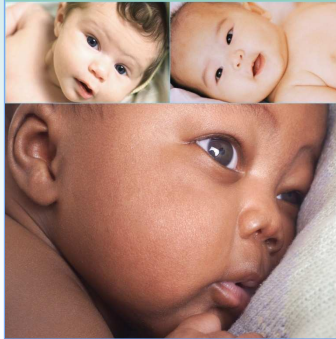
 Promoting, Protecting and Supporting
Breastfeeding in North Carolina
Blueprint Status Report
December 2011

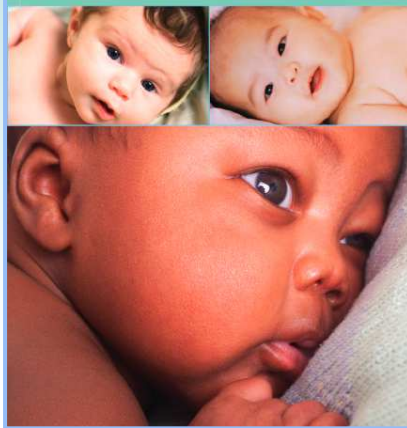


Promoting, Protecting and Supporting Breastfeeding in North Carolina

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Promoting, Protecting and Supporting Breastfeeding

A North Carolina Blueprint for Action
2006



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

- Encourage the adoption of activities that create breastfeeding-friendly communities.
- Create a breastfeeding-friendly health care system.
- Encourage the adoption of breastfeeding-friendly workplaces.
- Assist child care facilities in promoting, protecting and supporting breastfeeding.

Recommendations

- Advocate for insurance coverage by all third-party payers for breastfeeding care, services, and equipment when necessary.
- Involve the media and use social marketing and public education to promote breastfeeding.
- Promote and enforce new and existing laws, policies and regulations that support and protect breastfeeding.
- Encourage research and evaluation on breastfeeding outcomes, trends, quality of care, and best practices.

Excess Health Risks Associated with NOT Breastfeeding*

Outcome	Excess Risk* (%)
<i>Among full-term infants</i>	
Acute ear infection (otitis media)	100
Eczema (atopic dermatitis)	47
Diarrhea and vomiting (gastrointestinal infection)	178
Hospitalization for lower respiratory diseases (first year)	257
Asthma, with family history	67
Asthma, no family history	35
Childhood obesity	32
Type 2 diabetes mellitus	64
Acute lymphocytic leukemia	23
Acute myelogenous leukemia	18
Sudden infant death syndrome	56

* Original article: Ip et al., Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries, 2007
Table adapted from Surgeon General's Call to Action to Support Breastfeeding

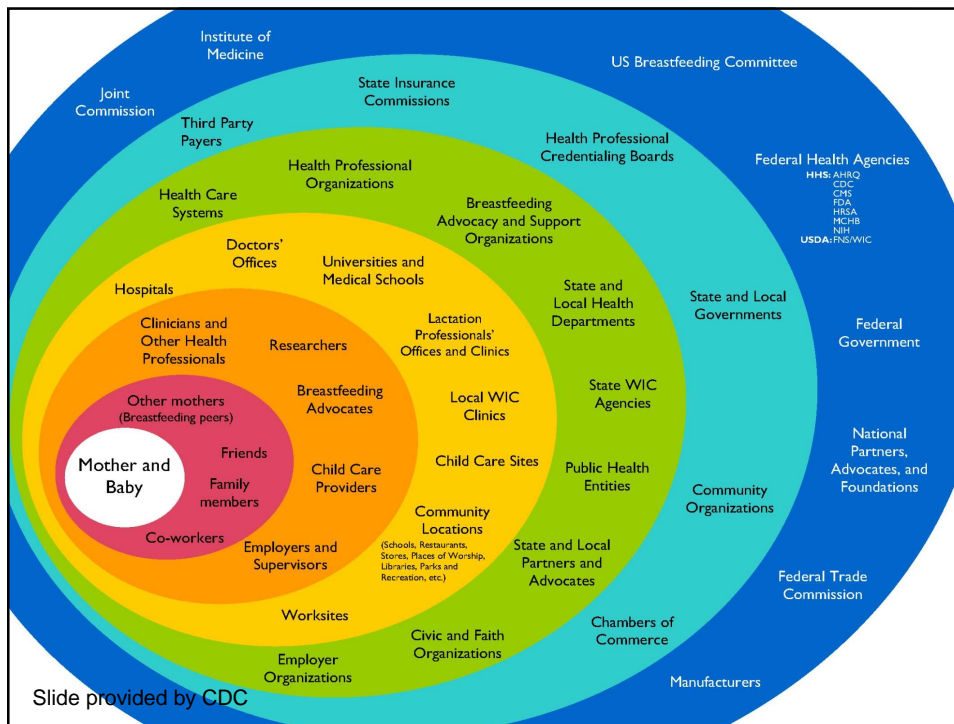
Excess Health Risks Associated with NOT Breastfeeding*

Outcome	Excess Risk* (%)
<i>Among preterm infants</i>	
Necrotizing enterocolitis	138
<i>Among mothers</i>	
Breast cancer (for each year of breastfeeding)	4
Ovarian Cancer	27

* Original article: Ip et al., Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries, 2007
Table adapted from Surgeon General's Call to Action to Support Breastfeeding

Circle of Support

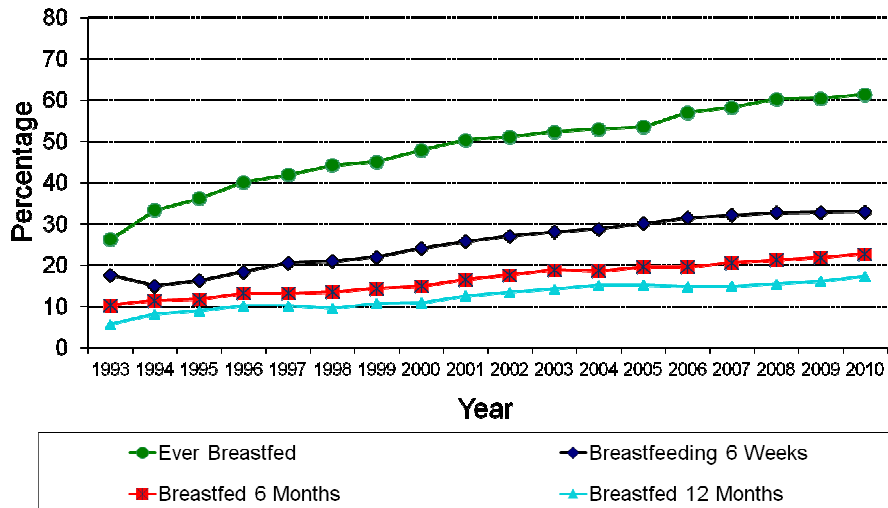




Collaboration is the key to success!

- NC Child Fatality Task Force
 - Perinatal Health Committee
- North Carolina Breastfeeding Coalition
- North Carolina Division of Public Health
- UNC-Carolina Global Breastfeeding Institute
- Healthy Start Foundation
- North Carolina Area Health Education Centers
- ...and many others!

Trends in the percentage of infants ever breastfed and breastfed at least 6 weeks, 6 & 12 months, NC WIC Program 1993-2010



Promoting, Protecting and Support Breastfeeding in NC Communities

N.C. Healthy Start Foundation

- Health and Wellness Trust Fund grant to NC Healthy Start Foundation
 - Campaign in Eastern North Carolina to improve initiation and duration among low income mothers
 - Focus on public awareness campaign to address cultural beliefs and obesity/breastfeeding relationship
 - TV Commercials May, Sept 2010
 - Pamphlets & materials distributed by WIC Program
 - NC WIC Program extended media campaign through May 2011

N.C. Healthy Start Foundation



"There are lots of reasons to breastfeed" clips:

Featuring mothers & father

<http://www.youtube.com/profile?user=HealthyStartNC#p/u/1/aZZ-0GILfj8>

Featuring mothers & grandmother

<http://www.youtube.com/watch?v=l6Bh23-XIX0>

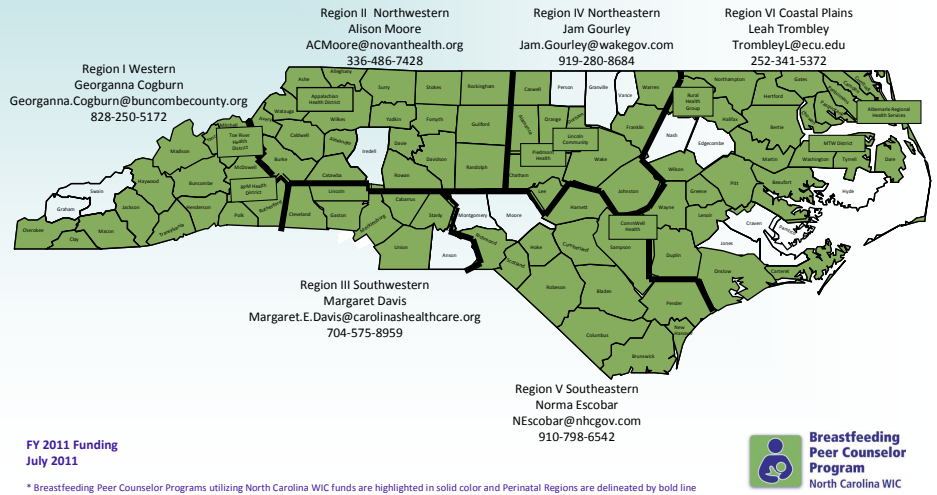
Public Awareness: Perinatal Regions V. & VI. WIC Breastfeeding Promotion and Support Mini-Grants



Perinatal Region IV Health Dept Lactation Rooms



North Carolina WIC Breastfeeding Peer Counselor Programs and Regional Breastfeeding Coordinators by Perinatal Region*



Promoting, Protecting and Support Breastfeeding in NC Health Care Systems



North Carolina Maternity Center
**Breastfeeding-Friendly
Designation**

N.C. Maternity Center Breastfeeding-Friendly Designation

- Voluntary
- There are no fees attached
- Recognition is awarded incrementally to help support a continuum of improvement
- It is a local program, promoting healthy competition to provide better care to NC citizens
- There are no site visits required

Levels of Attainment

- For each two steps implemented the maternity center will be designated one star
- A maximum of 5 stars

Promoting, Protecting and Support Breastfeeding in NC Workplaces

Laws and Regulations

North Carolina Legislation: 1993

- NC General Statute sec. 14-190.9
 - Notwithstanding any other provision of the law, a woman may breast feed in any public or private location where she is otherwise authorized to be, irrespective of whether the nipple of the mother's breast is uncovered during or incidental to the breast feeding.

Federal Health Care Reform

Patient Protection and Affordable Care Act (P.L. 111-148)

- Effective March 23, 2010
- Eligibility
 - Employees subject to the Fair Labor Standards Act (FLSA)
 - Covers nursing mothers until infant reaches 12 months of age
- Businesses with less than 50 employees must show undue hardship to avoid compliance

Federal Law-ACA

- Space Provision
 - No bathroom
 - Must be functional space conducive to expressing breast milk
 - If not a dedicated space, must be available when needed
 - Temporary space is permissible if:
 - Shielded from view
 - Free from intrusion

Federal Law-ACA

- Break Time Provisions
 - Employer must provide “reasonable break time”
 - Employers are not required to compensate for break time
 - If the employer already provides paid break time then the employee should be compensated
 - Recognition that frequency and duration of breaks will vary

N.C. Office of State Personnel (OSP)

- Work/Life Balance
 - Lactation Policy effective July 1, 2010
 - “It is the policy of North Carolina State Government to assist working mothers with the transition back to work following the **birth** of a child by providing lactation support. A lactation support program allows a nursing mother to express breast milk periodically during the work day”

OSP Lactation Policy

- State Agency Responsibilities
 - State agencies shall provide space, privacy and time for nursing mothers to express breast milk
 - Designated Space
 - Private
 - Not a restroom
 - Door that can be secured/locked
 - Adequate lighting and seating
 - Electrical outlet
 - Time
 - Employee may use paid break time to express milk
 - Reasonable efforts to allow employees to use paid leave or unpaid time if necessary

N.C. Division of Child Development

- Childcare manual and curriculum updated to include breastfeeding
- Child Care Rule-effective July 1, 2010
 - “The center shall provide seating and an electrical outlet, in a place other than a bathroom that is shielded from view from staff and the public which may be used by mothers while they are breastfeeding or expressing breast milk.”

Next Steps

- Address racial and ethnic disparities in breastfeeding rates
- Continue to support infrastructure for current programs
- Use trend data and geographical information system mapping to focus efforts
- Use the Blueprint and Surgeon General's Call to Action to Support Breastfeeding as our strategic planning guides

2012-13 Focus Areas

- Equity in workplace accommodations, policies
- Increasing the number of minority providers with lactation training
- Licensing and reimbursement for International Board Certified Lactation Consultants (IBCLC)
- Baby/Breastfeeding-Friendly healthcare system Infrastructure
- Donor milk-consumer protection
- Breastfeeding/SIDS messaging

Ruth Lawrence

“ Fear of instilling guilt is a poor reason to deprive a mother of an informed choice”

We all have an opportunity to promote, protect and support breastfeeding while respecting a mother’s feeding decision. Human milk is the optimal and **normal** food source for infants.