



Department of Public Health

The Role of Public Health Agencies in Lactation Support-Investing in California's Future

Archdiocese of San Bernardino

San Bernardino, CA

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Health Officer

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Largest geographical county in the United States.

Over 20,000 square miles
2010 Census Population:
2,035,210



- **Monitor health status to identify community health problems.**
- **Diagnose and investigate health problems and health hazards in the community.**
- **Inform, educate, and empower people about health issues.**
- **Mobilize community partnerships to identify and solve health problems.**
- **Develop policies and plans that support individual and community health efforts.**
- **Enforce laws and regulations that protect health and ensure safety.**

- **Link people to needed personal health services and assure provisions of health care when otherwise unavailable.**
- **Assure a competent public health and personal health care work force.**
- **Evaluate effectiveness, accessibility, and quality of personal and population-based health services.**
- **Research new insights and innovative solutions to health problems.**





Discuss the Short and Long-Term Benefits of Breastfeeding

Talk about the National Public Health Goals- Healthy People 2020

Review Breastfeeding Rates and Disparities Based on Socioeconomic Status

Identify Public Health's Role in Lactation Support

Share how San Bernardino County DPH is Answering the Call to Action to Support Breastfeeding- The New BONUS Program

Understand how San Bernardino County DPH will Continue to Support Breastfeeding and how Collaboration can be a Powerful Tool in Bringing About Needed Change.

Immediate and Long-Term Advantages of Breastfeeding

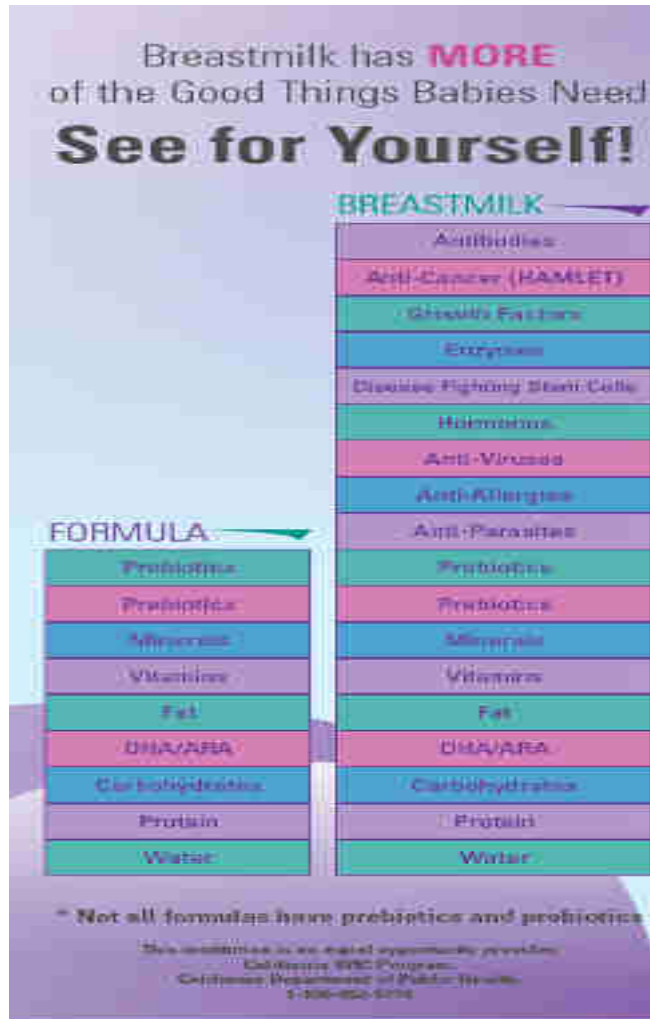
For Mother

- Shorter postpartum recovery period
- Enhanced bonding and may reduce risk of postpartum depression
- More rapid prenatal weight loss
- Reduced risks of breast and ovarian cancers
- Decreased risk of obesity



For Infant

- Protection against infection and bacteria
- Stronger immune system
- Breastfed babies are less likely to develop asthma
- Lower incidence of SIDS
- Higher IQ
- Decreased risk of obesity



*There is a reason
for everything in nature.*
Aristotle

- Breast milk is thought to be the best form of nutrition for neonates and infants.
- This dynamic fluid provides a diverse array of bioactive substances to the developing infant during critical periods of brain, immune, and gut development.
- The clinician must be familiar with how the mammary gland produces human milk and how its properties nourish and protect the breastfeeding infant.

Healthy People 2020 National Public Health Goals and Objectives

Increase the proportion of pregnant women who receive prenatal care beginning in first trimester

Increase the proportion of pregnant women who receive early and adequate prenatal care

(Developmental) Increase the proportion of women giving birth who attend a postpartum care visit with a health worker

(Developmental) Decrease the proportion of women delivering a live birth who experience postpartum depressive symptoms



Healthy People 2020 National Public Health Goals and Objectives

Increase the proportion of infants who are breastfed exclusively through 6 months—14.1 % in 2007-2009, increase to 25.5 % by 2020

Increase the proportion of employers that have worksite lactation support programs-25% in 2009, increase to 38 % by 2020

Reduce the proportion of breastfed newborns who receive formula supplementation within the first 2 days of life-24.2% in 2006, decrease to 14.2 % by 2020

Increase the proportion of live births that occur in facilities that provide recommended care for lactating mothers and their babies-2.9 % in 2007, increase to 8.1 % by 2020





America's leading business and economic news journal is talking about breastfeeding!

- *April 14, 2014, "Race and income are major predictors of whether a woman will exclusively breastfeed for six months. The highest rate of breastfeeding is among wealthy whites. Meanwhile, women with low incomes are often financially compelled to quickly return to the workforce. The jobs of low income women are also less likely to offer paid maternity leave."*

San Bernardino County has 11 Baby Friendly Designated hospitals, more than any other county!

How do we compare?

*California In-Hospital Breastfeeding as Indicated on the Newborn Screening Test Form

Statewide and Maternal County of Residence by Race/Ethnicity: 2014

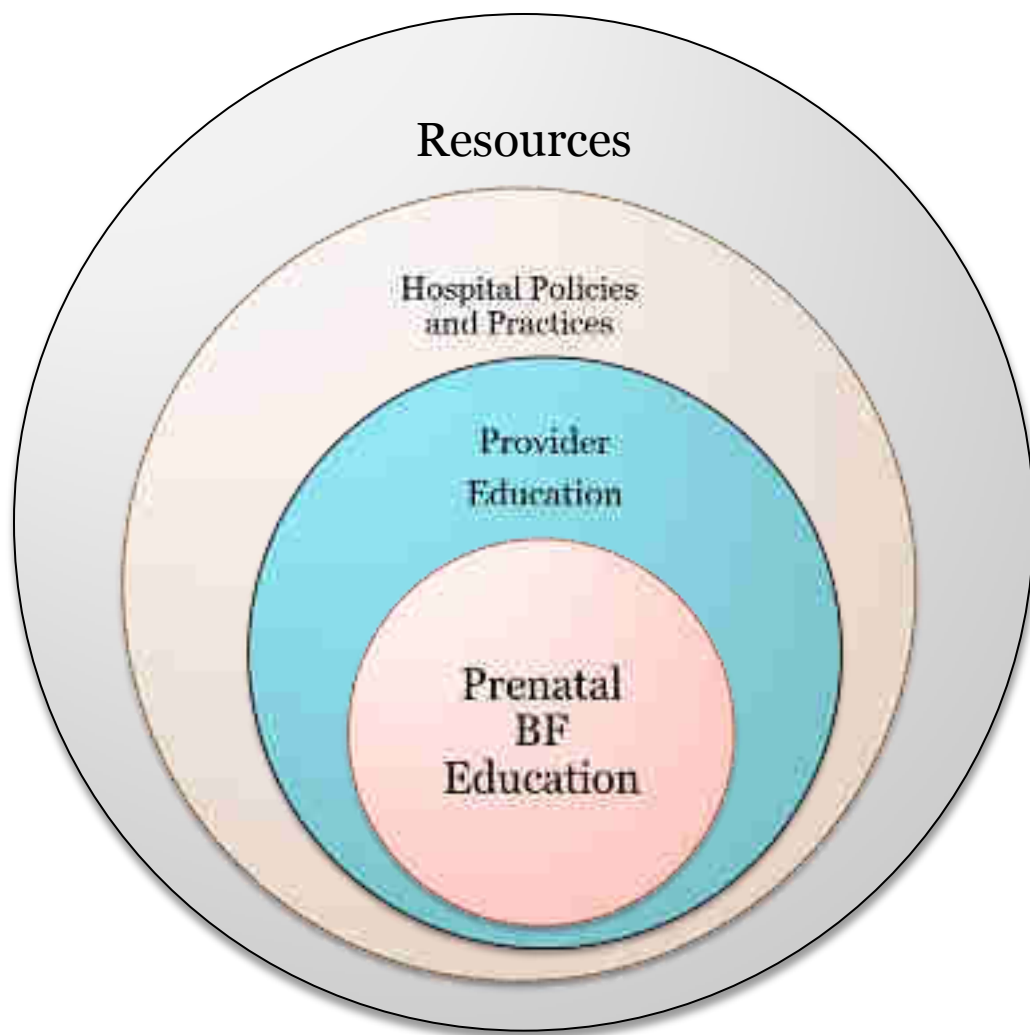


****San Bernardino County ranked 38th in the state for exclusive breastfeeding.**

**California Counties: In-Hospital Any and Exclusive Breastfeeding Rates, Lowest to Highest by Exclusive Rate (2014)

ETHNICITY	*EXCLUSIVE BREASTFEEDING 2014		
	San Bernardino	Riverside	California
African American	47.5%	57.6%	56.4%
American Indian	62.5%	78.8%	69.6%
Asian	42.1%	54.2%	60.0%
Multiple Race	64.1%	74.5%	74.9%
Pacific Islander	47.7%	56.7%	59.8%
Other	60.3%	61.8%	62.0%
White	71.2%	76.8%	80.4%
Hispanic	57.8%	65.7%	61.7%
ALL	58.8%	67.7%	66.8%

Factors Contributing to Breastfeeding Rates in San Bernardino County



Resources-lack of greater interconnectivity among breastfeeding support systems, i.e., BF clinics, referrals, school and workplace lactation accommodation, lack of access to culturally and linguistically appropriate help, community/family support.

Hospital Policies & Practices-increase consistent maternity care and staff education to better support breastfeeding at both baby friendly and non-baby friendly hospitals.

Provider Education- increase education and awareness to childbirth and pediatric providers on the numerous public health benefits of promoting breastfeeding for mom and baby.

Prenatal Breastfeeding Education- increase breastfeeding education to both mom and dad during prenatal provider visits i.e., incorporate BBB Toolkit.

Systems Approach

All Women

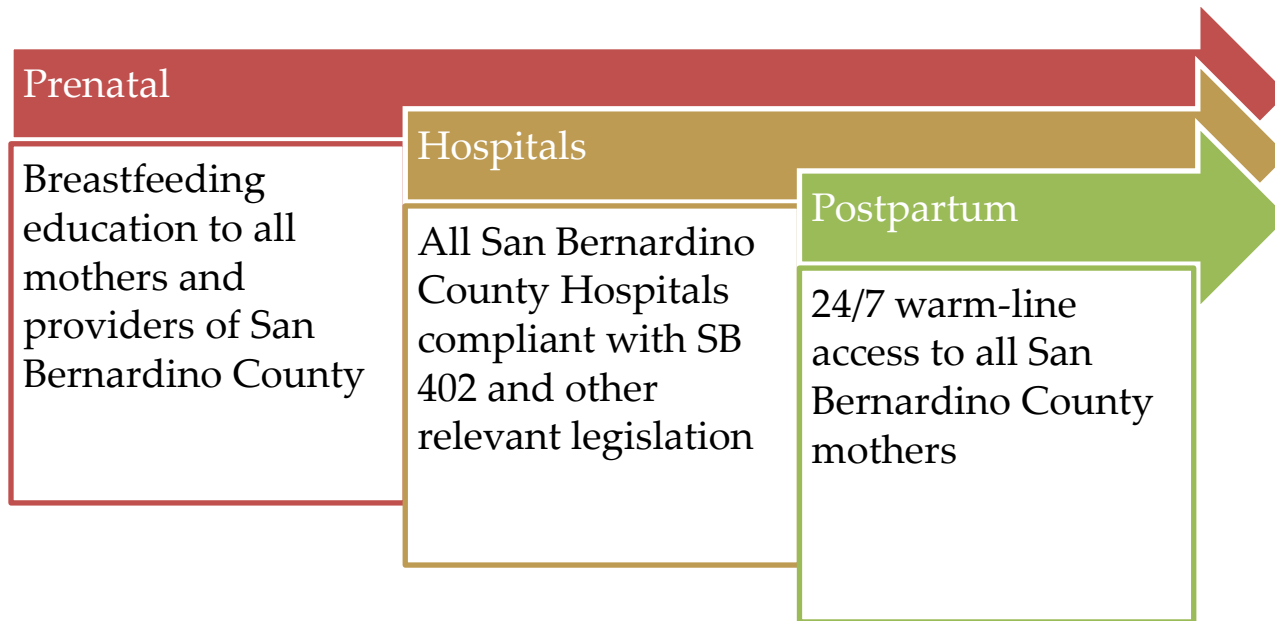
- Just under 30,000 births/year

Countywide

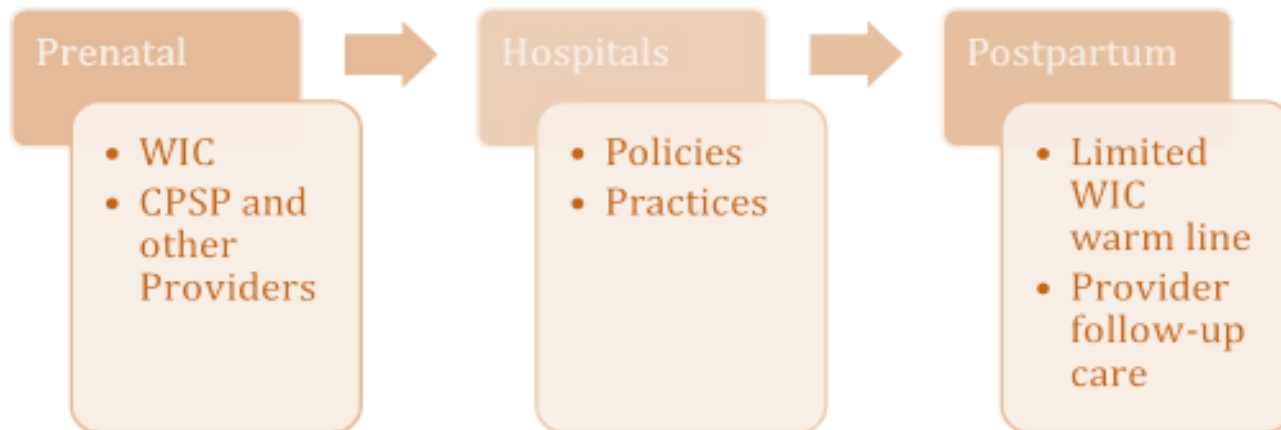
Breastfeeding Rates

- Initiation and Duration

Systems Approach

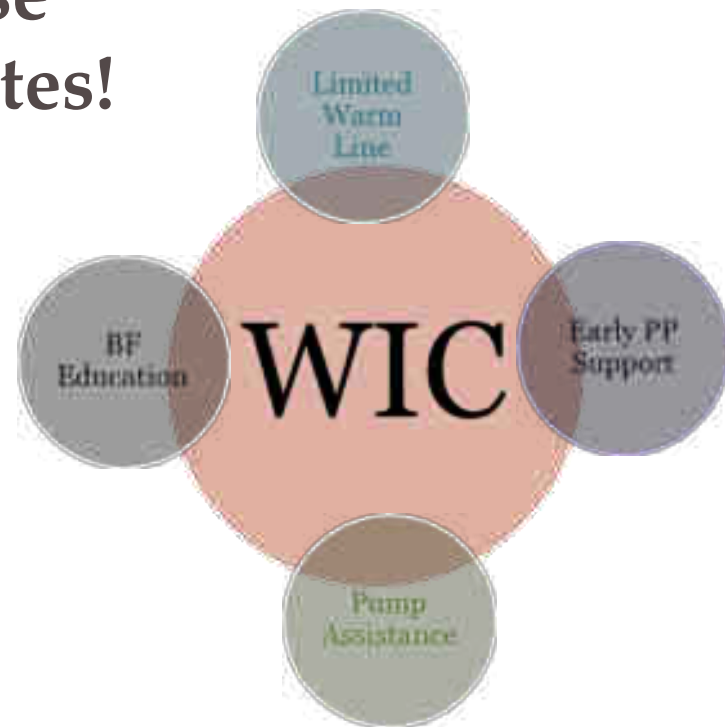


Breastfeeding Continuum of Care



It's Up To All of Us as a Collective Group to Increase Exclusive Breastfeeding Rates!

- Breastfeeding support services limited to WIC-eligible families.
- Services need to be accessible to all of San Bernardino County's residents.

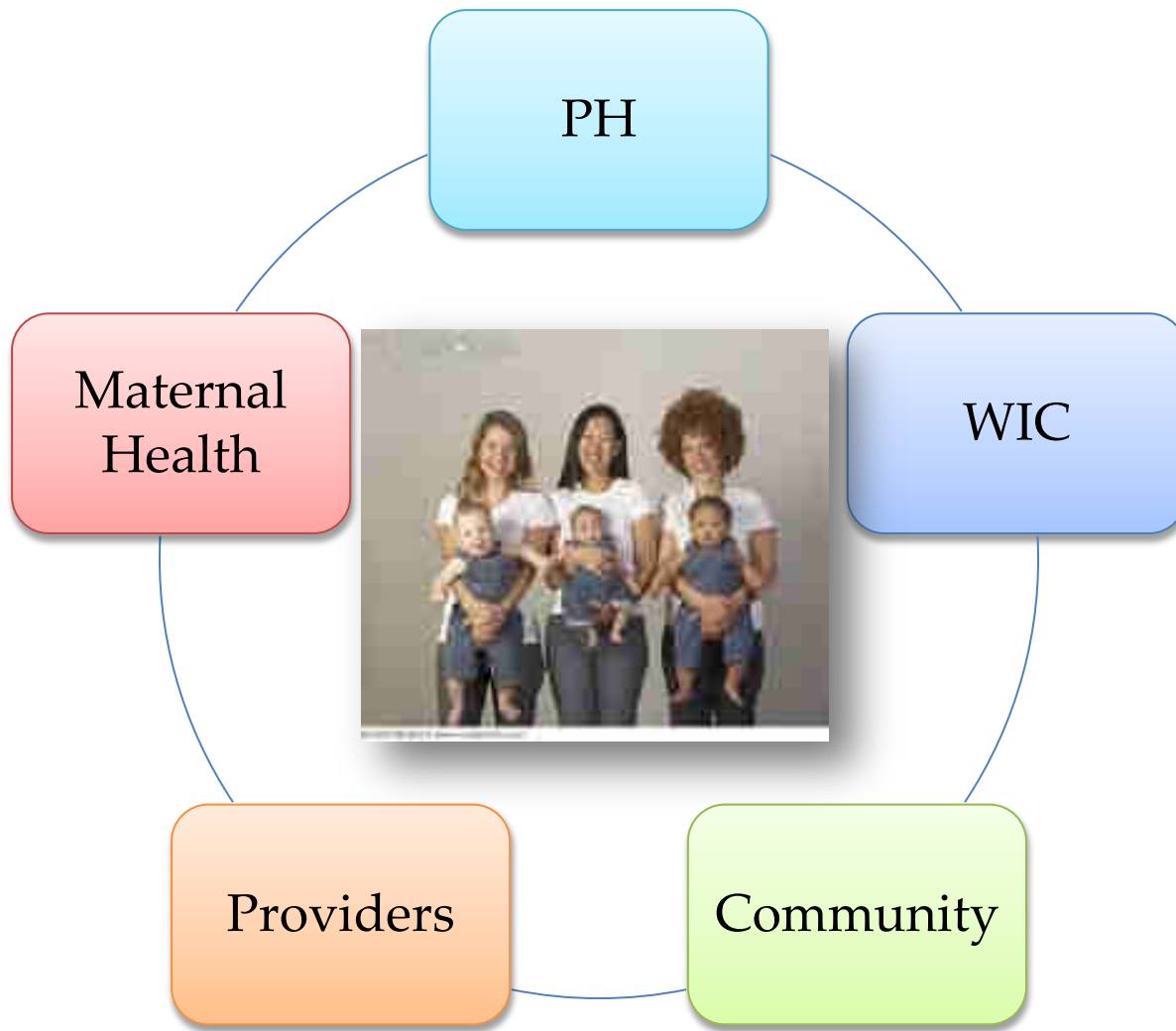


The Surgeon General's Call to Action to Support Breastfeeding

This *Call to Action* describes specific steps people can take to participate in a society-wide approach to support mothers and babies who are breastfeeding. This approach will increase the public health impact of everyone's efforts, reduce inequities in the quality of health care that mothers and babies receive, and improve the support that families receive in employment and community settings.

Answering the Call To Action! San Bernardino County Breastfeeding Collaborative Members

- Maxwell Ohikhuare
- Daniel Perez
- David Yleah
- Betsy Cline
- Gretchen Page
- Glenda Bates
- Stacey Wiles
- Asuncion Williams
- Sabrina Rosetti
- Leslie Bramson
- Vanessa Long
- Gretchen Andrews
- Ken Johnston
- Pedro Martinez



What PH has done:

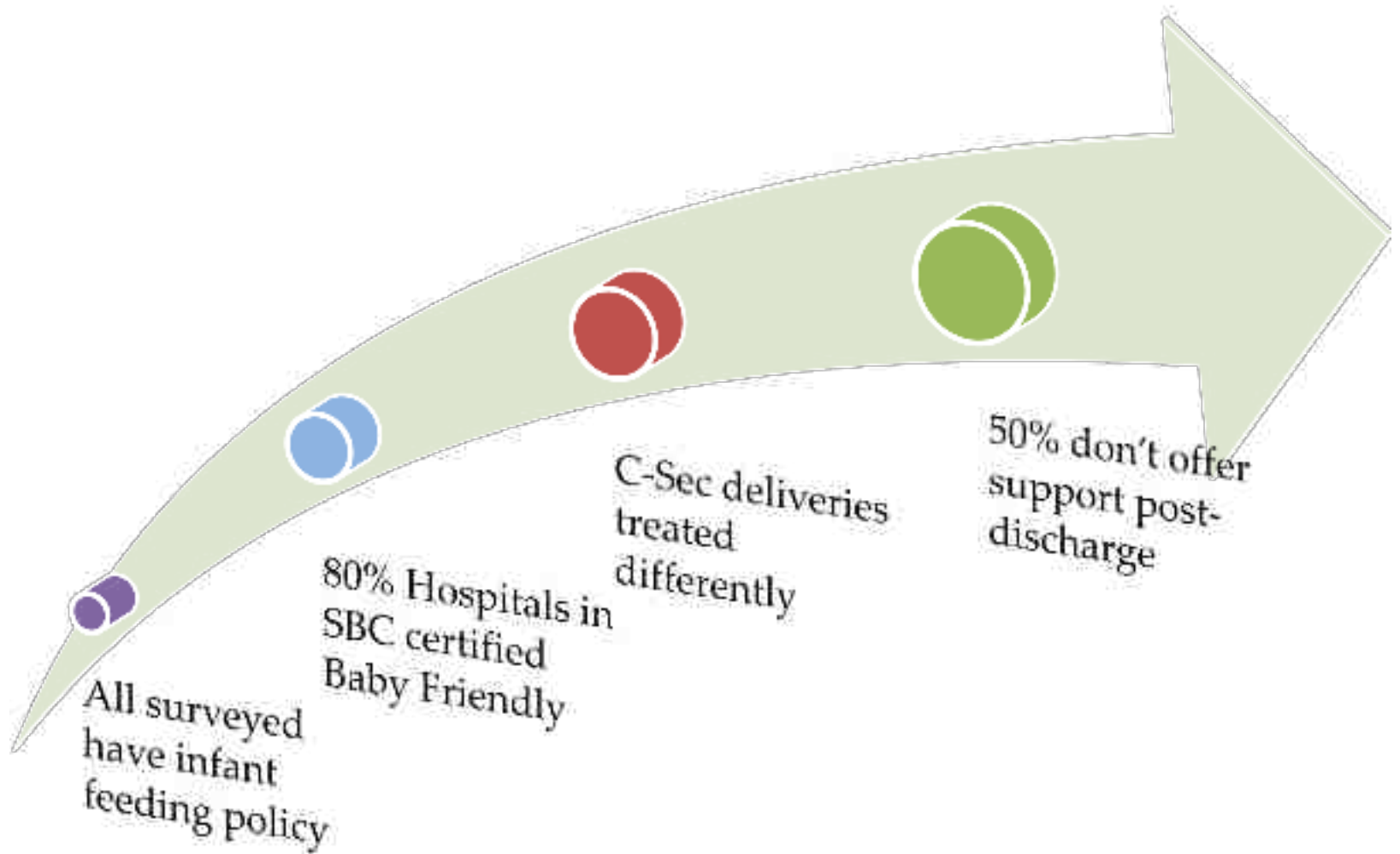
***Identified disparities in San Bernardino County that effect BF outcomes**

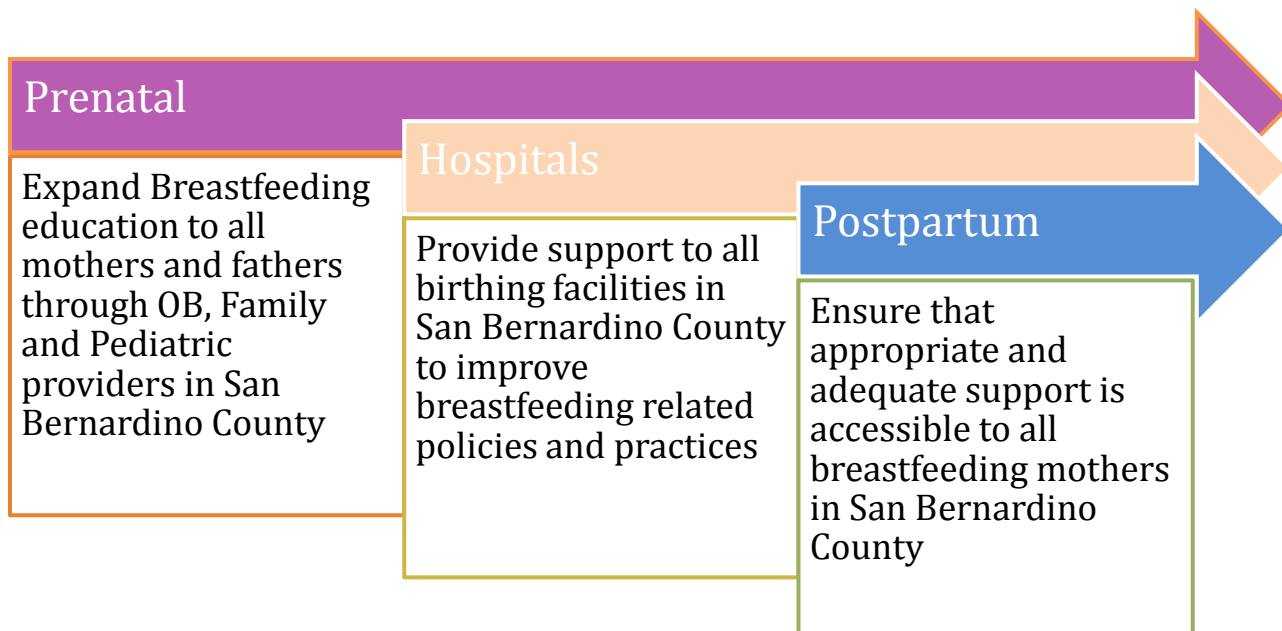
***Surveyed hospitals**

***Toured BF clinics**

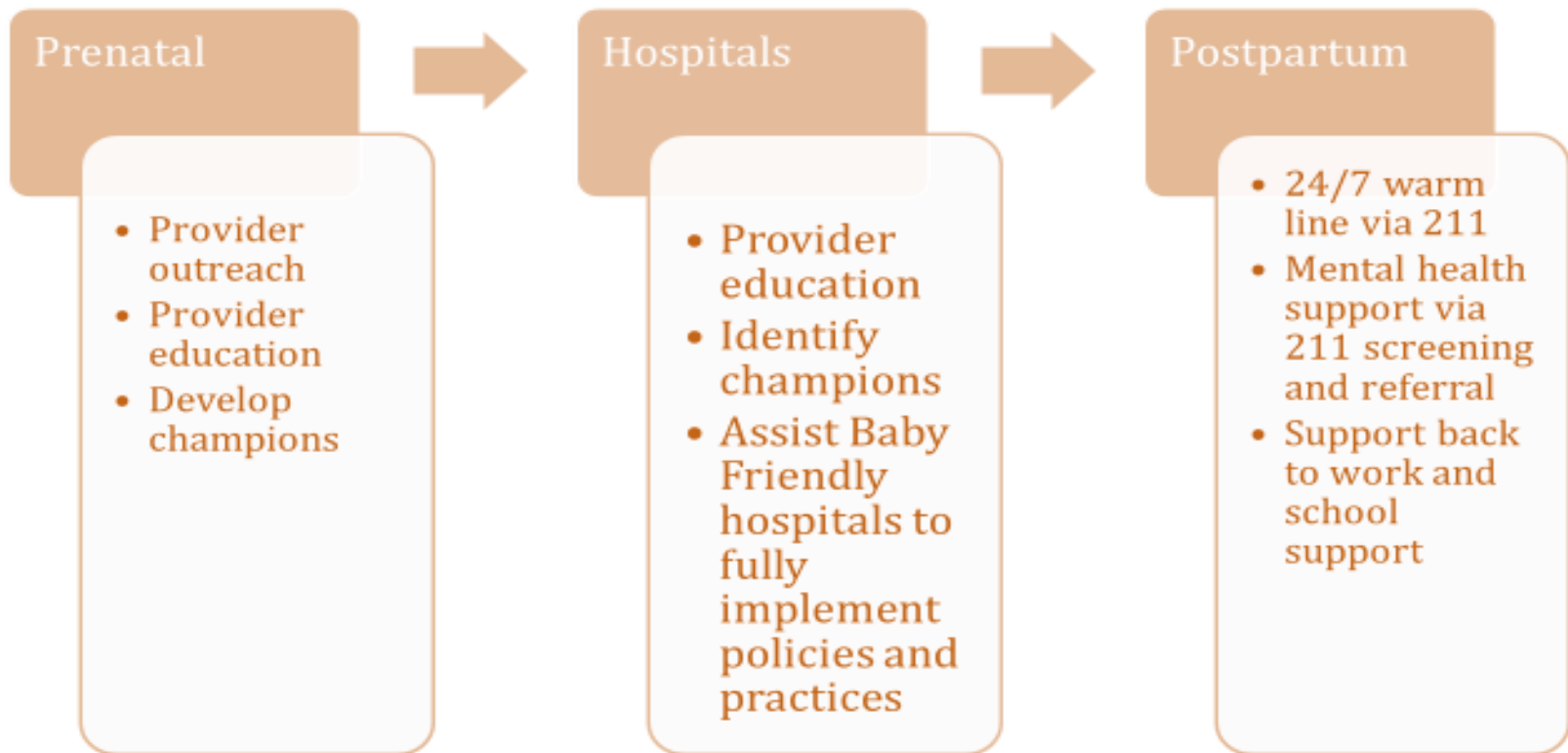
***Strengthened collaborative**

Hospital Policies and Practices Effect Breastfeeding Rates

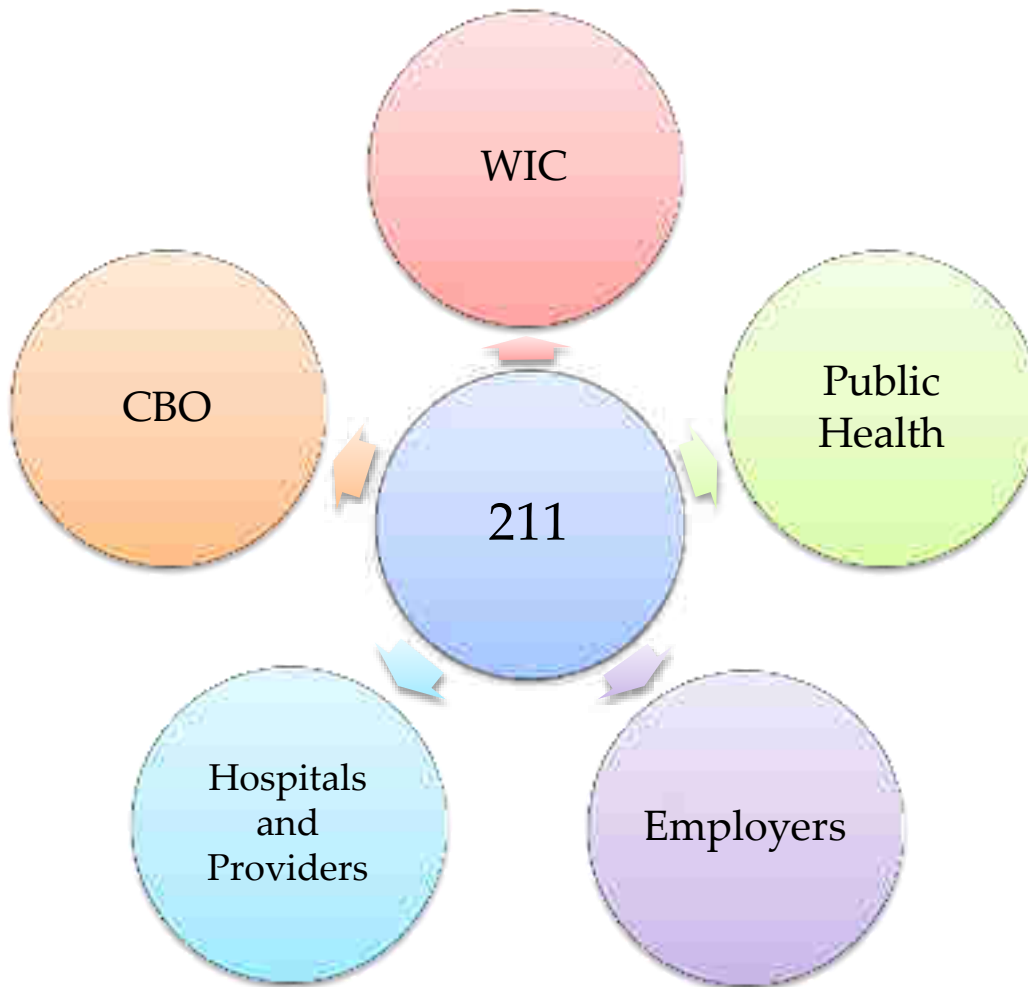




Greater Interconnectivity of Breastfeeding Support Services



How to Connect Residents to 211



Prenatal education by providers

24/7 lactation support and other postpartum support (including mood disorders)

Regional BF Liaison to serve as the link between PH, WIC, the medical community, community groups, and employers.

Secondary survey to OB/GYN, Family Practice, and Pediatric providers to offer support.

Establish a network of support to providers.

Maintain a data system to identify areas of focus outreach and support.

*****The mother makes her decision regarding breastfeeding prior to delivery in more than 90% of cases; therefore, her choice of infant nutrition should be discussed starting in the first and/or second trimester and continue as part of an ongoing dialogue during each obstetric visit.**



Baby's Optimal Nutrition with Ultimate Support

Increase the initiation and duration of exclusive breastfeeding in S.B. County for at least 6 months or longer by providing a 24/7 lactation support line for all residents, regardless of income via 211.

BONUS Program Staff will work with S.B. County providers, clinic/hospital staff, nurses, prenatal staff, IBCLCs, lactation consultants, etc., to encourage exclusive breastfeeding upon discharge from hospital and access to the BONUS Breastfeeding Support Line via 211.

BONUS Program staff will work with workplace/wellness representatives to provide support and accommodation for employees who want to provide breastmilk for their babies while at work, since that has a substantial impact on their duration of breastfeeding.



San Bernardino County Breastfeeding Collaborative Members 2015

- Maxwell Ohikhuare
- Daniel Perez
- Heather Wellons-Blum
- Gretchen Page
- Leslie Bramson
- Gretchen Andrews
- Asun Williams
- Ruben Gasco
- Caryn Nunley
- Cathy Beres
- Damaris Nastaste
- Monica Haag
- Nicolas Barreto
- Silas Molino
- Andrea Rodriguez
- Gil Gagandeep
- Elaina Cano
- Pooneh Navab

“Virtually all mothers can breastfeed, provided that they have accurate information, and the support of their family, the healthcare system and society at large...Breast milk is...the perfect food for the newborn and feeding should be initiated within the first hour after birth.”

The World Health Organization

Let's work together to build a strong network of breastfeeding support systems!



Build and Strengthen Partnerships

