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## Promoting, Protecting and Supporting Breastfeeding New Initiatives in North Carolina



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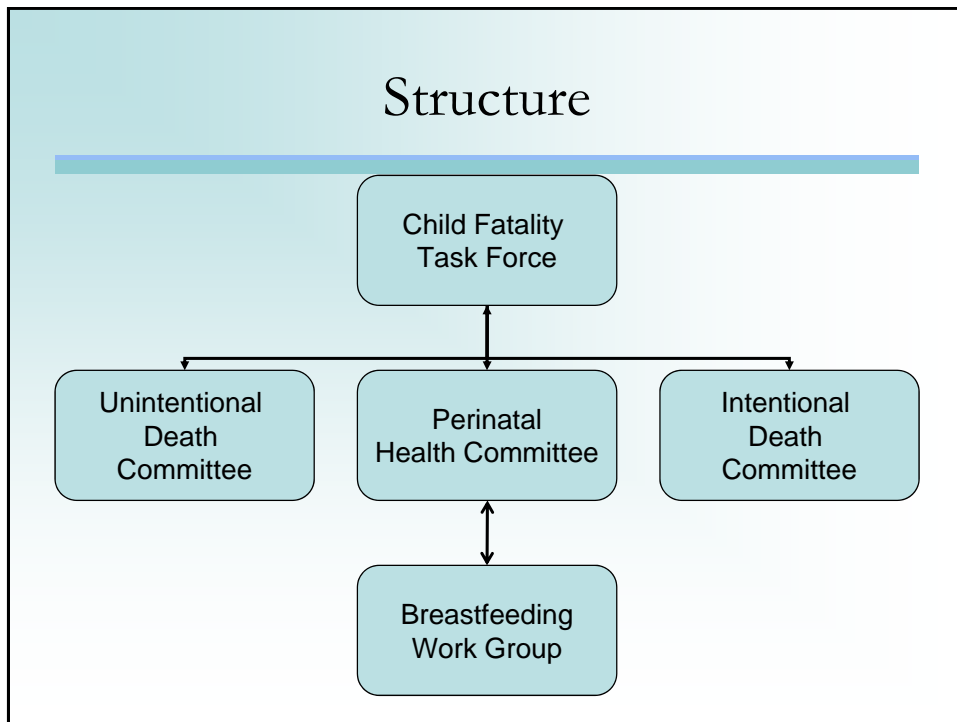
USBC/CDC State Coalitions Teleconference  
December 2008

### North Carolina Child Fatality Task Force (CFTF)

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- Legislative study commission established by the North Carolina General Assembly in 1991
- Created out of growing concern over the preventable deaths of children in North Carolina
- Focus: Infant and child morbidity and mortality
- Executive Director: Selena Childs
- Chair: Tom Vitaglione

## Structure



## Breastfeeding Work Group

- \*Selena Childs: Director CFTF
- Corrine Giannini
- \*Joe Holliday: Co-Chair PHC
- Miriam Labbok
- Alice Lenihan
- Steve Shore
- Catherine Sullivan
- Mary Rose Tully
- \*Sarah Verbiest: Co-Chair PHC
- \*Tom Vitaglione: Chair CFTF

## Our Charge...

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Study the link between breastfeeding and the reduction of infant mortality, disease and obesity

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Breastfeeding = Best Practice  
Evidence Based Reports 2007

## WHO Summary of Evidence

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Children who have been breastfed have

- Lower mean blood pressure
- Lower total cholesterol
- Higher performance on intelligence tests
- Reduced risk of overweight/obesity
- Reduced risk of Type 2 Diabetes

Horta BL, Bahl R, Martines JC, Victora CG. Evidence on the long-term effects of breastfeeding: Systematic Reviews and Meta-Analyses. World Health Organization 2007

## AHRQ Report

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Reduced risk for the mother

- Breast cancer
- Ovarian cancer
- Diabetes
- Post partum depression (small effect)

**Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries.** Evidence Report/Technology Assessment No. 153. AHRQ Publications No. 07-E007. Rockville, MD: Agency for Healthcare Research and Quality. April 2007

# AHRQ Report

## Reduced infant risk of

- Otitis media\*
- Gastroenteritis\*
- Severe lower respiratory tract infections\*
- Asthma\* (infant and children <10 strongest impact)
- Obesity\*
- Type 2 Diabetes\*
- SIDS\*
- Atopic dermatitis
- Necrotizing enterocolitis (\*preterm infants)

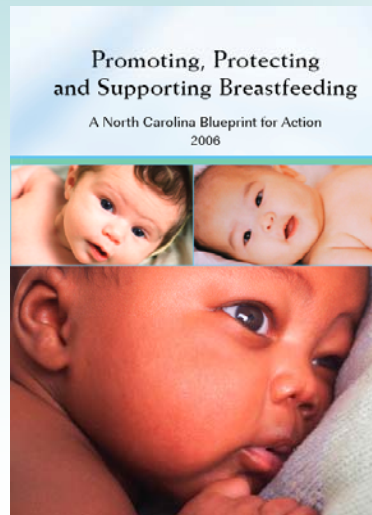
\* strongest evidence

## American Institute for Cancer Research



“It’s best for mothers to breastfeed exclusively for six months and then add other liquids and foods.”

AICR’s Second Expert Report: *Food, Nutrition, Physical Activity, and the Prevention of Cancer: a Global Perspective (2007)*



## Vision

**North Carolina mothers will be enabled to begin their children's lives by breastfeeding - the best possible foundation for infant and young child feeding.**

## Recommendations

- I. Encourage the adoption of activities that create breastfeeding-friendly communities.
- II. Create a breastfeeding-friendly health care system.
- III. Encourage the adoption of breastfeeding-friendly workplaces.
- IV. Assist child care facilities in promoting, protecting and supporting breastfeeding.
- V. Advocate for insurance coverage by all third-party payers for breastfeeding care, services, and equipment when necessary.
- VI. Involve media and use social marketing and public education to promote breastfeeding.
- VII. Promote and enforce new and existing laws, policies and regulations that support and protect breastfeeding.
- VIII. Encourage research and evaluation on breastfeeding outcomes, trends, quality of care, and best practices.

## From Recommendations to Action

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- Communities
- Health Care System
- Workplaces
- Child Care Facilities
- Insurance Coverage
- Media, Social Marketing, and Public Education
- Laws, Policies, and Regulations
- Research and Evaluation



## Breastfeeding Work Group Recommendations

## Communities

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Implement a statewide campaign to enhance public awareness about the benefits of breastfeeding

- Foundation funding
- Legislative appropriations

\* Other states with language/laws: California, Illinois, Missouri, Vermont

## Breastfeeding-Friendly Healthcare System

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Engage the North Carolina Hospital Association in championing the implementation of the UNICEF/WHO *Baby Friendly Hospital Initiative*, which offers policies and practices to promote and clinically support breastfeeding

\* Other states with language/laws: Florida, California, Missouri, Texas

## Breastfeeding Friendly Workplaces

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Work with employers, starting with state agencies, to

- Provide employees with a private place for breastfeeding and/or expressing milk
- Provide paid break time for either

\*Other states with language/laws: California, Connecticut, Georgia, Hawaii, Illinois, Minnesota, Montana, New Mexico, New York, Oklahoma, Oregon, Rhode Island, Tennessee, Texas, Washington, Wyoming

## Assist Child Care Facilities

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Work with

- Division of Child Development
- North Carolina Partnership with Children

To

- Assure that breastfed infants and their mothers receive equal access and care in all child care facilities
- All child care facilities know how to handle mother's milk appropriately

\* Other states with language/laws: Louisiana, Mississippi

## Media, Social Marketing & Public Education

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Work with the Department of Public Instruction to incorporate breastfeeding information into K-12 school health curriculum

\* K-12 curriculum: New York

## Law, Policy and Regulations

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Seek legislation to create a jury exemption for breastfeeding women

\* Other states with language/laws related to jury duty exemption: California, Idaho, Illinois, Iowa, Kansas, Kentucky, Minnesota, Mississippi, Nebraska, Oklahoma, Oregon, Virginia

## Law, Policy and Regulations

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### Enhance access to support services

- Create of a registry for board certified lactation consultants
- Define a scope of practice for registered lactation consultants
- Support insurance coverage for services post hospital discharge
- Expand insurance coverage for the use of donor human milk in NICU's

\*Joint study for insurance coverage: Louisiana

\*Regulation minimum guidelines for distribution of human milk and operation of donor human milk banks: Texas, California, New York, Maryland

## Work Group Progress: Recommendations for Action

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- Proposal submitted to the NC Health and Wellness Trust Fund
    - Focus on public awareness campaign to address
      - cultural beliefs
      - Obesity prevention/breastfeeding relationship
  - Breastfeeding Friendly Hospital Award System (Voluntary)
    - Early stages of planning
    - Award will be housed in the Division of Public Health
    - Partners will help encourage participation and implementation

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### Worksite Guidance

- Proposed additions to the NC Wellness Policy for state employees
  - Paid break time in addition to lunch break
  - Provision of space for breastfeeding and/or expressing milk
- Coordination of efforts with the NC Breastfeeding Coalition
  - Disseminate and train community groups to use *HRSA Toolkit: Business Case for Breastfeeding*

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## Division of Child Development

- Joint letter of support for breastfeed to childcare providers from DCD and DPH is planned
- Childcare manual and curriculum are being updated to include breastfeeding and human milk storage and handling information

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## Law, Policy and Regulations

- CFTF will not pursue jury duty exemption at this time.
  - Exemptions are handled by the Judicial Branch, so doing so would be politically negative
- Nursing Mothers Room established in the General Assembly

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## Law, Policy and Regulations

- Members are looking at creative ways to find a home for a NC R-LC registry
  - This is the first step toward insurance coverage efforts
- Early discussions with insurers about coverage for donor milk processing fees

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## Other alliances are developing

- CDC Report Card information on breastfeeding is now included in the North Carolina Child Health Report Card

## Progress-Measurable Outcomes Using Statewide Data

### 2008 CDC Breastfeeding Report Card

	Healthy People 2010 Goal	Nation	North Carolina
"Ever" Breastfed	75%	74.2%	66.2%
Breastfed 6 months	50%	43.1%	37.5%
Breastfed 12 months	25%	21.4%	18.2%
Exclusivity for 3 mo	40%	31.5%	26.3%
Exclusivity for 6 mo	17%	11.9%	9.5%

<http://www.cdc.gov/breastfeeding>

Based on 2005 National Immunization Survey Data