

The Time is Right: Seize the Moment

With the National Initiative – Supporting Nursing Moms at Work

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Objectives:

1. Identify at least two federal initiatives that affect breastfeeding policy at the national level.
2. Name at least two initiatives addressing systems level change within the health care system.
3. Identify at least two strategies to support nursing moms at work.

Federal Initiatives

- **National Prevention Strategy**...established under the Affordable Care Act requirements as a collaboration of around 20 federal agencies. Breastfeeding figures *prominently* in the nation's strategy to prevent illness and disease and promote health and wellness for Americans. Website: www.surgeongeneral.gov/initiatives/prevention/strategy
- **Let's Move**...has recommendations for promoting and supporting breastfeeding families in the nation's anti-obesity initiative.
- **IOM Report on Childhood Obesity Prevention**...includes significant breastfeeding recommendations in their "Healthy Eating," report. Website: www.iom.edu/Reports/2009/Local-Government-Actions-to-Prevent-Childhood-Obesity/Action-Steps-Local-Government-Actions-to-Prevent-Childhood-Obesity.aspx?page=2
- **Surgeon General's Call to Action to Support Breastfeeding** ...launched by U.S. Surgeon General Regina Benjamin in 2011. The CTA is the roadmap for public health officials and governments to use in establishing priorities for maternal and infant health. *Action Guides* are directed to health providers and other key groups. Website: www.surgeongeneral.gov/library/calls/breastfeeding/index.html

- **CDC Guide to Strategies to Support Breastfeeding Mothers and Babies.** This booklet focuses on evidence-based interventions that have been clearly shown in the research to make an impact on breastfeeding rates. These intervention areas include:
 - Maternity care practices
 - Professional education of physicians, nurses, and other providers
 - Access to professional support from IBCLCs and trained lactation experts
 - Peer support programs
 - Workplace support for breastfeeding employees
 - Support for breastfeeding in early care and education
 - Access to breastfeeding education and information
 - Social marketing
 - Reducing marketing of infant formula

Website: www.cdc.gov/breastfeeding

- In response to breastfeeding being at the national policy forefront, a number of governmental initiatives are in place.
 - **It's Only Natural Campaign...**HHS African American campaign. The campaign includes educational materials, videos, teaching resources for educators, and media resources such as public service announcements. Available at: <http://womenshealth.gov/itsonlynatural/>
 - **USDA WIC Program...**peer counseling program resources available for free download at: <http://lovingsupport.nal.usda.gov/content/instructional-tools-and-support-materials>
 - **CDC...**has been a major influence driving many of the national governmental changes regarding breastfeeding. www.cdc.gov/breastfeeding
- Whenever government sets priorities for health as breastfeeding has not become, this in turn is a powerful influence in driving systems level changes.

Health Care Systems

HOSPITALS – What we Know

- National research shows that **85%** of women today *want* to breastfeed and intend to for at least 3 months, and 77% actually do begin breastfeeding. However, only **32.4%** actually meet their goal. [Cria 2012]
- Mothers who are not exposed to any “baby friendly” maternity care practices are 13 TIMES more likely to wean their baby early compared to mothers who deliver in a hospital that has at least some BFHI standards. [DiGirolamo 2008]
- Over half of all breastfeeding moms say their baby’s first supplement as given in the hospital. (Grummer-Strawn 2008). Reasons cited for early discontinuation...problems with the latch, perceived low milk production, baby is not gaining weight well, and pain.
- A chief reason for weaning at any age is the perception that the baby is not satisfied by the mother’s milk. Over 55% of women say they weaned because they did not think their baby was making enough. [Li 2008]

- CDC data collected as part of the biannual mPINC Survey shows that maternity care practices are finally beginning to improve in the U.S. After several years of failing scores and little improvement, the 2013 scores showed that the national average has jumped to a national score of 75. Website: www.cdc.gov/breastfeeding/data/mpinc/index.htm
 - Florida’s mPINC score for 2013: **78**, with a ranking of 18 in the country.
 - Strengths: availability of prenatal instruction; documenting mothers’ feeding decisions
 - Areas for improvement: appropriate use of breastfeeding supplements (only 28% of facilities adhere to standard clinical practice guidelines against routine supplementation); inclusion of model breastfeeding policy elements; provision of hospital discharge planning support (only 29% of facilities provide appropriate discharge support); initiation of skin-to-skin care.

www.cdc.gov/breastfeeding/pdf/mpinc/states/2013/floridampinc13_508tagged.pdf
- CDC “2014 Breastfeeding Report Card” provides additional data related to state-by-state breastfeeding rates and practices. Website: www.cdc.gov/breastfeeding/pdf/2014breastfeedingreportcard.pdf

Initiatives that Make a Difference

- **Baby-Friendly Hospital Initiative**...recognition program for hospitals that implement UNICEF’s *Ten Steps to Successful Breastfeeding*. Website: <http://www.unicef.org/newsline/tenstps.htm>
 - In the U.S., Baby-Friendly USA is the administrator of the Baby-Friendly Hospital Initiative. Website: www.babyfriendlyusa.org
 - 247 hospitals and birthing centers in 46 states and territories have currently achieved BFHI designation (11.52% of all babies are now born in baby-friendly facilities...up from just 2.9% in 2007 and exceeding the Healthy People 2020 goal of 8.1%)
 - Over 600 are working towards baby-friendly status
- **EMPower Breastfeeding Initiative** – will support 100 hospitals across the country to become BFHI. Collaborative includes Abt Associates, Carolina Global Breastfeeding Institute, Center for Public Health Quality, and Baby-Friendly USA.
(Former CDC/NICHQ “Best Fed Beginnings” project sponsored by CDC provided support to 89 hospitals in 29 U.S. states to become baby-friendly. Website: <http://breastfeeding.nichq.org/Projects/Best%20Fed%20Beginnings/Overview.aspx>)
- **CHAMPS** – Communities and Hospitals Advancing Maternity Practices...funded by W.K. Kellogg Foundation and targeting underserved areas of Mississippi, New Orleans, and Southern Texas. FREE webinar series for hospitals on practices that move toward BFHI.
www.champsbreastfeed.org
- **Baby Steps to BFHI**...programs that recognize hospitals that are on the path toward becoming “baby friendly.” Examples:
 - Colorado Can-Do 5
 - Texas 10-Step
 - North Carolina 5-Star Program (star for every 2 steps completed)
 - California – issues annual report of hospital performance

- **The Joint Commission**...establishes national standardized performance measuring systems to assess care in specific focus areas. The new “Perinatal Care Core Measure Set” now requires all maternity hospitals with >1,100 deliveries/year to begin reporting as of January 1,2014 their rates of exclusive breast milk feeding as a component of the core measure set. This core measure set supports the new Healthy People 2020 goal to reduce the proportion of newborns receiving formula supplementation within the first 2 days of life. Website: www.jointcommission.org/perinatal_care/
- **The U.S. Breastfeeding Committee** provides guidance for hospitals at: www.usbreastfeeding.org/Portals/0/Coalitions/2010-NCSBC/BTT-Handouts/BTT-29-Handout.pdf
- **The Joint Commission’s “Speak Up” campaign** directed to consumers also now includes materials on breastfeeding, urging new moms to speak up about their needs for support. Website: www.jointcommission.org/speakup_breastfeeding/
- **IBLCE/ILCA Hospital Recognition**...nearly 300 hospitals and maternity services from 9 countries have achieved the recognition and are listed in the online directory at www.ibclccare.org. The IBCLC Care award program has now been extended to private clinics, health departments, and other community organizations that staff lactation consultants.
- **Ban the Bags**...currently 2 states (Rhode Island and Massachusetts) have gone completely bag-free. Nationally, the mPINC survey found that 54% of hospitals currently give away discharge bags containing formula samples; this is down from 72% just 4 years earlier, and 65% in 2009.

PRIMARY CARE

- Numerous studies show that health provider support of breastfeeding is critical. One study found that when physicians talk about breastfeeding during the prenatal period with mothers who are also receiving information from WIC, the %s of mothers initiating breastfeeding jumps from 55% to 75%.
- Another study found that 87% of women initiated breastfeeding, 75% were still breastfeeding at 2 weeks, and 55% continued to 12 weeks when they received clinical encouragement and support. Mothers who received support were much less likely to have weaned at 12 weeks. [Taveras 2003]
- However, prenatal discussions are not the norm. A 2013 study in *Obstetrics & Gynecology* found that physicians are NOT talking about breastfeeding, especially during the critical prenatal period when mothers are formulating their infant feeding decisions. Only 29% of prenatal care providers in this study mentioned breastfeeding, and the average amount of time taken was 39 seconds! [Demirci 2013]
- There are many opportunities for health provider support at crucial decision-making points of mothers. It begins with staff education and training to assure that everyone is on the same page. Intervention points include:
 - Prenatal period – when mothers are making their initial decision. Studies show that the earlier the mother makes her decision to breastfeed, the more likely it is she will follow through with that decision. Prenatal strategies include:

- Helping moms make an informed decision...not just talking about the benefits of breastfeeding, but showing her how to work it into her life.
- Preparing moms for the hospital experience
- Showing moms where to get help and making appropriate referrals
- After birth clinicians can follow evidence-based practices and educate moms about the importance of skin-to-skin contact, exclusive breastfeeding without supplements, ways to know she is making enough milk, and how to get help if things do not go as planned.
- After the early days, clinicians can connect mothers to local resources and support, and help them access support when returning to work.
- Mothers can also be taught about normal infant development so they better understand why their infant fusses and cries, how to tell true feeding cues, and why infants sleep and awaken.
Resource: Secrets of Baby Behavior. Information at www.secretsofbabybehavior.com and downloadable training resources at WIC Works at:
http://www.nal.usda.gov/wicworks/Sharing_Center/gallery/FitWICBaby.htm

Resources for Clinicians:

- Northeastern University – Free 3-hour online CME approved course meeting requirements of BFHI for physician training. Website: <http://www.northeastern.edu/breastfeedingcme>
- Academy of Breastfeeding Medicine – “What Every Physician Needs to Know About Breastfeeding” and clinical protocols. Website: www.bfmed.org
- New York DOH Toolkit – “Breastfeeding Information for Health Care Providers” www.health.ny.gov/prevention/nutrition/wic/breastfeeding/for_hcp.htm
- MomDocFamily program provides mentorship and support to mothers in medicine...over 400 physicians of many specialties from several states. <http://biomed.brown.edu/owims/MomDocFamily>
- Position papers for medical and professional organizations
 - American Public Health Association NEW position statement: www.apha.org/advocacy/policy/policysearch/default.htm?id=1448
 - ACOG: www.acog.org/About_ACOG/ACOG_Departments/Health_Care_for_Underserved_Women/Breastfeeding_2
 - AAFP: www.aafp.org/about/policies/all/breastfeeding-support.html
 - AAP: <http://pediatrics.aappublications.org/content/early/2012/02/22/peds.2011-3552>
 - AWHONN: www.awhonn.org/awhonn/content.do?name=07_PressRoom/07_PositionStatements.htm (Just released in 2015)

WIC

- Nationally, the Women, Infants and Children Program serves 8 million participants. <http://www.fns.usda.gov/pd/26wifypart.htm>. Florida serves about ½ million of those participants.
- WIC serves over 50% of all infants born in the U.S.
- WIC has established breastfeeding as a major priority, offering special food packages with extra foods for mothers and babies who are breastfeeding. In many states, WIC is also one of the major providers of breastfeeding education and support, with peer counselors, breast pumps, and other resources.
- When health providers and hospitals work WITH WIC as partners, we see the greatest successes!
- Texas WIC “Every Ounce Counts” campaign: www.breastmilkcounts.com/our-new-campaign.html with a smart phone app for providers.
- Peer Counseling initiative funded through \$60 million budget allotment. National WIC peer counseling program includes training for managers and peer counselors downloaded at WIC Works website at: <http://lovingsupport.nal.usda.gov/content/instructional-tools-and-support-materials>

Employment

What We Know

- Ample research shows the powerful impact that employment has on a mother’s ability to continue breastfeeding. Many women choose not to begin breastfeeding at all, or wean shortly before returning to work. One study found that among breastfeeding women who do continue until they return to work, 80% have weaned by the end of their first month back at work. [Cardenas 2005]
- What mothers need most to succeed with breastfeeding after returning to work: private space, flexible time, and support from supervisors and coworkers.
- Good news: businesses also win with breastfeeding support services! Bottom-line benefits include lower absenteeism rates, lower turnover rates, lower health care costs, and improved productivity and morale when comprehensive lactation programs are in place. [HHS MCHB 2008]
- Nationally, 34% of businesses currently provide lactation rooms and only 8% of businesses offer lactation services that include education and access to breastfeeding consultants. [SHRM 2013]
- If the business is using existing space that does not comply with the Americans with Disabilities Act of 1990, they must nevertheless accommodate all women in compliance with the ACA. New space built into the facility must be ADA compliant.

Initiatives:

- **Supporting Nursing Moms at Work: Employer Solutions.** HHS Office on Women’s Health online resources specifically for employers of hourly workers to launch in late Spring 2014, including a searchable online resource with more than 200 businesses in 29 states and representing all 22 major industry sectors. The website provides best practice examples of worksite support, hundreds of photos, and 29 short videos featuring some of the most outstanding examples of support in a variety of difficult environments. The website also includes two online toolkits focused on health care organizations and K-12 schools and universities. Website: www.womenshealth.gov/breastfeeding/employer-solutions/
- **Supporting Nursing Moms at Work: Employer Solutions PRESENTATION PLATFORM**...an innovative visual learning “platform” of hundreds of PowerPoint™ presentation slides and images that can be used to educate mothers, employers, or for training colleagues. Available as a free download at the United States Breastfeeding Committee website at: www.usbreastfeeding.org/SNMW-platform
- **Office of Personnel Management (OPM)**...provides oversight to employees working for Federal agencies. Guidance is now available at: www.opm.gov/policy-data-oversight/worklife/reference-materials/nursing-mother-guide.pdf
- **The Business Case for Breastfeeding**, published by the HHS Health Resources and Services Administration’s Maternal and Child Health Bureau. The toolkit includes a variety of resources for a diverse group of audiences, including decision-makers, HR directors, employees, and breastfeeding advocates. Although the kit is no longer available, downloadable PDF documents of the pieces are available at: <http://mchb.hrsa.gov/pregnancyandbeyond/breastfeeding/>
- **New York “Making it Work” Toolkit** – provides online resources for employers, moms, and family members. The toolkit was based on research around the state of New York with women and their employers, and was pilot tested with the target audience groups. Available at: www.breastfeedingpartners.org/index.php?option=com_content&view=article&id=164&Itemid=411
- **Child care resources** –
 - New York Breastfeeding-Friendly Childcare – recognizes child care centers and home providers who follow recommended practices to support breastfeeding families. <https://www.health.ny.gov/prevention/nutrition/cacfp/breastfeedingspon.htm>
 - Indiana Perinatal Network Child Care Campaign at: www.indianaperinatal.org/?page=BF_Childcare
 - Wisconsin toolkit at: Wisconsin toolkit at www.dhs.wisconsin.gov/publications/P0/P00022.pdf

Legislation and Policy**What we Know**

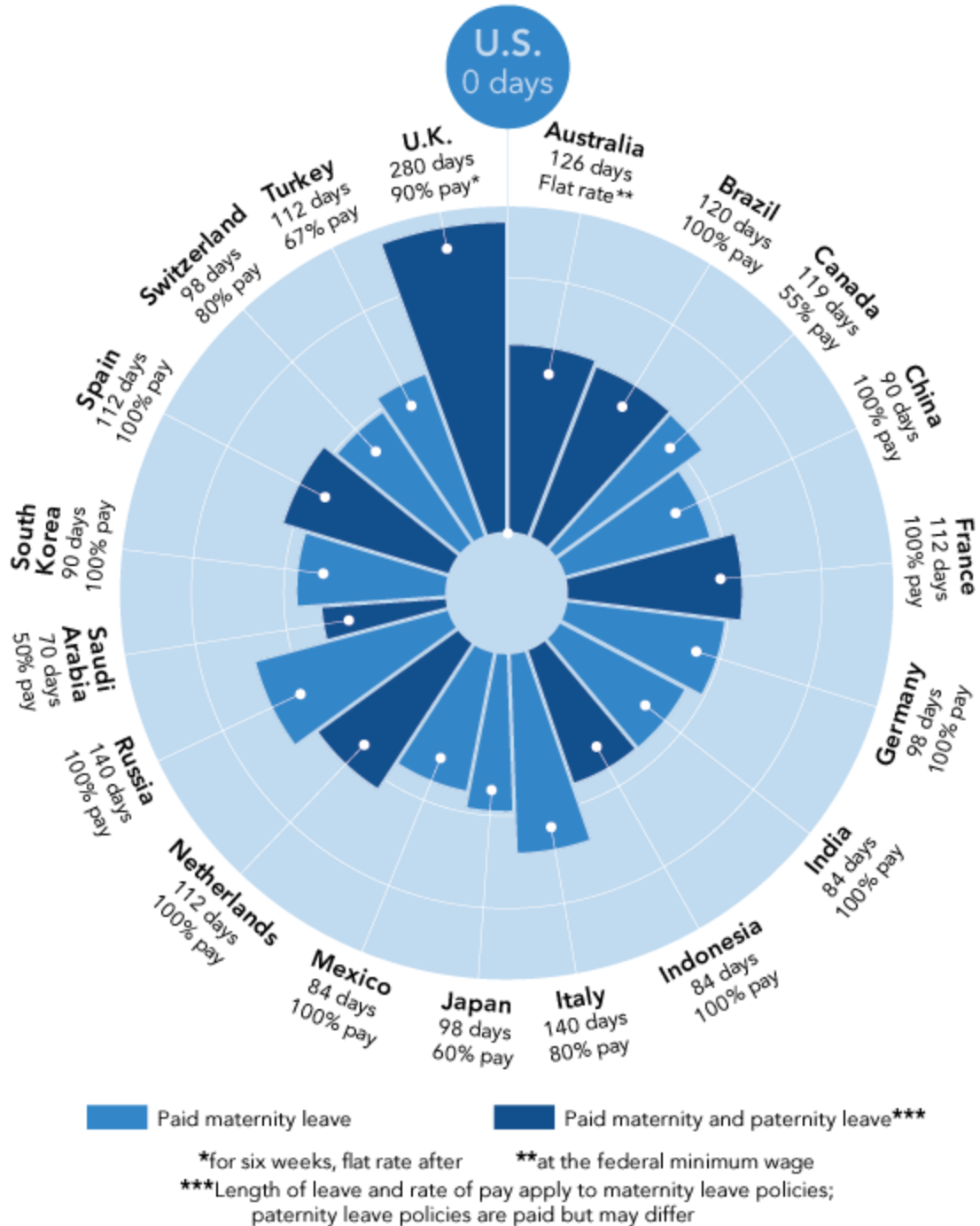
- Legislation truly *does* drive policy at the highest levels...and policy changes do drive systems changes at the grassroots level.

Significant Legislation

- **Affordable Care Act** – has two pivotal components that will change the way breastfeeding mothers are supported in this country.
 - Section 7 amends the Fair Labor Standards Act, requiring employers of hourly workers to provide reasonable time and private space *that is not a bathroom* for breastfeeding women to express milk at work. Although 24 U.S. states currently provide their own state legislation supporting working mothers (including New York) this law is pivotal because it provides the *minimum standards* required to support nursing moms. [Language of the law and resources are available at: www.usbreastfeeding.org]
 - **U.S. Department of Labor** resources include Fact Sheet #73, with guidance for businesses on implementing the ACA provisions, and a downloadable business card for mothers at: <http://www.dol.gov/whd/nursingmothers>
 - **Women’s Preventive Services** section of the ACA requires insurance companies to cover breastfeeding counseling and equipment for nursing moms without a copay.
 - USBC has developed the “Model Policy in cooperation with the National Breastfeeding Center, with guidance for insurance companies. Available at: <http://www.usbreastfeeding.org/LegislationPolicy/ExistingLegislation/ModelPolicyPayerCoverage/tabid/344/Default.aspx>
 - The Office on Women’s Health provides an infographic for moms to help guide them in their rights under the ACA at: www.womenshealth.gov/news/highlights/aca-infographic.html
 - The National Breastfeeding Center has issued a national SCORE CARD to rate insurance companies in how well they comply with the ACA in covering lactation benefits for new moms. www.nbfcenter.com/PayerScorecard.html

Paid Parental Leave: U.S. vs. The World

The U.S. joins Lesotho, Swaziland and Papua New Guinea as the only countries that do not mandate paid maternity leave. Most countries ensure at least three months of paid leave for new mothers, and many give fathers benefits too.



Source: International Labour Organization

THE HUFFINGTON POST

Challenges and Opportunities

New Moms

- Today's mothers are more educated about breastfeeding than any generation before.
- Research shows that 98% of new mothers trust the advice they receive from blogs; 86% trust information they read on Facebook™, and 85% trust what they see on Pinterest™ or Twitter™ (Collins 2012).
- *Mothers* are 61% more likely to use Pinterest™ than the average American (Nielsen 2012). Pinterest™, which only began in 2010, is now the 3rd largest social networking venue behind Facebook™ and Twitter™.
- Mothers are also increasingly turning to phone apps to help with parenting and breastfeeding. 65% of mothers navigate their lives through their smart phone (Warzel 2012).
- African American women ages 18-35 are 72% more likely than the average US adult to publish a blog or express their preferences on social media.
- Baby Cafés offer women the opportunity for face-to-face support and are increasing in popularity among new mothers.

The Tipping Point

- A “tipping point” is: “the point at which a series of small changes or incidents becomes significant enough to cause a larger, more important change.”
[www.google.com/#q=definition+of+%22tipping+point%22]
- Consider the evidence:
 - Research studies continue to mount with evidence of the importance of breastfeeding.
 - Legislation and policy at the national level (and accompanying funding for breastfeeding initiatives) have set breastfeeding as a national priority.
 - Hospitals and health systems are making positive changes.
 - HR directors are implementing lactation programs.
 - Community breastfeeding networks have expanded.
 - Media...breastfeeding is now a HOT TOPIC!
 - Breastfeeding rates have never been higher...
 - ...and Infant Mortality rates have started going DOWN for the first time in history!! (no coincidence!) www.cdc.gov/breastfeeding/resources/breastfeeding-trends.htm
- Momentum of the tipping point continues to build.

Much Work Remains

- Equity. We must continue to address the gap between those who HAVE and those who have NOT so that ALL mothers will have equal access to information and support.
- R.O.S.E. (Reaching Our Sisters Everywhere) is one group formed to help address disparities in breastfeeding. www.breastfeedingrose.org/

- WK Kellogg Foundation providing millions of dollars in funding for breastfeeding initiatives across the country to help improve access for ALL women. WKKF has funded many initiatives in New York.
- Not all hospitals have integrated the *Ten Steps to Successful Breastfeeding* into maternity care practices.
- Communities are not fully breastfeeding-friendly.
- Many “booby traps” (Best for Babes - <http://www.bestforbabes.org>) still abound in hospitals, workplaces, child care centers, shopping areas, clinics, and other places in the community

Opportunities in Your Own Backyard

- BFHI – build on the momentum!
- Consider integrating peer counselors into your hospital
- Get rid of the bags...make your own!
- Seamless referral networks with WIC
- Social media (blog, online community for moms in YOUR community? Pinterest board for resources in your community)
- Advocate for Medicaid reimbursement of breast pumps and counseling services
- Collective Impact ...emerging field of Collective Impact showing now that the BIGGEST change occurs when groups work together for maximum impact. When we SHARE the agenda, with each group seeing THEIR part in making it come about. More than just “collaborating” but truly trusting one another...

“Even if you’re headed in the right direction, you’ll get run over if you’re just sitting there!”
[Will Rogers]

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