



AUGUST IS

# NATIONAL BREASTFEEDING MONTH

#WBW2022 #StepUpForBreastfeeding #WorldBreastfeedingWeek2022  
#EducateandSupport #WarmChain

## WHY IS BREASTFEEDING SO IMPORTANT?

Many health professionals know the benefits of breastfeeding for mom and baby. The American Academy of Pediatrics and many other leading maternal and child health organizations stress how important breastfeeding is as a protective factor. Evidence shows that breastfeeding protects against a variety of diseases and conditions in infancy and childhood such as:

- Diarrhea
- Respiratory tract infection
- Necrotizing enterocolitis
- Otitis media
- Late-onset sepsis in preterm infants
- Type 1 and type 2 diabetes
- Leukemia
- Childhood obesity

Breastfeeding also protects maternal health:

- Decreased menstrual blood loss (lactational amenorrhea)<sup>i</sup>
- Decreased risk of breast, ovarian, endometrial and thyroid cancers<sup>i</sup>
- Decreased risk of hypertension<sup>ii</sup>
- Decreased risk of type 2 diabetes<sup>ii</sup>
- Decreased risk of rheumatoid arthritis<sup>i</sup>

Breastfeeding also protects the environment and benefits the economy. Breastfeeding families are sick less often and the parents miss less work. Mother's milk does not require the use of energy for manufacturing or create waste or air pollution. There is no risk of contamination and it is always at the right temperature and ready to feed<sup>i</sup>.

Breastfeeding can also be a protective factor for maternal mental health, especially when breastfeeding is going well. It is important for providers to recognize however, that if breastfeeding is not going well, for example a woman feels physical pain or disappointment in not being able to breastfeed her baby as she planned, this can be a mental health risk factor, necessitating the need for readily available and unbiased support. While breastfeeding offers many advantages and protective factors, it may not be an option for all families. Strong support and meeting families where they are is critical.

## WHY IS GREATER SUPPORT NEEDED?

While nearly nine in ten Kansas mothers who had a baby in 2017-2019 (89.8%) reported "ever" breastfeeding their infants, only 72% reported breastfeeding for at least eight weeks. Looking at the breastfeeding rates at eight weeks postpartum can help identify which mothers are at risk for early weaning, as well as factors that may play a role in supporting the mothers who choose to continue to breastfeed.

### Unmet basic needs\*

Women who reported having any unmet basic needs (such as food, housing or transportation insecurity) during pregnancy had a significantly lower prevalence of breastfeeding for at least 8 weeks, compared to those who had their basic needs met during pregnancy.

**61.1%**

of mothers with unmet basic needs breastfed for at least 8 weeks  
(95% CI: 55.6%, 66.4%)

**75.3%**

of mothers with all their basic needs met during pregnancy breastfed for at least 8 weeks  
(95% CI: 72.9%, 77.6%)

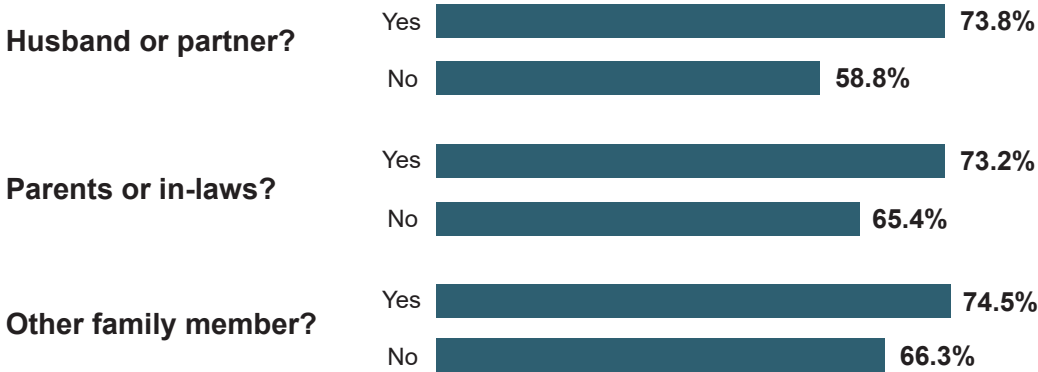
\* Any unmet needs during pregnancy = respondent indicated not having affordable transportation, skipping meals or inability to afford food, no access to a phone, inconsistent housing, unsafe housing, crowded living space, could not keep basic utility services on, or another unmet need. No unmet needs = respondent indicated that all needs asked about in the question were met, and did not write in another unmet need. Write-in responses that fit existing answer items were recoded to those answer items.



## Breastfeeding Support†

### Social Support

Data shows that strong social supports help moms continue to breastfeed. Women who reported they had a strong support system (such as a husband/partner, parents or in-laws, or a family member or relative to offer support) had significantly higher prevalence of breastfeeding for at least eight weeks, compared to mothers who did not have a support after birth.



Source: Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017-2019

### What can I do as a Provider?

Providers can play a key role in promoting breastfeeding and supporting families by<sup>i</sup>:

- Assisting families in making an informed decision about infant feeding by proactively discussing the benefits of breastfeeding.
- Educating yourself about breastfeeding and how to care for breastfeeding families in your practice.<sup>i</sup> (See Resources for breastfeeding education opportunities in Kansas.)
- Knowing how to assess breastfeeding and manage common breastfeeding problems.<sup>i</sup>
- Provide support and guidance to women who wish to return to work or school while breastfeeding.
- Understanding how to use breastfeeding equipment and learning how to support women who wish to return to work or school while breastfeeding.<sup>i</sup>
- Displaying positive images of breastfeeding in your office and encouraging the elimination of practices that interfere with breastfeeding (free formula, industry gifts, or coupons to parents, separation of mother and infant, inappropriate feeding images, etc.).<sup>i</sup>
- Supporting breastfeeding research.<sup>i</sup>
- Advocating for positive media coverage about breastfeeding.<sup>i</sup>
- Supporting businesses in your community to be breastfeeding friendly. Look for the "[Breastfeeding Welcome Here](#)" window decal.
- Supporting breastfeeding friendly policies.
- Joining your local breastfeeding coalition.
- Educating yourself on breastfeeding disparities in your community.

† From a question about social support after the birth, where respondents could check all answer items that applied (husband or partner; mother, father, or in-laws; other family member or relative; a friend; religious community; someone else; no one). Excludes those who did not answer the question at all (e.g., left all answers unchecked and did not write in another response). Write-in responses that fit existing answer items were recoded to those answer items.

# SOCIAL MEDIA POSTS

## 1. Did You Know?

Even though the majority of Kansas mothers initiate breastfeeding immediately following the birth of their baby, only half are still doing so at 6 months of age, and only one-third are still breastfeeding on their baby's first birthday. Research shows that support is key to helping women achieve longer durations of breastfeeding! Becoming a Mom® classes, WIC breastfeeding peer counselor appointments, and La Leche League meetings are a great way for parents to establish support and get valuable information both before and after the birth of their baby.

For more information about WIC breastfeeding peer counselors: <https://www.kdhe.ks.gov/1433/Breastfeeding-Peer-Counselor-Program>

For more information about Becoming a Mom®: <https://www.kdhe.ks.gov/588/Participating-Communities>

For more information about La Leche League: <http://www.kansaslll.org/>

## 2. Everyone can support breastfeeding in Kansas!

Having support from friends, family, childcare providers, local businesses, and employers can make all the difference to a breastfeeding family. Whether dropping off a meal, supporting her choice to feed her baby in a public space, or providing adequate breaks and space to pump during work time, a little bit of support goes a long way towards helping families meet their breastfeeding goals. For more ideas on how to be a great breastfeeding support, check out the CDC's "Guide to Support Breastfeeding Mothers and Babies" here: <https://www.cdc.gov/breastfeeding/pdf/bf-guide-508.pdf>

## 3. It takes a village!

Mothers who receive support during their pregnancy and after giving birth are more likely to breastfeed, and to continue breastfeeding for longer periods of time. There are many resources available to families, including in-person support groups and virtual tools to troubleshoot problems. For a list of resources in your community, as well as links to verified online support, visit the Kansas Breastfeeding Coalition's webpage located at [ksbreastfeeding.org/resources/](https://ksbreastfeeding.org/resources/) or contact your local health department.

## 4. Breastfeeding your baby reduces medical costs'

Breastfeeding has many benefits for the health of both mom and baby!

- Breastfeeding is a protective factor and reduces the risk of SIDS.
- Babies who are breastfed are less likely to develop infections and illnesses including diarrhea, ear infections, and pneumonia.
- Children who are breastfed for at least six months are less likely to become obese later in life.
- Mothers who breastfeed have a decreased risk of developing breast and ovarian cancers.

Adapted from information gathered at <https://www.hhs.gov/surgeongeneral/reports-and-publications/breastfeeding/factsheet/index.html>

## 5. Why do mothers stop breastfeeding?

According to the CDC, 60% of mothers stop breastfeeding earlier than they planned. There are many factors that go into a mother's decision to stop breastfeeding her baby, including:

- Issues with lactation and latching
- Concerns about infant nutrition and weight
- Mother's concern about taking medications while breastfeeding
- Unsupportive work policies and lack of parental leave
- Cultural norms and lack of family support
- Unsupportive hospital practices and policies

Community support matters! For information about resources available in your community, contact your local health department or visit [ksbreastfeeding.org/resources/](https://ksbreastfeeding.org/resources/)

Adapted from information found at <https://www.cdc.gov/breastfeeding/data/facts.html>

# RESOURCES

## Breastfeeding Awareness Week/Month Specific

- 2022 Theme: Together We Do Great Things!
- Weekly Themes and Resources:
  - Week 1 (August 1-7): [World Breastfeeding Week Theme: Educate & Support](#)
  - Week 2 (August 9-15): [Indigenous Milk Medicine Week Theme: Strengthening Our Traditions From Birth and Beyond](#)
  - Week 3 (August 16-24): [Asian American Native Hawaiian and Pacific Islander Week Theme: Telling Our Own Stories. Elevating Our Voices.](#)
  - Week 4 (August 25-31): [Black Breastfeeding Week Theme: BBW 2022: 10 Years, A New Foundation](#)
- [NICHQ NBM Toolkit](#)

## Patient/Client Resources

- [Kansas Breastfeeding Coalition](#)
  - [Local Resource Directory](#)
  - [Parent Education](#)
- [La Leche League of Kansas](#) – Mother to Mother Support; Virtual Support; Breastfeeding Information
- [La Leche League USA](#) – Breastfeeding Information / Parent Education
- [La Leche League International](#) – Breastfeeding Resources and Support
- [Kellymom](#) – Breastfeeding Resources
- [Kansas WIC](#) – Breastfeeding Resources
- [Office on Women's Health](#) – Breastfeeding Resources

## Provider Resources

- [Kansas Breastfeeding Coalition](#)
  - [Resources](#) – includes: [local resource directory](#); patient education handouts; podcasts; position statements and policies; professional organizations
  - [Physician specific resources](#)
  - [Educational Opportunities](#) – includes education for: child care providers; community supporters; healthcare professionals; parents; education events – [past](#) and [upcoming](#); [education courses](#)
- [Kansas Chapter American Academy of Pediatrics – Breastfeeding Resources](#) – includes: how to have a Breastfeeding Friendly Practice; coding for breastfeeding; model policy; statements and clinical protocols; educational opportunities
- [Center for Disease Control \(CDC\) Breastfeeding Resources Library](#) – Fact Sheets and Infographics

## Cross-Sector Initiatives/Tools

- [Warm Chain of Support for Breastfeeding](#) – Campaign that strives to link different actors across the health, community and workplace sectors to provide a continuum of care during the first 1000 days
- [Kansas Breastfeeding Coalition](#)
  - [Communities Supporting Breastfeeding](#)
  - [Support for Breastfeeding Employees and Students](#)
  - [Breastfeeding Welcome Here](#)
  - [Hospital-Based Initiatives](#)
  - [Tools for Coalitions](#)



i. American Academy of Pediatrics, Advocacy & Policy, AAP Health Initiatives, Breastfeeding, Benefits of Breastfeeding; retrieved from <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/Breastfeeding/Pages/Benefits-of-Breastfeeding.aspx>

ii. U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality; Breastfeeding Programs and Policies, Breastfeeding Uptake, and Maternal Health Outcomes in Developed Countries; retrieved from <https://effectivehealthcare.ahrq.gov/products/breastfeeding/research>

iii. Kansas Department of Health and Environment, Kansas Pregnancy Risk Assessment Monitoring System (PRAMS), 2017-2019 [https://www.kdheks.gov/prams/downloads/Kansas\\_PRAMS\\_2019\\_Surveillance\\_Report.pdf](https://www.kdheks.gov/prams/downloads/Kansas_PRAMS_2019_Surveillance_Report.pdf)

iv. CDC National Immunization Survey (NIS) 2018-2019, among 2017 births; retrieved from <https://www.cdc.gov/breastfeeding/pdf/2020-Breastfeeding-Report-Card-H.pdf>

v. United States Breastfeeding Committee, News and Info, National Breastfeeding Month 2020; retrieved from <http://www.usbreastfeeding.org/p/cm/ld/fid=909>

vi. Adapted from information gathered at <https://www.hhs.gov/surgeongeneral/reports-and-publications/breastfeeding/factsheet/index.html>