

How Health Care Leaders Can Help

The Surgeon General's Call to Action to Support Breastfeeding

Across the United States, most new mothers hope to breastfeed. Breastfeeding can protect the health of mothers and their infants. With support from their families and communities, as well as from health care leaders, mothers are more likely to be able to breastfeed their babies.

How You Can Help Mothers Breastfeed

Help clinicians learn more about breastfeeding.

Clinicians may need to talk with new mothers about how important it is to breastfeed and teach them how to do it. Most medical, residency, and nursing programs do not teach students enough about breastfeeding. You can provide training and continuing education programs so that clinicians know more and are more confident about giving advice on breastfeeding.

Make sure mothers get quality breastfeeding care.

Many leading health organizations* agree that most babies should be breastfed for at least 12 months and should have only breast milk for the first 6 months of life. For women who want to breastfeed, the support they get—or do not get—in the hospital can make the difference. As a health care leader, you can help make sure that hospitals make it easier for mothers to breastfeed.

Make support for breastfeeding part of standard care.

Clinical care practices can make it easier—or harder—for mothers to start and keep breastfeeding. For example, placing a healthy newborn in skin-to-skin contact with the mother rather than on an infant warmer, keeping the baby in the room with the mother at the hospital, and not giving samples of infant formula to breastfeeding mothers are practices that help mothers to breastfeed more easily.

Develop teams to give women the skilled care they need.

If women have trouble breastfeeding, they may need the support of a health care team that includes professionals with special training such as an International Board Certified Lactation Consultant (IBCLC). Hospitals can involve IBCLCs as core members of lactation care teams. Because some ethnic minority groups have lower rates of breastfeeding, hospitals should recruit and train more IBCLCs from these groups.

Help mothers get support after they leave the hospital.

If mothers get the support they need in the first 4 weeks of a new baby's life, they are more likely to keep breastfeeding. Mothers may need help finding people who are trained to assist with breastfeeding problems after they leave the hospital. Without help, some new mothers may stop breastfeeding. When women do not keep breastfeeding, they and their babies may not be as healthy.

* Includes the American Academy of Pediatrics, American Academy of Family Physicians, American College of Obstetricians and Gynecologists, American College of Nurse-Midwives, American Dietetic Association, and American Public Health Association.



How You Can Take Action

- Make sure hospitals support and help mothers who want to breastfeed.
- Promote changes to health care systems that make it easier for women to start and keep breastfeeding.
- Make sure that breastfeeding is promoted and supported at every visit to a hospital, clinic, or doctor's office.
- Take part in writing health care standards, putting policies in place, and displaying leadership that supports mothers who want to breastfeed.
- Look at the selected actions recommended by the Surgeon General (see next page) to make support for breastfeeding part of all mother-baby care.
- By taking these actions, you can lead the way to improving the health of breastfeeding mothers and their babies.



From the Surgeon General

Selected Actions for Health Care Leaders to Support Breastfeeding

Maternity Care

Action 7: Ensure that maternity care practices throughout 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 from Hospital to Community

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 the U.S. Department of Agriculture's Special Supplemental Nutrition Program for Women, Infants, and Children have services in place.

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.



Quality Clinical Care

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 4 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.

Lactation Care Teams

Action 11: Ensure 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.
- Provide reimbursement for certified consultants independent of their having other professional certification or licensure.
- Work to increase the number of racial and ethnic minority certified lactation consultants to better mirror the U.S. population.