

Breastfeeding Exclusive

Carolina Global Breastfeeding Institute
Newsletter

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Breastfeeding Is Breaking Out All Over!!

The number of conferences, collaborations and communities that are dedicated to breastfeeding are clearly on an upswing in the US and globally. This past year included all the major professional meetings, but also a World Breastfeeding Conference, hosted primarily by BPNI, the IBFAN affiliate in India, WABA and the Global Breastfeeding Initiative for Child Survival (gbics), that include representatives from more than 80 countries and about 30 governments. With the theme of "Mom-made, not Man-made: Let's Protect Every Feeding Mother" this group increased the emphasis on complementary foods while confirming the need to adopt a human right-based approach to the protection, promotion and support of breastfeeding; establish institutional mechanisms to avoid and manage conflicts of interest; support all women with a comprehensive system of maternity protection at work; ensure appropriate and adequate education and training of all health care professionals and allied health and community workers; establish clear budget lines for breastfeeding; invest in the Baby Friendly Hospital Initiative; publicize widely the multiple risks of artificial feeding, bottles and teats as well as early complementary feeding; ensure universal access to accurate information and counseling on breastfeeding and infant and young child feeding, and provide skilled counselors in the health facilities and in the community; monitor and track the global breastfeeding targets in every country; protect breastfeeding from commercial sector, by strictly enforcing the International Code of Marketing of Breastmilk Substitutes and subsequent related World Health Assembly Resolutions; promote the use of affordable and diverse, locally grown, indigenous foods for timely and appropriate complementary feeding after six- months along with continued breastfeeding, and; enhance and support breastfeeding related research with public funding.

Here in the US, the W.K. Kellogg Foundation hosted a meeting of organizations interested in increasing their support for breastfeeding. Calling for, and representing, diversity, the group gathered in Atlanta to exchange views and share lessons learned. One highlight of the two days of activities was a presentation and call for further action by the Surgeon General of the US.
(See Director's letter for comment on additional meetings)

The Breastfeeding Exclusive would like to hear about your special meetings. Please send an email with the subject "contribution to BFE", and we will try to share your information with our readers.

Project Update

Ready, Set, BABY Evaluation

By: Kathy Parry, MPH, IBCLC

Ready, Set, BABY is a one-on-one, education session offered to all prenatal patients who will deliver at UNC Health Care. Prenatal education is recognized as an evidenced-based intervention to improve breastfeeding rates by both the US Preventative Services Task Force and the Centers for Disease Control and Prevention due to the body of research demonstrating its effectiveness. The importance of educating pregnant women about the benefits and management of breastfeeding is highlighted in Step 3 of the Baby Friendly Hospital Initiative.



CGBI is conducting an evaluation of Ready, Set, BABY with support from the W.K. Kellogg Foundation. The evaluation allows for necessary program improvements and will gather feedback from patients who have attended the educational session. The project also includes a summer practicum for first-year MPH / MRTTI student, Rachel Davis, who will be conducting postpartum interviews with patients to identify any key differences between those who attended Ready Set Baby and those who did not.

Information from the evaluation will be used to make recommendations for improvement to the program's director at UNC Health Care, and will also inform the creation of updated materials for dissemination to other hospitals and/or further research. Our efforts will help to ensure education that includes breastfeeding is available and accessible to all prenatal women.

Understanding Women's Perceptions of Infant Formula Advertising

By: Kathy Parry, MPH, IBCLC

It is virtually impossible to avoid exposure to infant formula advertising in today's society; it appears in magazines, on television commercials, in the media, in doctor's offices and hospitals, and also in the mailboxes of most pregnant women. There is little research demonstrating how this may affect women and their feeding choices. We know women who receive formula samples at hospital discharge are more likely to stop breastfeeding sooner, yet the cumulative effects of a lifetime of exposure to infant formula advertising are nearly impossible to measure.

CGBI set out to better understand how women perceive the messages in formula advertisements by conducting focus groups. After viewing the advertisements, women showed considerable confusion about the superiority of breastmilk over infant formula. In the context of the ads, infant formula was viewed as a solution or treatment of some kind. Authors of the study recommend that the Federal Trade Commission, who is responsible for protecting consumers from false and misleading advertising, do more to regulate advertising of breastmilk substitutes. Health care providers can use the results of this study to inform the counseling they provide to pregnant and postpartum mothers.

Please look for this publication in the June 2013 issue of BIRTH.

Letter From The Director

Dear Friends and Colleagues,

CGBI continues to grow and change in its 8th year. We decided that it is time to have our own identity and have developed our new logo and new look for the 21st century. This issue is the first in the new format, and your feedback is appreciated. All of our materials will be adapted to this or complementary formats as appropriate to the need.



The logo is derived from the Golden Bow, modernizing and emphasizing the two loops of the bow: the mother and baby as a single dyad, or unit. Our activities, however, continue to include all aspects of the bow: the knot for support needed from the father, family and society, the streamers for continued breastfeeding for up to two years or longer with age-appropriate complementary feeding and for adequate birth and birth spacing support.



The growth and change includes the growth and maturity of the annual breastfeeding and feminism conference, this year in Chapel Hill, with the theme: “It Takes a Village: The role of the greater community in inspiring and empowering women to breastfeed.” This year our attendance surpassed 130, with 6 exhibitors and more than 50 presenters. For more information, please visit: <http://cgbi.sph.unc.edu/take-action/educational-opportunities/bf-and-fem> . There was impassioned discussion of the World Breastfeeding Conference slogan and its meaning with regard to women’s roles, rights and equity.

Recent changes include increased outreach – inter-organizational, interstate, and international, with collaborative work with colleagues in the DRC, Canada, Australia, China, and more to come. The current funding and staffing continue to support ongoing collaborative work, and continued adherence to our E-TIERS approach: Exploration, Translation, Innovative Intervention, Evaluation and adaptation; Replication and Sustainable Scale-up. In this quarter, we will be hosting both the 2nd Interstate Collaborative Meeting to support the Widespread Implementation of the Ten Steps, as well as the first Interstate Collaborative Meeting to support Breastfeeding in Child Care. The latter will explore lessons learned and consider next steps related to the Ten Steps for Breastfeeding in Child Care and related projects ongoing in more than 10 other states.

Best wishes,

Miriam



*CGBI at the Breastfeeding and Feminism Symposium March, 2013
(From Left to Right): Brittany Chamberlain, Kathleen Anderson,
Kathy Parry, Miriam Labbok, Brook Colgan, Emily Taylor, Zakiya
Williams, Courtney Latta, and Thea Calhoun-Smith*

Associates Corner

Baby Friendly Hospital Initiative in Colombia – Part II

By Jairo Osorno Reyes, M.D.

This is part two of a two-part series that 1) summarizes the current BFHI in Colombia, and 2) offers suggestions for the future of the Initiative. Part one was published in BFE, Dec 2012.

The Baby-friendly Hospital Initiative (BFHI) has been a powerful force in breastfeeding's resurgence throughout the world; it has proven its value, and must be maintained. However, the changes that been incorporated into BFHI have led to new challenges. It may be time to reassess the technical pillars of the Initiative, some of which are currently being questioned, such as the use of dummies for the prevention of SIDS. Careful analyses should precede any decision to accept or to reject conclusions coming from the literature.

Specifically, for Colombia, BFHI may maintain greater value if:

- The culture of self-assessment and the validity of the 10 Steps are maintained without having to respond to the needs of other programs and initiatives.
- Simplified instruments of self-assessment and evaluation of the original 10 steps are developed and used. Common language and adaptation to today's realities are essential.
- Step 10 should be assessed for functionality, and, if necessary replaced.
- Consideration is given to the local realities and the autonomy of every region, and external evaluators are aware of differences in cultural values.
- The realities of the differences between hospitals that care for the very ill mothers and children and those that are primary care in nature are taken into consideration.
- Certification remains specifically for maternity hospitals. Similar initiatives could be developed for other settings, borrowing on the concept, but with relevant criteria and dynamics.

In sum, we should consider that the promotion of breastfeeding, and BFHI itself, are human endeavors, and, as such, merit continuous reassessment, and adaptation to new realities.

Carolina
Bebes

BEBES spring semester was bustling with information sharing and activities. Hot topics on the Carolina BEBES Facebook page included sharing details about upcoming events, and posting articles and reactions to local and international breastfeeding news. Carolina BEBES has also been a useful resource for students with questions about breastfeeding on campus.



BEBES' new t-shirts have arrived! BEBES hosted a very successful Valentine's Day bake sale to raise funds purchasing these t-shirts. If you are interested in purchasing a shirt, please email Jessye Brick at jbrick@live.unc.edu.

The Breastfeeding & Feminism Symposium was highly anticipated by group members. Due to the large interest in attending this event, BEBES held a competition for three one-day conference scholarships. Many BEBES members attended and several members of the BEBES leadership team also presented at the conference.

We are looking forward to touring the Women's Birth and Wellness Center and hosting a film screening this semester. Please email Talene Ghazarian at tghazari@live.unc.edu or join the Carolina BEBES Facebook group if you are interested in becoming involved.

Alumni Spotlight

Dr. Nathan Nickel

By: *Nathan C. Nickel, MPH, PhD*

CGBI-Affiliated Projects: Breastfeeding Friendly Healthcare Project; Breastfeeding Friendly Childcare Project (Data Analysis)

I remained at CGBI for 6 months after completing my PhD under the mentorship of Dr. Labbok in December 2011. In July 2012, I began a Postdoctoral Fellowship at the Manitoba Centre for Health Policy (MCHP). MCHP conducts health services and population health research using data from the Population Health Research Data Repository, a comprehensive database consisting of health, education, social, and justice data for nearly all Manitoba residents. MCHP received a research grant to identify “what works to reduce child health and development inequities”--PATHS Equity; I was hired as the Postdoctoral Fellow on PATHS. I am part of two PATHS teams: the first is studying Baby-friendly’s impact on inequities in breastfeeding and the second is studying Full-day Kindergarten’s impact on inequities in educational outcomes. I am also working on two government research projects: (1) projecting future healthcare utilization and costs associated with chronic kidney disease and (2) assessing the healthcare utilization and costs attributable to smoking. In addition, I am leading a team studying the healthcare utilization associated with exclusive formula feeding at hospital discharge during the first year of life. Finally, along with my Postdoctoral Supervisor, Dr. Patricia Martens, I am co-teaching a graduate course in Health Services Research.



Publications and Presentations

Publications

Labbok MH. Breastfeeding: Population-based perspectives. *Pediatr Clin North Am.* 2013;60(1):11-30.

Nickel NC, Labbok MH, Hudgens MG, Daniels JL. The extent that noncompliance with the Ten Steps to Successful Breastfeeding influences breastfeeding duration. *J Hum Lact.* 2013 Feb; 29(1): 59-70.

Nickel NC, Taylor EC, Labbok MH, Weiner BJ, Williamson NE. Applying organisation theory to understand barriers and facilitators to the implementation of baby-friendly: A multisite qualitative study. *Midwifery.* Available online 20 February 2013. <http://dx.doi.org.libproxy.lib.unc.edu/10.1016/j.midw.2012.12.001>

Taylor E, Nickel NC, Labbok MH. Implementing the ten steps for successful breastfeeding in hospitals serving low-wealth patients. *Am J Public Health* 2012;102(12):2262-8. DOI: 10.2105/AJPH. 2012.300769. Epub 2012 Oct 18.

Smith PH, Coley SL, Labbok M, Cupito S, Nwokah E. Early breastfeeding experiences of adolescent mothers: a qualitative prospective study. *Int Breastfeed J* 2012;29;7(1):13.

Labbok MH. Global baby-friendly hospital initiative monitoring data: update and discussion. *Breastfeed Med* 2012 Aug;7:210-22.

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Tully KP, Ball HL. Misrecognition of the need: Women’s experiences of and explanations for undergoing cesarean delivery. *Soc Sci Med.* 2013. DOI:10.1016/j.socscimed.2013.02.039.

Publications and Presentations Continued

Books and Chapters

- Labbok M. Development and use of the Lactational Amenorrhea Method (LAM): Transitioning to other Natural Methods. Chapter 3 in: Fehring R, Notare T, editors. Science, Faith, and Human Fertility. Milwaukee: Marquette University Press, 2012.
- Labbok M. Breastfeeding in Public Health: What Is Needed for Policy and Program Action? In: Smith PH, Hausman BL, & Labbok M, editors. Beyond Health, Beyond Choice: Breastfeeding Constraints and Realities. New Brunswick: Rutgers University Press; 2012. pp. 36-52.
- Smith PH, Hausman BL, Labbok M, editors. Beyond Health, Beyond Choice: Breastfeeding Constraints and Realities. New Brunswick: Rutgers University Press; 2012.
- Smith PH, Hausman BL, Labbok M. Introduction: Breastfeeding Constraints and Realities. In: Smith PH, Hausman BL, & Labbok M, editors. Beyond Health, Beyond Choice: Breastfeeding Constraints and Realities. New Brunswick: Rutgers University Press; 2012. pp. 1-13.
- Smith PH, Hausman BL, Labbok M. Conclusion: Beyond Health, Beyond Choice: New Ways Forward in Public Health. In: Smith PH, Hausman BL, & Labbok M, editors. Beyond Health, Beyond Choice: Breastfeeding Constraints and Realities. New Brunswick: Rutgers University Press; 2012. pp.281-286.

Presentations/Papers/Posters

- Abraham SW. Chasing the theory: Operationalizing social influences on breastfeeding. 8th Breastfeeding and Feminism Symposium, 2013 Mar 21-22.
- Brick J, Ghazarian T, Snyder T. Increasing the use of donor human milk: An assessment of knowledge, beliefs, and practices among health care professionals. 8th Breastfeeding and Feminism Symposium, 2013 Mar 21-22.
- Labbok M, Cameron BM, Ringel-Kulka T, Scheckter R, Nickel NC, Anderson KL, Kotch JB, Petersen A. Carolina child care ten steps: creating breastfeeding-supportive child care. Coalition for Improving Maternity Services (CIMS) Annual Meeting, Kansas City, 2013 Mar 2.
- Labbok M. Contraception Choices for Breastfeeding Women: The Good, the Bad, and the Ugly. New Mexico, The 19th Annual Conference on Advanced Concepts in Breastfeeding, 2013 Mar 7-8.
- Labbok M. Change my practices to support the Ten Steps to Successful Breastfeeding?! Why should I? New Mexico, The 19th Annual Conference on Advanced Concepts in Breastfeeding, 2013 Mar 7-8.
- Labbok M. The global village: Do women live here? A critical look at the state of the global approach to breastfeeding promotion, protection and support. 8th Breastfeeding and Feminism Symposium, 2013 Mar 22.
- Labbok M. Presentations on the Ten Steps and Joint Commission at three hospitals: Farmington, Los Alamos, Santa Fe, 2013 Mar 4-6.
- Taylor E, Parry K, Labbok M. The use of human milk in the U.S. 8th Breastfeeding and Feminism Symposium, 2013 Mar 21-22.
- Tully KP, Holditch-Davis D, Brandon D. The challenge of late preterm birth on realizing breastfeeding intentions. 8th Breastfeeding and Feminism Symposium, 2013 Mar 21-22..
- Tully KP, Ball H.L. The role of postnatal unit bassinet types on enabling early breastfeeding intentions. 8th Breastfeeding and Feminism Symposium, 2013 Mar 21-22.

We welcome your feedback. Please send your comments or suggestions regarding Breastfeeding Exclusive to the editor at klanderson@unc.edu or the designer at kathyparry@unc.edu.

Be In Touch!

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