

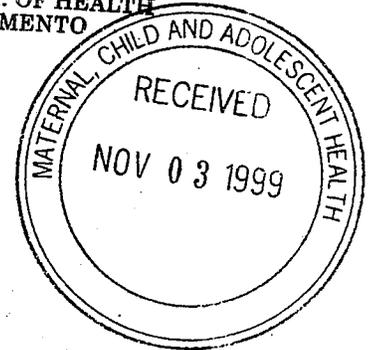
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MATERNAL AND CHILD HEALTH
OPERATIONS SECTION

OCT 25 2006

November 11, 1999
STATE DEPT. OF HEALTH
SACRAMENTO



TO: Local Health Officers

SUBJECT: BREASTFEEDING PROMOTION COORDINATOR

Purpose

The Department of Health Services (DHS) requests that you designate a local health jurisdiction "Breastfeeding Coordinator" to assist us in developing a closer partnership with you in the area of breastfeeding promotion and support (see Enclosure A). The California Breastfeeding Promotion Committee recommended that each Department of Public Health establish a breastfeeding coordinator to facilitate communication between state and local government. In some jurisdictions, the most appropriate designated staff may be a WIC staff member. The Department is in a key position to share breastfeeding promotion ideas and resources to assist you in your efforts to increase local breastfeeding initiation and duration rates.

Local breastfeeding promotion efforts are increasing

At last count, there are 30 regional breastfeeding coalitions in California developing and implementing innovative breastfeeding promotion and support strategies at the local level. The Maternal and Child Health Branch regularly updates the list of regional breastfeeding coalitions in California, which includes a summary of current activities (located in Enclosure B).

Department of Health Services' breastfeeding promotion efforts are increasing

DHS is also moving forward with efforts to increase breastfeeding rates in California. The Department developed a Strategic Plan for Breastfeeding Promotion (Enclosure C) based on recommendations and strategies from the California Breastfeeding Promotion Committee's report, "Breastfeeding: Investing in California's Future." This plan includes over fifty objectives and participation from the following divisions: Medi-Cal Managed Care, Medi-Cal Policy, Licensing and Certification, Primary Care and Family Health, Health Information and Strategic Planning, Chronic Disease and Injury Control, the Office of Women's Health, and the Office of Multi-Cultural Health.

Enclosed is a summary of our key accomplishments, and current activities for your review (Enclosure D). In addition, enclosed is the Medi-Cal Managed Care Division's breastfeeding policy letter to contracted health plans to update you on this tremendous step forward for improving breastfeeding support, not only for Medi-Cal beneficiaries, but for all women in California (Enclosure B).

Why is breastfeeding promotion a priority?

The American Academy of Pediatrics issued a new Policy Statement on Breastfeeding and the Use of Human Milk in December 1997 to reflect the considerable advances that have occurred in recent years in the scientific knowledge of the benefits of breastfeeding, in the mechanisms underlying these benefits, and in the practice of breastfeeding (Enclosure E).

Benefits of Breastfeeding

Scientific research overwhelmingly indicates that breastfeeding is the superior method of infant feeding. Significantly lower rates of diarrhea, ear infections, lower respiratory illness, and childhood lymphomas occur among breastfed infants and children in the United States. Breastfeeding has also been reported to protect against necrotizing enterocolitis, bacteremia, meningitis, botulism, sudden infant death syndrome, urinary tract infection, early childhood caries, juvenile diabetes, and inflammatory bowel disease. Developmentally, breastfed infants have better visual acuity, and evidence suggests that their cognitive development is superior. For mothers, breastfeeding reduces the risk for developing premenopausal breast, ovarian, and endometrial cancer.

The health benefits of breastfeeding translate into significant cost savings from decreased hospitalizations and pediatric visits. Some studies suggest that if all women in the United States breastfed their infants for as little as twelve weeks, the United States could save 2 to 4 billion health care dollars annually. Looking only at ear infections, infants who are exclusively breastfed for at least four months had half the number of ear infections as formula fed infants. In addition, a recent study demonstrated that infants who were never breastfed cost a managed care health system an additional \$331 to \$475 during the first year of life for excess office visits, hospitalizations, and prescriptions compared to infants exclusively breastfed for three months.

What can a Public Health Department Breastfeeding Coordinator do?

Proposition 10 - Incorporating Breastfeeding Promotion and Support

Given that county commissions are currently developing strategic plans to implement activities to enhance early childhood development through funds provided by Proposition 10, a timely opportunity exists for identifying and proposing solutions for gaps in breastfeeding promotion and support services. A Public Health Department Breastfeeding Coordinator could assist in this effort by networking with other public health programs, i.e. Women, Infants, and Children (WIC) Supplemental Nutrition Branch, Comprehensive Perinatal Services Program, and Public Health Nursing to identify and develop proposals for integrated, coordinated, and comprehensive breastfeeding services.

**What can a
Public Health
Department
Breastfeeding
Coordinator do?
(cont.)**

Enclosed is a resource, "Breastfeeding and Early Childhood Development," which was developed by the WIC Branch and documents the relationship between breastfeeding and early childhood development and includes ideas for incorporating breastfeeding activities into Proposition 10 (Enclosure F).

Establish a Breastfeeding Friendly Work Environment

A Department of Public Health Coordinator can assist in efforts to establish breastfeeding friendly workplaces. As health care leaders in the community, it is our responsibility to reduce this common barrier to breastfeeding, particularly within our own workplace. Encourage your Breastfeeding Coordinator to start by establishing a written breastfeeding policy.

In order for mothers to express milk regularly to maintain their supply, they need a comfortable and private space for pumping, other than a bathroom, a refrigerator to store their milk, and an electric pump to shorten the time to express milk. Mothers often need flexible breaks and work hours to accommodate their pumping schedules.

Providing an environment which supports breastfeeding can also reap substantial benefits to employers. In a recent study of lactation programs run by both the Los Angeles Department of Water and Power and the Aerospace Corporation, infants who were breastfed had 33 percent fewer illnesses than bottle-fed infants and 21 percent fewer illnesses that led to a parent's absence from work. The overall net impact of the programs was to decrease absenteeism by 28 percent and sick child health care claims by 36 percent.

Action needed

DHS looks forward both to receiving the enclosed form from you by fax to Deanna Lester at (916) 928-0610, at the WIC Branch, by November 30, 1999, identifying your Department of Public Health Breastfeeding Coordinator and to assisting you in your continued efforts to increase breastfeeding rates in your county (Enclosure A). The Department appreciates your attention to this important public health issue.

Local Health Officers

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Questions

If you have any questions, please contact me at (916) 657-1425, or
Phyllis Bramson-Paul, Chief of the WIC Branch at (916) 928-8806.



Diana M. Bontá, R.N., Dr. P.H.
Director

Enclosures

cc: Maternal and Child Health Directors
Directors of Public Health Nursing
California Conference of Local Health Department Nutritionists
Primary WIC Program Contact
Regional Breastfeeding Coalitions
California Breastfeeding Promotion Committee