<td>Massachusetts</td>
<td>86.3%</td>
<td>57.2%</td>
<td>37.8%</td>
<td>49.6%</td>
<td>26.2%</td>
</tr>
<tr>
<td>Healthy People 2020 Target</td>
<td>81.9%</td>
<td>60.6%</td>
<td>34.1%</td>
<td>46.2%</td>
<td>25.5%</td>
</tr>
</tbody>
</table>
Music Therapy Impacts Breast Milk Production

Mothers of preterm newborn infants experience heightened psychological stress. The use of mother's breast milk compared to infant formula has a positive impact on reducing morbidity and mortality. Music therapy was associated with a significant reduction of stress and a significant increase (p-value 0.033) in breast milk expression in mothers receiving music therapy when compared with those who did not receive music therapy.


Breastfeeding Associated with Lower Incidence of Childhood Leukemia

Leukemia is the most common childhood cancer. A meta-analysis of 18 published (1995-2012) case-control studies showed that, compared to no or shorter breastfeeding, breastfeeding 6 months or longer was associated with a 19% lower risk of childhood leukemia (odds ratio, 0.81; 95% CI, 0.73-0.89).


Breast Milk Exposure Important to Microbial Diversity in Respiratory Tract

A core microbiome bridges both the gastrointestinal and upper respiratory organ systems. Clinical outcomes are linked to changes in bacterial abundances over time. Breast milk exposure is an important determinant of microbial diversity in the respiratory tract. Increased diversity was associated with prolonged periods of health and delays in first Cystic Fibrosis exacerbation.

Hoen, AG, et al. (2015). Associations between gut microbial colonization in early life and respiratory outcomes in cystic

Breastfeeding Influences Bacterial Diversity in Gastrointestinal Tract

Initial bacteria colonization is critical in the adjustment of the newborn to the extraterine environment and is essential for normal gastrointestinal development and function. Dysbiosis, following premature birth or cesarean section, and perinatal use of antibiotics has been associated with increase of disease and interference with bacterial diversity. Breastfeeding was shown to influence initial colonization and is associated with a lower incidence of immune-mediated disease.


Need For Culturally Appropriate Interventions to Address Breastfeeding Disparities in African American Working Mothers

Breastfeeding rates are lowest among African American mothers, who face unique employment challenges and are more likely to work in unsupportive workplace environments without breastfeeding protections. A focus group of African American mothers in the Detroit area found that interventions to support working African American mothers should include education and training for health professionals, enforcement of workplace breastfeeding policies, and social support from peer role models. Culturally appropriate workplace interventions could help address breastfeeding disparities.


FREE CMEs for Clinicians!

Check out the updated online breastfeeding tutorials for clinicians. These modules provide 3 FREE CMEs as well as continuing education credits for RNs.

www.mass.gov/dph/breastfeeding
Resources for Professionals and Families

Massachusetts WIC Nutrition Program
www.mass.gov/wic

Massachusetts Department of Public Health
www.mass.gov/dph/breastfeeding

Massachusetts Breastfeeding Coalition
www.massbreastfeeding.org

Academy of Breastfeeding Medicine
www.bfmed.org

LactMed

International Lactation Consultant Association
www.ilca.org

AAP Breastfeeding Resource Guide for Health Professionals
http://www2.aap.org/breastfeeding/
healthProfessionalsResourceGuide.html

Baby-Friendly USA
www.babyfriendlyusa.org

Supporting Nursing Moms at Work

Fair Labor Standards Act Break Time for Nursing Mothers
http://www.dol.gov/whd/nursingmothers/

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Massachusetts Breastfeeding Coalition Annual Conference

Breastfeeding In the Bay State

Monday, September 28, 2015
7:30 AM—5:15 PM

Massachusetts Medical Society
Waltham, Massachusetts

Jointly provided by Massachusetts Breastfeeding Coalition, University of Massachusetts School of Medicine Department of Continuing Education, and the Massachusetts Section of ACOG.

7.5 Physician CME, 8.7 Nurse CEU contact hours, 7.25 IBLCE CERPs provided.

For more information, visit
http://massbreastfeeding.org/conference

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Celebrate World Breastfeeding Week!

Nominate an employer or a business for a Breastfeeding-Friendly Award

http://massbreastfeeding.org/parents/employer-award/

http://massbreastfeeding.org/parents/business-award/

Nominations due September 8, 2015