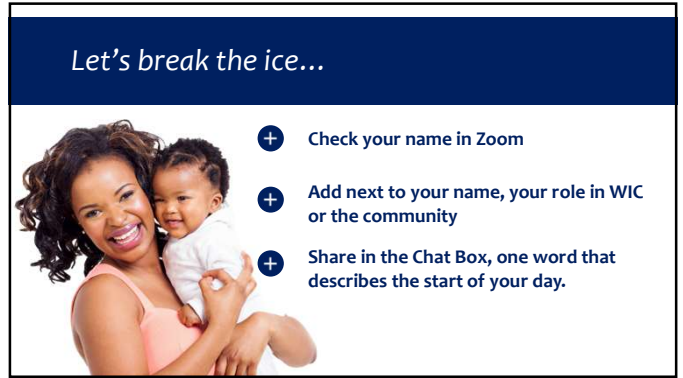




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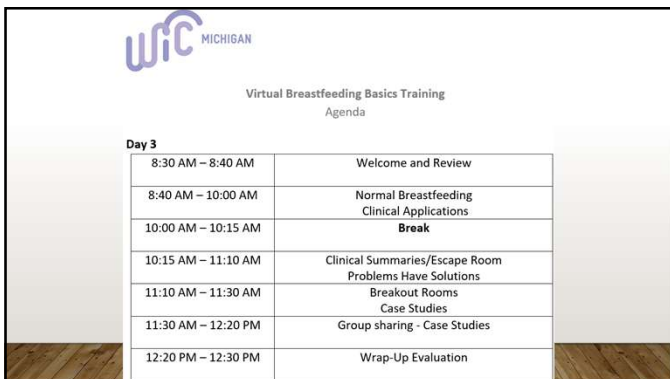
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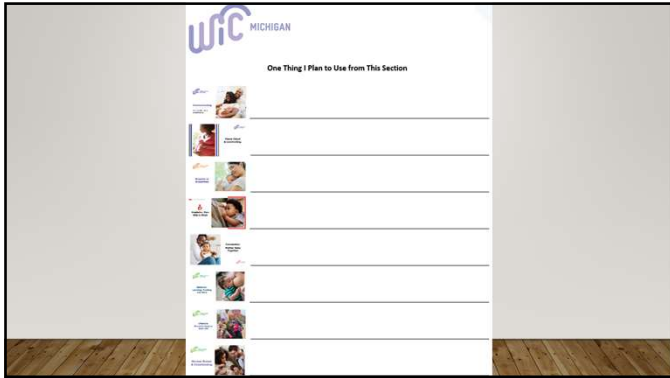
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8

Inclusive Language

- In this presentation, we will use the term mother and woman to refer to individuals of any sex or gender whose gender identity includes being a mother and/or woman.
- We will use lactating parent, birthing parent, and human milk to describe childbearing populations of any gender.
- We will generally use the term breastfeeding for all genders, recognizing, that in different communities, cultures, and languages the term for breastfeeding may be very different.
- Source: Aunchalee Palmquist, PhD, IBCLC (2022)
- Breastfeeding may look differently for every family, and can include various methods such as directly latching to the breast/chest, expressing milk (or pumping), and/or giving expressed human milk to the child.
- The use of the term breastfeeding is inclusive of all families involved in this process, regardless of the method being utilized.

9

Housekeeping

- Closed captioning
- Basic needs
- Breakout room expectations
- Trigger warning

10



Communicating


With Families About Breastfeeding



1








2



The L.O.V.E. Model

Grade A Communication Strategies
Start with the Heart

-  Listen (Active)
-  Observe (Ask)
-  Validate (Affirm)
-  Educate (Add)



3






The L.O.V.E. Model

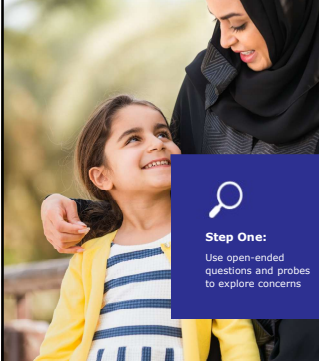
-  **Step One:** Listen to what parents are saying
-  **Step Two:** Observe and ask open-ended questions to explore concerns
-  **Step Three:** Validate and affirm feelings
-  **Step Four:** Educate regarding targeted concerns

4


Communicating with Families

Three-Step Counseling

-  **Step One:** Use open-ended questions and probes to explore concerns
-  **Step Two:** Validate and affirm feelings
-  **Step Three:** Education to target concerns...information comes last



5




Step 1: Active Listening Skills

First Things First: Connection Before Content


"People don't care how much you know, until they know how much you care."

Theodore Roosevelt



6

Communicating with Families



Best Way to Identify Barriers

Listen to Families

7

Communicating with Families

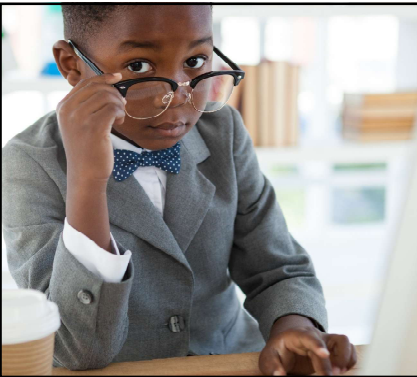



What Does the Community Say?

Reasons why they do not want to chest feed

8

Communicating with Families



Do I Have a Deal for You!

What Not to Do...

9

Communicating with Families




Observation Game

10



11





How Many Items Can You Remember?

12

Step 2:
Observation and
Open-Ended Questions

- Build trust and openness
- Observe what happens naturally
- Have no right or wrong answer
- Avoid making clients feel interrogated
- Help families feel safe sharing thoughts and feelings



13

Above the waterline is
the 10% of what we see

Below the waterline is the 90%
we DON'T see, or is difficult to
see - it's what makes all of us
UNIQUE individuals

The Iceberg Analogy



14


Communicating with Families

Examples of Open-Ended Questions

How
...do you feel about breastfeeding?
...can we help you with feeding your baby?

What
...do you know about infant feeding?
...questions or concerns do you have?
...have you and your partner discussed regarding breastfeeding?

Tell Me
...why you feel you will need formula.
...which language you prefer regarding your infant feeding.






15

Communicating with Families

Breakout Session
(Unmute, turn on video, designate reporter)


.....
Let's practice open-ended questions

16

Don't Make Assumptions

- Extending
- Clarifying
- Reflecting
- Redirecting



17

Step 3:
Validate and
Affirm Feelings

- ✓ Most important part of a successful communication exchange
- ✓ Parents are not ready for information until they feel their opinions have been heard
- ✓ Allows families to build confidence by drawing attention to what they are doing well



18



Communicating with Families


Ways to Affirm


- **Find** an area where you agree
- **Show** them they are not alone
- **Affirm** what is being done well
- **Praise** parents for all victories
- **Remind** her of what she has done
- **Compliment** what matters to them



19

Communicating with Families





A culture...

20



What is Culture?

21

Communicating with Families



Cultural Awareness

Helpful Hints

- **Become** knowledgeable
- **Respect** different cultures and backgrounds
- **Accept** different learning styles
- **Distribute** culturally appropriate materials
- **Communicate** honestly


22



Diversity Wheel - Define Your Cultural Identity Dimension



Instructions:

- 1 Identify 3 areas on the wheel that shape who you are
- 2 Discuss your list with your group; compare similarities and differences
- 3 How does this influence your lens when you are interacting with others?




23

Communicating with Families

Breakout Session:

(Unmute, turn on video, designate reporter)

Discuss your list with your group; compare similarities and differences.

How does this influence your lens when providing or directing care for others?

24

Communicating with Families

Scripts for Supporting Families

- You are not alone. I am here to support you.
- You're asking really important questions.
- Let's make a list of resources to help you with this issue.
- Your questions are really valid.
- I am inspired by your dedication.
- You are so responsive to your baby's needs!
- How can I help you?
- What would make it easier to meet your goals?
- We are here because we care.
- You are working so hard!



25

Communicating with Families

Step 4: Education

Adults Learn Best When You:

- Feed information in small bites
- Target information to families concerns (including partners)
- Give 2-3 solid options
- Keep it simple
- Reinforce the information



26

Communicating with Families

Education Goals

- 1 Increase parent's awareness of what is happening
- 2 Increase the parent's confidence
- 3 Help parents to know what to expect
- 4 Help parents find solutions to perceived barriers



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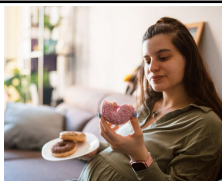

Communicating with Families

Knowledge Isn't Always Enough

People do not always adopt healthy behaviors based on information alone.

Effective counseling principles

help people help people explore ways to work breastfeeding into their lives.

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Communicating with Families

Adult Learning

- **Visual** learning style
- **Auditory** learning style
- **Kinesthetic** learning style
- **Reading/writing** learning style



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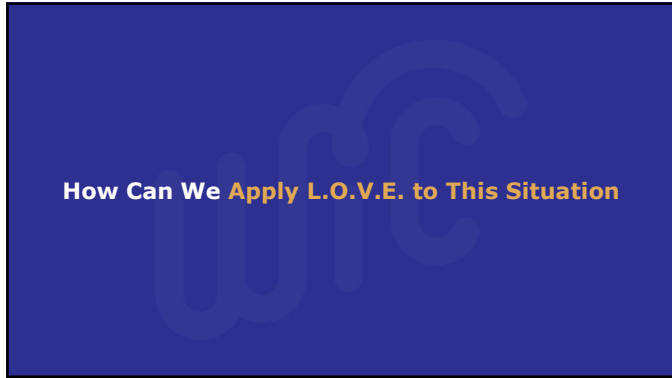
Communicating with Families

The Four Gates of Speech

- Is it **true**?
- Is it **necessary**?
- Is now the best **timing**?
- Is it **kind**?
- Are you the best **person** to deliver the information?



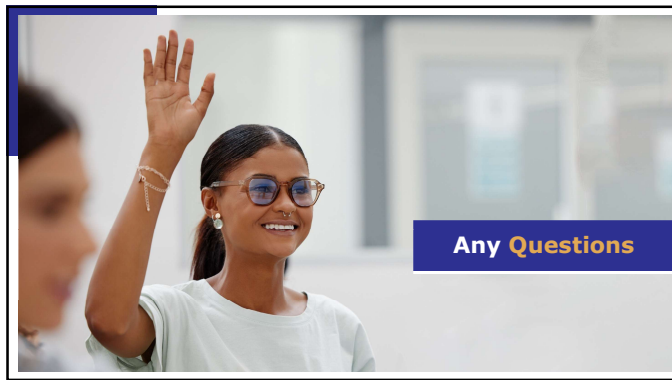
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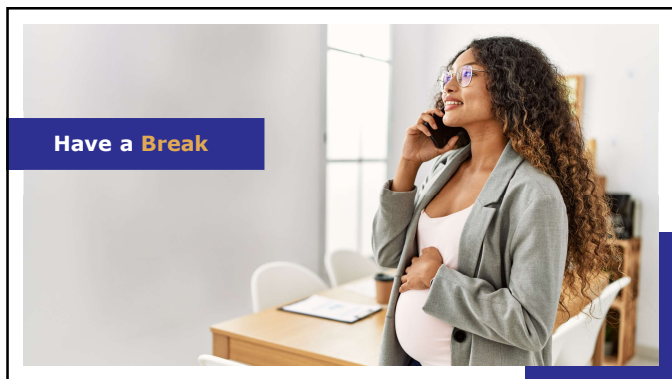
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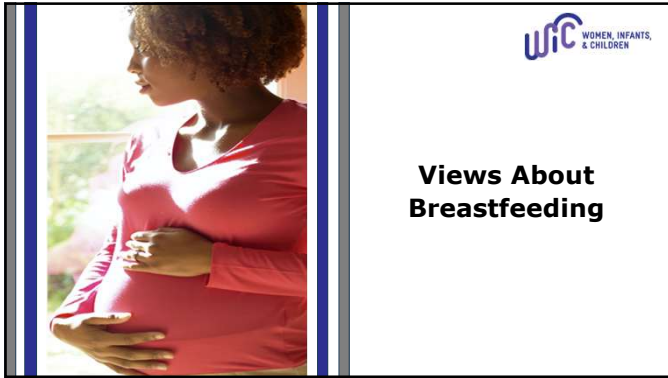
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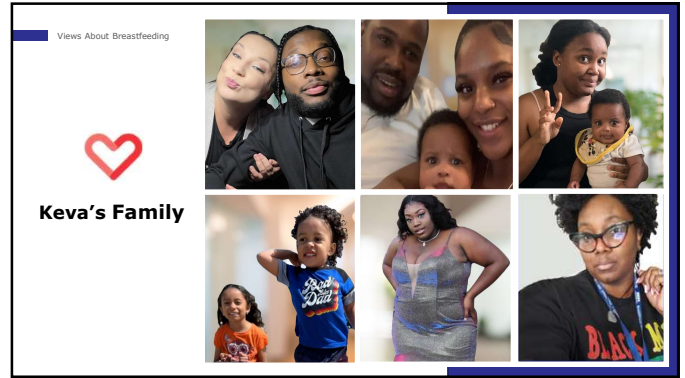
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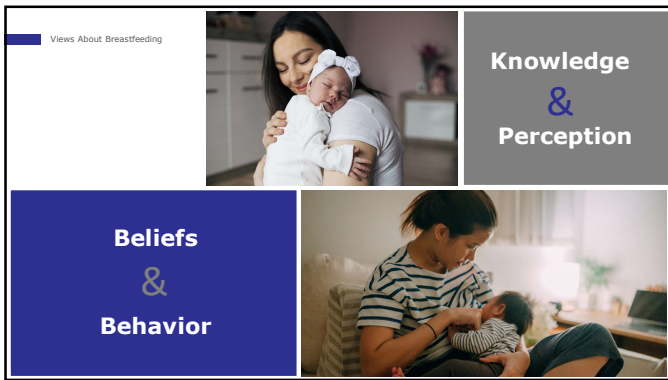
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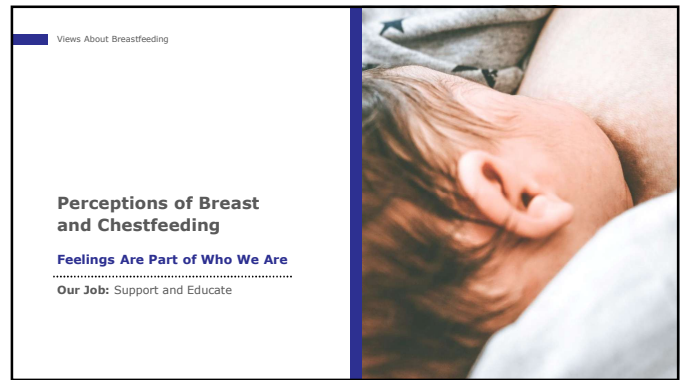
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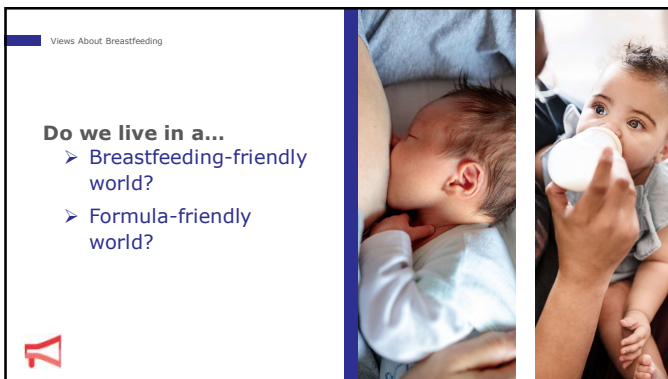
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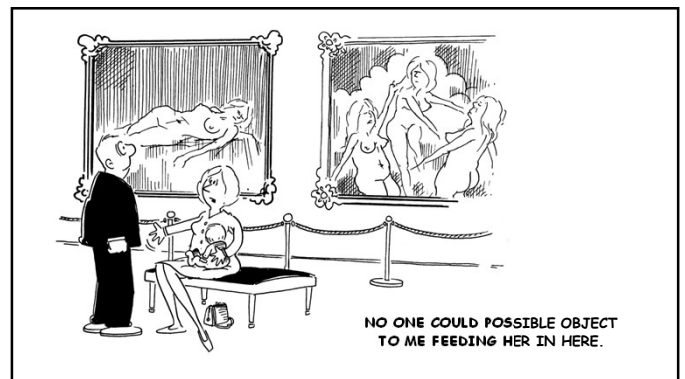
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Views About Breastfeeding



The Milky Way
Nursing a Galactic Revolution



Milky Way Breastfeeding Documentary

7




2011
Metro Detroit Mother and Issue of Public Breastfeeding



8

Views About Breastfeeding



Things That Get in the Way of Breast and Chestfeeding

Community:

- No family, friends breastfeeding
- Disapproval of breastfeeding in public

Institutional:


- Maternity leave limited, unpaid
- Lack of help with breastfeeding in hospital or community
- Marketing of formula

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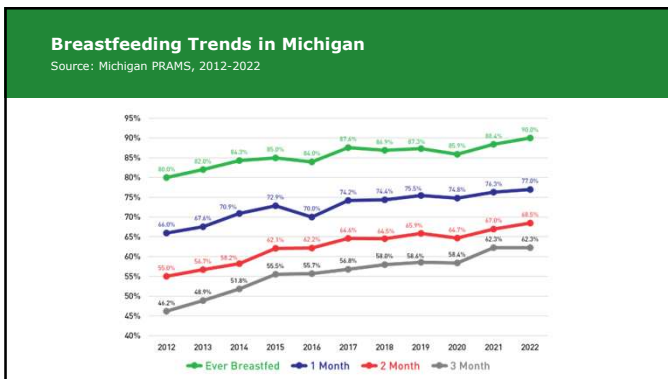
Views About Breastfeeding

History of Breastfeeding in the United States

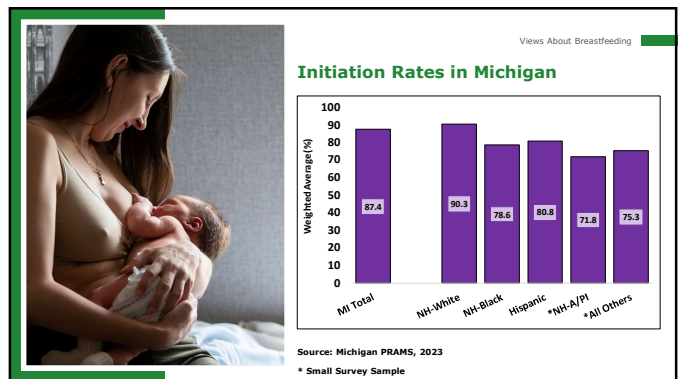
W.K. Kellogg Foundation's Growing A First Food Movement



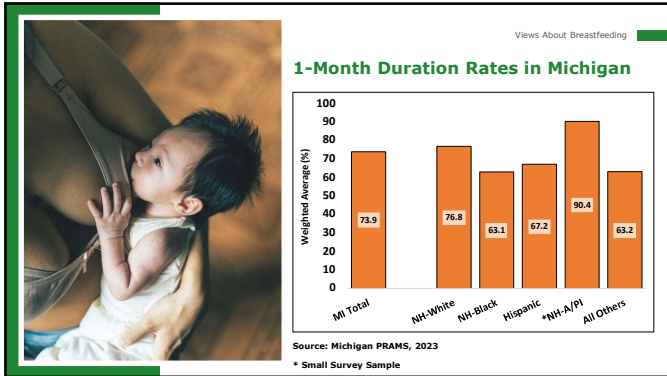
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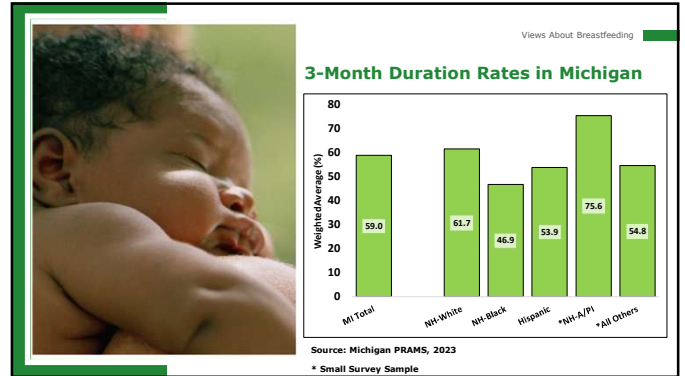
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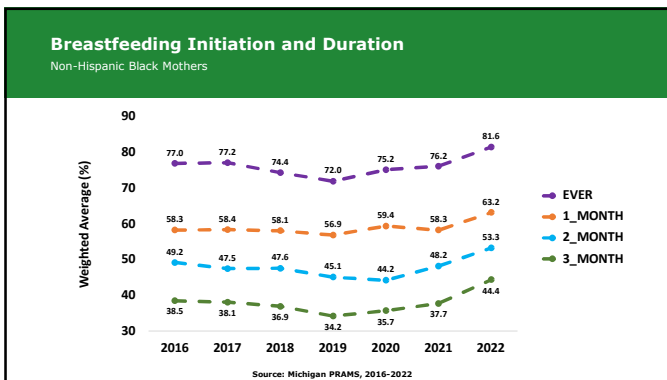
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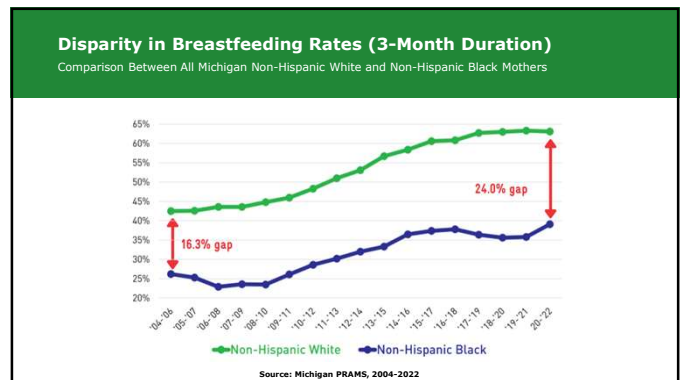
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AAP Policy Statement

"AAP identifies stigma, lack of support, and workplace barriers as obstacles that hinder continued breastfeeding."

2022 American Academy of Pediatrics Policy Statement

18



Views About Breastfeeding

Ways to Increase Initiation and Duration


- 1 Empowerment and encouragement to breastfeeding
- 2 Transferring knowledge about breastfeeding within family units and social circles
- 3 Identify breastfeeding role models
- 4 Positive social support builds confidence

19



Every Baby Deserves Human Milk

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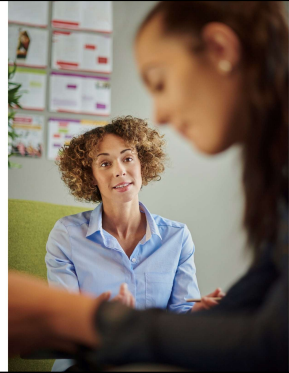


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Exclusive breastfeeding goes a long way towards canceling out the health difference between being born into poverty or being born into affluence.

—
JAMES P. GRANT

21




Views About Breastfeeding

Our Role

- 1 Increase parent's awareness of what is happening
- 2 Increase the parents' confidence
- 3 Help parents to know what to expect
- 4 Help parents find solutions to perceived barriers

22


Any Questions?




?

Any Questions?

23




Views About Breastfeeding




One Thing I Plan To Use From This Section

24




Reasons to Breastfeed




1


Autumn's Family



3



Reasons to Breastfeed



Making Informed Decisions


Brown, 2016

6

What We See Risks and Benefits

What We Don't See

- Formula marketing and disinformation campaigns
- Lack of exposure to breastfeeding
- Colonization
- Medicalization of birth and gatekeeping of innate knowledge
- And more...



7



Infant Feeding is Personal, Political, and Cultural

"Colonization is a primary disruptor of bonding, lactation, and parenting. Lactation is more than just feeding a baby. Lactation care is more than just feeding support."

ELIZABETH MONTEZ GIRAS, IBCLC
Little Traverse Bay Band Odawa

8

Breastfeeding Promotion

First Time Parents

Positive or Negative?



Zhang et al., 2021

9

Reasons to Breastfeed



Benefits of Breastfeeding



10

Reasons to Breastfeed

Breast/chestfeeding reduces the occurrence of all these conditions except...




11

Reasons to Breastfeed



The Debate is Over

Breast and Chestfeeding Protects Babies from Illnesses Including:

- Gastroenteritis (diarrhea)
- Severe lower respiratory infections
- Ear infections
- Atopic dermatitis
- Asthma

Alotby, 2023 

12

But, Wait!
There's More...

Breast and Chestfeeding Protects Babies From:

- Childhood obesity
- Type 2 Diabetes
- Childhood leukemia
- Sudden Infant Death Syndrome
- Necrotizing Enterocolitis

Surgeon General's Call to Action to Support Breastfeeding, 2011



Alotby, 2023

13

Reasons to Breastfeed

People who do not breastfeed have a greater incidence of what conditions?





14

Reasons to Breastfeed

And Still!
Lactating People Have Increased Protections From:

- Breast cancer
- Ovarian cancer
- Postpartum depression
- Cardiovascular disease

Chowdury, et al, 2015



15

Reasons to Breastfeed





Human Milk is Not Just a Preferred Food Source!

Breast and Chestfeeding is:

- Cultural revitalization
- Passing down family wisdom
- Introducing family foods
- Connection
- Relationship

16


Reasons to Breastfeed

Impact of Not Breastfeeding

17

The Formula Crisis




The Pandemic Amplified Numerous Breakdowns in the System:

- A shortage of 10-30% is considered normal at any given time in the US
- WIC families may be more vulnerable to formula shortages


Damian-Medina et al., 2024

18

Financial Impact




- Formula: \$1200 to \$1500/Year
- Hospitalizations
- Doctors Visits & Prescriptions
- Wages Lost While Staying Home With Sick Baby



19


Reasons to Breastfeed



Environmental Impact

For every one million formula-fed babies

- 150 million containers of formula used²⁵
- Many of these containers end up in landfills
- Transportation costs related to making and selling formula




20

Reasons to Breastfeed

Water is Life


Formula Feeding and Water Usage:

- At home: Feeding your child, washing the bottles
- Making formula: From feeding the cows, to factory production, to transportation to market
- Ongoing water crises: in Michigan and across the world



BPNZ, EDFAN, 2014

21



Reasons to Breastfeed

Choices in Infant Feeding

WHO Recommendations:

- 1 Body feed: latch directly
- 2 Expressed milk from the birthing person
- 3 Donated human milk
- 4 Formula

22

ALL Infant Feeding Methods Are Work!



Families Deserve SUPPORT!

- Washing bottles and pump parts
- Baby's reactions to formula
- Combo feeding is grueling both mentally and physically


23




Effective Interventions

-  Address real and perceived barriers
-  Rooted in community context
-  Unconditional support
-  START prenatally!

24



Reasons to Breastfeed



One Thing I Plan To Use From This Section


25

Group Activity

Unmute, turn on video!
Clerks/Techs and Educators

How would you respond?

"I'm not making enough milk."





26

Behavior: Latching, Feeding and More

But, What About?

"Help! My breasts don't get totally drained after a feed. I'm afraid that my baby is not getting enough milk!"



27



Behavior: Latching, Feeding and More

But, What About?

"Help! My baby just finished breastfeeding but then drank an entire 2 oz bottle of formula. I think she's still hungry because I'm not making enough milk!"

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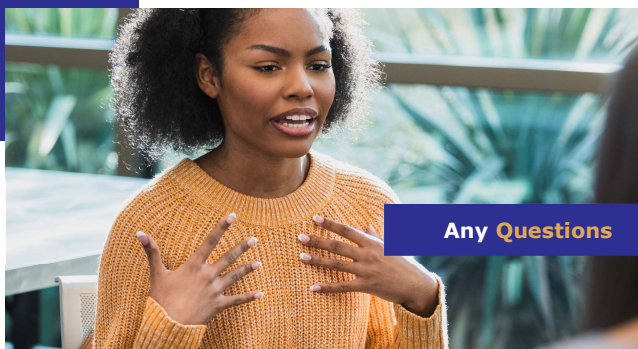


Behavior: Latching, Feeding and More

But, What About?

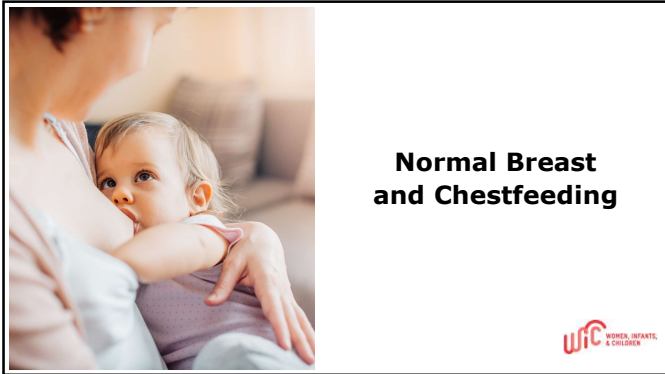
"Help! My baby gets fussy so much and cries every night. I think he's not getting enough milk!"

29



Any Questions

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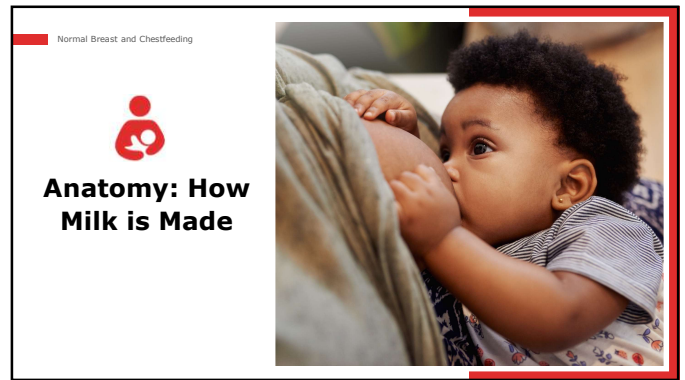
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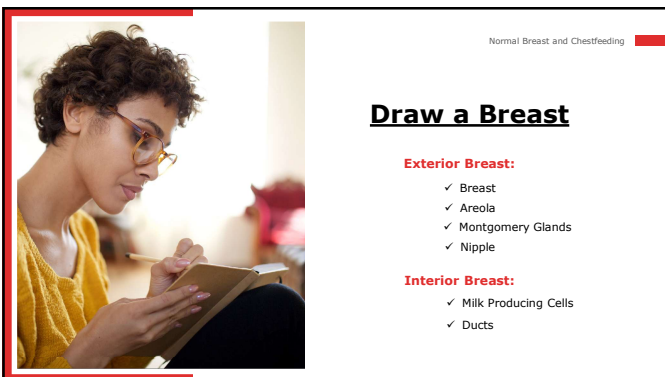
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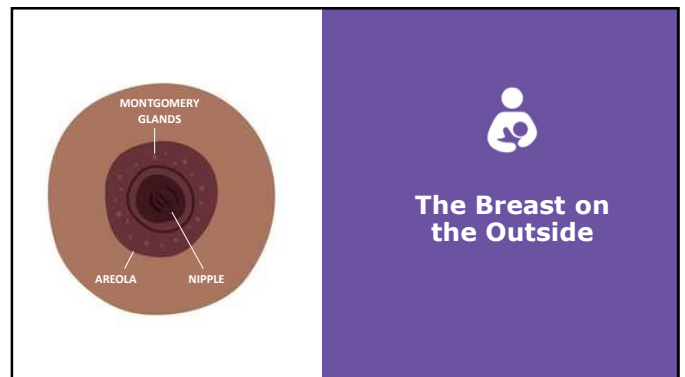
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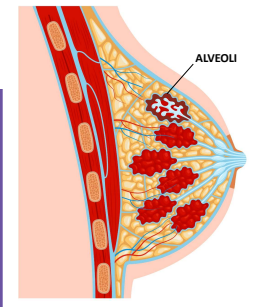


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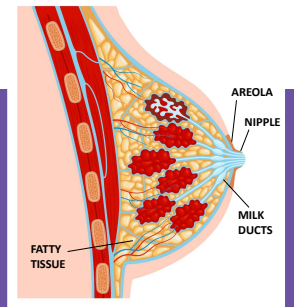
Inside the Breast
Milk-Making Tissue



- ✓ Milk-making cells called "alveoli"
- ✓ Develop during pregnancy
- ✓ Bunched into 7-10 clusters or lobes
- ✓ Muscle cells around alveoli tighten to release milk

7

Inside the Breast
The Milk Highway System



- ✓ Milk making cells "alveoli"....
- ✓ Milk travels through the milk ducts
- ✓ Milk flows out the nipple

8

Normal Breast and Chestfeeding



Getting Ready for Milk Production



9



Recipe:
Human Milk

Ingredients:

- ✓ Breast
- ✓ Pregnancy-colostrum

10

Normal Breast and Chestfeeding

Colostrum

- ✓ Low volume
- ✓ Contains high levels of antibodies
- ✓ More protein and vitamins than mature milk
- ✓ Less fat, carbohydrates
- ✓ Has laxative effect
- ✓ Coats baby's gut
- ✓ Is not appreciated in all cultures




11

Normal Breast and Chestfeeding

Milk Production


Begins During Pregnancy:

- ✓ Milk making tissue develops
- ✓ Colostrum available around 16-18 weeks
- ✓ Based on hormonal response



12

Normal Breast and Chestfeeding



The Placenta

- ✓ Makes a Hormone
- ✓ Delivery of the Placenta
- ✓ Milk Changes

13

Normal Breast and Chestfeeding




Milk Production

After Baby is Born

- ✓ Prolactin surge at 30-72 hours
- ✓ Milk volume increases
- ✓ Oxytocin helps milk to flow

14



Prolactin

- ✓ Main Hormone
- ✓ Pituitary Gland
- ✓ Delivery of Placenta

15

Normal Breast and Chestfeeding



Oxytocin

(The Mothering Hormone)

**Stimulated
Vs.
Inhibited**

16

Normal Breast and Chestfeeding



A Symphony of Hormones



17



18




Recipe: Mother's Milk


Ingredients:

- ✓ Breast
- ✓ Pregnancy-colostrum
- ✓ Delivery of Placenta
- ✓ Maternal Hormones – Prolactin, Oxytocin
- ✓ Baby




19



Babies have inborn reflexes that help them breastfeed



20

Stomach size on Day 1	Stomach size on Day 3	Stomach size on Day 10
 <p>1-1 ½ teaspoons or 5-7 ml per feeding (just sips)</p>	 <p>about 4 ½ - 5 ½ teaspoons or 22-27 ml per feeding</p>	 <p>12-16 teaspoons, 60-81 ml or 2-2 ¾ ounces per feeding</p>
<p>Stomach size grows slower after Day 10, reaching 4 ounces (118 ml) per feeding usually by three or four months.</p>		

21

Normal Breast and Chestfeeding

Breast Changes

<p>Days 3-5:</p> <p>Will notice breast fullness; sometimes engorgement</p>	<p>First Month:</p> <p>Fullness on and off</p>	<p>After First Month:</p> <p>Fullness appears to go away as production matches baby's needs</p>
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22


Normal Breast and Chestfeeding

Storage Capacity

- ✓ 25-35 oz of milk per day, during months 1-6 when breastfeeding exclusively
- ✓ Capacity is not determined by breast size



23



Other Ways to Express Milk:

- ✓ Hand Expression
- ✓ Breast Pump

24



Normal Breast and Chestfeeding



Weaning

- ✓ A process
- ✓ Food other than milk

25


Normal Breast and Chestfeeding


Cross-Culturally

The average age of weaning is 3-4 years.




26



 **WHO & AAP**
Recommendations

- ✓ Exclusively breastfeed for the first 6 months of life.
- ✓ From the age of 6 months, begin complimentary foods while continuing to breastfeed up to 2 years and beyond.

Source: World Health Organization
2022 American Academy of Pediatrics Policy Statement

27

Normal Breast and Chestfeeding




One Thing I Plan To Use From This Section




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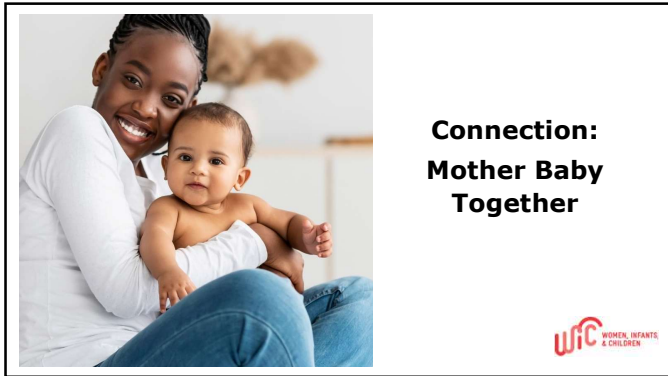
Normal Breast and Chestfeeding



Any Questions?



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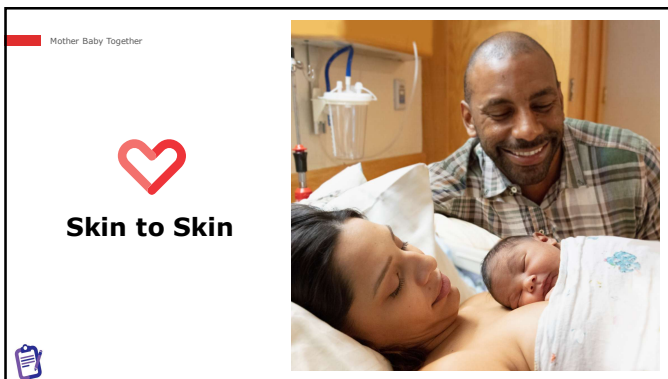
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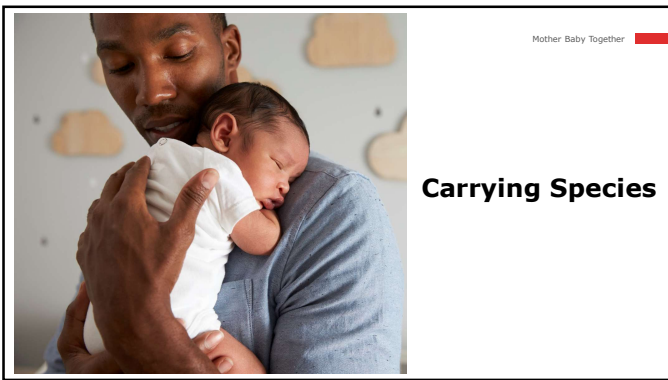
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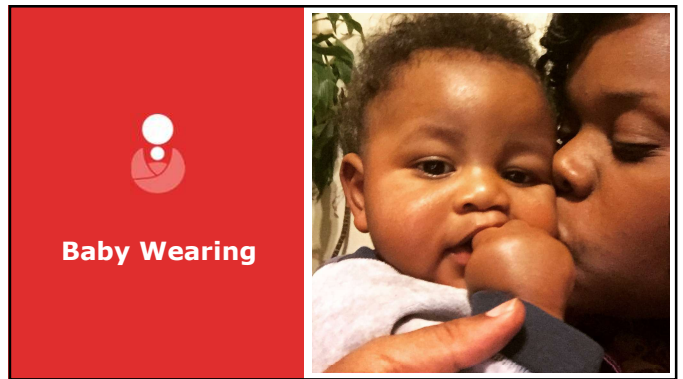
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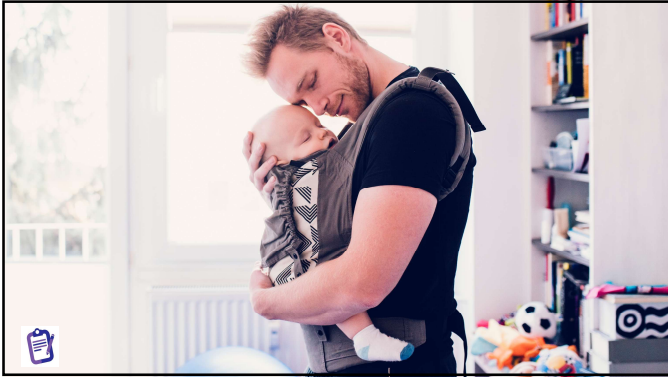
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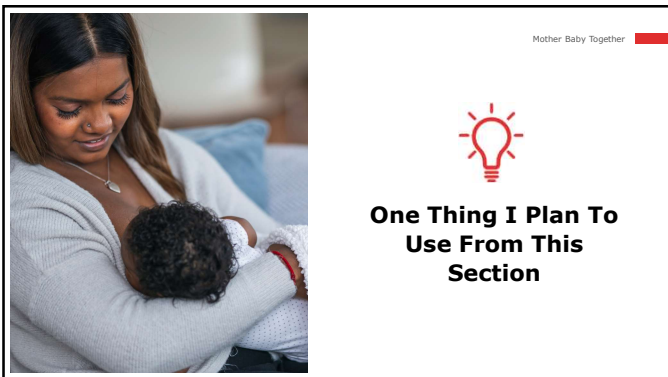
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**Behavior:
Latching, Feeding
and More**

1



Behavior: Latching, Feeding and More

What Is the Number One Concern Parents Have Regarding Breast Feeding?




2

Am I Making Enough Milk?

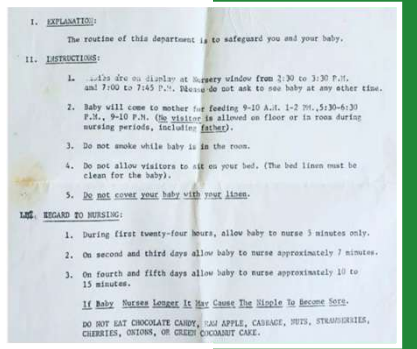


- Perceived low milk supply is extremely common
- New parents will often introduce supplemental formula or give up breastfeeding altogether

3



How Did We Get Here?



I. EXPLANATION:
The routine of this department is to safeguard you and your baby.

II. INSTRUCTIONS:

1. ...do not call at nursery window from 2:30 to 3:30 P.M. and 7:00 to 7:45 P.M. Please do not ask to see baby at any other time.
2. Baby will come to mother for feeding 9-10 A.M. 1-2 P.M. 5:30-6:30 P.M., 9-10 P.M. (The visitor is allowed on floor or in room during nursing periods, including latching).
3. Do not smoke while baby is in the room.
4. Do not allow visitors to sit on your bed. (The bed linen must be clean for the baby).
5. Do not cover your baby with your limbs.

NOTE REGARD TO NURSING:

1. During first twenty-four hours, allow baby to nurse 3 minutes only.
2. On second and third days allow baby to nurse approximately 7 minutes.
3. On fourth and fifth days allow baby to nurse approximately 10 to 15 minutes.

If Baby Increases Latches It May Cause The Nipple To Become Sore- DO NOT EAT CHOCOLATE CANDY, RAW APPLE, CAULIFLOWER, BUTTS, STRAWBERRIES, CHEESE, ONIONS, OR OTHER EQUIVOCAL CASE.

4



5



Behavior: Latching, Feeding and More


How To Know if Baby Is Getting Enough Milk

Education and Support on the Following Topics:

1. Infant latch and attachment
2. Infant behaviors before, during, and after feeding
3. Lactating person's experience
4. Growth and elimination/output


6

Behavior: Latching, Feeding and More



Infant Latch and Attachment



GLOBAL HEALTH MEDIA PROJECT
Breastfeeding Series



Breastfeeding Attachment
for health workers

7

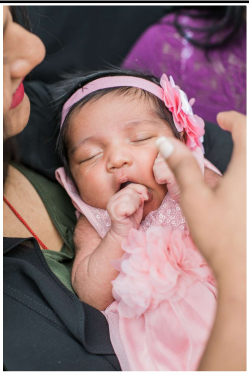

What Did You Notice About This Video?

8

Behavior: Latching, Feeding and More


How Long Is Normal for a Baby To Go Between Feedings?

9


Behavior: Latching, Feeding and More

Is Baby Getting Enough?



Not the Clock...

Watch Baby...




10

Behavior: Latching, Feeding and More

Newborn Reflexes

- Grasp with hands
- Open mouth when stimulated
- Turn head towards stimuli
- Suckling




11

Behavior: Latching, Feeding and More


Newborn Hunger Cues

- Bobbing head
- Turning head toward stimuli
- Sniffing
- Smacking/licking lips
- Sticking out tongue
- Bringing hands to mouth
- Latching

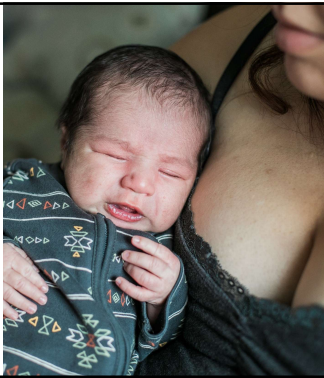


12

Behavior: Latching, Feeding and More



Newborn Hunger Cues
Crying is a late hunger cue.



13



14





15

Baby's Hungry, Now What?
Steps to getting baby latched

- Calm a fussing baby
- Take a deep breath
- Get in a comfortable position
- Cesarean healing: use a rolled-up towel or blanket to cover incision
- Optional: unswaddle baby, remove hat and gloves
- Bring baby to breast, belly to belly



16





Infant Behavior During a Feed


- Lower jaw movement, ear wiggling
- Use hands to paw at breast
- Attain a sense of calm, sometimes called "milk drunk"
- Falling asleep is normal

17

Behavior: Latching, Feeding and More



Is Breastfeeding Supposed To Be Painful?



18

Behavior: Latching, Feeding and More

Is Breastfeeding Supposed To Be Painful?

Initial Latch

Comfort and Sensation

19

Behavior: Latching, Feeding and More

Lactating Person's Experience

20

Behavior: Latching, Feeding and More

Uterine Cramping aka "After Pains"

21

Behavior: Latching, Feeding and More

Growth and Weight

- Healthy, full-term newborns typically follow a pattern of weight fluctuations
- **5-7% weight loss** in the first 4 days is considered normal
- **10% loss** is considered on the high-end
- Return to birth weight by **2 weeks** of age

22

Wet diapers in 24 hours*			Poopy diapers in 24 hours*	
Day	# of Diapers	Color	# of Stools	Color/Consistency
Day 1	1	Pale	1	black, tarry/sticky
Day 2	2-3	Pale	1-2	green/black, changing
Day 3-4	3-4	Pale	At least 3	green/yellow, soft
Day 4	4-6	Pale	At least 3	yellow/seedy, soft/liquidy
Day 5+	6+	Pale	At least 4	yellow/seedy, soft
6 weeks	6+	Pale	May slow down to 1 every day or every few days	yellow/seedy, soft

23

Diapers of the Breastfed Baby

Looking at a baby's poop and pee can help you tell if your baby is getting enough to eat.

The baby's poop should change color from black to yellow during the first 5 days after birth.

- The baby's first poop is black and sticky.
- The poop turns green by Day 2 or 3.
- The poop should turn yellow by Day 4 or 5.
- Poop can look watery.
- Poop can look mushy.
- Stools, urine, or spit-ups can cause bleach in poops. Call doctor.
- Stools may be large and watery in the first few days. Only most poops larger than this.
- By Day 4, most breastfed babies make 3 or 4 soapy diapers every day.
- By Day 5 or 6 most babies are making 4 or 5 soapy diapers.
- By Day 7 or 8, breastfed babies should make 3 or 4 soapy diapers with wet front backs from their water.
- A wet diaper is an early sign of dehydration in most.

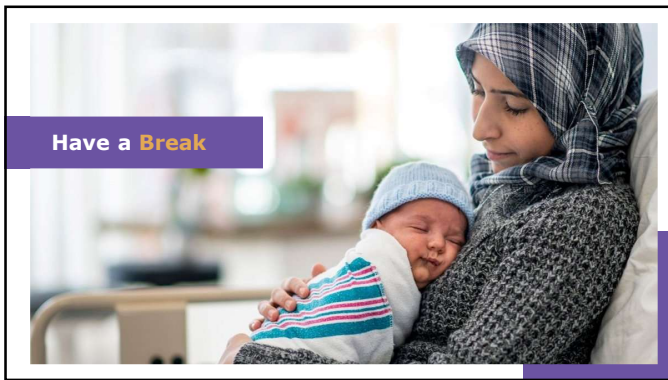
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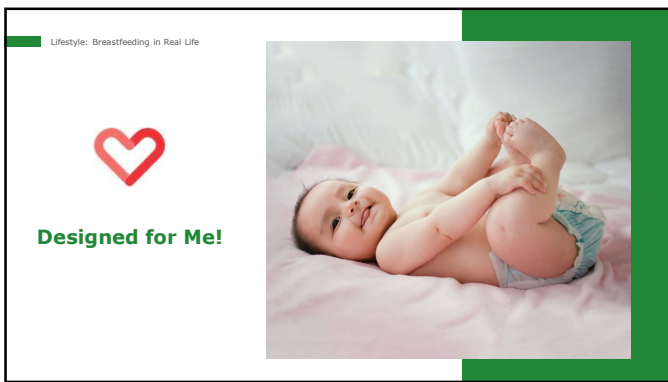
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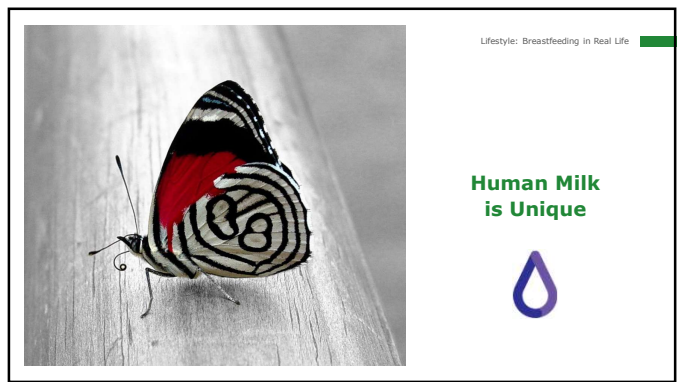
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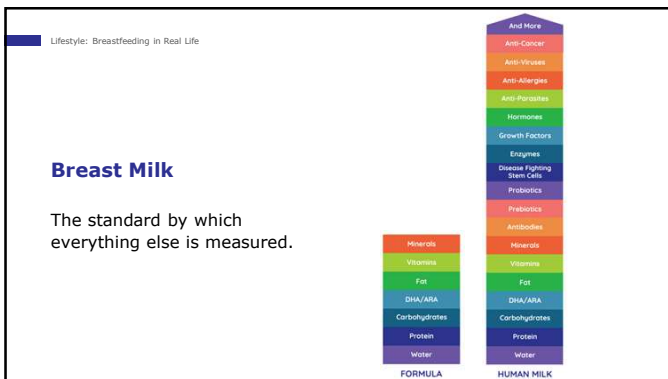
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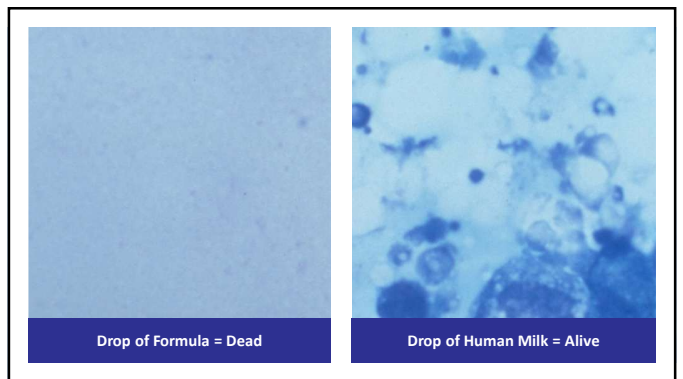
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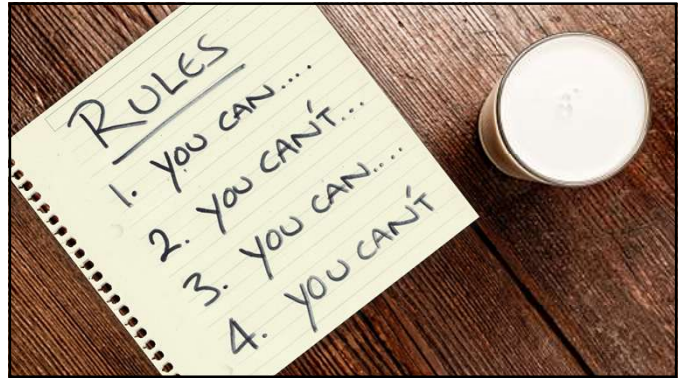
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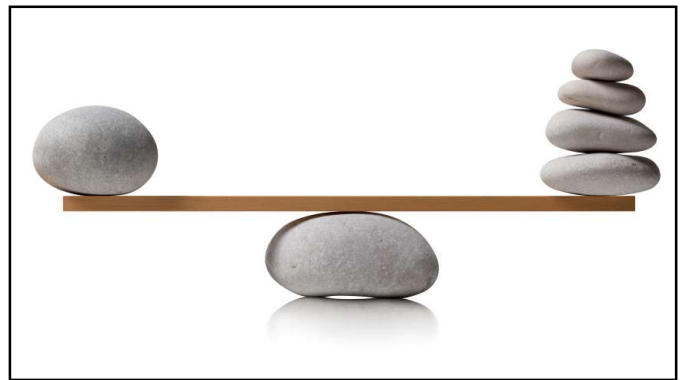
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10



11



12

Lifestyle: Breastfeeding in Real Life

Eat to Hunger and Drink to Thirst

13

Lifestyle: Breastfeeding in Real Life

Lactating Parent Calorie Needs

Additional 340-400 calories/day (or more).

14

Lifestyle: Breastfeeding in Real Life

Food Group	Breastfeeding only	Breastfeeding plus formula	What counts as 1 cup or 1 ounce?
<i>Eat this amount from each group daily.*</i>			
Fruits 	2 cups	2 cups	1 cup fruit or 100% juice ½ cup dried fruit
Vegetables 	3 cups	2½ cups	1 cup raw or cooked vegetables or 100% juice 2 cups raw leafy vegetables
Grains 	8 ounces	6 ounces	1 slice bread 1 ounce ready-to-eat cereal ½ cup cooked pasta, rice, or cereal
Protein Foods 	6½ ounces	5½ ounces	1 ounce lean meat, poultry, or seafood ¼ cup cooked beans ½ ounce nuts or 1 Tbsp peanut butter 1 egg
Dairy 	3 cups	3 cups	1 cup milk 8 ounces yogurt 1½ ounces natural cheese 2 ounces processed cheese

15

Lifestyle: Breastfeeding in Real Life

Make Healthy Food Choices

- Make half your plate fruits and vegetables.
- Make half your grains whole grains.
- Choose low-fat or fat-free dairy options.
- Vary your proteins.
- Limit foods high in sodium, saturated fat, and added sugars.
- Choose vegetable oils instead of butter.
- Choose water instead of sugary drinks.

16

Lifestyle: Breastfeeding in Real Life

Breastfed Infant Nutrition

Daily Intake
6-8 Months

- Human milk: 6 or more feeds
- 2-4 ounces fruits
- 2-4 ounces vegetables
- 1-2 ounces proteins
- 1-2 ounces grains
- Up to 8 ounces of water

17

Lifestyle: Breastfeeding in Real Life

Breastfed Infant Nutrition

Daily Intake
9-12 Months

- Human milk: 4 or more feeds
- 4-6 ounces fruits
- 4-6 ounces vegetables
- 2-4 ounces proteins
- 2-4 ounces grains

18

Lifestyle: Breastfeeding in Real Life

Lactating Parent Nutrient Needs

- Calcium
- Choline
- Iodine
- Iron
- Vitamin B12
- Vitamin D
- Zinc



19

Life as a Breastfeeding Family




<p>Exclusively breastfeeding and Chestfeeding Up to 1 Year</p>	<p>Partially Breastfeeding and Chestfeeding Up to 1 Year</p>	<p>Not Breastfeeding and Chestfeeding Up to 6 Months</p>
---	---	---

WIC Food Benefits Support A Well-Balanced Diet

20

Lifestyle: Breastfeeding in Real Life



Name that WIC Food

[Kahoot! Game](#)

21

Lifestyle: Breastfeeding in Real Life

“

But, what about...?

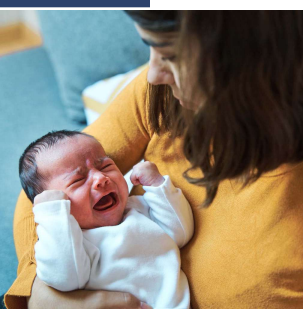
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28

Lifestyle: Breastfeeding in Real Life



Signs of Feeding Problems

- Fussiness after feeds
- Gassiness
- Bloating
- Skin rashes
- Diarrhea
- Vomiting

29



30



31



32



33




34



35

Lifestyle: Breastfeeding in Real Life



Don't Stop Breastfeeding Because You Smoke

It is safer, for the baby, to continue breastfeeding rather than using formula.

36



37

Lifestyle: Breastfeeding in Real Life




Pregnancy and Lead Exposure

- Home inspection
- Identify any cravings such as eating dirt or clay
- Coordinate with healthcare providers



38

Lifestyle: Breastfeeding in Real Life




Breastfeeding and Lead Exposure

- Parent blood lead level (BLL)
 - **<5 mcg/dL:** continue
 - **5-39 mcg/dL:** depends
 - Infant BLL <5: continue
 - Parent ≥20 AND Infant ≥5: pump/discard
 - **≥40 mcg/dL:** pump/discard until <40


39

Life as a Breastfeeding Family



Fight Lead Absorption!

- Calcium
- Iron
- Vitamin C



40



41



42

Lifestyle: Breastfeeding in Real Life

CDC Contraindications to Breastfeeding

<p>NO breastfeeding or feeding expressed breast milk to infant:</p> <ul style="list-style-type: none"> Galactosemia HIV Positive, not on ART, and/or does not have a suppressed viral load (see CDC site) Human T-cell lymphotropic virus type I or II Using drugs of abuse Ebola virus disease 	<p>TEMPORARILY NO breastfeeding or feeding expressed breast milk to infant:</p> <ul style="list-style-type: none"> Untreated brucellosis Certain medications Undergoing radiation or taking radiopharmaceuticals Active herpes simplex virus infections with lesions on breast Mother has Monkeypox (Mpx) virus infection 	<p>TEMPORARILY NO breastfeeding, but CAN feed expressed breast milk:</p> <ul style="list-style-type: none"> Untreated, active tuberculosis Active varicella
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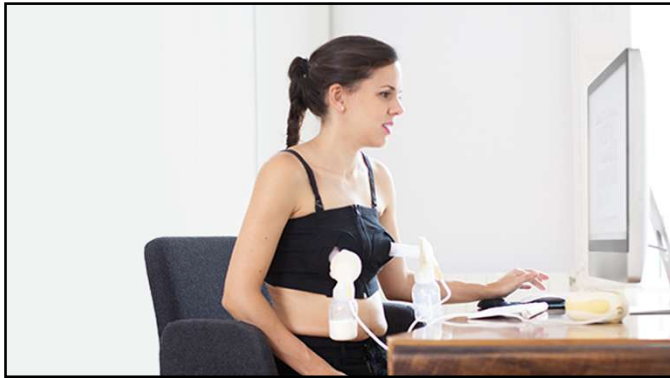


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Lifestyle: Breastfeeding in Real Life

Milk Sharing

47



48



49

Lifestyle: Breastfeeding in Real Life

KEY Opportunity for Educating Mothers

50

Lifestyle: Breastfeeding in Real Life

Drink or Drown!!

51

Milk mob media

NSQIS
NOD

52

Lifestyle: Breastfeeding in Real Life

Breastfeeding and Safe Sleep

53



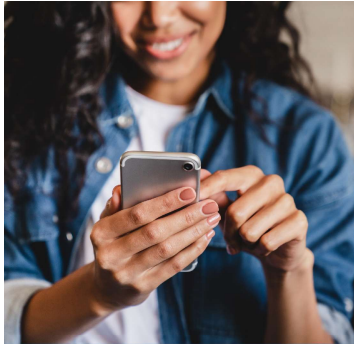
Safe Sleep

- Always place baby on his back for all sleep times.
- Keep pillows, blankets, soft toys, or crib bumpers out of baby's sleep area.
- Share the room, not the bed.
- You can breastfeed baby in your own bed, when finished, place baby back in his own separate sleep space.



54


Lifestyle: Breastfeeding in Real Life



Share Ways You Use the Internet...

.....



To support breastfeeding families



55

Lifestyle: Breastfeeding in Real Life

Any Questions?

56

Lifestyle: Breastfeeding in Real Life



One Thing I Plan To Use From This Section





57



Normal Breast & Chestfeeding



1

Application:
Anatomy: How Milk is Made

2

Normal Breast & Chestfeeding




Prenatal Conversations With Families About Breast & Chestfeeding



3


Hospital Practices that Affect Milk Production

- Infant formula samples and discharge bags
- Unnecessary formula supplementation
- Pacifier use
- Insufficient breastfeeding support
- Too many interruptions/visitors




4

Normal Breast & Chestfeeding



Early Feeds in Hospital

- **Frequent nursing** in the 1st 3 days gets feeding off to a good start
- **Extra removal** of colostrum stimulates more milk production
- Use **hand expression** with spoon feeding between feedings




5

Normal Breast & Chestfeeding

Hand Expression...

- Press...
- Compress...
- Relax



6

Normal Breast & Chestfeeding

"Making Enough Milk - The Key to Successful Breastfeeding"
- Dr. Jane Morton

Hand Expression Steps

To order video:
www.breastmilk.com

To see video on the internet:
<http://med.stanford.edu/newborns/professional-education/breastfeeding/hand-expressing-milk.html>

7

Normal Breast & Chestfeeding




Practice Hand Expression

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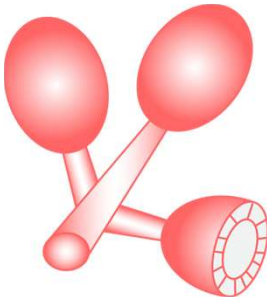


Maintaining Lactation
The Important 1st Month



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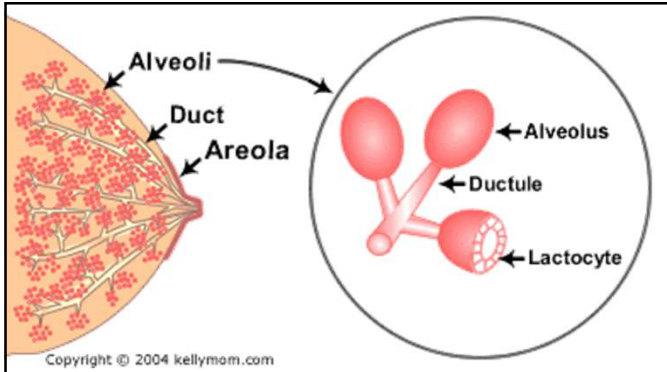
Normal Breast & Chestfeeding



The Role of Hormone Receptors

- Prolactin and Oxytocin receptors
- Created in response to the number of feeds and milk removed
- Formula supplementation and delayed feeds interferes

10



Alveoli
Duct
Areola

Alveolus
Ductule
Lactocyte


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11

Normal Breast & Chestfeeding


Milk Production Changes

- 1 **Day 3-5:** breast and chest fullness
- 2 **First Month:** Fullness on and off
- 3 **After first month** fullness go away as production matches baby's needs



12

Normal Breast & Chestfeeding



Storage Capacity

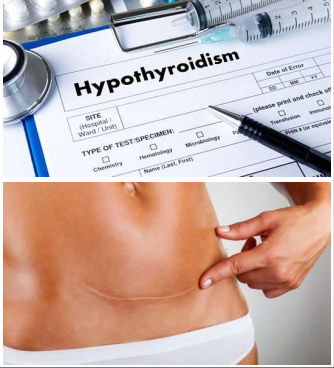
- Not determined by breast size
- Parents make around 25-35 oz per day

13



Normal Breast & Chestfeeding

Risk Factors That May Delay Production

- Cesarean delivery
- Obesity
- Type 1 Diabetes
- Hypothyroidism
- Birthing parent in their 40s
- Retained placental fragments



14






Application


Connection:
Mother Baby Together

15

Normal Breast & Chestfeeding

Laid-Back Breastfeeding



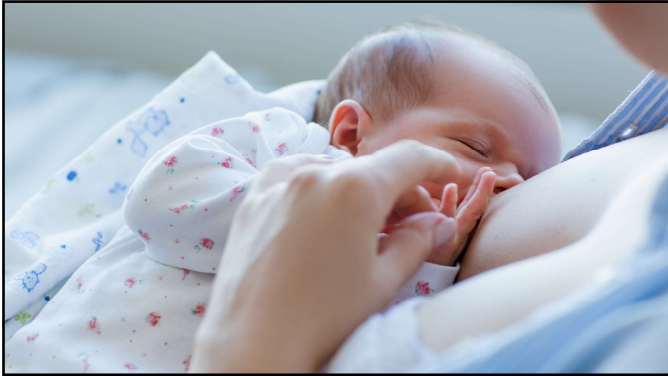
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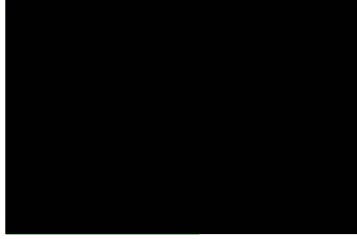


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Normal Breast & Chestfeeding



Biological Nurturing
Laid Back Breastfeeding
by Suzanne Colson

20

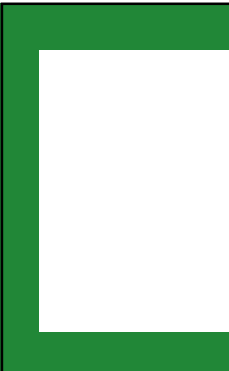
Normal Breast & Chestfeeding




Baby-Led Latch

21


Normal Breast & Chestfeeding




Baby-Led Breastfeeding
The Mother-Baby Dance
by Christina Smillie, MD

22

Mother Baby Together



Handling Versus Helping



Increase Confidence!

23

Normal Breast & Chestfeeding



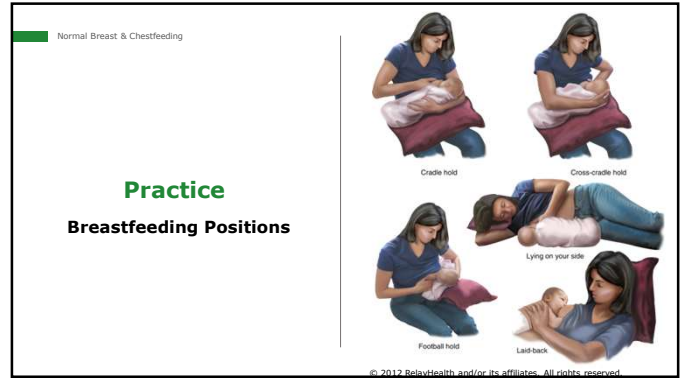
Parents Role in Breast & Chestfeeding



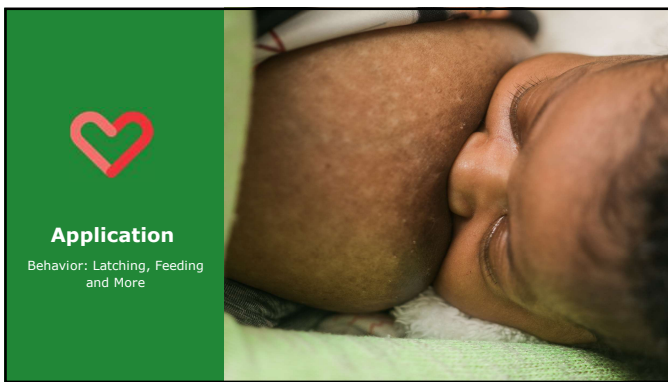
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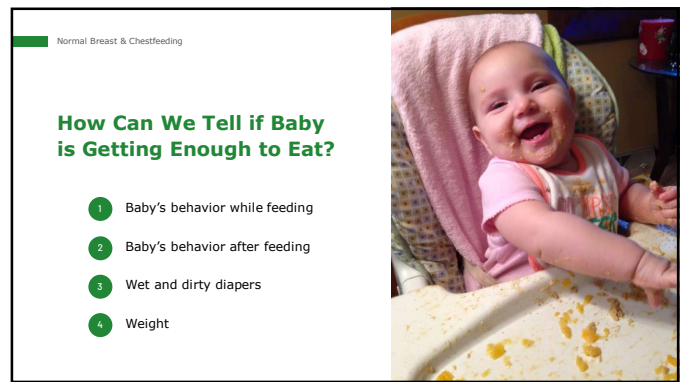
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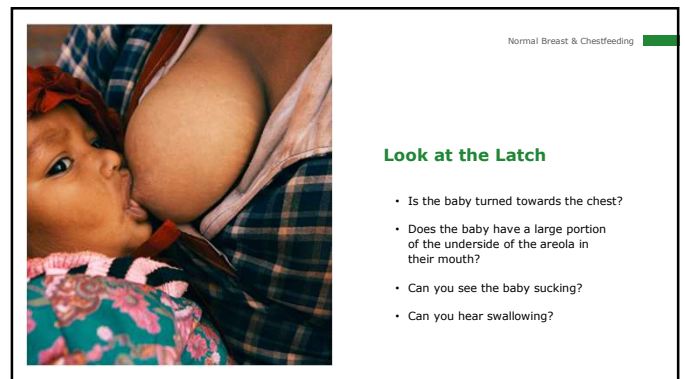
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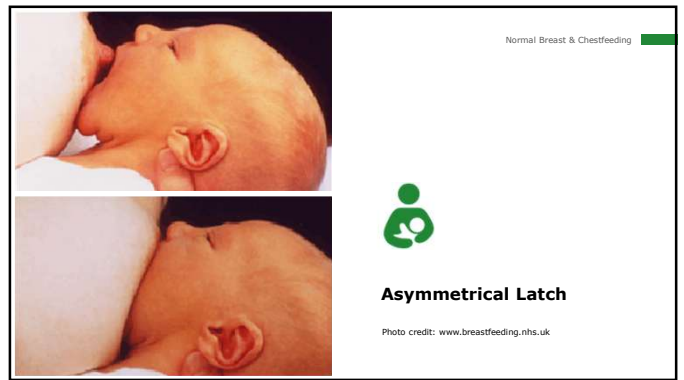
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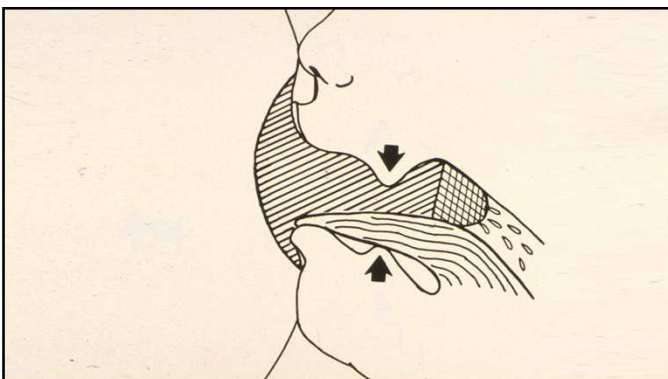
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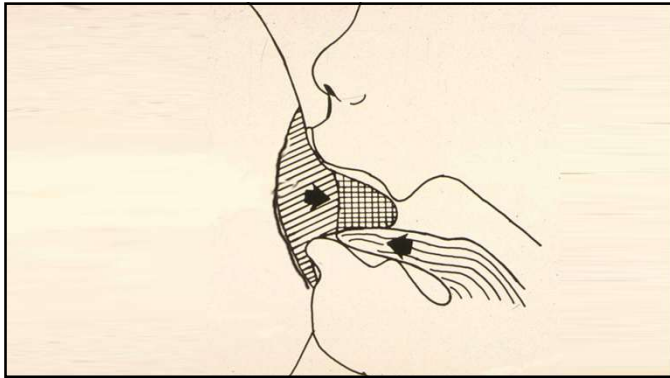
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38

Normal Breast & Chestfeeding

Latch 1,2,3 Summary of Latching

 A photograph of a woman in a pink shirt breastfeeding a baby. The baby is lying on its stomach, and the woman is holding it in a cradle hold.

Healthy Children's Center for
Breastfeeding
<http://www.healthychildren.cc>

39

Normal Breast & Chestfeeding

Is Milk Getting into Baby?

 A photograph of a woman breastfeeding a baby.

Milk let down – listen for swallowing	Mom gets sleepy, thirsty	Chest gets softer
---	--------------------------------	----------------------

41

Normal Breast & Chestfeeding

 A photograph of a woman breastfeeding a baby.

Milk Transfer

42

Normal Breast & Chestfeeding

Breast Compression

 A photograph of a woman breastfeeding a baby.

Increases
milk
removal
and
production

See Handout for
more information.

Use when baby is
"sucking" but not
"drinking"

43

Normal Breast & Chestfeeding


Breast Compression Video

Source:
<https://vimeo.com/user5816669>


 A photograph of a woman breastfeeding a baby.

44

Normal Breast & Chestfeeding

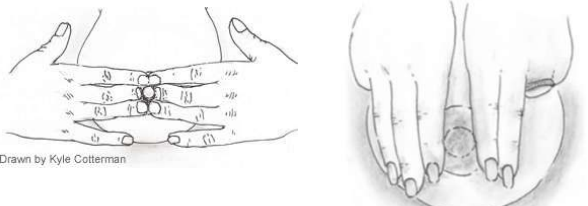


Practice
Breast Compression




46

Reverse Pressure Softening...

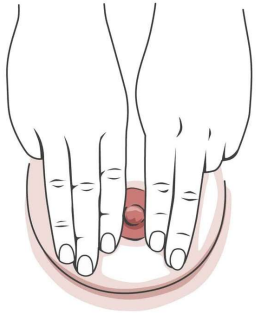


Drawn by Kyle Cotterman




Drawn by Kyle Cotterman

47




Normal Breast & Chestfeeding



Practice
Reverse Pressure Softening

48

Normal Breast & Chestfeeding



Things That Impact Normal Feedings...

- Engorgement
- Sore Nipples
- Sleepy Babies
- Dyad separated

49

Summary

- A good latch
- One size does not fit all
- Try a variety of approaches



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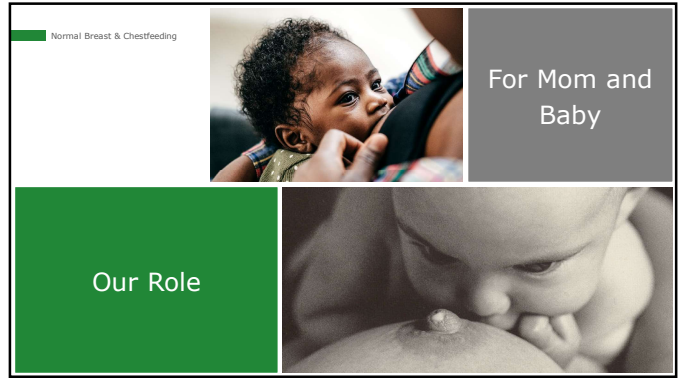



Breast Pumps
MDHHS - WIC Milk Expression

51



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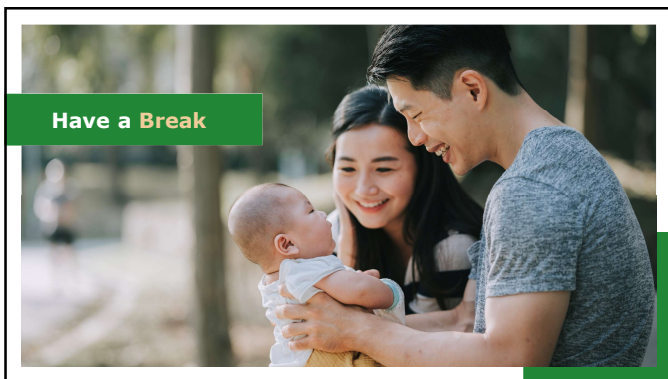
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58



Clinical Summaries Level 2 Escape Room Game




1

Clinical Summaries

- Tools used to develop critical thinking skills about clinical breastfeeding issues.
- Address:
 - Issue
 - Signs
 - Causes
 - Questions to Ask
 - Tips/Solutions
 - When to Yield



2

PROBLEM SOLVING: COMMON INFANT ISSUES
HANDOUT: COMMON INFANT ISSUES SUMMARY

Infant Problem	Signs	Causes	Questions to Ask	Tips/Solutions	When to Yield
Latch Difficulties	<ul style="list-style-type: none"> Baby might: Latch but not suck Full asleep after latching Struggle to latch and cry Turn head and refuse to latch Mom might: Be frustrated Have sore nipples Be engaged Have low milk production 	<ul style="list-style-type: none"> Uncomfortable positioning Use of artificial nipples before breastfeeding is established Baby's preference for one breast over the other due to comfort or amount of milk available Overstimulation Baby's congestion Baby's mouth Baby's oral thrush Baby's breathing Discomfort Breast refusal for unknown reason 	<ul style="list-style-type: none"> Tell me how you know when it is time to feed your baby. How is your positioning and latching your baby? Do you have your baby's feet when you try to latch? What have you already tried? What concerns you the most? What else is your baby receiving besides your milk? Are you using bottles or pacifiers? Tell me about your baby's wet and dirty diapers. What are your breastfeeding goals? Who is available to support you? 	<ul style="list-style-type: none"> Review basic positioning and latch. Swallow the breast. Back/Nips in a straight line Angled to take in most of bottom part of areola in mouth; top part of areola (above-pectoral) may be visible Chin touching the breast Nose aligned to nipple Wide open mouth Good skin-to-skin contact Vary breastfeeding positions Start feeding on preferred breast; then switch baby over to the other breast. Hand express drops of milk. Avoid artificial nipples. Maintain milk production. Address engorgement. Minimize distractions. Be patient! 	<ul style="list-style-type: none"> Yield to OBE if: Basic solutions offered do not improve baby's latch. Mom reports unresponsive nipples or engorgement. Mom wants alternative ways to feed the baby. Mom has concerns about anatomical issues Mom is concerned about baby's weight and output.
Slow Weight Gain	<ul style="list-style-type: none"> Baby not returned to birth weight by 2 weeks 	<ul style="list-style-type: none"> Baby not feeding often or long enough Poor positioning and latch Maternal factors 	<ul style="list-style-type: none"> Tell me about your baby's feeding patterns. How do you know when it's time to feed your baby? 	<ul style="list-style-type: none"> Ensure correct positioning and latch to improve milk transfer. Vary positions. 	<ul style="list-style-type: none"> Yield to OPA/OBE if: Baby gains weight slowly.


3

Escape Room Game



- Issue
- Signs
- Causes
- Questions to ask
- Tips/Solutions
- When to Yield

4



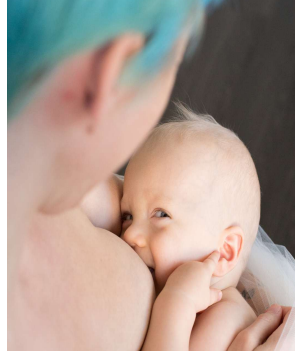
Escape Room

- Series of Puzzles
- Each Puzzle is giving you an opportunity to problem solve
- The Puzzle will give 1-2 letters that will be used in the final word.
- Goal: Be the first room to identify the final word.

5

Escape Room Tips

- Work as a team
- Ask for help
- Screen Share
- Annotations Option



6






Finding Solutions to Breast/Chestfeeding Challenges

1


“

We are all faced with a series of great opportunities...disguised as impossible situations.

—
K. AUERBACH



2



Finding Solutions

Gathering Information

Ask questions in a calm and relaxed manner and affirm the parents for what they are doing right!


- Can you describe...
- Tell me about it...
- What have you observed...
- How does your baby...
- How often does your baby...
- Can you give me a picture of how your baby...

3


Finding Solutions

Feeding Concerns

- **Listen** to their story
- **Take** notes
- **Ask** the parent what is their main "concern"
- **What** is their "gut" saying?
- **Ask** them to describe a feeding




4



Specific Information

- Baby's age
- Baby's output
- Baby's Growth
- Frequency and length of feeding
- Parent's comfort
- Any supplements or medications
- Pacifier or bottle use
- Has baby seen doctor


5





Finding Solutions


L.O.V.E. Model

Don't Forget Your "Tools for Connection"









6



Finding Solutions

Telephone Counseling

Clipboard icon

7



Case Studies

Small Group Activity in a Breakout Room



8



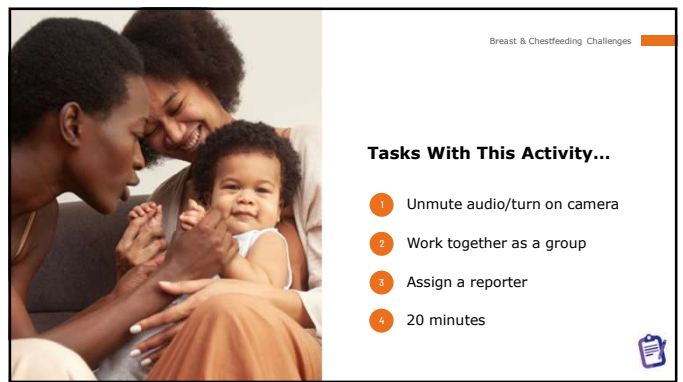
29. L.O.V.E. Practice: Case Studies

30. L.O.V.E. Practice: Worksheet



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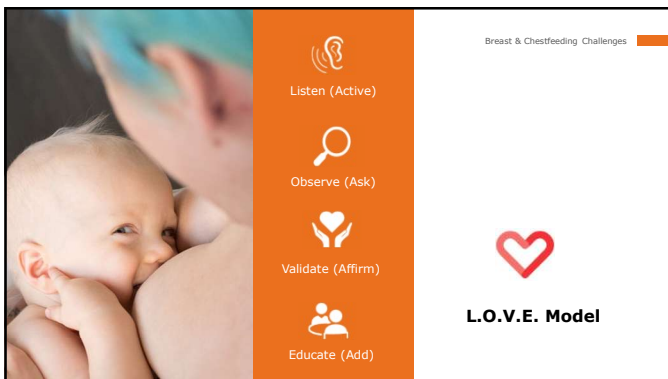
Breast & Chestfeeding Challenges

Tasks With This Activity...

- 1 Unmute audio/turn on camera
- 2 Work together as a group
- 3 Assign a reporter
- 4 20 minutes

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10



Breast & Chestfeeding Challenges

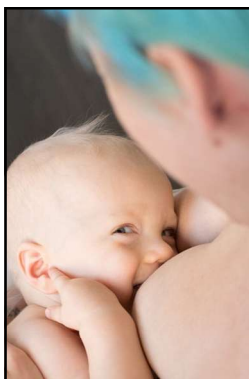

Listen (Active)

Observe (Ask)

Validate (Affirm)

Educate (Add)

L.O.V.E. Model

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Breakout Activity Room



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