

Maine Center for Disease Control and Prevention WIC Nutrition Program

Effective: October 1, 2012

Policy No. BF-2

Revised: August 1, 2015

Breastfeeding Promotion and Support Activities

Authority

7 CFR §246.11(c)(2), (7)

22 MRSA §255 and §1951

Policy

1. All staff shall be educated on how to present to clients a positive attitude about breastfeeding.
2. Staff shall encourage and support women to breastfeed their infants.
3. The Local Agency director shall ensure that all nutrition staff has access to accurate, up-to-date information to effectively promote and support breastfeeding.

Procedures

1. All Local Agency WIC staff shall demonstrate a positive attitude toward breastfeeding. This demonstration of positive attitude may include but is not limited to:
 - 1.1 Appropriate words of encouragement for all women.
 - 1.2 Avoiding overt or subtle endorsements of formula.
 - 1.3 Appropriate issuance of supplemental formula and maternal food benefits.
 - 1.4 Appropriate referrals to health professionals (e.g. IBCLC's, dietitians, physicians, etc.)
2. Each Local Agency shall ensure that participants receive complete and accurate information regarding breastfeeding by:
 - 2.1 Discussing breastfeeding at all prenatal appointments.
 - 2.2 Assessing participants' knowledge, concerns and attitudes related to breastfeeding at the earliest opportunity in the prenatal period.
 - 2.3 Individualizing support to all breastfeeding women.
 - 2.4 Distributing accurate, unbiased breastfeeding educational materials.

- 2.5 Providing referrals to lactation consultants, home visiting programs and local La Leche League chapters.
 - 2.5.1 Local agencies will refer breastfeeding dyads in need of additional breastfeeding support to local agency or contracted IBCLC for assessment and follow-up.
 - 2.5.2 Breastfeeding dyads in need of additional support will be tracked on the IBCLC Referral Log (Appendix BF-2-A).
- 2.6 Prescribing supplemental formula only after completing a thorough nutrition assessment that identifies need, and providing counseling to the mother.
 - 2.6.1 Counseling should include the risk of supplementation on breast milk production.
 - 2.6.2 Issuing the smallest amount of supplemental formula that meets the infant's assessed needs to minimize the possibility of replacing breast milk.