



# Doctors in Action

## A Call to Action from the Surgeon General to Support Breastfeeding



Across the US, most mothers hope to breastfeed; it is an action that mothers can take to protect their infants' and their own health. Support from their families, communities, doctors, nurses, health care leaders, employers, and policymakers makes it possible for mothers to breastfeed their babies.

### How to Help Patients Breastfeed

#### Support mothers' decisions.

Mothers rely on physicians for help and advice on how to feed their babies. Without help, many mothers see breastfeeding as a goal they cannot reach for themselves and their babies. Many mothers do not know the health risks to their babies and themselves when they do not breastfeed. This information is helpful for mothers so that they can decide how to feed their babies.

Doctors can help breastfeeding mothers in all clinical care settings. Doctors can provide care to pregnant women that follows best practice guidelines for breastfeeding support. Also, doctors can provide support to new mothers and their babies.

#### Avoid serving as advertisers for infant formula.

Giving free samples of formula leaves mothers with the impression that doctors favor formula feeding over breastfeeding. Mothers who are given free formula samples of formula are less likely to breastfeed exclusively.

The *International Code of Marketing of Breast-Milk Substitutes* (the Code) provides guidance to doctors so that they can avoid serving as advertisers for infant formula.

#### Provide breastfeeding support after hospital discharge.

Breastfeeding mothers need help from hospitals, doctors, and community organizations to connect them to skilled help for breastfeeding such as International Board Certified Lactation Consultants (IBCLC). Without continued support, once mothers return home from the hospital they may stop breastfeeding. Not continuing to breastfeed brings risks to the mothers' and babies' health. Continued support helps new mothers meet their own breastfeeding goals.

#### Include breastfeeding support as a standard of care.

Clinical care practices can help or hinder mothers' ability to start and keep breastfeeding. For instance, placing healthy, term babies skin-to-skin with their mother immediately after birth can help babies start breastfeeding. Quality breastfeeding care allows doctors to support their patients' intentions and health needs.

#### Develop skilled lactation care teams.

International Board Certified Lactation Consultants (IBCLC) are health care professionals certified in lactation care. IBCLCs have specific clinical expertise and training in how to manage complex breastfeeding problems. IBCLCs need to be involved as core members of lactation care teams.



### Clinical Care Decisions Change Patients' Lives

**Changes are needed in clinical care practices.**

Doctors need to support patients' intentions to breastfeed as well as health system changes to improve patient satisfaction and breastfeeding outcomes.

**Supportive doctors ensure breastfeeding is systematically addressed and supported at every clinical encounter.**

Doctors share responsibility to craft standards, implement policies, and display leadership that consistently supports every new mother who chooses to breastfeed her baby.

**The Surgeon General has identified key actions that can be taken in clinical care to improve breastfeeding rates.** Make a commitment to ensure that breastfeeding support is consistently integrated in clinical care. You can lead the way to improve the health of millions of mothers and babies nationwide.

Read "Key Actions Identified by the Surgeon General to Support Breastfeeding in Clinical Care" on the back of this page.

# Key Actions Identified by the Surgeon General to Support Breastfeeding in Clinical Care

## Patient Support



**Action 1: Give mothers the support they need to breastfeed their babies.**

- Help pregnant women to learn about the importance of breastfeeding for their babies and themselves.
- Teach mothers to breastfeed.
- Encourage mothers to talk to their maternity care providers about plans to breastfeed.
- Support mothers to have time and flexibility to breastfeed.
- Encourage mothers to ask for help with breastfeeding when needed.

## Formula Marketing



**Action 6: Ensure that the marketing of infant formula is conducted in a way that minimizes its negative impacts on exclusive breastfeeding.**

- Hold marketers of infant formula accountable for complying with the *International Code of Marketing of Breast-Milk Substitutes* (the Code).
- Take steps to ensure that claims about formula are truthful and not misleading.
- Ensure that health care clinicians do not serve as advertisers for infant formula.

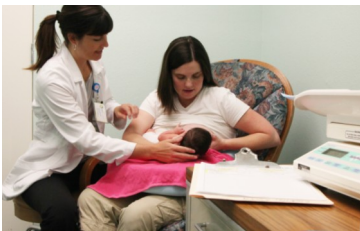
## Care Continuity



**Action 8: Develop systems to guarantee continuity of skilled support for lactation between hospitals and health care settings in the community.**

- Create comprehensive statewide networks for home- or clinic-based follow-up care to be provided to every newborn in the state.
- Establish partnerships for integrated and continuous follow-up care after discharge from the hospital.
- Establish and implement policies and programs to ensure that participants in WIC have services in place before discharge from the hospital.

## Clinical Care Quality



**Action 10: Include basic support for breastfeeding as a standard of care for midwives, obstetricians, family physicians, nurse practitioners, and pediatricians.**

- Define standards for clinical practice that will ensure continuity of care for pregnant women and mother-baby pairs in the first four weeks of life.
- Conduct analyses and disseminate their findings regarding the comparative effectiveness of different models for integrating skilled lactation support into settings where midwives, obstetricians, family physicians, nurse practitioners, and pediatricians practice.

## Lactation Care Teams

**Action 11: Guarantee equitable access to services provided by International Board Certified Lactation Consultants.**



- Include support for lactation as an essential medical service for pregnant women, breastfeeding mothers, and children.
- Ensure that reimbursement of IBCLCs is not dependent on their having other professional certification or licensure.
- Work to increase the number of racial and ethnic minority IBCLCs to better mirror the U.S. population.

For more information:  
<http://www.surgeongeneral.gov/topics/breastfeeding/calltoactiontosupportbreastfeeding.pdf>

Doctors are central to national breastfeeding efforts. Take a stand and give all breastfeeding mothers the support they need and deserve.





# Nurses in Action

## *A Call to Action from the Surgeon General to Support Breastfeeding*



Across the US, most mothers hope to breastfeed; it is an action that mothers can take to protect their infants' and their own health. Support from their families, communities, registered nurses (RNs), advanced practice registered nurses (APRNs), doctors, health care leaders, employers, and policymakers makes it possible for mothers to breastfeed their babies.

### How to Help Patients Breastfeed

#### Support mothers' decisions.

Mothers rely on nurses for help and advice on how to feed their babies. Without help, many mothers see breastfeeding as a goal they cannot reach for themselves and their babies. Many mothers do not know the health risks to their babies and themselves when they do not breastfeed. This information is helpful for mothers so that they can decide how to feed their babies.

Nurses can help breastfeeding mothers in all clinical care settings. Nurses can provide care to pregnant women following best practices for breastfeeding support. Also, nurses can provide support to new mothers and their babies to help them start and keep breastfeeding.

#### Provide breastfeeding support after hospital discharge.

Breastfeeding mothers need help from hospitals, nurses, and community organizations to connect them to skilled help for breastfeeding. Without help, once mothers return home from the hospital they may stop breastfeeding. Not continuing to breastfeed brings risks to the mothers' and babies' health. Continued support helps new mothers meet their own breastfeeding goals.

#### Seek out opportunities to improve knowledge and skills.

Mothers rely on nurses to learn about breastfeeding and for help with how to successfully breastfeed. Yet, most nursing school programs do not teach enough about breastfeeding. Nurses can seek out opportunities for practice-based learning.

#### Include breastfeeding support as a standard of care.

Clinical care practices can help or hinder mothers' ability to start and keep breastfeeding. For instance, keeping babies with their mothers during the hospital stay can help mothers to breastfeed. On the other hand, giving breastfeeding mothers gift packs containing infant formula samples can hinder their ability to breastfeed. Quality breastfeeding care allows nurses to support their patients' intentions and health needs.

#### Develop skilled lactation care teams.

International Board Certified Lactation Consultants (IBCLC) are health care professionals certified in lactation care. IBCLCs have specific clinical expertise and training in how to manage complex breastfeeding problems. IBCLCs need to be involved as core members of lactation care teams.



### Clinical Care Decisions Change Patients' Lives

#### Changes are needed in clinical care practices.

Nurses need to support patients' intentions to breastfeed as well as health system changes to improve patient satisfaction and breastfeeding outcomes.

#### Supportive nurses ensure breastfeeding is systematically addressed and supported at every clinical encounter.

Nurses share responsibility to craft standards, implement policies, and display leadership that consistently supports every new mother who chooses to breastfeed her baby.

#### The Surgeon General has identified key actions that can be taken in clinical care to improve breastfeeding rates.

Make a commitment to ensure that breastfeeding support is consistently integrated in clinical care. You can lead the way to improve the health of millions of mothers and babies nationwide.

Read "Key Actions Identified by the Surgeon General to Support Breastfeeding in Clinical Care" on the back of this page.



# Key Actions Identified by the Surgeon General to Support Breastfeeding in Clinical Care

## Patient Support



**Action 1:** Give mothers the support they need to breastfeed their babies.

- Help pregnant women to learn about the importance of breastfeeding for their babies and themselves.
- Teach mothers to breastfeed.
- Encourage mothers to talk to their maternity care providers about plans to breastfeed.
- Support mothers to have time and flexibility to breastfeed.
- Encourage mothers to ask for help with breastfeeding when needed.

## Care Continuity



**Action 8:** Develop systems to guarantee continuity of skilled support for lactation between hospitals and health care settings in the community.

- Create comprehensive statewide networks for home- or clinic-based follow-up care to be provided to every newborn in the state.
- Establish partnerships for integrated and continuous follow-up care after discharge from the hospital.
- Establish and implement policies and programs to ensure that participants in WIC have services in place before discharge from the hospital.

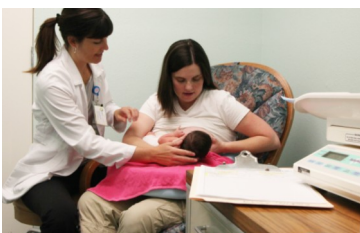
## Knowledge and Skills



**Action 9:** Provide education and training in breastfeeding for all health professionals who care for women and children.

- Improve the breastfeeding content in undergraduate and graduate education and training for health professionals.
- Establish and incorporate minimum requirements for competency in lactation care into health professional credentialing, licensing, and certification processes.
- Increase opportunities for continuing education on the management of lactation to ensure the maintenance of minimum competencies and skills.

## Clinical Care Quality



**Action 10:** Include basic support for breastfeeding as a standard of care for midwives, obstetricians, family physicians, nurse practitioners, and pediatricians.

- Define standards for clinical practice that will ensure continuity of care for pregnant women and mother-baby pairs in the first four weeks of life.
- Conduct analyses and disseminate their findings regarding the comparative effectiveness of different models for integrating skilled lactation support into settings where midwives, obstetricians, family physicians, nurse practitioners, and pediatricians practice.

## Lactation Care Teams



**Action 11:** Guarantee equitable access to services provided by International Board Certified Lactation Consultants.

- Include support for lactation as an essential medical service for pregnant women, breastfeeding mothers, and children.
- Ensure that reimbursement of IBCLCs is not dependent on their having other professional certification or licensure.
- Work to increase the number of racial and ethnic minority IBCLCs to better mirror the U.S. population.

For more information:  
<http://www.surgeongeneral.gov/topics/breastfeeding/calltoactiontosupportbreastfeeding.pdf>

Nurses are central to national breastfeeding efforts. Take a stand and give all breastfeeding mothers the support they need and deserve.





# Health Care Leadership in Action

## *A Call to Action from the Surgeon General to Support Breastfeeding*



Across the US, most mothers hope to breastfeed; it is an action that mothers can take to protect their infants' and their own health. Support from their families, communities, clinicians, health care leaders, employers, and policymakers makes it possible for mothers to breastfeed their babies.

## How to Support Breastfeeding in Health Care Systems

### Improve maternity care practices.

For women who want to breastfeed, the hospital experience is critical. Yet, the policies and practices of the institution where they give birth can either help or hinder their intentions. Quality breastfeeding care allows clinicians to support their patients' intentions and health needs.

### Provide breastfeeding support after hospital discharge.

Breastfeeding mothers need help from hospitals, clinicians, and community organizations to connect them to skilled help for breastfeeding such as International Board Certified Lactation Consultants (IBCLC). Without help, once mothers return home from the hospital they may stop breastfeeding. Not continuing to breastfeed brings risks to the mothers' and babies' health.

### Improve clinician knowledge and skills.

Mothers rely on clinicians for help and advice on how to breastfeed. Yet, most medical, residency and nursing programs do not teach students enough about breastfeeding. Action is needed so that clinicians are better trained in how to support breastfeeding.

### Include breastfeeding support as a standard of care.

Clinical care practices can help or hinder mothers' ability to start and keep breastfeeding. For instance, keeping babies with their mothers during the hospital stay can help mothers to breastfeed. On the other hand, giving breastfeeding mothers gift packs containing infant formula samples can hinder their ability to breastfeed. Put quality breastfeeding care into action so that mothers who decide to breastfeed are fully supported.

### Develop skilled lactation care teams.

International Board Certified Lactation Consultants (IBCLC) are health care professionals certified in lactation care. IBCLCs have specific clinical expertise and training in how to manage complex breastfeeding problems. IBCLCs need to be involved as core members of lactation care teams. To mirror patient populations, more IBCLCs are needed from racial and ethnic minority groups. More opportunities to train IBCLCs are required to meet this need.



## Health Care Leadership Changes Patients' Lives

### Changes are needed in health care systems.

Health care systems need to support patients' intentions to breastfeed as well as health system changes to improve patient satisfaction and breastfeeding outcomes.

### System-level changes ensure breastfeeding is systematically addressed and supported at every clinical encounter.

Health care leaders share responsibility to craft standards, implement policies, and display leadership that consistently supports every new mother who chooses to breastfeed her baby.

### The Surgeon General has identified key actions that can be taken in health care systems to improve breastfeeding rates.

Make a commitment to ensure that breastfeeding support is consistently integrated in health care delivery. You can lead the way to improve the health of millions of mothers and babies nationwide.

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# Key Actions Identified by the Surgeon General to Support Breastfeeding in Health Care Systems

## Maternity Care



**Action 7: Ensure that maternity care practices around the United States are fully supportive of breastfeeding.**

- Accelerate implementation of the Baby-Friendly Hospital Initiative.
- Establish transparent, accountable public reporting of maternity care practices in the United States.
- Establish a new advanced certification program for perinatal patient care.
- Establish systems to control the distribution of infant formula in hospitals and ambulatory care facilities.

## Care Continuity



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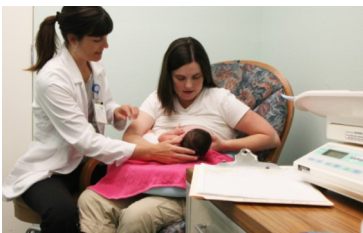
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