BECOMING BABY-FRIENDLY IN OKLAHOMA 7TH ANNUAL SUMMIT, FEBRUARY 22, 2019







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|--|---|--|--|
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Disclosure

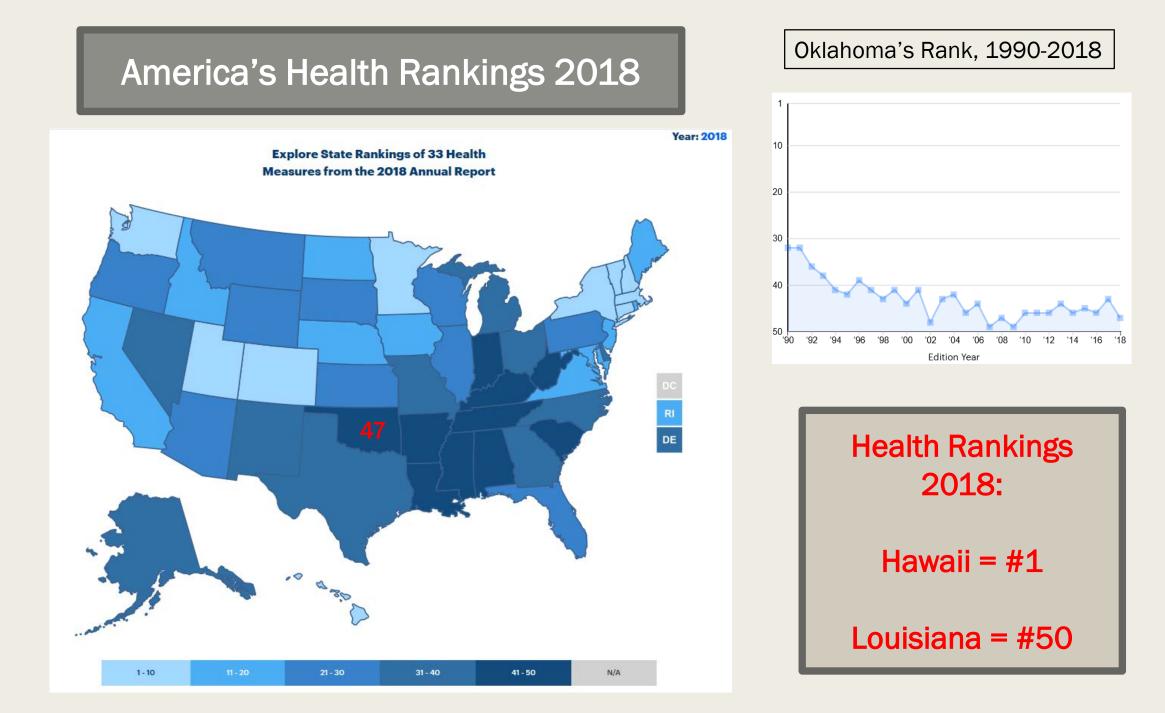
- I DO NOT have a financial interest/arrangement or affiliation with one or more organizations that could be perceived as a real or apparent conflict of interest in the context of the subject of this presentation.
- I also serve as Executive Director of the nonprofit Oklahoma Mothers' Milk Bank
- I am a new grandmother!

STATE OF THE STATE: Addressing Breastfeeding Barriers Through Policy and Research

Becky Mannel, MPH, IBCLC, FILCA Clinical Assistant Professor, Dept of OB/GYN Director, Oklahoma Breastfeeding Resource Center

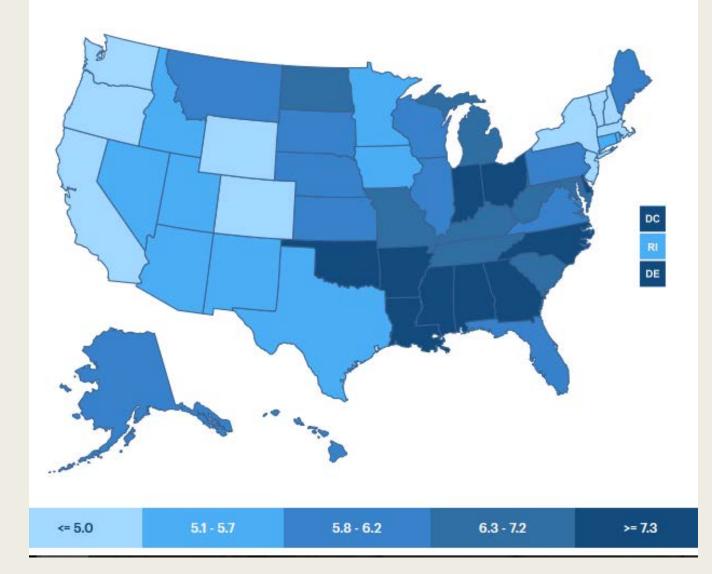
OBJECTIVES

Describe current breastfeeding rates
Identify current barriers to breastfeeding
Apply research and/or policy to reduce barriers



U.S. Infant Mortality Rate by State 2018

Number of infant deaths (before age 1) per 1,000 live births (2-year average)

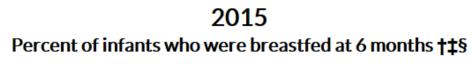


Source: CDC Wonder, 2018

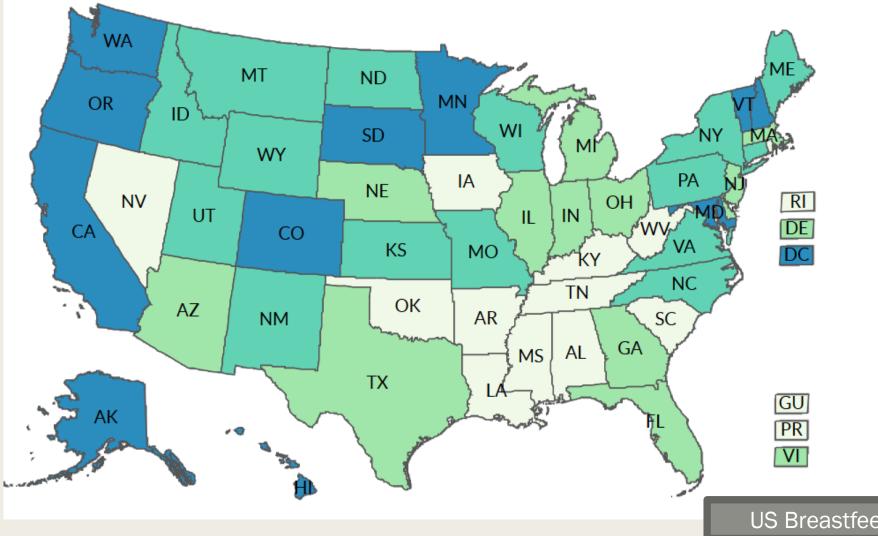
Oklahoma's Infant Mortality Rate

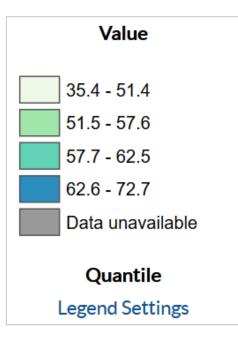
Overall 2018 IMR = 7.4 infant deaths per 1,000 live births

- Racial and ethnic disparities persist
 - White, 6.1
 - Black/African American, 13.9
 - American Indian, 9.7
 - Asian/Pacific Islander, 7.7
 - Hispanic, 7.4



View by: Total



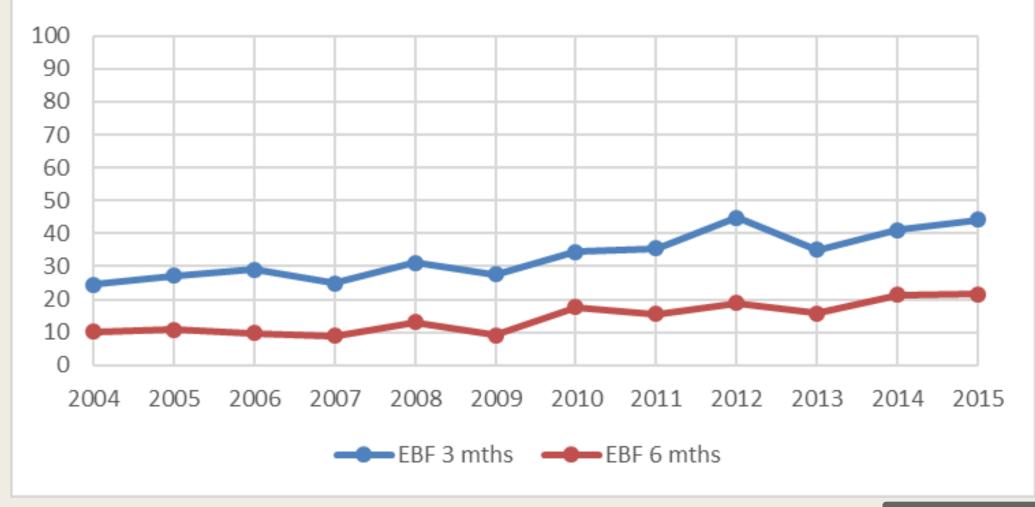


US Breastfeeding Rates, CDC 2018

Oklahoma Breastfeeding Rates Babies Born in 2015

| 2018(CDC) | National | Oklahoma | Ranking (out of 50) |
|--------------------------|----------|----------|-------------------------|
| Ever breastfed | 83.2% | 75.9% | 44 th |
| Any Bfdg at 6 months | 57.6% | 49.0% | 45 th |
| Any Bfdg at 12 months | 35.9% | 31.0% | 40 th |
| EBF at 3 months | 46.9% | 44.2% | 35 th |
| EBF at 6 months | 24.9% | 21.6% | 41 st |

Oklahoma Exclusive Breastfeeding Rates Babies Born 2004-2015



CDC 2018

Breastfeeding vs Percent of Poverty 100 90 80 70 60 50 40 30 20 10 0 Less than 100 100 - 199200-399 400-599 600 or greater Ever Breastfed Any Bfdg – 6 mths Any Bfdg – 12 mths

Babies Born

in 2015

U.S. Breastfeeding Rates, CDC 2018

Child Economic Well-Being in Oklahoma

- 22% of Oklahoma children live in poverty
 - "Growing up in poverty is one of the greatest threats to healthy child development. Poverty and financial stress can impede children's cognitive development and their ability to learn." Annie E. Casey Foundation



Child Economic Well-Being in Oklahoma

- Breastfeeding provides <u>equal</u> <u>opportunity to all children</u> for optimal development
 - "Breastfeeding is a child's first inoculation against death, disease, and poverty, but also their most enduring investment in physical, cognitive, and social capacity." Keith Hansen, Vice President, World Bank



Breastfeeding Saves Lives Calculator

www.usbreastfeeding.org/saving-calc

Based on expected impact on 5 maternal and 9 pediatric diseases

MATERNAL

- Pre-menopausal ovarian cancer
- Breast cancer
- Hypertension
- Diabetes
- Myocardial Infarction

. .

Crohn's Disease

PEDIATRIC

- Ulcerative Colitis
- Sudden Infant Death Syndrome

Acute Lymphoblastic Leukemia

- Ear Infections
- Gastrointestinal Illness
- Obesity
- Lower Respiratory Tract Infection
- Necrotizing Enterocolitis

Accessed February 13, 2019

If we achieved 80% EBF at 6 Months



Medical Costs \$33,086,161 (\$21,996,764 to \$45,822,207)

Non Medical Costs \$14,004,363 (\$11,492,067 to \$16,924,695)

Death Costs \$164,496,827 (\$42,578,303 to \$300,675,219)

> Maternal deaths 28 (-7, 67)

> > Child deaths 9 (2, 17)

BARRIERS

- 1. Inaccurate or no information
- 2. Lack of support in hospitals
- 3. Lack of support in communities
- 4. Lack of support in workplaces

Barrier 1: Inaccurate or No Information About Breastfeeding

Where do mothers get information about breastfeeding?

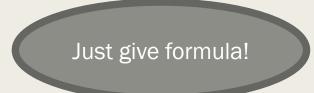


Gallup: Texting is most common form of communication for adults <50 17% of women received NO advice about breastfeeding during pregnancy

CDC 2014

Social Media! Facebook Twitter Instagram

Misinformation campaigns





COMPLICATIONS FROM THE BABY-FRIENDLY PROTOCOL

The Fed is Best Foundation has received tens of thousands of stories from mothers whose children have suffered serious starvation-related complications while exclusively breastfeeding with insufficient breast milk. The most common reasons mothers cite for these complications were failures by their health providers and health educators to teach them about:

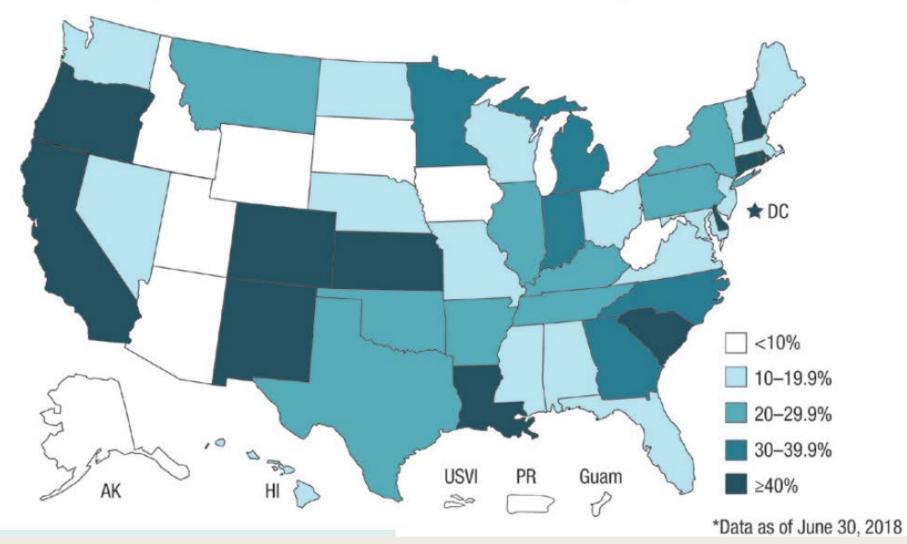




"IS BABY-FRIENDLY SAFE?": BFHI SAFETY ISSUES DISCUSSED AT NATIONAL NEONATOLOGY CONFERENCE

Barrier 2: Lack of Support in Hospitals

Percentage of Live Births at Baby-Friendly Facilities, 2018*



Barrier 3: Lack of Support in Communities



1000s of negative comments over Instagram photo of black girl breastfeeding her doll

BREASTFEEDING

Black Breastfeeding Caucus (BBC) Calls On Disney Parks To Apologize

January 16, 2019



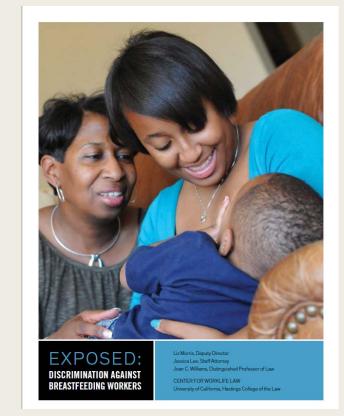
On Christmas Day, Alleah Erica Clarke was at DisneyWorld in Orlando with her 8-month old son for his first Christmas. What was supposed to be a magical experience turned into every breastfeeding mom's nightmare when a Disney Parks cast member called security on her,

Barrier 4: Unsupportive Workplaces

EXPOSED: Discrimination Against Breastfeeding Workers

"I had a male supervisor tell me that I shouldn't get time to "'play with myself." Sarah, US Air Force

This first comprehensive report on breastfeeding discrimination



Due to an unintended legal technicality, over 9 million women of childbearing age are not covered by the Break Time for Nursing Mothers law, the federal law that provides break time and private space for milk expression.

Mothers That Are Not Protected By Current Laws

- Salaried employees, e.g. school teachers
- Military employees and spouses
- Incarcerated mothers

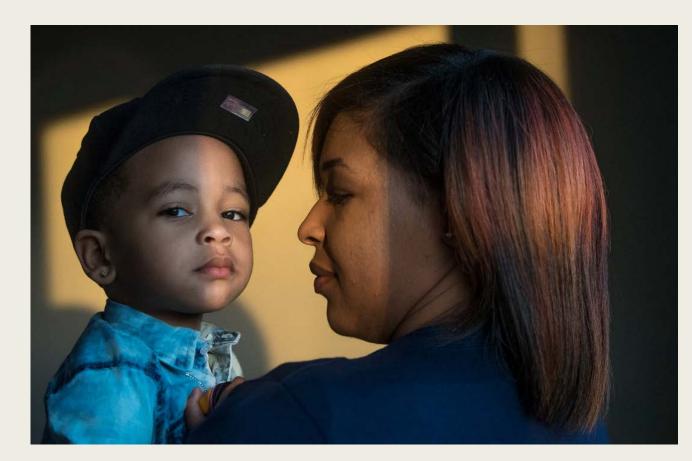


Breastfeeding in Combat Boots



Barrier 4: Unsupportive Workplaces

'A Pumping Conspiracy': Why Workers Smuggled Breast Pumps Into Prison



Tishanta Olds and her son. Ms. Olds refused to pump in the men's restroom at the prison where she worked, so she sneaked a manual breast pump inside.

NY Times December 2018

Maternity Leave and FMLA

- FMLA is UNPAID and not accessible to 63% of working Oklahomans
- In 66% of Oklahoma households with children all parents with paid jobs
- Key family breadwinners:
 - 85% of Black mothers
 - 51% of white mothers
 - 45% of Latina mothers

23% of new mothers go back to work by 2 weeks www.inthesetimes.com

Paid Leave Means A Stronger Oklahoma

JANUARY 2018

The vast majority of working people in the United States do not have paid family leave through their jobs.¹ In Oklahoma, even *unpaid* leave under the federal Family and Medical Leave Act is inaccessible for 63 percent of working people.² This means Oklahomans face impossible choices when new children are born or adopted and when serious personal or family health needs inevitably arise.

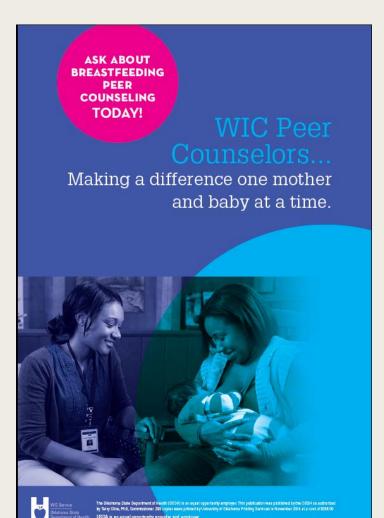
SOLUTIONS

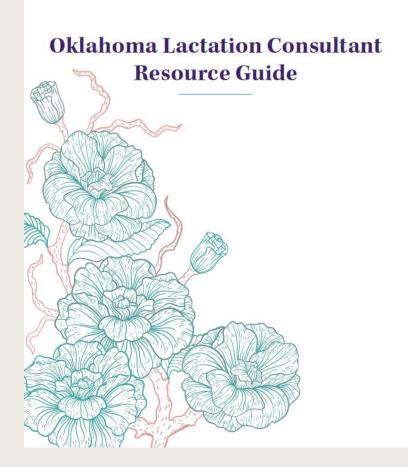
Barrier 1: Providing Accurate Information About Breastfeeding



- Importance of breastfeeding
- Why exclusive breastfeeding
- Importance of early skin-to-skin contact, early initiation and rooming-in on a 24-hour basis
- Baby-led feeding
- Frequency of feeding in relation to establishing a milk supply
- Effective positioning and latch techniques

Barrier 1: Providing Accurate Information About Breastfeeding





Updated 2x/year by OSDH/WIC

Barrier 1: Providing Accurate Information About Breastfeeding



Get in touch! 🦸 🛒 📼

HOME LAW/POLICY HEALTH CARE BREASTFEEDING AT WORK BREASTFEEDING HELP



Fun, Free, Drop-In Breastfeeding Cafés

ADVOCACY

Pregnant and thinking about breastfeeding? Already breastfeeding and want to meet other moms? Have breastfeeding concerns?

COBA Baby Cafe Facebook Page

Many Oklahoma hospitals host mother-to-mother support groups, especially those working on Baby-Friendly



BREASTFEEDING RESOURCES FOR MOMS

The resources listed are available for nursing moms, partners and families, expecting parents, hospitals, and anyone else needing breastfeeding information and support. For more details on the organizations, please visit the COBA website at <u>www.okbreastfeeding.org</u>.

COBA Coalition of Oklahoma Breastfeeding Advocates

Oklahoma Breastfeedii Hotline

877-271-MILK (6455) The hotime is available 24/7, free of charge, using a call-back system. Both English and Spanish speaking callers can leave a message for a return call from an International Board Certified Lactation Consultant

wie

The Women, Infants, and Children program has about 35 clinacs in Oklahoma where mothers can meet with breastfeeding peer counselors to receive breastfeeding education, a well as follow-up support. A list of WIC clinacs can be found at ywww.fiss.usda.gov/wic/wo men-infants-and-childrenwic

Milk Mons Milk Mons offers free weekly drop-in mother-tomother breastfeeding support in Oklahoma City, facilitated by a Certified Lacuation Counselor. Updates can be found on the Milk Mons Facebook page at www.facebook.com/milkm onsokc

Barrier 2: Providing Quality Support in the Hospital



Breastfeeding Programs and Policies, Breastfeeding Uptake, and Maternal Health Outcomes in Developed Countries

Evidence Summary

Background

In reproductive physiology, lactation follows pregnancy; a growing body of evidence supports the association between breastfeeding and better health outcomes for both infants and mothers.1-3 A 2007 Agency for Healthcare Research and Quality (AHRQ) review by Ip and colleagues concluded that breastfeeding was associated with reduced maternal type 2 diabetes, breast cancer and ovarian cancer, but not fractures.2 For other outcomes (e.g., postpartum depression), the authors concluded that the relationship between breastfeeding and maternal health was unclear. Since 2007, several new studies have reported on maternal outcomes not addressed in the 2007 AHRQ review, including hypertension, rates of myocardial infarction, and other cardiovascular outcomes 47

In 2014, an estimated 82.5 percent of infants born in the United States were breastfed at birth, meeting Healthy People 2020 targets for the percentage of infants who are ever breastfed (81.9%). However, rates of breastfeeding duration fell short of Healthy People 2020 targets. In 2014, only 55.3 percent of women breastfed at 6 months and 33.7 percent at 12 months⁴ (falling short of the 2020 targets of 66.6 and 34.1 percent, respectively, for 6 ma 12 months)³ Rates of exclusive breastfeeding through 3 and 6 months Purpose of Review To summarize the effectiveness of community, workplace, and health care system-based programs and policies atmod at supporting and promoting breastfeeding, and to determine the association between breastfeeding and matemah health.

Key Messages

duration

Baby-Friendly Hospital Initiative (BFHI) is associated with improved rates of breastfeeding initiation and duration. Health care staff education combined with postpartum home visits may be effective for increasing breastfeeding

Health care staff education alone (with no additional breastfeeding support services) may not be effective for increasing breastfeeding initiation rates.

For women enrolled in the WIC Program, peer-support interventions offered by WIC agencies may improve rates of breastfeeding initiation and duration. Breastfeeding is associated with reduced maternal risk of breast and ovarian

cancer, hypertension, and type 2 diabetes Workplace, school-based, and community-based interventions and underlying socioeconomic factors need further research.



Breastfeeding Programs and Policies, Breastfeeding Uptake, and Maternal Health Outcomes in Developed Countries

Comparative Effectiveness Review Number 210, July 2018

Agency for Heathcare Research and Quality (AHRQ)

AHRQ New Evidence on Baby-Friendly

Purpose of Review

To summarize the effectiveness of community, workplace, and health care system—based programs and policies aimed at supporting and promoting breastfeeding, and to determine the association between breastfeeding and maternal health.

Key Messages

 Baby-Friendly Hospital Initiative (BFHI) is associated with improved rates of breastfeeding initiation and duration.

Becoming Baby-Friendly in Oklahoma



Number of Baby-Friendly hospitals in Oklahoma:

9

Percent of Oklahoma babies born in a Baby-Friendly hospital:

22.6%

CONGRATULATIONS TO: CLAREMORE INDIAN HOSPITAL INTEGRIS BAPTIST MEDICAL CENTER CHEROKEE NATION W.W. HASTINGS HOSPITAL COMANCHE COUNTY MEMORIAL HOSPITAL INTEGRIS HEALTH EDMOND ST ANTHONY HOSPITAL, OKC CHICKASAW NATION MEDICAL CENTER, ADA HILLCREST MEDICAL CENTER, TULSA INTEGRIS CANADIAN VALLEY HOSPITAL

Barrier 2: Quality Support in the Hospital







needed

Supporting breastfeeding and feeding the baby are not mutually exclusive!

Express milk if needed

Barrier 2: Quality Support in the Hospital: Supporting Exclusive Breastfeeding

Bathing after 12 hours increased EBF rates

JOGNN

HEALTH CARE IMPROVEMENT AND EVALUATION

Initiative to Improve Exclusive Breastfeeding by Delaying the Newborn Bath

Heather Condo DiCioccio, Candace Ady, James F. Bena, and Nancy M. Albert

Correspondence

Heather Condo DiCioccio, DNP, RNC-MNN, Cleveland Clinic Hillcrest Hospital, 6780 Mayfield Rd., Mayfield, OH 44124. dicioch@ccf.org

ABSTRACT

Objective: To examine whether delayed newborn bathing would increase rates of in-hospital exclusive breastfeeding and plans to use human milk at discharge.

Design: A retrospective, two-group, pre- and postintervention design.

Setting/Local Problem: At our facility, the initial bath was completed within 2 hours of birth, and the rate of in-hospital

DiCioccio et al 2019

Barrier 2: Quality Support in the Hospital: Supporting Exclusive Breastfeeding

683 births before BFHI designation and 518 after:

- Decrease in mean weight loss day 0-2 in ALL infant feeding groups
- Increase in EBF at discharge



BREASTFEEDING MEDICINE Volume 13, Number 3, 2018 © Mary Ann Liebert, Inc. DOI: 10.1089/bfm.2017.0182

Baby-Friendly Practices Minimize Newborn Infants Weight Loss

Diane Procaccini, Ann L. Cupp Curley, and Martha Goldman

Barrier 2: Quality Support in the Hospital: Delaying Pacifier Use

BREASTFEEDING MEDICINE Volume 12, Number 1, 2017 © Mary Ann Liebert, Inc. DOI: 10.1089/bfm.2016.0137

> Association Between In-Hospital Pacifier Use and Breastfeeding Continuation and Exclusivity: Neonatal Intensive Care Unit Admission as a Possible Effect Modifier

> > Laura R. Kair^{1,2} and Tarah T. Colaizy¹

Abstract

Background: Breastfeeding dyads frequently use pacifiers during the birth hospitalization, but the relationships between this exposure and breastfeeding continuation and exclusivity remain unclear. **Materials and Methods:** In this secondary analysis of cross-sectional survey data from the CDC Pregnancy Risk Assessment Monitoring System (PRAMS) from 10 U.S. states (AK, AR, CO, ME, MN, NJ, NY, OR, TX, and VT) from 2009 to 2011, we assessed to what extent pacifier use during the birth hospitalization is independently associated with any and exclusive breastfeeding ≥ 10 weeks.

37,628 mothers surveyed:

Pacifier use during the hospital stay associated with <u>decreased any and</u> <u>exclusive breastfeeding</u> at 10 weeks

Barrier 2: Quality Support in the Hospital: Reducing Breastfeeding Disparities

Addressing Racial Inequities in Breastfeeding in the Southern United States

Anne Merewood, PhD, MPH,^a Kimarie Bugg, DNP, MPH, IBCLC, CLC,^b Laura Burnham, MPH,^a Kirsten Krane, MS-MPH, RDN, Cl Nathan Nickel, PhD, MPH,^d Sarah Broom, MD,^{e,f} Roger Edwards, ScD,^g Lori Feldman-Winter, MD, MPH, FAAP, FABM^h

BACKGROUND: Race is a predictor of breastfeeding rates in the United States, and rates are lowest among African American infants. Few studies have assessed changes in breastfeeding rates by race after implementing the Ten Steps to Successful Breastfeeding (hereafter referred to as the Ten Steps), and none have assessed the association between implementation and changes in racial disparities in breastfeeding rates. Our goal was to determine if a hospital- and

abstract

PEDIATRICS Volume 143, number 2, February 2019

Barrier 2: Quality Support in the Hospital: Reducing Breastfeeding Disparities

All of these results were statistically significant!

- Initiation among AA women increased from 46% to 63%
- EBF among AA women increased from 19% to 31%
- Rooming in associated with increased EBF in AA infants
- Skin to skin care after cesarean associated with increased initiation and EBF in all infants
- Initiation and EBF increased for all races combined
- Disparity in breastfeeding between AA and white infants decreased by 9.6%

Merewood et al 2019

Barrier 3: Quality Support in the Community: "the 4th Trimester"

ACOG COMMITTEE OPINION

Number 736 • May 2018

(Replaces Committee Opinion Number 666, June 2016)

Presidential Task Force on Redefining the Postpartum Visit Committee on Obstetric Practice

The Academy of Breastfeeding Medicine, the American College of Nurse-Midwives, the National Association of Nurse Practitioners in Women's Health, the Society for Academic Specialists in General Obstetrics and Gynecology, and the Society for Maternal–Fetal Medicine endorse this document. This Committee Opinion was developed by the American College of Obstetricians and Gynecologists' Presidential Task Force on Redefining the Postpartum Visit and the Committee on Obstetric Practice in collaboration with task force members Alison Stuebe, MD, MSc; Tamika Auguste, MD; and Martha Gulati, MD, MS.

Optimizing Postpartum Care

Introduction

The weeks following birth are a critical period for a woman and her infant, setting the stage for long-term health and well-being. During this period, a woman is adapting to multiple physical, social, and psychological changes. She is recovering from childbirth, adjusting to changing hormones, and learning to feed and care for her newborn (1). In addition to being a time of joy and excitement, this "fourth trimester" can present considerable challenges for women, including lack of sleep, fatigue, pain, breastfeeding difficulties, stress,

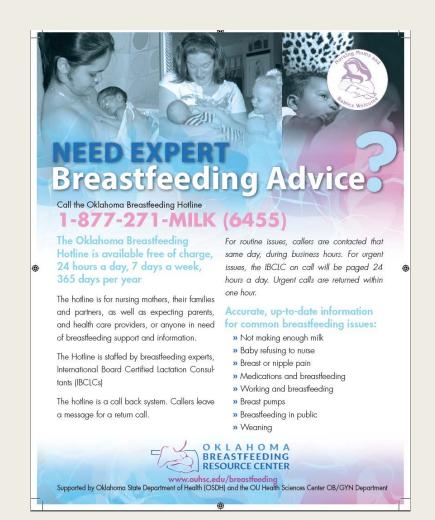


sion (15). Contact in the first few weeks also may enable women to meet their breastfeeding goals: Among women with early, undesired weaning, 20% had discontinued breastfeeding by 6 weeks postpartum (33), when traditionally timed visits occurred. To address these common postpartum concerns, all women should ideally have contact with a maternal care provider within the first 3 weeks postpartum.

Barrier 3: Quality Support in the Community

- OK Lactation Consultant Guide from OSDH
- WIC Breastfeeding Peer Counselors
- COBA Baby Café
- Hospital support groups (e.g. Integris Milk Bars)
- La Leche League
- Breastfeeding USA

Oklahoma Breastfeeding Hotline: 877-271-MILK



Barrier 3: Quality Support in the Community



HOME LAW/POLICY HEALTH CARE

BREASTFEEDING AT WORK BREASTFEEDING HELP

ADVOCACY

Get in touch!

Oklahoma offers 24/7 breastfeeding help! Call 1-877-271-MILK (6455) Regional resources are always expanding!

Pages in this Section

Oklahoma Breastfeeding Hotline

Lactation Consultant Resource Guide

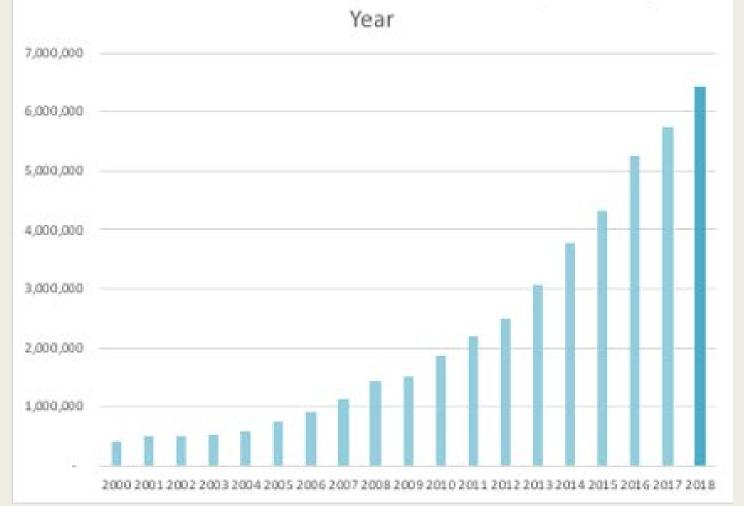
Prenatal Education and Birth and Postpartum Support

Volunteer Peer Support

WIC Breastfeeding Support

www.okbreastfeeding.org

Ounces of HMBANA Donor Human Milk Dispensed by



HMBANA Milk banks dispensed 6.5 million oz in 2018!

Q&A: NJ law now requires health insurers to cover donated breast milk

January 14, 2019

ADD TOPIC TO EMAIL ALERTS



Thomas Hegyi

A New Jersey law went into effect on Jan. 1, 2019, requiring all health insurers in the state to cover donated human breast milk for infants under certain circumstances. Insurers must cover the costs if the infant is aged younger than 6 months, the milk comes from a milk bank that meets the quality guidelines of the Human Milk Banking Association of North America or is licensed by the New Jersey Department of Health, and it is prescribed to the infant by a physician. Similar laws are in place

in California, New York, Missouri, Kansas, Texas and Washington, D.C.

Thomas Hegyi, MD, vice-medical director of the SIDS Center of New Jersey and professor and co-chair of pediatrics at Rutgers Robert Wood Johnson Medical School, spoke with *Infectious Diseases in Children* about the potential impact of the New Jersey law. – *by Erin Michael*







In 2018, Oklahoma Mothers' Milk Bank dispensed 5,000 oz free or discounted donor milk

Barrier 3: Quality Support – in the Community: Messaging About Safe Sleep and Breastfeeding



Breastfeed Your Baby to Reduce the Risk of SIDS (Full Length)

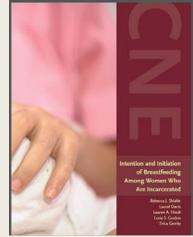
https://safetosleep.nichd.nih.gov/

Barrier 3: Quality Support in the Community: Access to Lactation Consultant Care

- HB 2131 IBCLC licensure
- Representative Munson is introducing it in 2019 as HB 2131, <u>link here</u> to the full text.
- It has been assigned to the Public Health Committee, under <u>Representive Roberts</u>.
- Licensure does NOT prevent other medical professionals from providing lactation care within their respective scope of practice,
- Next, the bill needs to be heard by the committee by Feb 28.

Barrier 3: Quality Support in the Community: Incarcerated Mothers

- About 4,000 women give birth in prisons in the US
- 9 states that have prison nursery programs:
 - Illinois, Indiana, Nebraska, New York, Ohio, South Dakota, Washington, West Virginia, Wyoming
- Prison nurseries allow infants to stay with the mother to age of 12-36 months
- In states with no prison nursery program, infants are removed from their mothers at 48-72 hours
- Most prison rules prohibit breastfeeding during visits
- Some prisons allow pumping and milk storage





Indiana Prison Nursery

Shafer et al, 2018

Barrier 4: Supporting Breastfeeding Mothers in the Workplace





Breastfeeding Protections under the Affordable Care Act

Break Time for Nursing Mothers:

- Reasonable break time for milk expression up to 1 year
 - Frequency and duration will vary
- A place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public
- Does not preempt state laws that provide greater protections

"Having a baby is a universal period of vulnerability for everyone." Dr. Neel Shah, MD, MPP

Access to Breast Pumps

 ACA: Health insurance plans must provide breastfeeding support, counseling, and <u>equipment for the duration of</u> <u>breastfeeding.</u> These services may be provided before and after birth.

- Oklahoma Medicaid does NOT cover breastpumps
- OSDH/WIC provides double-electric breastpumps for mothers returning to work or school.

Barrier 4: Supporting Breastfeeding Mothers in the Workplace

- New California laws:
 - Employers required to provide lactation room and can only be used for lactation purposes
 - CA Community Colleges and CA State University to accommodate lactating students w/o academic penalty
 - County jails must develop infant/toddler breast milk feeding policy
- Nationwide, 29 states have some type of workplace law, including Oklahoma!

http://www.ncsl.org/research/health/breastfeeding-state-laws.aspx

A 50-week extension in paid leave was associated with a 20 percent dip in infant deaths in Europe

Barrier 4: Supporting Breastfeeding Mothers in the Workplace: Lawsuits

TIME

U.S. POLITICS WORLD TECH ENTERTAINMENT SUBSCRIBE

And every story in between.

мотто

Breastfeeding Discrimination Lawsuits Rose 800% in the Past Decade

Woman awarded more than \$1.5M in breastfeeding discrimination case against KFC

Breastfeeding Laws Cards

Breastfeeding Laws

National Law 2010 Patient Protection and Affordable Care Act

Employers shall provide reasonable break time and a private place for an employee to express breast milk for her nursing child for one year.



Oklahoma Law 2004

Mothers have the right to breastfeed anywhere. They have a right to be excused from jury duty upon request. Please tell us: 1-888-655-2942 Have you visited a business that was breastfeeding friendly? We will send a thank you letter.

Have you been asked to leave a public place because you were breastfeeding? We will send a letter encouraging them to support breastfeeding and tell them about the laws.

> Oklahoma Breastfeeding Hotline 1-877-271-MILK(6455) http://bis.health.ok.gov

The Oklahoma State Department of Health is an equal opportunity provider.

ODH #117

To Request (free):

- <u>http://bis.health.ok.gov</u> (Oklahoma Laws page)
- Available in English and Spanish



Barrier 4: Supporting Breastfeeding Mothers in the Workplace: Paid Maternity Leave

- 4 states have paid leave policies: California, New Jersey, New York, Rhode Island
 - Usually around 50% of salary for 4-6 weeks
 - <u>http://www.ncsl.org/research/labor-and-employment/state-family-and-medical-leave-laws.aspx</u>
 - 20 states have bills introduced, including Oklahoma
 - HB2464 and SB 478 creating Paid Family Leave 65% of salary for 6 weeks
- Private companies are implementing paid family leave benefits:
 - *Boeing:* either parent receives 12 weeks of paid leave during 1st year of life
 - *Starbucks:* Baristas who give birth receive 6 weeks at 100% of salary. Barista fathers/parents can take 12 weeks unpaid
 - Amazon: Birth mothers can take 14-20 weeks of fully paid leave; non-birth parents receive 6 weeks of paid leave
 - Bill & Melinda Gates Foundation: 52 weeks of fully paid parental leave

Barrier 4: Supporting Breastfeeding Mothers in the Workplace



HOME LAW/POLICY HEALTH CARE BREASTFEEDING AT WORK BREASTFEEDING HELP ADVOCACY

Breastfeeding WORKS for families, employers, and communities!

Pages in this Section





Get in touch!

6 9

COBA Promotes Breastfeeding Support in the Workplace Statewide.

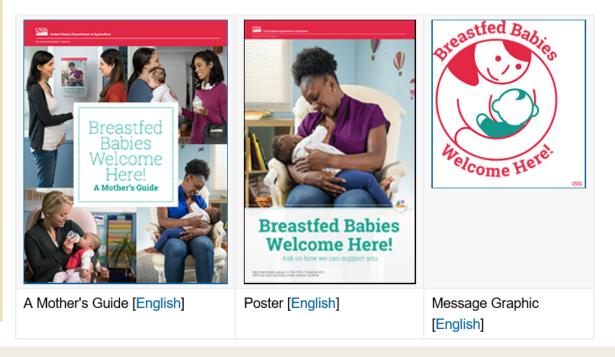
www.okbreastfeeding.org

Childcare Support for Breastfeeding: New Resources from USDA

Breastfed Babies Welcome Here

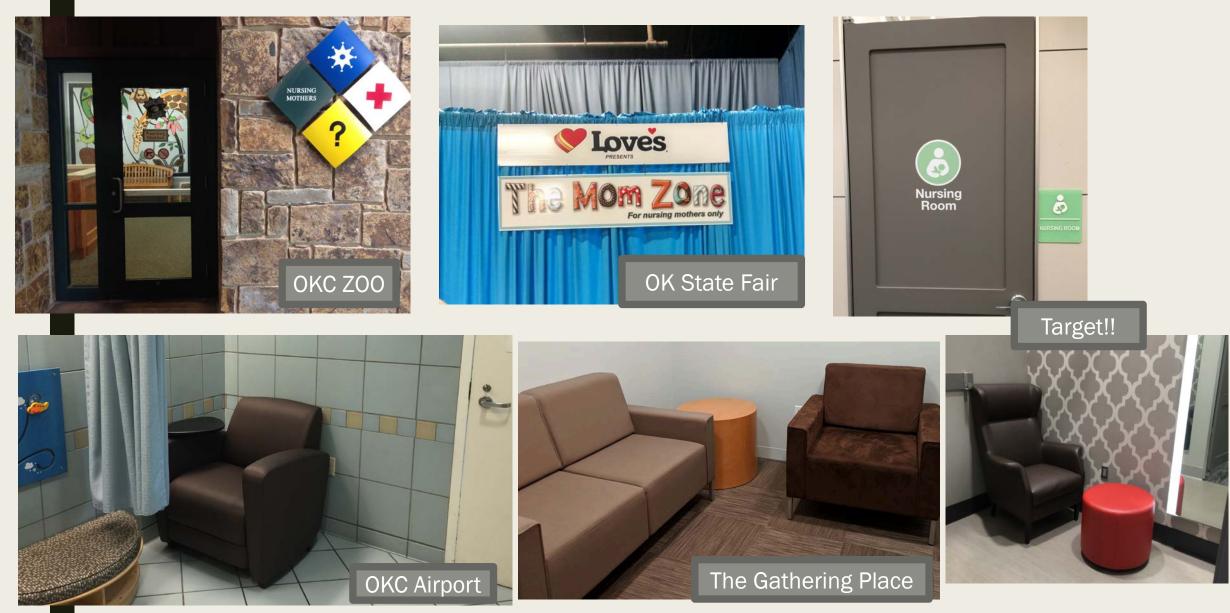
The Breastfed Babies Welcome Here! resource contains communication tools Child and Adult Care Food Program (CACFP) operators can use to let mothers and families know that breastfed babies are welcome at their child care site. It includes a mother's guide, 11"x17" poster, and a message graphic.

Availability: Spanish and printed materials available soon. All are welcome to download these materials and make copies. If you have difficulty opening any of these files in your Internet browser, please right-click on the link and "save target as..." to download.





Lactation Rooms Around OKC



The Power of Nutrition Keith Hansen, JD, MBA Vice President, The World Bank



The gains from early childhood nutrition are forever. And to a large extent, many of them are free because they have come prepackaged in this unbelievable intervention called breastfeeding.

And wonderfully, it also <u>reduces inequity</u>. This ensures that <u>all children</u>, irrespective of their gender, whether they are from a rich country or a poor one, <u>can get the best possible start in life</u> and start from a very even basis.

