
IOWA BREASTFEEDING HEALTH

Iowa Breastfeeding Coalition Newsletter Developed for Health Professionals to Support Breastfeeding

Mission Statement

Providing, promoting, and coordinating breastfeeding education, support, and evaluation through local coalitions, health care providers, educational institutions, and other interested individuals.

IBC Goals

1. Assure access to comprehensive, current, and culturally appropriate lactation care and services for all women, children, and families.
2. Ensure that breastfeeding is recognized as the normal and preferred method of feeding infants and young children.
3. Ensure that all state and local laws relating to child welfare and family law recognize and support the importance and practice of breastfeeding.
4. Increase protection, promotion, and support for breastfeeding mothers in the work force.

Information provided and distributed by the Iowa Breastfeeding Coalition



IBC Fall Meeting Presentation

The Iowa Breastfeeding Coalition hosted Billie Jo Clausen, MS, IMHS-E for an educational presentation titled “Social Emotional Learning 101: All about Attachment” at the November 9, 2021 Fall Meeting. The presentation slides and recording can be found on the IBC website in the members’ only section under member exclusives. Check it out!

Join the Coalition

Join the coalition to connect with other breastfeeding advocates across the state of Iowa! Membership runs from May to May. The coalition is a group of lactation consultants, counselors, educators, and specialists, dietitians, nurses, health professionals, peer counselors, mothers, and other interested individuals who are passionate about breastfeeding and want to promote and protect the rights of breastfeeding families in Iowa.

Get Involved

Interested in becoming more involved in the coalition? Want to work on a breastfeeding project? Contact us for more details at iowabreastfeedingcoalition@gmail.com.

Invitation for Input

Have a topic you would like to see in the newsletter? Submit it through the Contact Us section of the website. We’d love to spotlight some successes and accomplishments of our members.



Iowa Breastfeeding Coalition Gear

Check out our IBC merchandise! We have a variety of t-shirts and sweatshirts available to show your support of the coalition.

<http://iabreastfeeding.org/store>

Calendars

There is still plenty of time to order your IBC calendar. They run from July 2021 through December 2022. They can be found at

<http://iabreastfeeding.org/store>.

IBC Board Members

Co-Chair:

Marieta Boberg,
MS, RD, LD, IBCLC

Co-Chair:

Mollie O'Brien,
DNP, ARNP, FNP-C

Secretary:

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Jennifer Vinnece,
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Board Liaison:

Nicole Newman,
RD, LD, CLC

Newsletter Editor

Angie Mach,
CLC

Local Coalition Update Request

We'd love to hear from you about what your local coalitions are up to! Send local coalition events, activities, or accomplishments to be shared in an upcoming newsletter to the coalition at

iowabreastfeedingcoalition@gmail.com.

Identify the Issue

Written by Angela E. Bigler Swieter, RN, BSN, IBCLC, ICCE,
owner of Basking Babies LLC

Challenge yourself and review your assessment skills by reading the clues and seeing if you can identify the issue most likely being described: Your breastfeeding client is ten weeks postpartum. Breastfeeding had been going well. She presents with a tender red area on her right breast and no complaints or discomfort with her left breast. She states she feels like she has the flu: headache, body aches and fatigued. Her temperature is 101 F. Can you identify the issue?

Milestone Minutes

The first years of a child's life are the most important period of development physically, emotionally, cognitively, and socially. The ways infants and children play, learn, speak, act, and move provide important clues about their development. Developmental milestones are things most children can do by a certain age and play an important role in infant feeding. The milestones are different for each age range and there is a normal range in which a child may reach each milestone. The American Academy of Pediatrics recommends that infants be **exclusively breastfed for about the first 6 months** with continued breastfeeding along with introducing appropriate complementary foods for 1 year or longer. WHO and UNICEF recommend early initiation of breastfeeding within 1 hour of birth, exclusive breastfeeding for the first 6 months of life, and introduction of nutritionally-adequate and safe complementary (solid) foods at **6 months together with continued breastfeeding** up to 2 years of age or beyond.

Milestones at 6 Months

6 months			
Movement Milestones	<ul style="list-style-type: none"> • Sit steadily without help for longer periods • Sit and bounce on their bottom • Push up from their tummy onto hands and knees, and rock back and forth • Rolls over in both directions (front to back, back to front) 	<ul style="list-style-type: none"> • Pick up, hold, and control an object using both hands • Bang objects together. • Explore objects by grabbing, shaking, sliding and banging them • When standing, supports weight on legs and might bounce 	<ul style="list-style-type: none"> • Progress from holding things in her palm to using the thumb and first and second fingers • Rake at tiny objects with hands • Pick up larger objects with fingers
Visual and Hearing Milestones	<ul style="list-style-type: none"> • Responds to own name • Responds to sounds by making sounds • Looks or turns toward a new sound 	<ul style="list-style-type: none"> • Can see much farther away (several feet or more) • Can tell the difference between different colors • Has full color vision 	<ul style="list-style-type: none"> • Will turn head to see an object • Likes certain colors • Will touch image of self in mirror
Emotional Milestones	<ul style="list-style-type: none"> • Show strong feelings about likes and dislikes for certain people, objects or places • Refuse to do some things. For example, push a spoon away during feeding time 	<ul style="list-style-type: none"> • Laugh • React to other people’s moods. If you are sad, your baby may cry. If you are happy, your baby may laugh along with you 	<ul style="list-style-type: none"> • Show fear (possibly by crying) if he is scared • Show fear of strangers • Look worried about loud noises, such as vacuum cleaners, loud stern voices or banging
Social Milestones	<ul style="list-style-type: none"> • Seek attention • Want to take part in activities with people 	<ul style="list-style-type: none"> • Not want to be away from you or other caregivers • Likes to play with others, especially parents 	<ul style="list-style-type: none"> • Be sensitive to other children and perhaps cry if they cry
Communication Milestones	<ul style="list-style-type: none"> • Point to things for a reason • Begins to say consonant sounds (jabbering with “m,” “b”) 	<ul style="list-style-type: none"> • Begin mimicking, such as sticking out their tongue • Makes sounds to show joy and displeasure 	<ul style="list-style-type: none"> • Strings vowels together when babbling (“ah,” “eh,” “oh”) and likes taking turns with parent while making sounds
Cognitive Skills (Thinking, Learning, and Problem-solving)	<ul style="list-style-type: none"> • Focus when doing something, ignoring other things that are going on • Begins to pass things from one hand to the other • Looks around at things nearby 	<ul style="list-style-type: none"> • Recognize the appearance, sound, and touch of familiar people • Shows curiosity about things and tries to get things that are out of reach • Brings things to mouth 	<ul style="list-style-type: none"> • Recall the memory of a person, like a parent, or object when that person or object is not present. This cognitive skill is called object permanence
Feeding Milestones	<ul style="list-style-type: none"> • Continue to breastfeed • Ready for introduction of complementary foods • Easier acceptance of new foods • Shows preference for and rejection of foods 	<ul style="list-style-type: none"> • Gag response declines as mouth becomes more used to the feel of food • Can move food from side to side in mouth • Shows better regulation with responsive feeding 	<ul style="list-style-type: none"> • Can show that they have had enough food by: <ul style="list-style-type: none"> ○ turning head away from the spoon ○ clenching mouth shut ○ spitting food out ○ holding food in mouth

For more information about developmental milestones, visit [CDC’s Developmental Milestones](#).

[CDC’s Milestone Tracker App](#) tracks children’s milestones from age 2 months to 5 years. Download it *free* on [iOS](#) and [Android](#) devices in English and [Spanish](#)!

Upcoming Events

Online Conferences & Webinars:

Gold Learning Online Continuing Education

Lecture Library with individual lectures or bundles

<https://www.goldlearning.com/ce-library/all-lectures>

Great Lakes Breastfeeding Webinars

Michigan Breastfeeding Network, Free

<https://www.mibreastfeeding.org/webinars/>

USBC “Power Tools” Webinars

United States Breastfeeding Committee

Bimonthly webinars, Free

<http://www.usbreastfeeding.org/power-tools>

IABLE Breastfeeding Webinars

Several webinars available for a cost

<https://lacted.org/events/>

Online Lactation Education: 45-90 Hour Courses

Certified Lactation Specialist (CLS) Course

February 23-25, 28, and March 1, 2022

March 21-25, 2022

April 20-22 & 25-26, 2022

46 hours

<https://lactationeducation.com/clsc>

Lactation Education Counselor (LEC) Course

UC San Diego Extension

45 hour course offered every quarter

<https://extension.ucsd.edu/courses-and-programs/lactation-education-counselor>

Certified Lactation Counselor (CLC) Course

52 hours course, self-paced- have 6 months to complete

https://centerforbreastfeeding.org/register_lctc/

Lactation Education Program

Arizona State University

90 hours, self-paced

<https://courses.cpe.asu.edu/browse/nursing-health-innovation/courses/cpe-lac-101>

Medline Breast Pump Information

The Iowa Breastfeeding Coalition members had the opportunity to hear from Medline at the Fall 2021 meeting. They shared information about double electric breast pumps that are now covered by Amerigroup of Iowa and Iowa Total Care as an MCO value-added benefit. Several resources are available for support persons working with pregnant or breastfeeding women to assist them in getting a breast pump. Amerigroup of Iowa started offering the pump benefit on January 1, 2021, and Iowa Total Care went live July 1, 2021. To date, 1,241 pumps have been issued to Amerigroup clients and 761 to Iowa Total Care clients for a total of 2,002 in 2021. Below is the contact information, websites, and resources for breast pumps from Medline.

Customer Service Lines:

Amerigroup of Iowa: 833-881-1424

Iowa Total Care: 833-881-1425

Breast Pump Request Websites:

Amerigroup of Iowa:

<https://athome.medline.com/amerigroupia>

Iowa Total Care:

<https://athome.medline.com/en/iowatotalcare>

Troubleshooting Guide:

https://www.medline.com/media/catalog/Docs/MKT/LIT_e20350_SSH_Breast_Pump_Troublesho.pdf

Pump Instruction Videos:

English: <https://player.vimeo.com/video/318638334>

Spanish: <https://vimeo.com/635459887>

US Breastfeeding Committee 2021 Conference Update

Mollie O'Brien, DNP, ARNP
IBC Co-Chair

The USBC held their annual conference in June of 2021. Fortunately, multiple members of the IBC board were able to attend due to its virtual platform. In line with current events the past few years, the majority of speakers shared projects and/or evidence-based recommendations addressing health equity and emergency preparedness. One presentation resonated with me and encompassed the full spectrum of health equity (or inequity). Nekisa Killings, MPH, IBCLC, and owner of Lioness Lactation, LCC, presented, "It Could All Be So Different: Addressing the Chasm of Image Diversity in Lactation". I will share the highlights.

The majority of breasts in lactation education represent Caucasian women. Black and brown breasts are marginalized in the literature, making up only 10% of images, even though worldwide they make up 76% of our population. This thought alone is striking. This means lactation professionals are not given an education that accurately represents the group of individuals they will most likely encounter. If this is true for lactation education, it is also likely true about medical education. All of this is frightening. If as professionals we aren't given the educational tools that represent breastfeeding concerns in different races, how are we equipped to accurately assess and treat those issues? It also means that try as we might, we can't possibly treat all breasts equally. As a result, breastfeeding mothers with black or brown skin receive suboptimal lactation care.

While breastfeeding issues such as mastitis have distinct differences in their physical presentation, the biology remains the same. A great example Nekisha shared was *erythema*. On white breasts, erythema is red. It is not the same on darker-skinned breasts. As a presenting sign of mastitis, unobserved erythema could have painful and devastating outcomes. We can work to change the representation of black and brown breasts going forward, but we can't change today. What we can do, is be aware of this marginalization and hone in our assessment skills when working with breastfeeding mothers to be able to diagnose and treat issues early.

State Breastfeeding Strategic Plan

The State Breastfeeding Strategic Plan work continues to move forward with a goal to promote and support breastfeeding and increase the breastfeeding rates in Iowa. In October 2021, Coffective hosted a meeting with the team of Iowa Department of Public Health program representatives including WIC, Maternal Health, Child Health, Child Care, 5-2-1-0, SNAP Ed, Health Equity, and MIECHV, along with state partners from the Iowa Breastfeeding Coalition, Mother's Milk Bank of Iowa, Amerigroup of Iowa, Iowa Total Care, La Leche League, AWHONN, IME, Wellmark, SIDS Foundation, Common Good Iowa, Iowa Hospital Association, Iowa Economic and Financial Authority, Count the Kicks, UIHC, Association of Nurse Practitioners, Iowa Lactation Consultant Association, Young Women's Resource Center, Iowa Physician Assistant Society, Legislators, Iowa Black Doula Collective, Primary Health Care, Iowa Department of Administrative Services, Iowa Department of Education, Iowa Department of Human Services, Certified Midwife Group, and Iowa Healthiest State.

Outputs from the work thus far include state partner profiles, a real-time network map, and a landscape opportunity analysis. The partner profiles and recommendations in the landscape opportunity analysis were developed with input from conversations Coffective had with each partner. Some focus areas in the landscape opportunity analysis include developing a central database for maternal and child health resources, supporting breastfeeding friendly work sites, proposing legislation for paid family medical leave, modeling a state level worksite breastfeeding support program, promoting child care breastfeeding initiatives, developing lactation centers within public health departments, reviewing statewide referral processes and procedures, creating a breastfeeding education and training program that could be integrated into partner program training curriculums, and considering opportunities to incorporate equity into resources, training, and projects. The Iowa Breastfeeding Coalition was mentioned in several of the recommendations as the state-level coalition and plans to be involved in partnerships encouraged by Coffective.

Over the past couple of months, state partners were provided the opportunity to review and provide input and data sources for the landscape opportunity analysis. The IDPH team plans to meet, review the input received, and set goals and objectives for the project in the upcoming months.

Identify the Issue Answers

Answers by Angela E. Bigler Swieter, RN, BSN, IBCLC, ICCE, owner of Basking Babies LLC

We are not making any diagnoses but it presents like mastitis. Approximately 15-20% of nursing moms experience mastitis.

What is mastitis and what causes it?

- Mastitis is a breast inflammation generally caused by milk not draining well and then irritating the breast by leaking or backing up in to the breast tissue.
- There is also the possibility that bacteria has entered the breast through a damaged nipple, which could also cause this inflammation.
- Another possible cause can be that feedings have been interrupted, going a longer time between feedings so that breasts get overfull.
- It is also a possibility that a purse or diaper bag strap has pressed into the breast restricting the flow or backing up the milk. This could also be caused by mom sleeping on her stomach.

SUGGESTIONS FOR MOM

Some moms have used home remedies and report they are able to resolve the issue without the use of antibiotics if they start as soon as they notice the symptoms. If non-antibiotic treatment has not improved the symptoms after 24 hours, the health care provider (HCP) should be contacted. A prescription of oral antibiotics may be necessary.

Here is a list of a variety of home remedies:

- Nurse frequently.
- Wear comfortable fitting bras and clothes.
- Eat a healthy, well-balanced diet.
- Get plenty of rest (not sleeping on stomach).
- If open areas/cracks are found on the nipple, care should be taken to promote healing.
- Oftentimes, sore nipples are due to improper latch so mom should work with a lactation specialist to improve latch.
- It is important to nurse the baby frequently on the affected side (when he or she nurses the most vigorously) and massaging the affected area toward the nipple often expedites the healing process. Vary feeding positions. Sometimes a baby will not feed on the affected side as the milk may taste saltier. If the baby will not nurse on the affected side, mom

should pump and hand express at least every 2 to 3 hours to empty that breast and continue to offer this breast to the baby until he begins to feed on this side again.

- Between feedings, cold compresses may help with inflammation.
- Very cold, raw cabbage leaves placed 2 to 3 times per day for 15 minutes on the affected area can reduce inflammation and pain and can also help draw out infection and heat.
- If a cold poultice (a moist preparation placed on an aching or inflamed part of the body) is desired, the use of a cold, grated raw potato can be placed on the breast and covered with a towel.
- Taking an anti-inflammatory recommended by your health care provider will also decrease the inflammation.
- Sometimes using both warmth and cold may be comforting. Taking a warm shower may help mom to relax and allow the milk to be hand expressed while in the shower. This will loosen any clogged areas and may help with the inflammation and pain. Some mothers like to use cold between feedings and then apply warmth right before the feeding.
- Raw garlic acts as a broad-spectrum antibiotic and can be taken raw.
- Echinacea assists the body in fighting off infections.
- Some moms report that taking Vitamin C and consuming more foods high in vitamin C is helpful. This would include bell peppers, dark leafy greens, broccoli, cauliflower, Brussel sprouts, kiwi, papayas, strawberries, oranges, and the herbs: thyme and parsley.

Remember, if the above remedies do not resolve the issue within 24 hours and/or the condition worsens, the HCP should be notified. The risk of developing an abscess is a possibility when mastitis goes without proper treatment. Oftentimes the HCP will prescribe an antibiotic.

Most importantly, encourage the mom that mastitis does clear up and she can continue to enjoy many months of breastfeeding her baby.

These suggestions are remedies that work for some moms, but they are not meant as a treatment plan for every situation. Care and support from an International Board Certified Lactation Consultant and/or mom's health care provider is always recommended.