



AUGUST 2020 COMMUNITY HEALTH

BREASTFEEDING AWARENESS MONTH

IN THIS TOOLKIT:

- About National Breastfeeding Month
- Benefits to Breastfeeding
- Infant Feeding Basics
- Common Problems
- Considerations for Nursing Practice
- Lactation Education Resources

ABOUT ABOUT

Since its declaration by the United States Breastfeeding Committee in 2011, August has been recognized as National Breastfeeding Month (USBC, 2020).

In response to the PERSISTENT RACIAL AND ETHNIC DISPARITIES SURROUNDING BREASTFEEDING, the theme for the 2020 National Breastfeeding Month is "MANY VOICES UNITED" (USBC, 2020).

AUGUST 1-7: WORLD BREASTFEEDING WEEK

AUGUST 9-15: NATIVE BREASTFEEDING WEEK

AUGUST 16-24: SPOTLIGHT ON INFANT AND YOUNG CHILD FEEDING EMERGENCIES

AUGUST 25-31: BLACK BREASTFEEDING WEEK



WORLD BREASTFEEDING WEEK

#WBW2020

The first week of 2020 National Breastfeeding Month is dedicated to bringing awareness to the links between **BREASTFEEDING** and **CLIMATE CHANGE**.

HOW CAN BREASTFEEDING IMPROVE THE HEALTH OF OUR PLANET AND POPULATIONS?

"Scaling up optimal breastfeeding could prevent more than 823,000 CHILD and 20,000 MATERNAL DEATHS each year" (WABA, 2020).

The process for manufacturing and distributing breast milk substitutes requires substantial amounts of energy, water, and methane (WABA, 2020).

"Feeding one million babies formula for two years" produces about 150 MILLION CANS of formula as waste (WABA, 2020).

LEARN MORE AT:

https://worldbreastfeedingweek.org/



NATIVE BREASTFEEDING WEEK

#NATIVEBREASTFEEDINGWEEK

The second week of 2020 National Breastfeeding Month is to highlight the Native Breast/chestfeeding Experiences.

WHY IS THIS IMPORTANT?

Based on already limited data, Native mothers "have lower rates of breastfeeding initiation, duration, and exclusivity relative to other racial/ethnic groups except for African Americans" (Echo-Hawk, 2019).

"Native Breastfeeding is an act of defiance to the colonial systems and their imposed "norms" as well as a resilience of culture and body sovereignty..." (Echo-Hawk, 2019).

LEARN MORE AND ENGAGE IN THE DISCUSSION AT:

https://www.facebook.com/Native BreastfeedingWeek/



INFANT AND CHILD FEEDING EMERGENCIES

This week is dedicated to educating and providing resources on feeding emergencies, including during COVID-19.

FEEDING EMERGENCY FACTS

"Nearly 95% of infant and child deaths in emergencies result from diarrhea due to contaminated water and an unsanitary environment" (USBC, 2020).

"Infant formula has been linked to an increase in infant disease and death: it can also be contaminated and requires clean water and fuel to sterilize formula, bottles, and nipples. Lack of electricity also can make it difficult to preserve formula" (USBC, 2020).

"The safest food in an emergency is the mothers' own milk" which "contains antibodies that fight infection" (USBC, 2020).

FOR MORE INFORMATION AND RESOURCES, VISIT:

http://www.usbreastfeeding.org/p/cm/l
d/fid=33



BLACK BREASTFEEDING WEEK #BBW20 #REVIVE RESTORE RECLAIM

WHY IS THIS IMPORTANT?

- 1. The Black Infant Mortality Rate
 - a.Infants of black women have the highest morality rate. Black babies are 2.3 TIMES more likely to die than white babies (Ely & Driscoll, 2019).
 - b."Increased breastfeeding among black women could decrease infant mortality rates by as much as 50%" (Allers, 2014).
- 2. Diet-Related Diseases
 - a. Black children have higher rates of respiratory infections and metabolic diseases (Allers, 2014).
- 3. Lack of Diversity in Lactation Field
- 4. Cultural Barriers Among Black Women
 - a. The breastfeeding dialogue has been influenced by history of wet nursing for slave owners children, lack of role models, and stereotyping (Allers, 2014).
- 5. Lack of access for breastfeeding support

LEARN AND ENGAGE IN THE DISCUSSION AT:

https://www.facebook.com/ BlackBreastfeedingWeek/



Research reveals that breastfeeding has "significant value to infants, mothers, families and the environment" (La Leche League, 2020).

SOME BENEFITS OF BREASTFEEDING

FOR BABY:

Antibodies that help protect baby while their immune system matures (La Leche League, 2020).

Protection against illnesses/conditions such as ear infections, respiratory infections, "colds, viruses, staph, strep and e coli infections," allergies, intestinal problems, diabetes, dental problems, and cancers (La Leche League, 2020).

FOR MOM:

Reduced risk for cancer of the breast, uterus, cervix, and ovaries (La Leche League, 2020).

Decreased risk for diabetes, rheumatoid arthritis, and cardiovascular disease (Healthy Children, 2016).

FOR THE ENVIRONMENT:

Human milk has no "excess packaging or processing" (La Leche League, 2020).

INFANT FEEDING BASICS

The American Academy of Pediatrics recommends exclusive breastfeeding until the infant is 6 MONTHS old, and continued breastfeeding with complementary foods for AT LEAST 1 YEAR or longer (CDC, 2020).

"The longer an infant is breastfed, the greater the protection from certain illness and long-term diseases. The more... a woman breastfeeds, the greater the benefits to her health as well" (CDC, 2020).

When introducing foods around 6 months, try one new food at a time and wait 3-5 days before trying a different food to monitor for allergies (CDC, 2020).

Foods that are UNSAFE until child is 1 YEAR include (CDC, 2020):

- honey
- unpasteurized drinks/foods
- cows milk

FOR MORE INFORMATION AND RESOURCES, VISIT:

https://www.cdc.gov/breastfeeding/faq/index.htm





If feeding an infant formula, it is important to keep in mind the following (CDC, 2020):

- Check expiration date.
- Ensure container is sealed and free of damage.
- Clean and sanitize bottles properly.
- Do NOT use a homemade infant formula recipe.
- Follow container instructions. If using powder, always measuring the water before the powder.
- If you choose to warm the formula, place under running warm water and NOT the microwave, as the microwave can cause hot spots that can burn baby's mouth.
- Store unopened containers in a cool, dry place. After preparing formula, use within 2 hours or after 24 hours of storing in fridge.
- DO NOT save any formula that baby did not eat in a feed, as "the combination of infant formula and your baby's saliva can cause bacteria to grow" (CDC, 2020).

INFANT FEEDING BASICS

PACED BOTTLE FEEDING

A technique of bottle feeding for both breastmilk and formula fed babies that helps prevent overfeeding (WIC, 2018).

Paced bottle feeding technique (WIC, 2018):

- 1. Ensure the bottle has a slow-flow nipple.
- 2. Position the baby in a sitting upright position, making sure to support the head and neck.
- 3. When baby opens mouth (follow feeding cues), insert the nipple to give a deep latch.
- 4. Hold the bottle horizontal as baby begins sucking, keeping the milk angled just enough to fill the nipple halfway.
- 5. Give baby a break by tipping the bottle down every 3-5 swallows, lifting the bottle back up when they begin to suck again this mimics milk flow from a breast.
- 6. Continue until baby shows signs of fullness.

HELPFUL VIDEO:

https://youtu.be/OGPm5SpLxXY

COMMON PROBLEMS

SORE NIPPLES

POSITIONING - a poor latch can cause the baby to pinch the nipple when breastfeeding, leading to damage. A mom might need to be seen by a lactation specialist or consultant for tips to correct positioning. Breastmilk can be used to help heal soothe pain (Office on Women's Health, 2018).

WIDEO: https://youtu.be/wjt-Ashodw8

YEAST INFECTION - a yeast infection, or thrush, is typically manifested as sore nipples that are red, shiny, itchy, and painful. A baby might also have white patches in their mouth. Breastmilk will not help treat a yeast infection, as fungus thrive in sugary environments. Both mom and baby will need to seek medical treatment (Office on Women's Health, 2018).



COMMON PROBLEMS LOW MILK SUPPLY

It is common for moms to worry about not having enough milk to feed their baby. Babies typically have growth spurts around 2 weeks, 6 weeks, and 3 months. During these times, they will want to eat more often. These are some ways you can be sure that your babies needs are being satisfied:

- Breastfeed at least 8-12 times in a 24 hour period... follow your baby's hunger cues!
- Diaper counts and weight are adequate ways to measure milk intake
- Ensure proper positioning and latch
- Watch for your baby to appear content after a feed, often having relaxed hands (as opposed to a fist)

If a baby seems lethargic, has a shallow latch, is not stooling, or has dark urine, check in with a health care provider.

FUN FACT: at birth, a baby's stomach size is about the size of a marble!

(La Leche League, 2020).

COMMON PROBLEMS

ENGORGEMENT

Engorgement is the result of milk building up causing the breasts to feel hard and painful. It could be an indicator that your baby is not transferring milk out of the breast efficiently (ex: poor latch). Early treatment is important, as could lead to a decreased milk supply or MASTITIS (La Leche league, 2020).

What to do you if your breasts are engorged (La Leche League, 2020):

- Skin-to-skin with baby
- Express milk every 2 hours
- Massage the breasts
- Warm compresses before feeding
- Ice compresses after feeding for 20 minutes

Seek medical attention if a hard lump develops in the breast accompanied by fever, chills, and aching. These are signs of Mastitis (La Leche League, 2020).

COMMON PROBLEMS

BLOCKED DUCTS

A plugged or blocked duct manifests as a tender reddened section of the breast with localized pain. Treatment is similar to engorgement, and can also lead to mastitis (La Leche League, 2020).

FLAT OR INVERTED NIPPLES

If flat or inverted nipples are suspected, it is important to consult a lactation consultant for recommendations. They might recommend:

- Breast Shell applies pressure to help draw out the nipple
- Breast Pump can help draw nipple out before breastfeeding
- Nipple Stimulation roll the nipple between your thumb and index finger to help it become erect
- Reverse Pressure Softening "using your finger tips to encircle the base of the nipple and push toward the chest wall"
- Nipple Shield last resort and should only be used with guidance by lactation consultant!

(La Leche League, 2020).

CONSIDERATIONS FOR NURSING PRACTICE

HELP FAMILIES KNOW THEY ARE NOT ALONE

BE INFORMED ON RESOURCES THAT ARE AVAILABLE TO MOMS AND FAMILIES SHOULD THEY NEED SUPPORT. EXAMPLES INCLUDE:

- Local breastfeeding support groups and phone lines
- Hospital lactation consultant telephone line
- Where to get donor milk

HTTPS://WWW.HMBANA.ORG/ FIND-A-MILK-BANK/

FOCUS CARE ON EMPOWERMENT

While research indicates that breastfeeding is the best nutrition for babies, it is essential that nurses focus their care on EMPOWERING MOMS AND FAMILIES. Educating on evidenced-based recommendations is important, but it is also important to adjust education to help make a mom's breastfeeding goals achievable.

CONSIDERATIONS FOR NURSING PRACTICE

STAY UP TO DATE ON EVIDENCED-BASED PRACTICES

IN ORDER TO PROMOTE SUCCESSFUL BREASTFEEDING INITIATION AND DURATION, BABY-FRIENDLY USA HAS DEVELOPED THE FOLLOWING 10 STEPS FOR FACILITIES:

- 1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
- 2. Train all health care staff in the skills necessary to implement this policy.
- 3.Inform all pregnant women about the benefits and management of breastfeeding.
- 4. Help mothers initiate breastfeeding within one hour of birth.
- 5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.
- 6. Give infants no food or drink other than breast-milk, unless medically indicated.
- 7. Practice rooming in allow mothers and infants to remain together 24 hours a day.
- 8. Encourage breastfeeding on demand.
- 9. Give no pacifiers or artificial nipples to breastfeeding infants.
- 10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or birth center.

LEARN MORE AT:

https://www.babyfriendlyusa.org/about/

LEARN MORE ABOUT BREASTFEEDING

GLOBAL HEALTH MEDIA PROJECT

https://globalhealthmedia.org/ videos/breastfeeding/

CALIFORNIA BREASTFEEDING COALITION

http://californiabreastfeeding.org/

LA LECHE LEAGUE https://www.llli.org/



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