

U.S. Surgeon General's “Call to Action to Support Breastfeeding”

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Question: What single action can accomplish all of the following:

- Promote the health of babies and their mothers.
- Cut health care costs.
- Save over \$1,000 in a child's first year.
- Improve employee retention.

Answer: Breastfeeding

In the “Call to Action to Support Breastfeeding,” announced January 20 in Washington, D.C., the U.S. Surgeon General has identified 20 evidence-based actions that are needed to support breastfeeding, including establishing worksite policies and programs, implementing maternity care practices in hospitals and birthing facilities, reducing marketing of infant formula, and ensuring access to services provided by International Board Certified Lactation Consultants (IBCLCs).

The Surgeon General has chosen to focus on breastfeeding because of its importance in promoting women's and children's health, and its potential for significant health care cost savings through preventive action.

The full text of the Call to Action to Support Breastfeeding is at:

<http://www.surgeongeneral.gov/topics/breastfeeding/calltoactiontosupportbreastfeeding.pdf>

La Leche League Leaders can play an active role in carrying out the suggested actions. Some of them we are already doing, while others may be out of the normal realm of the Leader. However, knowing what they are, and looking for ways to work within your community through the mothers you support, you can help with the rest.

So... Think about how you might be a part of each of the actions. You might get an idea for a World Breastfeeding Week Celebration project grant!

Action #1: Give mothers the support they need.

Who does this better than YOU, the La Leche League Leader? Every time you help a mother by phone, by email, or in her home, or at a meeting, YOU are performing Action #1!

Implementation Strategies from the Call to Action:

- Help pregnant women to learn about the importance of breastfeeding for their babies and themselves.
- Teach mothers to breastfeed.
- Encourage mothers to talk to their maternity care providers about plans to breastfeed.
- Support mothers to have time and flexibility to breastfeed.
- Encourage mothers to ask for help with breastfeeding when needed.

For more information, see p. 38 in the [Call to Action](#).

Action #2: Develop programs to educate fathers and grandmothers about breastfeeding.

Consider having a couples meeting and invite fathers. Encourage mothers to bring their mothers along to regular Group meetings. Talk to mothers about how to help family members support their breastfeeding efforts.

Implementation Strategies from the Call to Action:

- Launch or establish campaigns for breastfeeding education that target a mother's primary support network, including fathers and grandmothers.
- Offer classes on breastfeeding that are convenient for family members to attend.

For more information, see p. 39 in the [Call to Action](#).

Action #3: Strengthen programs that provide mother-to-mother support and peer counseling.

Get the word out in your community about Group meetings and Leaders who are available to help. Encourage mothers at your Group meetings to reach out to other mothers who are breastfeeding or pregnant and invite them to meetings. Connect with your local WIC clinics and look for ways you can work together.

Implementation Strategies from the Call to Action:

- Create and maintain a sustainable infrastructure for mother-to-mother support groups and for peer counseling programs in hospitals and community health care settings.
- Establish peer counseling as a core service available to all women in WIC.

For more information, see p. 40 in the [Call to Action](#).

Action #4: Use community-based organizations to promote and support breastfeeding.

Group meetings, Breastfeeding Cafes, and participation in health fairs are some of the many ways Leaders reach out to mothers in their community.

Implementation Strategies from the Call to Action:

- Support and fund small nonprofit organizations that promote breastfeeding in communities of color.
- Integrate education and support for breastfeeding into public health programs that serve new families.
- Ensure around-the-clock access to resources that provide assistance with breastfeeding.

For more information, see p. 41 in the [Call to Action](#).

Action #5: Create a national campaign to promote breastfeeding.

Here is a brand-new resource that Leaders can use: "Your Guide to Breastfeeding." This 48-page, full-color, magazine-style resource is like a beautifully illustrated Reader's Digest version of *The Womanly Art of Breastfeeding*. It was prepared by the U.S. Department of Health and Human Services, Office on Women's Health, with input from La Leche League—and it is FREE!!! You can order up to 50 copies, and use them as a hand-out for mothers at meetings, by calling 1-800-994-9662. You can select the basic version, a Spanish translation, or one aimed at African-American mothers.

Implementation Strategies from the Call to Action:

- Develop and implement a national public health campaign on breastfeeding that relies heavily on social marketing.
- Use a variety of media venues to reach young women and their families.

For more information, see p. 42 in the [Call to Action](#).

Action 6. Ensure that the marketing of infant formula is conducted in a way that minimizes its negative impacts on exclusive breastfeeding.

Do the health care providers in your community put out marketing materials from formula companies in their waiting rooms and exam rooms? Consider providing alternatives—Group meeting notices, posters, or some of the Health and Human Services “Your Guide to Breastfeeding” publications mentioned in Monday’s Actions. You can order up to 50 at a time every month for free by calling 1-800-994-9662 — and add a sticker on the back with your contact information.

Implementation Strategies from the Call to Action:

- Hold marketers of infant formula accountable for complying with the *International Code of Marketing of Breast-milk Substitutes*.
- Take steps to ensure that claims about formula are truthful and not misleading.
- Ensure that health care clinicians do not serve as advertisers for infant formula.

For more information, see p. 43 in the [Call to Action](#).

Action 7. Ensure that maternity care practices throughout the United States are fully supportive of breastfeeding.

For Leaders who work in hospitals as nurses, doctors, IBCLCs, etc., take an active role in promoting positive breastfeeding policies. Work with your state’s breastfeeding coalitions to achieve this goal. Help the mothers you work with understand the need for good hospital breastfeeding protocols, and encourage them to write the hospitals after they’ve given birth noting what hospital personnel have done well and recommend changes.

Implementation Strategies from the Call to Action:

- Accelerate implementation of the Baby-Friendly Hospital Initiative.
- Establish transparent, accountable public reporting of maternity care practices in the United States.
- Establish a new advanced certification program for perinatal patient care.
- Establish systems to control the distribution of infant formula in hospitals and ambulatory care facilities.

For more information, see p. 44 in the [Call to Action](#).

Action 8. Develop systems to guarantee continuity of skilled support for lactation between hospitals and health care settings in the community.

Visit your local hospital or birth center and introduce yourself. Bring meeting notices and request that they be given to every new mother. Let your local WIC clinic know you are in the community as well. Keep your Area’s Web site up-to-date so that mothers can readily find local Group meetings and Leader contact information.

Implementation Strategies from the Call to Action:

- Create comprehensive statewide networks for home- or clinic-based follow-up care to be provided to every newborn in the state.
- Establish partnerships for integrated and continuous follow-up care after discharge from the hospital.
- Establish and implement policies and programs to ensure that participants in WIC have services in place before discharge from the hospital.

For more information, see p. 45 in the [Call to Action](#).

Action 9. Provide education and training in breastfeeding for all health professionals who care for women and children.

Are your local healthcare professionals using *Medications and Mother's Milk*, *Breastfeeding Answers Made Simple*, and *The Womanly Art of Breastfeeding, 8th Revised Edition*, to help address mothers' questions and concerns? Encourage awareness of resources with up-to-date breastfeeding information.

Implementation Strategies from the Call to Action:

- Improve the breastfeeding content in undergraduate and graduate education and training for health professionals.
- Establish and incorporate minimum requirements for competency in lactation care into health professional credentialing, licensing, and certification processes.
- Increase opportunities for continuing education on the management of lactation to ensure the maintenance of minimum competencies and skills.

For more information, see p. 46 in the [Call to Action](#).

Action 10. Include basic support for breastfeeding as a standard of care for midwives, obstetricians, family physicians, nurse practitioners, and pediatricians.

Encourage mothers to seek out healthcare providers who are knowledgeable about and supportive of breastfeeding.

Implementation Strategies from the Call to Action:

- Define standards for clinical practice that will ensure continuity of care for pregnant women and mother-baby pairs in the first four weeks of life.
- Conduct analyses and disseminate their findings on the comparative effectiveness of different models for integrating skilled lactation support into settings where midwives, obstetricians, family physicians, nurse practitioners, and pediatricians practice.

For more information, see p. 47 in the [Call to Action](#).

Action 11. Ensure access to services provided by International Board Certified Lactation Consultants.

La Leche League Leaders are knowledgeable and able to answer the vast majority of breastfeeding questions, using the resources available to them. However, when a mother needs hands-on help and the Leader is not available to provide a home visit, encourage the mother to seek a qualified lactation consultant through referral from her healthcare provider.

Implementation Strategies from the Call to Action:

- Include support for lactation as an essential medical service for pregnant women, breastfeeding mothers, and children.
- Provide reimbursement for IBCLCs independent of their having other professional certification or licensure.
- Work to increase the number of racial and ethnic minority IBCLCs to better mirror the U.S. population.

For more information, see p. 48 in the [Call to Action](#).

Action 12. Identify and address obstacles to greater availability of safe banked donor milk for fragile infants.

With all of the recent controversy about informal milk sharing, this is an important step to take to help those fragile infants in need of precious breast milk. A reminder—LLL has a policy on milk donation that covers the Leader's responsibilities concerning informal milk sharing:

<http://www.llli.org/leaderpages/PSRm.html#14>. If you haven't read the policy recently, this would be a good time to review it. Also, see a previous Eastern Announce post by LLL Alliance Professional Liaison Resource Librarian, Sara Dodder Furr, that addresses the Eats on Feets informal milk sharing organization: <http://community.llli.org/message.htm?mode=view&hid=862326>.

Implementation Strategies from the Call to Action:

- Conduct a systematic review of the current evidence on the safety and efficacy of donor human milk.
- Establish evidence-based clinical guidelines for the use of banked donor milk.
- Convene a study on federal regulation and support of donor milk banks.

For more information, see p. 49 in the [Call to Action](#).

Actions 13, 14, and 15: Supporting breastfeeding in the workplace

The next three actions deal with supporting breastfeeding women in the workplace. The "Break Time for Nursing Mothers" law included in the Patient Protection and Affordable Care Act (PPACA) passed last year is a first step for ensuring that breastfeeding mothers have time and a place to pump or express milk during their work day. (See http://www.dol.gov/whd/nursingmothers/Sec7rFLSA_btmn.htm to read the law.) The U.S. Department of Labor is looking for input on providing guidance to employers and employees about how to put this law into practical use. You can read about the proposed guidelines and make comments about the law here:

<http://webapps.dol.gov/FederalRegister/HtmlDisplay.aspx?DocId=24540&Month=12&Year=2010>.

Comments are accepted through February 22, 2011. Note that this law does not apply to every working mother. Some companies are small enough to be exempt, and because it is a federal law, some businesses without national connections are not covered—but they are encouraged to follow suit anyway.

This law is a good step, but doesn't address the need for longer maternity leaves or the need for on-site child care that would allow a nursing mother to nurse her baby while at work.

Action 13. Work toward establishing paid maternity leave for all employed mothers.

Implementation Strategies from the Call to Action:

- Add maternity leave to the categories of paid leave for federal civil servants.
- Develop and implement programs in states to establish a funding mechanism for paid maternity leave.

For more information, see p. 50 in the [Call to Action](#).

Action 14. Ensure that employers establish and maintain comprehensive, high-quality lactation support programs for their employees.

Implementation Strategies from the Call to Action:

- Develop resources to help employers comply with federal law that requires employers to provide the time and a place for nursing mothers to express breast milk.
- Design and disseminate materials to educate employers about the benefits of providing more comprehensive, high-quality support for breastfeeding employees.
- Develop and share innovative solutions to the obstacles to breastfeeding that women face when returning to work in non-office settings.
- Promote comprehensive, high-quality lactation support programs as part of a basic employee benefits package.

For more information, see p. 51 in the [Call to Action](#).

Action 15. Expand the use of programs in the workplace that allow lactating mothers to have direct access to their babies.

Implementation Strategies from the Call to Action:

- Create incentive or recognition programs for businesses that establish, subsidize, and support child care centers at or near the business site.
- Identify and promote innovative programs that allow mothers to directly breastfeed their babies after they return to work.

For more information, see p. 52 in the [Call to Action](#).

Action 16. Ensure that all child care providers accommodate the needs of breastfeeding mothers and infants.

When discussing separation with mothers, Leaders can share information on pumping, milk storage, and alternate feeding methods to encourage breast milk feeding in the mother's absence. The tear-off sheet "Storing Human Milk" (available from <http://store.llli.org/public/category/5?order=rank&page=1>) can be a helpful way to pass along information to child care providers.

Implementation Strategies from the Call to Action:

- Promote adoption of the breastfeeding standards in *Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care*.

For more information, see p. 53 in the [Call to Action](#).

Actions 17 and 18: Promoting research on breastfeeding

The next two Actions focus on promoting research on breastfeeding. Even if a Leader is not in a position to do research, she can help promote successful breastfeeding through critical reading and distinguishing reliable studies from those without merit. For help enhancing your ability to evaluate information, see "Critical Reading Skills for Leaders" <http://www.llleus.org/EU/EU20092.pdf> (username: usallleader password: access4ALLL). Leaders can also help keep up with current research by reading the quick updates in "Leader's Digest" online at <http://www.llleus.org/PLD.html>.

Action 17. Increase funding of high-quality research on breastfeeding.

Implementation Strategies from the Call to Action:

- Designate additional research funding for studies on how to increase breastfeeding rates, the economics of breastfeeding, and management of lactation.

For more information, see p. 54 in the [Call to Action](#).

Action 18. Strengthen existing capacity and develop future capacity for conducting research on breastfeeding.

Implementation Strategies from the Call to Action:

- Develop a national consortium on breastfeeding research.
- Enhance the training of scientists in basic and applied research on lactation, breastfeeding, and women's and children's health.

For more information, see p. 55 in the [Call to Action](#).

Actions 19 and 20: The Big Picture

The last two Actions look at the bigger picture by tracking breastfeeding rates and improving the national leadership on promotion and support of breastfeeding. As recently as a few years ago, the primary source for tracking breastfeeding rates was sponsored by Ross Labs. The Centers for Disease Control and Prevention (CDC) currently uses data from the National Immunization Survey and other sources. The availability of information varies from state to state as far as how much detail is provided on specifics of exclusivity and duration of breastfeeding. Since 2003, the U.S. Standard Certificate of Live Birth has included a question on whether the child was ever breastfed, but only 28 states use the certificate, and “ever breastfed” reflects very little about progress towards Healthy People 2020 goals.

According to the recent report from Brenda Bandy and Marianne Vakiener, LLLI representatives on the United States Breastfeeding Committee, the most recent CDC Breastfeeding Report Card did not include information on the number of LLL Groups per 1000 live births, as previous report cards have. The CDC has promised to include this measure if LLL could provide “accurate and timely” data, and LLLI representatives have assured them this would be taken care of. This is an important measure of how well La Leche League is performing Step 10 of the Ten Steps to Successful Breastfeeding: “Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from hospital or clinic.”

Action 19. Develop a national monitoring system to improve the tracking of breastfeeding rates as well as the policies and environmental factors that affect breastfeeding.

Implementation Strategies from the Call to Action:

- Enhance the CDC Breastfeeding Report Card by including a broader array of process indicators and showing trends over time.
- Collect data in all states on the initiation of breastfeeding and in-hospital supplementation with formula through the U.S. Standard Certificate of Live Birth.
- Develop systems to collect key information on policy and environmental supports for breastfeeding.

For more information, see p. 56 in the [Call to Action](#).

Action 20. Improve national leadership on the promotion and support of breastfeeding.

Implementation Strategies from the Call to Action:

- Create a federal interagency work group on breastfeeding.
- Increase the capacity of the United States Breastfeeding Committee and affiliated state coalitions to support breastfeeding.

For more information, see p. 57 in the [Call to Action](#).

We hope you have enjoyed reading these Actions and that perhaps they’ve given you ideas of how you can incorporate some of these into your work as LLL Leaders. Let us know what you come up with!

Also, the LLLI website has a page devoted to the Call to Action:

<http://www.llli.org/surgeongeneralcalltoactiontosupportbreastfeeding>. Here you’ll find a podcast and YouTube video of the meeting in Washington, DC, where the Call to Action was debuted, as well as some highlights from the report.

Feel free to share this document with any Leaders!