



2014 Breastfeeding Awareness Month Project Evaluation

Project Overview

August Breastfeeding Awareness Month was an area-specific marketing campaign promoting breastfeeding as a vital health activity. Collaborators included Healthiest Weight Florida, the Florida Women, Infants and Children (WIC) Program, the Bureau of Chronic Disease Prevention, Healthy Start and the Florida Childcare Food Program. The campaign, featured on the Healthiest Weight Florida website, provided materials that focused on awareness with four different target areas:

- 1) Mothers and Families
- 2) Employers
- 3) Childcare Facilities
- 4) Hospitals and Healthcare providers

The downloadable marketing materials addressed the general benefits of breastfeeding as well as a number of accommodations and policies that facilities can implement in order to become more breastfeeding friendly.

Objective

The campaign's objective was to increase knowledge and awareness of breastfeeding practices at home, in the workplace and with childcare and healthcare providers. In order to accomplish this, the campaign provided a variety of specialized materials, made available for download at www.HealthiestWeightFL.com/breastfeeding (Appendix 1).

Upon evaluation of the web analytics results, the following conclusions were made:

- The *Breastfeeding and Work: A Guide for Moms* resource had the largest reach in the breastfeeding community with a total of 10,722 downloads, 7,000 more downloads than any other material made available.
- Individuals were more interested in the subject of breastfeeding in the workplace than the other three areas of focus. The top three downloaded products were employer and workplace related materials. The second highest area of interest was childcare facilities.

- Site visitors accessed the webpage primarily through the activities page of www.HealthiestWeightFL.com rather than the direct URL of www.HealthiestWeightFL.com/breastfeeding, a result of the URL not being live upon launch of the campaign.
- Visitors downloaded the same material multiple times. On average there were roughly 10 downloads per page visit.

Web Trends Data

Most Downloaded Materials		
Title of Product	August Downloads	Total Downloads
Breastfeeding and Work: A Guide for Moms	9,998	10,722
Tools for Moms Returning to Work	2,915	3,233
Employee Rights Workplace Flyer	85	128
Feeding Tips for Breastfed Babies in Childcare Facilities Magnet	59	109

Webpage Outreach			
Time Frame	Total visits	Visits Via Activities Page	Visits Via URL Redirect
August 2014	949	772	177
August 2014 – November 2014	1297	1050	247

Appendix 1 – Website Screenshot

Return to the Florida Department of Health [#HealthiestWeightFL](#)

HealthiestWeight

Home Strategies **Activities** Resources Partners

1 out of 3 kids are now considered overweight or obese.

August Breastfeeding Awareness Month

A campaign to promote breastfeeding as a vital health activity.

Every woman's journey to motherhood is different, but one of the first decisions a new mom makes is how to feed her child. When you choose to breastfeed, you make an investment in your baby's future. Breastfeeding allows you to make the food that is perfect for your baby. Your milk gives your baby the healthy start that will last a lifetime.

There are many benefits to breastfeeding:

- Mothers that breastfeed their children have a better weight status than moms that use artificial baby milk. They also have a lower risk of developing Type 2 diabetes, breast and ovarian cancer and postpartum depression.
- Children that are breastfed typically score higher on IQ tests and are sick less often. They also have a lower risk for developing respiratory and gastrointestinal infections, asthma, obesity, Type 2 diabetes and SIDS (sudden infant death syndrome).
- Mothers of breastfed babies enjoy a special bond through the skin-to-skin contact that breastfeeding involves.
- A breastfeeding family can save approximately \$1,500 per year on formula costs.

AUGUST Breastfeeding Awareness Month

August is National Breastfeeding Awareness Month. Based on [2013 data](#) from the Centers for Disease Control and Prevention (CDC), only 71.8% of women in Florida have ever tried breastfeeding compared to the national average of 76.5%. The Department of Health offers a variety of programs, materials and resources to encourage breastfeeding friendly environments throughout the sunshine state.

- The Florida [WIC Program](#) offers [counseling](#) and breastfeeding [materials](#) to pregnant and breastfeeding clients. WIC also participates in the U.S. Department of Agriculture (USDA) breastfeeding peer counseling program.

- Florida's [Healthy Start Program](#) promotes healthy behaviors and provides [services](#) to pregnant women, women in between pregnancies, infants and children to obtain the support needed to reduce the risks for poor health outcomes.
- The Florida [Child Care Food Program](#) (CCFP) awards recognitions to [breastfeeding friendly](#) facilities and provides education to child care providers through workshops, online modules, and educational materials.
- The Florida Chronic Disease Prevention Program supports the [Baby-Friendly Hospital Initiative](#), a recognition established by Baby-Friendly USA promoting human milk as the best source of nourishment for new babies. Evidence shows several [specific practices in birth facilities](#) can significantly affect breastfeeding initiation, duration and exclusivity.

Everyone Can Play a Role in Promoting a Breastfeeding Friendly Florida

Mothers and Families

[Breastfeeding](#) is a normal part of mothers and babies being together. Breastfeeding isn't just about the milk though. Breastfeeding helps to build a bond that can last a lifetime.

Pediatricians recommend that babies be fed only breast milk for the first 6 months of life. Solid foods should be fed at about 6 months, and breastfeeding should continue until the baby is at least 1 year of age or older.

- Breastfeeding Your Baby [English](#) | [Español](#) | [Kreyòl](#)
- [Breastfeeding and Work: A Guide for Moms](#)
- [Tools for Moms Returning to Work](#)

Employers

Support for breastfeeding in the workplace includes several types of employee benefits and services including writing corporate policies to support breastfeeding women; teaching employees about breastfeeding; providing designated private space for breastfeeding or expressing milk; allowing flexible scheduling to support milk expression during work; giving mothers options for returning to work, such as teleworking, part-time work, and extended maternity leave; providing onsite or near-site child care; providing high-quality breast pumps and refrigerated storage; and offering or referring professional lactation management services and support.

- Get [recognized](#) as a breastfeeding friendly employer by the Florida Breastfeeding Coalition
- Breastfeeding When You're Going Back to Work or School [English](#) | [Español](#)
- [Employee Rights Workplace Flyer](#)

Childcare

With nearly 11 million American children in some form of child care each year, the role of the child care setting and provider is significant. Child care providers have a unique opportunity to normalize, promote, and encourage breastfeeding. Breastfeeding and returning to work or school can be overwhelming. Even mothers who successfully initiated breastfeeding tend to stop around the time they return to work or school and enroll their baby in child care.

The Florida [Child Care Food Program](#) (CCFP) recognizes participating facilities that are breastfeeding friendly. Facilities that meet CCFP's six standards and have a baby-friendly policy in place are eligible for [recognition](#). The CCFP and the [Florida Breastfeeding Coalition](#) (FBC) have collaborated to offer a similar recognition to facilities that do not participate in the CCFP. In recognition of Breastfeeding Awareness Month, the CCFP and FBC developed an online training module, [Creating a Breastfeeding Friendly Child Care Facility](#).

- [Feeding Tips for Breastfed Babies in Childcare Facilities Magnet](#)

- [Preventing Childhood Obesity in Early Care and Education Programs](#)

Hospitals and Health Care Professionals

Hospitals play a critical role in helping mothers who choose to breastfeed. Florida hospitals can support breastfeeding initiation and duration by following the evidence-based practices in the [Ten Steps to Successful Breastfeeding](#), endorsed and promoted by the American Academy of Pediatrics, the Centers for Disease Control and Prevention, the World Health Organization, UNICEF and others.

Health care professionals, especially those serving pregnant women, children and new moms, also play a significant role in supporting breastfeeding families. The [American Academy of Pediatrics](#), the [American Academy of Family Practice Physicians](#), and the [American Congress of Obstetricians and Gynecologists](#) (ACOG), have policy statements and clinical guidelines for providers to best support mothers and babies.

- See if you qualify for the Florida Breastfeeding Coalition's [Maternity Care Award](#) for baby-friendly hospitals

*Note: This page contains materials in the Portable Document Format (PDF). The free [Adobe Reader](#) may be required to view these files.



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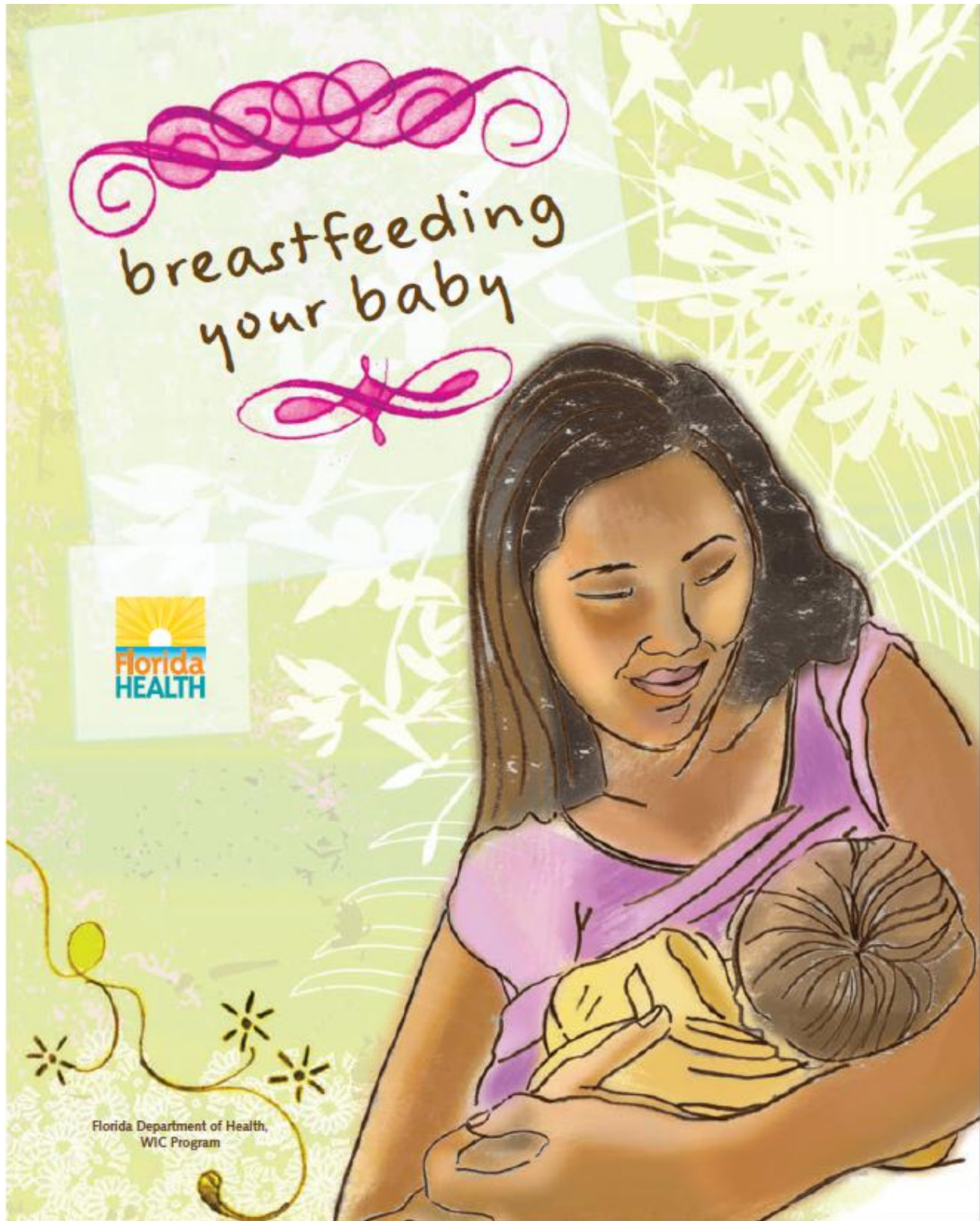
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Appendix 2 – Selected Resource Materials

Resource 1: Breastfeeding Your Baby (provided in English, Spanish and Creole)





babies are born to breastfeed

Breastfeeding is a normal part of mothers and babies being together. It is what nature intended for mothers and babies. Breastfeeding isn't just about the milk though. **Breastfeeding helps to build a bond that can last a lifetime!**

When the normal breastfeeding relationship does not take place, health problems can occur. Babies who are not breastfed and women who do not breastfeed can have more health problems. Here are just a few of the possible problems that can occur:

- **Infants who are not breastfed are at higher risk of obesity, diabetes, asthma, and ear infections. These infants also may have more learning problems. These problems can occur during childhood and/or adulthood.**
- **Mothers who don't breastfeed have higher stress levels and are more likely to be overweight. They also are at higher risk of breast, ovarian, and endometrial cancer; type 2 diabetes; osteoporosis; and rheumatoid arthritis.**

Pediatricians recommend that babies be fed only breast milk for the first 6 months of life. Solid foods should be fed at about 6 months and breastfeeding should continue until the baby is at least 1 year of age or older.

In the United States, it is recommended that women with HIV or AIDS not breastfeed, as the virus can be passed to their baby through breastmilk. If you do not know your HIV status, please ask your health care provider for an HIV test.

getting started with breastfeeding



To get breastfeeding off to a good start, learn all you can about breastfeeding during your pregnancy. That way you will have an idea of what to expect and what to do when your baby is born. It is very helpful to go to breastfeeding classes or breastfeeding support group meetings. These may be available at the WIC office in your area or at a local hospital. A breastfeeding support group, such as La Leche League, may also be available in your area. Ask your WIC breastfeeding educator or peer counselor for information.

Both before and after your baby's birth, avoid the use of soaps, lotions, and creams on your nipples and breasts. They are not good for your nipples. The strong odors may confuse your baby.

Check with your health care provider before taking any medications or drugs while you are pregnant or breastfeeding.

Avoid using pain medications during labor if possible. Pain medications given during labor can affect a baby's ability to breastfeed successfully.

Before your baby is born, talk to your doctor, midwife, or labor room nurse. Tell them that you want to be with your baby during the first hour or two after birth. Tell them that you want to hold your baby close to you, skin to skin, after the baby is born. You want to spend time gazing at each other. You also want to talk to your baby and stroke and touch your baby. Ask them not to bathe your baby or do other routine procedures until after your baby has been breastfed.

Breastfeeding mothers can eat just about anything they like in reasonable amounts including greens, beans, garlic, onions, broccoli, and pizza. Most babies are never bothered by what the mother eats. To keep themselves healthy, breastfeeding women should eat the same healthy foods that they ate while they were pregnant.

breastfeeding after birth

Breastfeeding in the first hour or two after birth is good for both you and your baby. Your baby's sucking reflex is strongest during this time. Also during this time, the baby is quiet and alert. This helps the baby to learn to breastfeed well. Early, uninterrupted breastfeeding also helps your baby have his or her first bowel movement faster. This decreases the chance of the baby becoming jaundiced (yellowed). Though your breasts won't feel full yet, they provide just the right amount of early milk (colostrum) for your baby.

Starting breastfeeding right away helps increase your "mothering hormones" called oxytocin and prolactin. Oxytocin levels are important for milk production.

Early skin-to-skin contact and breastfeeding help you to build a strong bond with your baby and establish breastfeeding. Welcoming your baby with skin-to-skin contact keeps your baby calmer, and helps breastfeeding get off to a good start. It makes for a more confident mother. Skin-to-skin contact triggers the baby's natural instincts to breastfeed. Give your baby frequent skin-to-skin contact both in the hospital and at home.

what is skin-to-skin contact?

Take off all of the baby's clothes except the diaper and head cap. The front of your baby's body is placed in an upright position on the front of the mother's bare chest between the mother's breasts. A blanket or gown is placed across your baby's back and the bed covers are pulled up over the mother and baby.



breastfeeding — the first few days



Babies need to be with their mothers to learn how to breastfeed well.

- **New mothers need to be with their babies to learn how to breastfeed!** The two of you are like one. You need each other. With

patience and practice, breastfeeding will get easier and faster. Babies know how to breastfeed, but breastfeeding is a learned skill for mothers. It takes at least a month to establish a good milk supply and for the mother to feel that she has the hang of it.

- **Have your baby "room-in" with you 24 hours a day at the hospital.** That way you will not miss any of your baby's small cues that he or she needs to breastfeed. Limit your visitors. Tell your family and friends ahead of time that you need lots of time alone with your baby to learn to breastfeed and to rest. Too many visitors tire you out. It can interfere with breastfeeding. This is a special time just for you and your baby.
- **Make sure you breastfeed during the night.** Breastfeeding during the night is very important for establishing a good milk supply. Newborns tend to group more of their breastfeedings between 9:00 in the evening and 3:00 in the morning. This is normal.
- **Tell the nurses not to give your baby artificial nipples.** This includes both bottle nipples and pacifiers. These can cause your baby to not breastfeed well and you to not make enough milk. Put a crib card in the bassinette that says "**no pacifiers or bottles and no formula please!**"
- **Tell the nurses not to give your baby formula unless medically necessary.**
- **Giving any formula greatly increases the chance of you and your baby not having success with breastfeeding.**
- **Giving any formula also affects your baby's immune system. It increases the risk of certain diseases, such as diabetes, diarrhea, and asthma.**

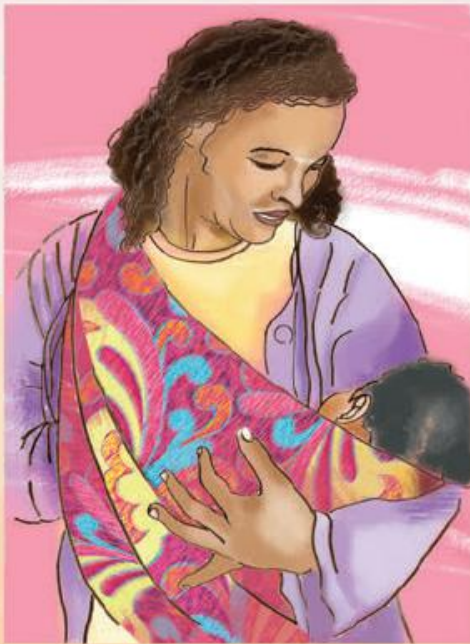


breastfeeding— the first few days *continued*



When you get home with your baby, accept all the help you can get. Have others cook meals, wash dishes, do laundry, etc. Limit visitors.

- **For the first 40 days or so after your baby is born**, you should breastfeed and take care of your baby, and let others take care of you! Stay at home as much as possible. Concentrate on learning to breastfeed. This period of time is referred to as “baby moon” time.
- **Keep your baby in a bassinette next to your bed and learn to breastfeed lying down.** Learning to breastfeed lying down means you get more time to rest! Babies are safer when they sleep in the same room as their mother sleeps in. When your baby is finished breastfeeding, place the baby in a bassinette next to your bed.
- **Make sure you always put your baby to sleep on his or her back.** Make sure everyone in your family knows to do this. Learn about “safer sleep” habits before you have your baby. You can learn about “safer sleep” at www.nichd.nih.gov/sids/.



- **Learn to wear your baby in a soft, cloth baby carrier or sling.** Babies who are “worn” by their mothers and other family members are happier and calmer, have less colic, and develop better. Avoid leaving your baby sitting in a car seat, baby seat, or baby swing for long periods of time. Babies need to be held in arms a lot! You cannot “spoil” your young baby.

After your “baby moon” period and your health care provider says it is okay to go out, plan to take your baby everywhere with you for the first several weeks. Breastfeeding babies are easy to take places.

latching-on

Calm your baby first by holding him or her close, skin to skin.

- **Place your baby not quite chest to chest, almost under your breasts, so that your baby comes up to the breast from slightly below and his or her eyes make contact with yours.**

- **Align your nipple towards the baby's nose.** Hold your breast between your thumb and first finger. Lift it up slightly. Keep your hand behind the darker skin around your nipple which is your areola.

- **Your baby's head is tilted back slightly.** Make sure your baby is well supported with no gaps between you and your baby. Pull baby's body in close with baby's chin touching you.

- **Move your baby toward your breast, lightly touching baby's chin and mouth with the breast.** Move his or her mouth away slightly. Repeat this until the baby's mouth is opened wide like a yawn and baby's tongue is down and forward.

- **Quickly draw the baby in and onto the breast.** You must bring the baby onto the breast quickly while the baby's mouth has the widest opening. The baby's chin and lower jaw touch the breast first. Make sure the baby's lower jaw takes in a good mouthful of breast. Make sure that the baby's lips are curled out—not sucked in.

- **Remember to bring your baby to the breast.** Do not plug the breast into baby's mouth.

- **For an excellent animated version of latch,** click on "Animated Latch" in the left column at www.breastfeedingmadesimple.com or click on the "Latch-On Video" at www.ameda.com.

- **If breastfeeding hurts,** remove the baby by putting your finger in the corner of the baby's mouth to break the suction. It should not hurt when the baby is latched-on correctly. Soreness is common, but not normal when beginning breastfeeding. A correct latch will prevent pain. You should feel strong tugging, but not persistent pain. Frequent breastfeeding of your baby does not cause sore nipples. Incorrect positioning and incorrect latch are the main causes of sore nipples.

- **Let your baby finish the first breast well.** When the baby lets go of the first breast, burp your baby, and then offer the other breast. Sometimes the baby will take just one breast at a feeding. That is okay. Sometimes your baby will take both breasts. Let your baby lead the way.

- **At the next feeding, start with the breast you finished with at the last feeding.**



how often and how long to breastfeed your baby

- **Let your baby feed as often and as long as he or she needs to.** This could be a 5-minute feeding or a feeding that is well over 30 minutes. Let your baby finish the first breast and come off on his or her own. Then offer the other breast. Babies may take one breast at a feeding or both. Let your baby decide.
- **Breastfeed the baby at the first signs of hunger.** Watch your baby for signs of hunger. Your baby may start to stretch, make little noises or grunts, suck on his or her lips or tongue, turn his or her head toward you, or put his or her hand up to the mouth. Crying is a late sign of hunger. Do not wait until the baby cries!
- **Milk supply is affected by how often milk is effectively removed from the breast** either by breastfeeding your baby or by expressing your milk. The more you breastfeed or express milk, the more milk you will make. Breast size has nothing to do with the amount of milk you can make.
- **Usually, 2 to 4 days after birth, your milk supply will greatly increase.** Your breasts will feel heavier and fuller. They may swell. This swelling goes away around 7 to 10 days postpartum. It is normal. You are not losing your milk. Mature breast milk looks thin and bluish, but it has everything your baby needs. It does not look like homogenized cow's milk!
- **Breastfeed your baby at least 10 to 12 times in 24 hours during the first month or so.** Newborns need to breastfeed very often. Their tummies are very tiny and your milk digests very quickly. You will have enough milk to feed your baby even if you cannot see it or feel it. Feedings do not follow any regular schedule. Babies often group (cluster) feedings together, particularly in the evening. They may seem to breastfeed on and off constantly during these cluster feedings. This is fine.
- **As babies grow and somewhere around the fifth week, feedings will become more spread out and regular.** Follow your baby's signals—not the clock.
- **You should breastfeed frequently and not give the baby formula (artificial baby milk).** Only use formula if there is a medical reason. Giving bottles or using pacifiers causes your body to make less milk. All of your baby's sucking should be at your breast.
- **If you have a sleepy baby, skin-to-skin contact** can encourage breastfeeding. See page 4 for a description of skin-to-skin contact.

how to tell if your baby is breastfeeding well

All babies have days when they breastfeed more often. It does not mean you are not making enough milk. Breastfeeding your baby as often as your baby shows signs of hunger will help your milk supply and help your baby have a good weight gain.

- **You should hear frequent swallowing or gulping sounds while breastfeeding.** There should not be any clicking or smacking sounds. Turn off the TV and radio, so you can listen closely to your baby's sounds.
- **Your baby should no longer shows signs of hunger after a breastfeeding.** The baby's body and hands relax for a short time. The baby has a full, satisfied expression after breastfeeding.
- **Your baby should not lose more than about 7 percent of his or her birth weight in the first 3 days after birth.** The baby should regain his or her birth weight by about 10 days after birth. After that, breastfed babies generally gain around 6 ounces a week for the first 4 months of life. Between 4 and 6 months, they average a weight gain of 4 to 5 ounces a week. Between 6 and 12 months, they may gain between 2 and 4 ounces a week.
- **Make sure your baby gets a weight check with the baby's health care provider within 5 days of discharge from the hospital.** You can also bring your baby to the WIC office for a weight check. Have another weight check at 2 weeks of age.

your baby's bowel movements

Your baby should be having at least 3 bowel movements (stools) every 24 hours after day 1. By day 4, your baby should also be having 6 or more very pale yellow urine, wet/heavy diapers a day. If your baby is not wetting at least 6 diapers in 24 hours, call your health care provider immediately.

Your baby's stools will change from dark black to green/brown to loose, seedy yellow as your milk supply increases. Your baby should have at least 3 to 4 stools a day that are each about the size of a quarter or larger. If your baby is not having bowel movements, call your baby's doctor and go see your breastfeeding educator.

Sometime between 4 and 6 weeks of age, stooling can vary greatly from several times a day to only once a week.

Call the breastfeeding educator or your peer counselor at the WIC office right away if you have concerns about your milk supply. Do **not** reach for infant formula (artificial baby milk) when you are feeling unsure of yourself.

If there are any problems with breastfeeding, it is important to get help early! If you wait too long to get help, it may make it harder to breastfeed. Contact your health care provider if you have any concerns about your baby's weight gain or health. Call your breastfeeding educator for help with breastfeeding.

breastfeeding positions

Here are some positions in which you can hold your baby while breastfeeding. Find a hold that works for you and your baby. Always make sure your baby takes in a good mouthful of breast, especially the underneath part of the darker skin around the nipple (areola).



Cradle hold

This is the most commonly used position. Hold your baby with his or her head on your forearm and with baby's body facing yours. Make sure the baby's head, shoulders, and hips are in a straight line and the baby's whole body should be in contact with yours.



Cross cradle or transitional hold

This is good for premature babies or babies who are having problems latching on. Hold your baby along the opposite arm from the breast you are using. Support baby's head with the palm of your hand at the base of his or her head. Do not touch the back of the baby's head.



Clutch hold or football hold

This is good for mothers who have had a cesarean birth or who have large breasts. Hold baby at your side. The baby is lying on his or her back, with his or her head at the level of your nipple. Support baby's head with the palm of your hand at the base of the baby's head.

Side-lying hold

This allows you to rest while baby breastfeeds. This position is also good for mothers who have had a cesarean birth. Lie on your side with baby facing you. Pull baby close and guide the baby's mouth to your nipple.



positions for
breastfeeding two
babies at the same
time—yes, you can fully
breastfeed twins and even triplets!

Combination cradle and clutch hold

The mother is sitting up straight. One baby is in the cradle hold. The other baby is in the clutch hold.



Double clutch hold

The mother is sitting up straight. Both babies are in the clutch hold. Some mothers use pillows or folded towels at their sides to support the babies.



WHAT TO AVOID:

Don't apply pressure to the back of the baby's head.
Don't allow baby's feet to push against a hard surface.
Don't leave open spaces between you and your baby.

preventing soreness

Soreness is common, but not normal. If you do get sore nipples, the most important thing to do is to **make sure the baby is latched on correctly!**

Other ways to help if you have sore nipples:

- Start feedings on the least sore side.
- For comfort, you can put crushed ice in a plastic bag (covered by a thin washcloth) on your nipple, for a couple of minutes, right before breastfeeding.
- If nipples are sore, bruised or cracked, apply a little bit of ultra-purified, anhydrous lanolin made just for breastfeeding mothers. You can usually find this at your local drug store.
- Call the breastfeeding educator at the WIC office for help right away if you remain sore, have cracks, or the soreness is getting worse. You need skilled help with learning how to position your baby better. You should keep breastfeeding—it is very important for your baby's health and well being.

uncomfortably full breasts



Some fullness is normal in the first weeks. However, if milk builds up in your breasts they may feel uncomfortably full, hard, or warm to the touch. This is called "engorgement." Your baby may have difficulty latching on and sucking if the breast is too full.

to prevent engorgement

- **Make sure your baby is correctly positioned at the breast.** It is important that your baby take in a good mouthful of breast, not just the end of the nipple.
- **Breastfeed at least 10 to 12 times a day.**
- **Make sure you hear your baby swallowing.**
- **Let the baby finish the first breast well, breastfeeding until that breast is well softened.** Then offer the second breast. Sometimes your baby will take one breast, sometimes both. Follow your baby's lead.

to relieve engorgement

If you are already engorged, follow the steps above that are used to prevent engorgement and also do the following:

- **For minor engorgement, before breastfeeding, put a warm washcloth on your breasts or take a warm shower to help your milk flow.** You could also immerse your breasts in a basin of warm water. Any heat applied to breasts should only be done for about 5 minutes or less.
- **Massage your breasts gently to release milk before feedings.** Hand-express some milk to soften-up the areola area. If your baby is unable to latch on and breastfeed effectively because of extreme breast engorgement, try expressing enough milk to soften the breast so baby can latch on.
- **You may need to fully drain the breasts once or twice during the period of engorgement by using an effective breast pump.** Pumping the breasts fully once or twice will help the milk flow so your baby can then latch-on and breastfeed well. If you are still in the hospital, ask to use a full-size electric breast pump. If you are home, call your WIC breastfeeding educator or peer counselor right away for information about breast pumps and what is available through your local WIC agency. Extreme engorgement needs to be treated as fast as possible. It is a breastfeeding emergency.
- **If the baby continues to not breastfeed well, use an electric breast pump 8 to 10 times in 24 hours.**
- **For more severe engorgement, cold ice packs applied to the breasts between feedings may help reduce swelling and relieve pain further.** Bags of frozen peas make excellent ice packs! Lie flat on your back and apply cold packs for 15 to 20 minutes at a time.
- **Call your WIC breastfeeding educator for help if the problem is not resolved within 24 hours.**



tender breast lump

If you notice a tender lump in one of your breasts, you may have a "plugged duct." The area around it may be red and sore and you may ache. This occurs when milk builds up a waxy "plug" in your breast and there is pressure on the area.

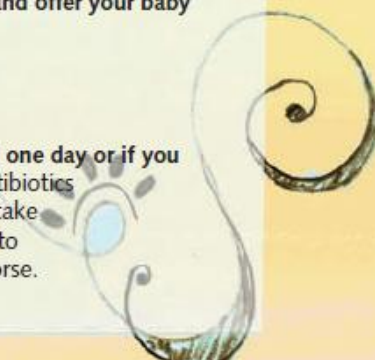
to prevent a plugged duct

- If you wear a bra, make sure it is not too tight. Underwire bras may contribute to plugged ducts.
- Do not use a too tight-fitting front baby carrier.
- Breastfeed at least 10 to 12 times a day, making sure the breast is well softened when the baby is finished. Massaging the breast in any lumpy areas while breastfeeding can help prevent plugs.
- Change your breastfeeding position often by using the football hold or the cross-cradle hold, lying down, etc.
- If you already have a plugged duct, take the above steps. Before feedings, put a warm washcloth on your breast and gently massage the area to loosen the plug. Offer this breast first and position your baby so his or her chin is closest to the sore spot. Within a few feedings, the plug should move toward and then out the nipple. It may look like thin spaghetti. Rest in bed.
- See your health care provider if the plug does not go away in 2 to 3 days or if you have a fever.
- Keep breastfeeding.

breast infection or inflammation

If one of your breasts is red and tender to touch and you feel like you have the flu, you may have a breast infection (mastitis). Your milk is not infected.

- Breastfeed more often.
- Put a warm wet washcloth on your breast before feedings and offer your baby the affected breast first.
- Gently massage the sore area while breastfeeding.
- Drink plenty of fluids. Rest in bed for 24 to 48 hours.
- See your health care provider if you feel achy for more than one day or if you have a fever. You may need an antibiotic. There are many antibiotics that your health care provider can give you that are okay to take while breastfeeding. Tell your health care provider you want to keep breastfeeding. Sudden weaning could make matters worse.





breastfeeding away from home

At first, new mothers may feel uncomfortable about breastfeeding in public. You will become more confident and comfortable as you gain experience. Most of the time, other people do not even notice you are breastfeeding because the baby is quiet and does not attract attention.

Here are some ideas to try:

- Breastfeed just before leaving home and right after you return home, if your outing is short.
- Breastfeed your baby in your parked car before leaving your car.
- Find a women's lounge or sitting area to breastfeed in.
- Turn your chair so you are facing slightly away from other people.
- Use a baby sling, breastfeeding cover, or blanket to cover your breast and your baby.



You can breastfeed your baby wherever and whenever you need to. According to Florida law, it is your right to breastfeed your baby wherever you are authorized to be. Breastfeeding is a normal part of being a mother.

you and your baby are born to breastfeed!



Breastfeeding is a learned art. It takes patience, practice, and commitment. In the first few weeks, while you are learning, you may feel frustrated at times. This is normal. It takes most mothers 4 to 6 weeks to get used to it. Remember that breastfeeding gradually gets easier, not harder. The investment of time and energy you make in the early weeks is worth it. You are investing in your health and your baby's health. In addition, you are building a bond that will last a lifetime.

where to get help

Local WIC office: They may have an International Board Certified Lactation Consultant (IBCLC) or breastfeeding educator on staff or may have a breastfeeding peer counseling program.

Local hospital: They may have an International Board Certified Lactation Consultant on staff.

La Leche League International: Trained volunteers provide one-on-one help to breastfeeding mothers on the phone and conduct monthly group support meetings. Call 1-800-LALECHE or Website www.lalecheleague.org

Breastfeeding Helpline: Call 1-800-994-9662 or Website www.womenshealth.gov/breastfeeding

For more information about the Florida WIC program: Call 1-800-342-3556 or Website www.FloridaWIC.org

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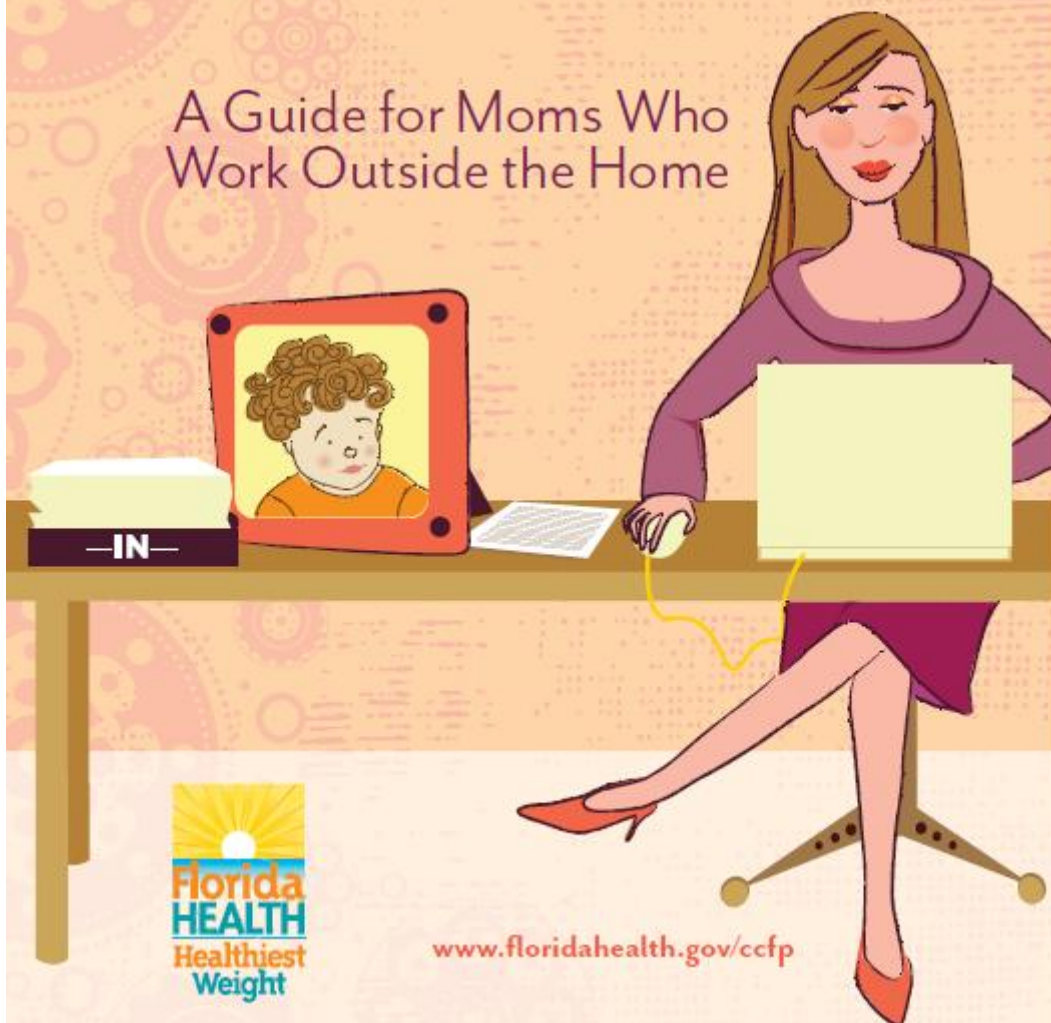
Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

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Breastfeeding & Work

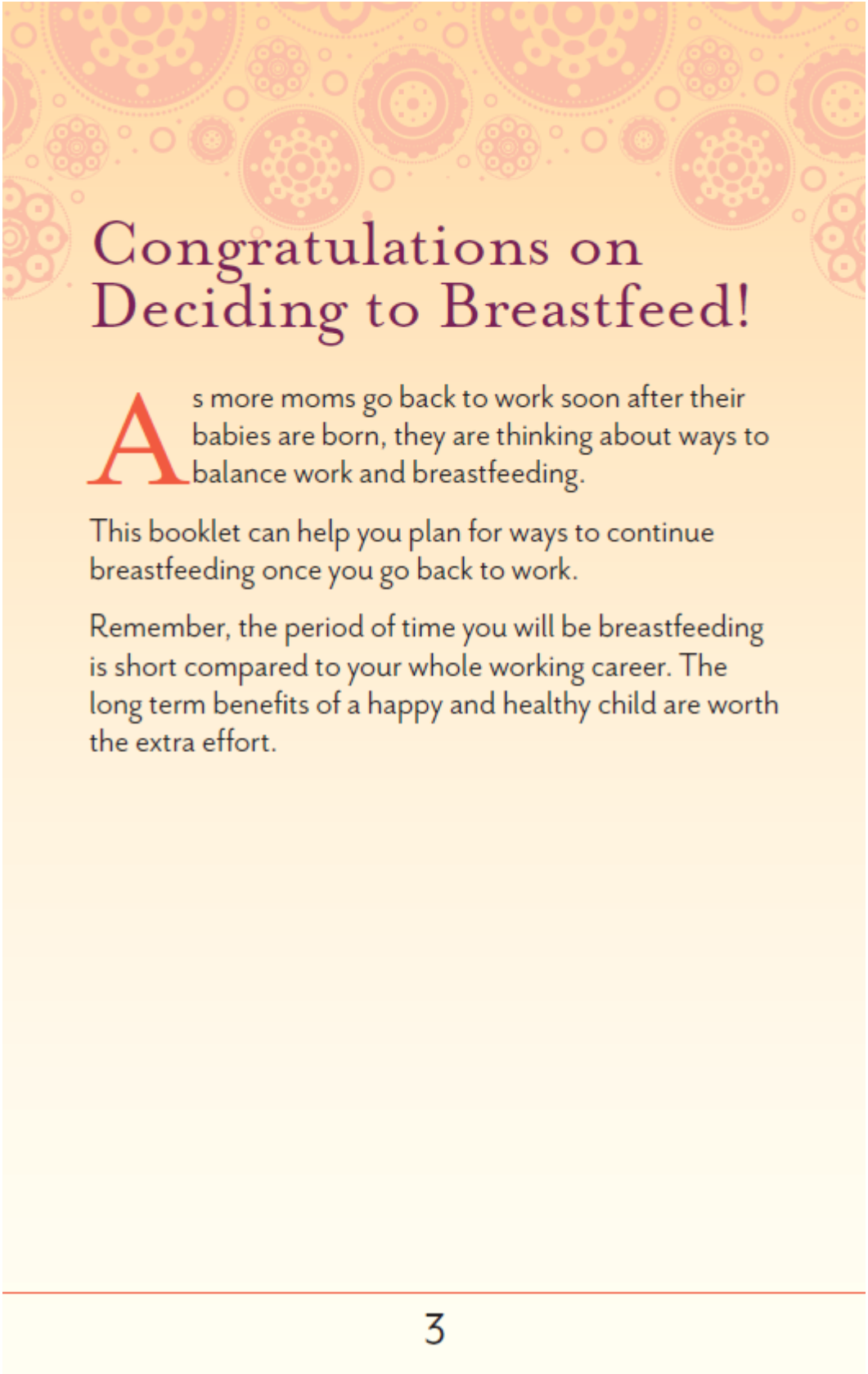
A Guide for Moms Who
Work Outside the Home





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Congratulations on Deciding to Breastfeed!

As more moms go back to work soon after their babies are born, they are thinking about ways to balance work and breastfeeding.

This booklet can help you plan for ways to continue breastfeeding once you go back to work.

Remember, the period of time you will be breastfeeding is short compared to your whole working career. The long term benefits of a happy and healthy child are worth the extra effort.

Facts About Breastfeeding

Exclusively breastfed babies...

- Don't get sick as often.
- Have fewer allergies.
- Have less chance of becoming overweight or obese.
- Have less chance of SIDS (Sudden Infant Death Syndrome).
- Have lower rates of asthma, diabetes, and cancer.

Moms who breastfeed...

- Feel a special closeness to their babies.
- Have a decreased risk of breast and ovarian cancer.
- Lose their pregnancy weight quicker.
- Save money in doctor and hospital visits.
- Save money and time purchasing and preparing formula bottles.



Planning During Your Pregnancy

While you are pregnant:

- Take time to learn about your company's policies concerning maternity leave and breastfeeding.
- Ask how long you can be out from work (with or without pay) after the baby is born.
- The older the baby is when you return to work, the less you will need to pump your milk during the day.
- Ask if you can come back to work beginning with a part-time schedule; or see if there is a job-sharing plan (this way you can gradually get used to being back).
- Look for times in your current work schedule that can be used for nursing or pumping breast milk.
- Talk to other breastfeeding working moms to see what worked best for them.
- Consider joining or creating a support group at work!



Talking to your employer

- Discuss your ideas and plans with your employer before you have your baby.
- Remind them of the long term benefits of breastfeeding compared to your short term needs:

Reduced sick time/personal leave for breastfeeding women because their infants are sick less often.

Lower healthcare costs for healthier breastfed infants.

Reduced staff turnover and loss of skilled workers after childbirth.

Higher job productivity, employee satisfaction, and morale.

Added recruitment incentive for women and enhanced reputation as a family friendly employer.

A healthier workforce for the future.

“It’s a win-win!”

During Your Maternity Leave

- Give yourself time to get to know your baby and how breastfeeding works. The more comfortable you feel with breastfeeding the easier it will be once you return to work.
- Nurse in different places so you become more comfortable nursing or expressing milk away from home.
- Keep track of times your baby usually wants to breastfeed so you can try to express milk or nurse about the same times while at work.
- Wait at least 3–4 weeks to give your baby a bottle of breast milk.
- Express your breast milk every time your baby takes a bottle to keep up your own supply.
- Practice having someone else besides just mom give the bottle.



Choosing a Pump

It is important to find a pump best suited to your needs. You can even hand express your milk without a pump. A hospital nurse, lactation consultant, or La Leche League leader can help you choose the best pump for you.

Types of pumps

- A large, rented or purchased electric pump is the most efficient, allowing you to express from both breasts at the same time, taking only about 15 minutes.
- A mini-electric/battery operated pump is less expensive and more portable, but only pumps one side at a time.
- Manual pumps come in many designs but only pump one side at a time.

Storing your milk

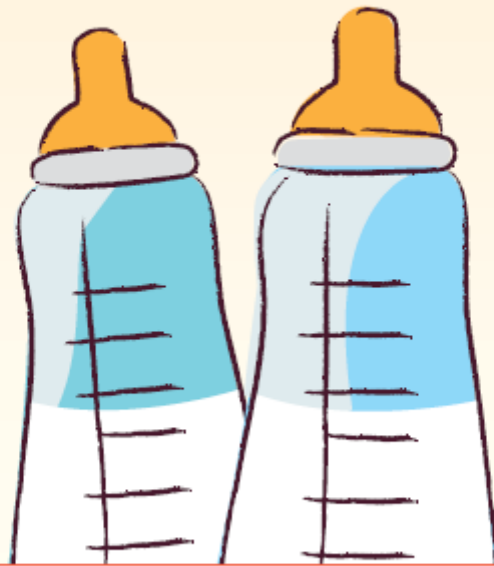
- You can keep bottles of milk in the employee refrigerator, a small cooler, ice chest, or thermos.
- Put the bottles in a container labeled with name, date, and time expressed.
- Store breast milk in small amounts (2-4 ounces).


Your milk may be stored at home:

- In a refrigerator at 39° for up to 8 days.
- In a freezer compartment with a separate door for up to 3–4 months.
- In a separate deep freezer at 0° for up to 6 months or longer.

Planning ahead for returning to work

- Start thinking about how you will continue to breastfeed when you return to work.
- If the baby will be at an onsite or nearby childcare center you may be able to nurse during the day.
- Identify a clean, private area with an electrical outlet and comfortable chair where you will be able to nurse or express your milk.






Returning to Work

- Try to go back to work mid-week, or late in the week and keep a light schedule if possible. This will make you less tired and less worried about being away from your baby.
- Get up a little early so you can nurse the baby, then the baby will be happy while you get both of you ready for the day. Also try to nurse again before you leave the baby with your child care provider and when you pick him/her up.
- Express your milk at least twice a day (once in the morning and once in the afternoon).
- Wear 2-piece outfits to make pumping/nursing easier.
- If you leak milk, try to express more often, use nursing pads, or press gently against your nipples to stop the leak.
- Keep pictures of your baby, your baby's blanket, or a toy nearby to help you relax while you express your milk.
- Drink enough non-alcoholic fluids, like water and juice, during the day. Limit caffeinated drinks to 2 drinks per day.



Having a new family member will change many areas of your life; learning to breastfeed and work is just one of those changes. Once a routine is set up it will get easier—don't be too hard on yourself! Give yourself time to rest and adapt to your new lifestyle. Have other family members or friends help with meals, cleaning the house, or even doing laundry. Cut down on activities that don't need to be done—you and your baby are most important.



Resources

- Your local WIC office: www.floridawic.org
- US Breastfeeding Committee: www.usbreasfeeding.org
- Florida Breastfeeding Coalition: www.FLbreasfeeding.org
- La Leche League: 1-800-LA-LECHE, www.llli.org
- Office on Women's Health:
www.womenshealth.gov/breastfeeding/

Feeding Tips for Breastfed Babies in Child Care Facilities



www.floridahealth.gov/ccfp/ • www.flbreastfeeding.org • HealthiestWeightfl.com/bf

Handling Breast Milk

- Store milk in small amounts (1–4 ounces) in back of refrigerator or freezer, labeled with baby's name and date collected
- Thaw milk in refrigerator or in a bowl of warm water
- Warm milk by using warm—not hot—water (never microwave)
- Breast milk may separate; swirl gently to mix (never shake)
- Use oldest milk first; never refreeze thawed milk
- Breast milk is food. No special precautions are needed.

Breast Milk Freezer Storage

- Freezer inside refrigerator:
5° F
for 2 weeks
- Freezer with separate door:
0° F
for 3–6 months
- Deep Freezer:
–4° F
for 6–12 months

Breast Milk Refrigerator Storage

- Refrigerator, thawed milk:
32–39° F
for 24 hours
- Refrigerator, fresh milk:
32–39° F
for 48 hours

Florida HEALTH Healthiest Weight

Florida Breastfeeding Coalition, Inc.

Feeding the Breastfed Baby

- Breast milk is easily digested, so babies may eat more often (every 1.5–3 hours)
- Feed small amounts of milk, adding more as needed
- Watch for hunger cues: turning head from side to side, sucking, hand movements toward face, smacking lips
- Crying is a late hunger cue
- Milk remaining in the bottle must be discarded (or returned home) within one hour after serving the infant
- Feed slowly with frequent pauses
- Slow flow nipples are recommended
- Never put solid food (cereal) in a bottle

Sources: Florida Administrative Code, Child Care Standards, 2013, and the Academy of Breastfeeding Medicine, 2010

I'm a working/ pumping Mom.

PLEASE RETURN AT:

post a note here with time

I'll be finished
pumping milk for
my baby at that
time. Thanks!



EMPLOYEE RIGHTS

UNDER THE FAIR LABOR STANDARDS ACT

BREASTFEEDING SUPPORT IS THE LAW

BREAK TIMES

An employer shall provide a reasonable break time, as needed, for an employee to express breast milk for her nursing child up to one year of age.

PRIVATE SPACE

The employer shall provide a place, other than a bathroom, that is shielded from view and free from intrusion from the public and co-workers, for the employee to express breast milk.

COMPENSATION

An employer need not provide additional compensated work time for this purpose; however, an employee may use designated paid break time or request paid or unpaid leave if such paid break time is not sufficient.

ADDITIONAL INFORMATION

This law applies to employers with 50 or more employees and is not applicable if the law's requirements would impose an undue hardship on the employer's business.



For more information, contact your supervisor or human resources office.