

BREASTFEEDING

ISSUE:

All major medical authorities recommend that babies receive no food or drink other than human milk for their first six months and continue to breastfeed, after the introduction of complementary foods around 6 months of age, for at least the first 1-2 years of life. The nutritional, immunological, and psychosocial benefits are well documented. Breastfeeding provides significant economic and ecologic savings for families, businesses and society.

BACKGROUND:

Implementation of best practices to ensure that skilled lactation support is provided throughout healthcare and the community is imperative to the exclusivity and longevity of breastfeeding. All families must have access to lactation support as long as they desire from the prenatal period on. Additionally, provision of human donor milk should be obtainable for vulnerable infants whose mother's own milk is not available for use. All levels of lactation support should be provided using a culturally competent and equitable approach.

Successful community-wide education programs include education to public agencies, businesses and media about the multiple benefits of breastfeeding for mothers and babies, as well as a mother's right to nurse wherever and whenever her infant requires. These initiatives will assist with the normalization of breastfeeding in the communities they serve. Development of multidisciplinary breastfeeding task forces and implementation of evidence-based initiatives will aid in improving breastfeeding initiation and duration in the community.

Communities need to become aware of the cost benefit of breastfeeding and how to provide support for breastfeeding in the workplace, schools, colleges, day care centers, and public places. Health curricula, kindergarten through twelve, should include the benefits of breastfeeding as well as the anatomical and physiological dynamics of the process. In addition, lactation and breastfeeding supportive techniques should be included in university curricula for medical, nursing, and allied health professional programs. Obstacles to breastfeeding within the health care system, workplace and community should be identified and eliminated.

STRATEGY:

Establish perinatal programs that provide direct support and education beginning with preconception care and continuing throughout the postpartum period.

Following discharge, a program for home health services, office visits, community resources and referrals to breastfeeding support personnel should be identified as part of every care plan for the family.

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