

State of the State: Breastfeeding in Connecticut

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La Leche League-CT Healthcare Provider Seminar
March 27, 2015

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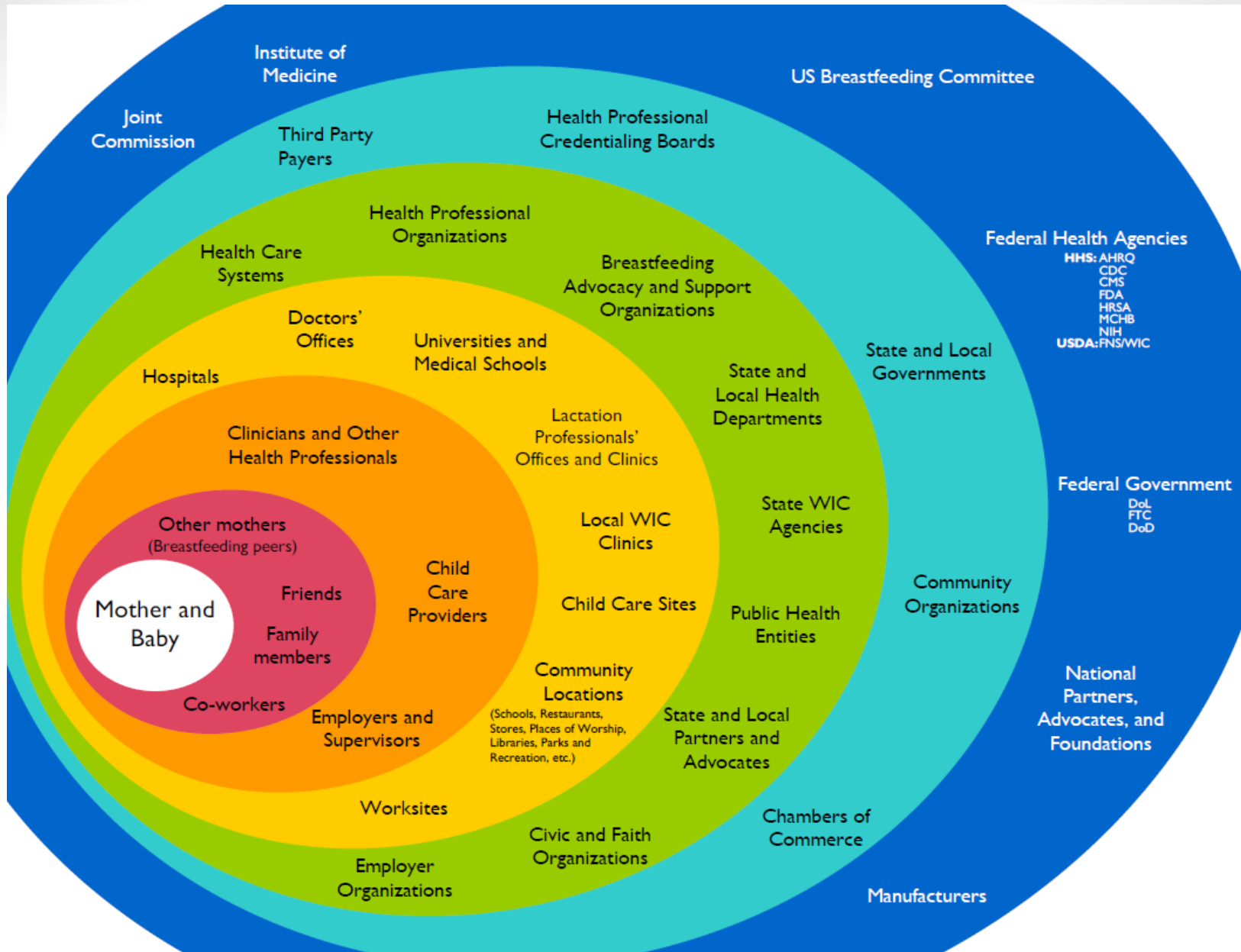
Meriden



Acknowledgements

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- Monica Belyea, UConn Health Center for Public Health and Health Policy
- Caroline Smith Cooke, CT WIC/DPH Breastfeeding Co-Coordinator
- CT-DOL and CT-CHRO
- WIC Local agency staff, peer counselors





<http://www.usbreastfeeding.org/Coalitions/CDCUSBCBiMonthlyTeleconferences/2011TeleconferenceArchives/tabid/195/Default.aspx>

The Surgeon General's Call to Action to Support Breastfeeding: The Role of Breastfeeding Coalitions, Larry Grummer-Strawn, PhD, Centers for Disease Control & Prevention Teleconference: Tuesday, February 8, 2011

Learning Objectives

- Identify at least one source of available State breastfeeding data
- Discuss at least one ongoing effort to improve quality of breastfeeding data
- List one State supported initiative targeted at reducing breastfeeding disparities in Connecticut
- Describe one future State effort to collect and evaluate data related to peer and professional support for breastfeeding in Connecticut



Let's Step Up to the Plate...

More Babies Get Benefit

OF THE 1

(By employees, Page 4)

State breast-feeding rates rise as support systems expand

By **AMANDA CUDA**
and **MARIE K. SHANAHAN**
Connecticut Post

As the leader of a breast-feeding support group, Kathleen Raymond never tries to push new mothers in a certain direction.

Raymond, 38, of Fairfield, sees herself as an educator or a guide through what can be a challenging process for many women.

"When we meet a woman, we don't have any specific goals in mind for her," said Raymond who, until recently, led a La Leche League group in Danbury and is starting a new chapter in Fairfield. "We want to know what her goals are and the best way for her to meet them."

When a new mom is learning to breast-

feed, getting information and support is essential, Raymond said. And, a lot of times, women can't get that kind of support from their mothers or other female role models, she said, since they most likely raised their children in a culture where breast-feeding wasn't the norm.

But mother-to-mother support groups such as La Leche are becoming more common — and the rise of technology has made it easier for new moms to find a group that's right for them.

"I do see more women able to get support," Raymond said. "I think that's really helped more women to be successful at breast-feeding."

The state's burgeoning network of moth-

er-to-mother support is a key contributor to the rising rate of breast-feeding in Connecticut, experts say.

According to the 2014 Breastfeeding Report Card issued by the U.S. Centers for Disease Control and Prevention, 83.3 percent of babies born in Connecticut start their lives being breast-fed. Connecticut's rate exceeded the national average of 79.2 percent of babies "ever breast-fed."

The number of Connecticut babies "ever breast-fed" has increased by 12.3 percent over the past five years, according to CDC data.

However, many advocates and experts said too many women still stop breast-feeding too soon.

The 2014 report card ranks Connecticut higher than the national average for babies still being breast-fed at 6 months (51.4 percent versus 49.4 percent) and for 6-month-old babies nourished exclusively with breast milk (19.2 percent versus 18.8 percent).

"The data is positive and is the result of the work of many programs," said Dr. Kathleen Marinelli, a neonatologist and member of the Human Milk Research Center at Connecticut Children's Medical Center.

Experts consider breast-feeding the best source of infant nutrition and immunologic protection. Breast-fed babies are less

(Breast-feeding rates, Page 4)

Candid online posts describing the challenges of breastfeeding fill the Facebook page of Breastfeeding USA's Connecticut chapter. The daily stream of anecdotes, questions and

BREASTFEEDING

comments alternate in tone from exasperated to celebratory.



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SERIES 43-1
PITCHER 3-2-2
CATCHER 1-4-2-1

W.B. MASON
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LEAGUE PARK

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BOS	0	0	0	0	0	0	0	0	0	0	0	0	0

HOME - BALL STRIKE OUT

American League

HR	R	P	HR	R	P	HR	R	P

National League

HR	R	P	HR	R	P	HR	R	P

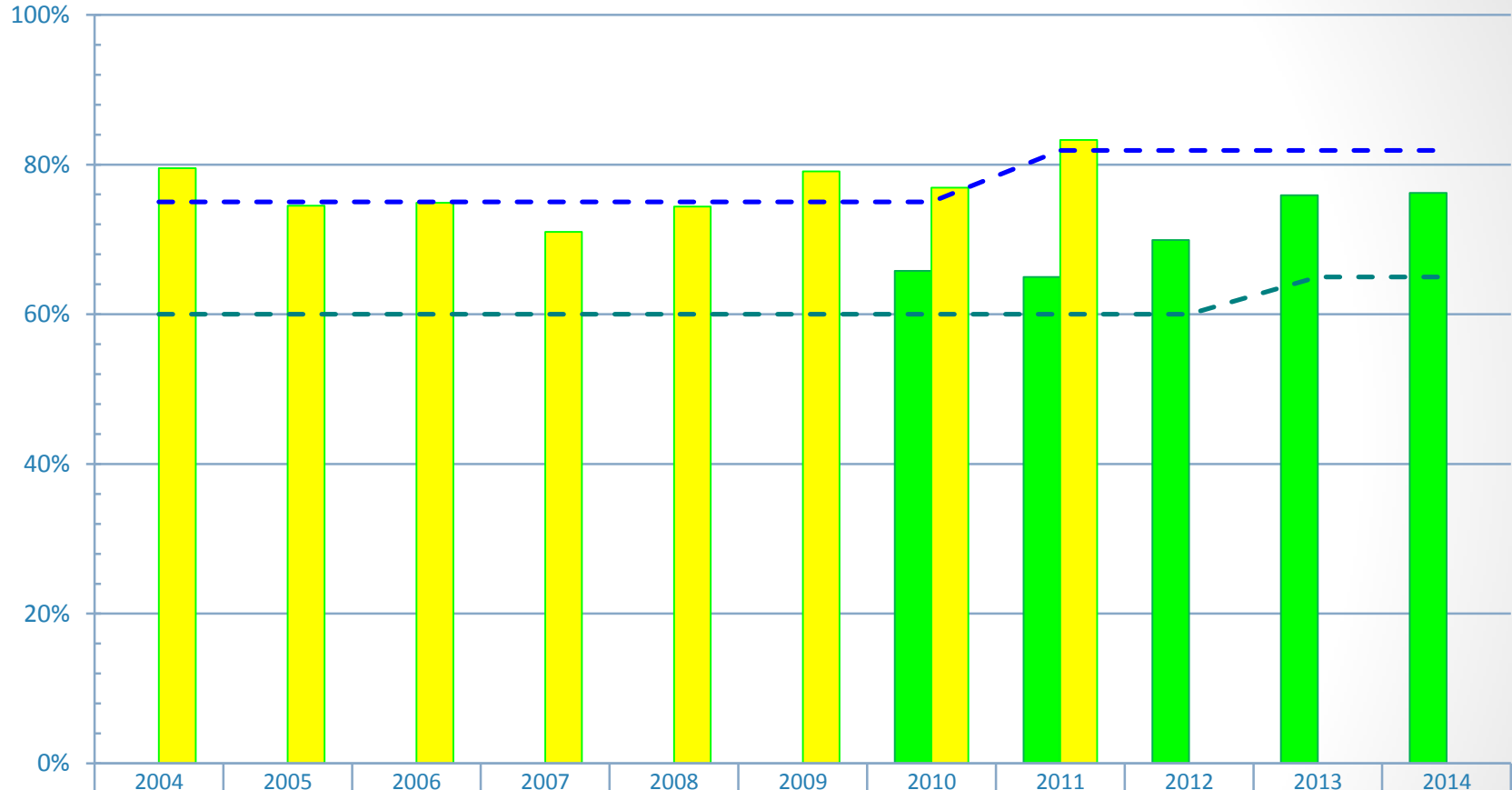
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Since  1866

Percentage of Infants Ever Breastfed in Connecticut, among WIC Participants ^a & the General Population 2010, 2011, 2012, 2013 & 2014 (Data year refers to birth cohort's year of birth)



■ Connecticut WIC

■ Connecticut (NIS)

- - - CT WIC Target

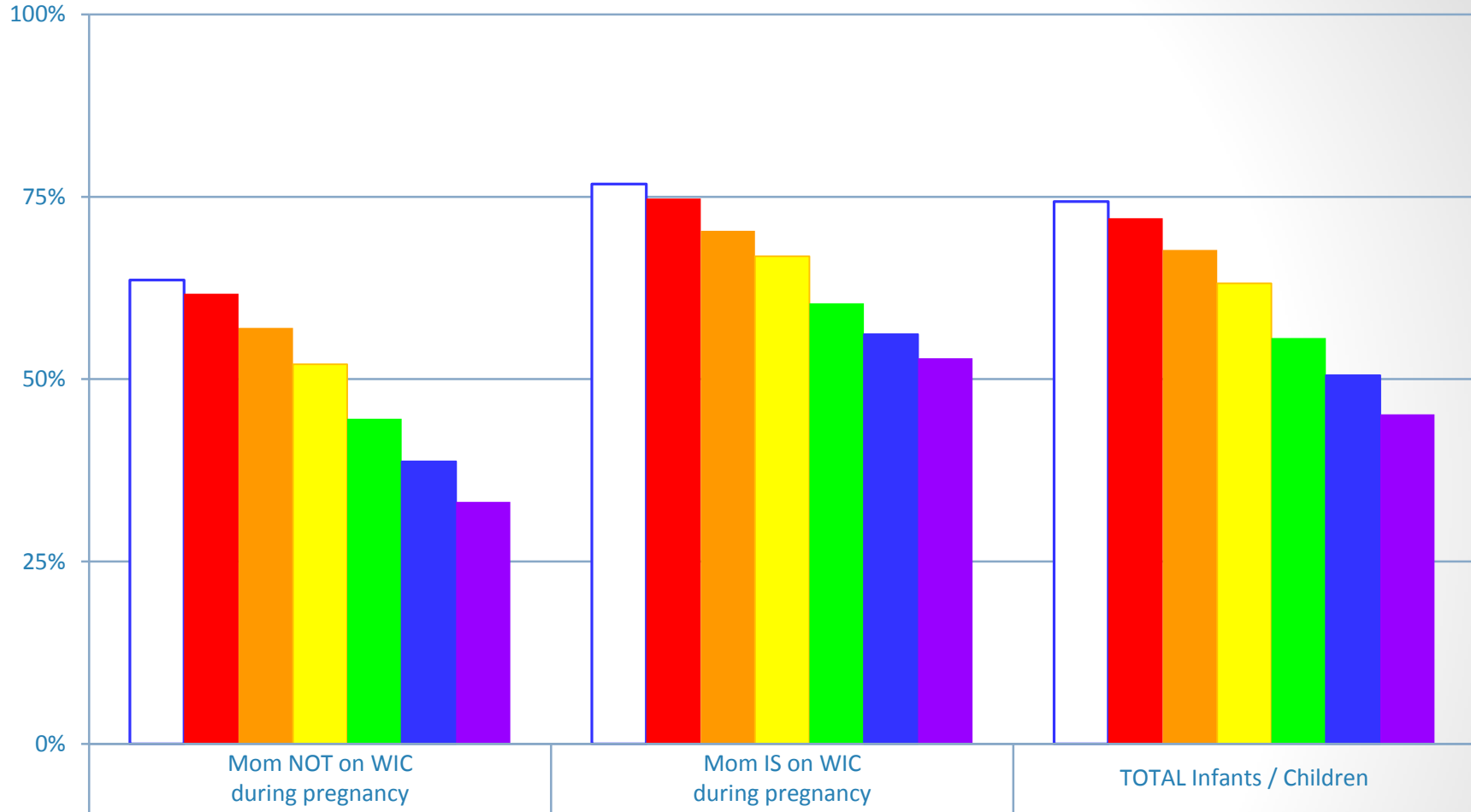
- - - HP 2010 / 2020

^a Among infants whose mother was on WIC for any length of time during pregnancy.

Data source (WIC): Connecticut Department of Public Health, State WIC Program Statewide WIC Information System (SWIS), Quarterly Report OutObjQ3a.

Data source (general population): Centers for Disease Control & Prevention (CDC), National Immunization Survey (NIS), Breastfeeding Report Card (2007 to 2014).
<http://www.cdc.gov/breastfeeding/data/reportcard.htm>

CT WIC Breastfeeding Status (Statewide Averages) Federal Fiscal Year 2015, Quarter 1



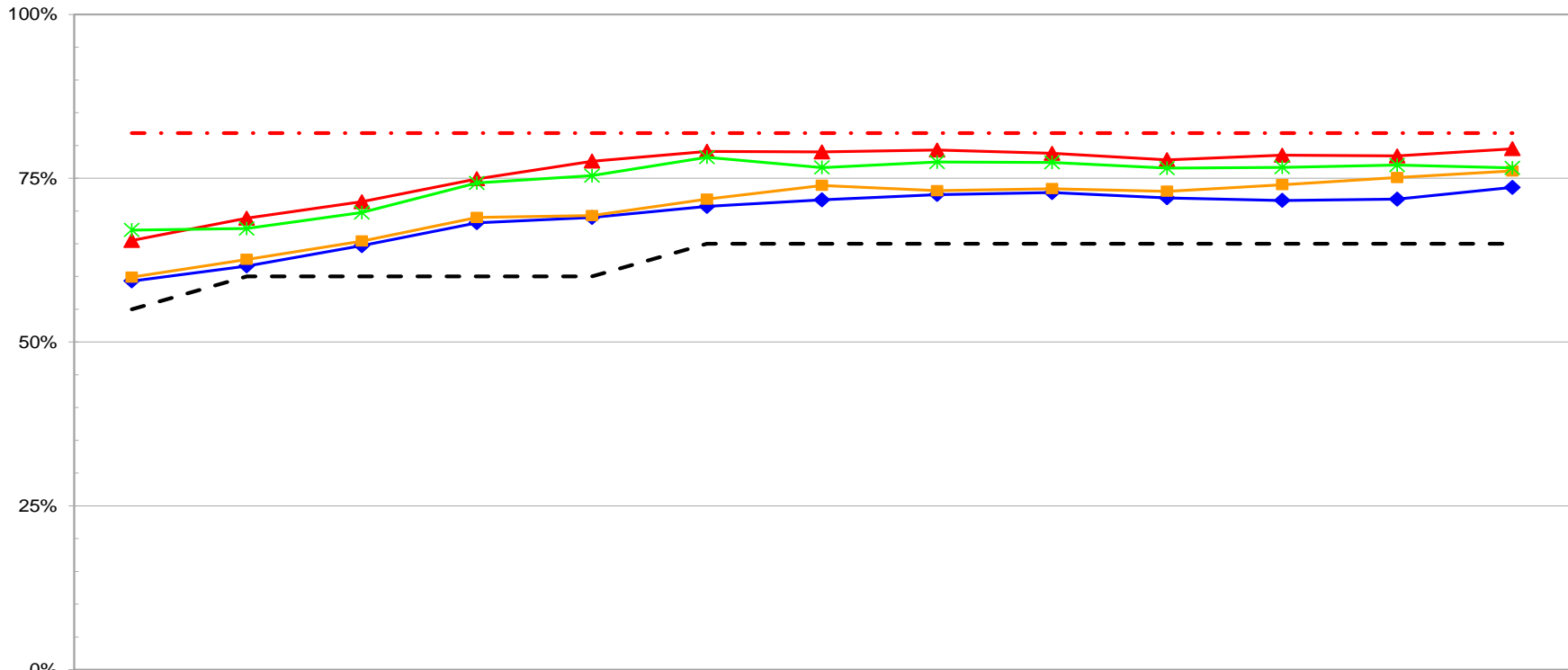
Ever breastfed	63.6%	76.8%	74.3%
2+ weeks of age	61.7%	74.7%	72.1%
6+ weeks of age	57.0%	70.3%	67.7%
3+ months of age	52.1%	66.9%	63.1%
6+ months of age	44.6%	60.4%	55.7%
9+ months of age	38.7%	56.2%	50.6%
12+ months of age	33.2%	52.9%	45.2%

STATE OF CONNECTICUT ~ DEPARTMENT OF PUBLIC HEALTH

CONNECTICUT WIC PROGRAM

Percentage of WIC Infants Initiating Breastfeeding,
among those whose mothers were on WIC
for any length of time during pregnancy,
by Race / Ethnicity

Federal Fiscal Years 2011 - 2014



	09/2011	12/2011	03/2012	06/2012	09/2012	12/2012	03/2013	06/2013	09/2013	12/2013	03/2014	06/2014	09/2014	
	FFY 2011		Federal Fiscal Year 2012				Federal Fiscal Year 2013				Federal Fiscal Year 2014			
--- HP 2020	81.9%	81.9%	81.9%	81.9%	81.9%	81.9%	81.9%	81.9%	81.9%	81.9%	81.9%	81.9%	81.9%	
- - - Target (≥)	55.0%	60.0%	60.0%	60.0%	60.0%	65.0%	65.0%	65.0%	65.0%	65.0%	65.0%	65.0%	65.0%	
—▲— Hispanic	65.5%	68.9%	71.4%	74.9%	77.6%	79.1%	79.0%	79.3%	78.8%	77.8%	78.5%	78.4%	79.5%	
—◆— White, NH	59.3%	61.6%	64.7%	68.2%	69.0%	70.7%	71.7%	72.5%	72.8%	72.0%	71.6%	71.8%	73.6%	
—■— Black, NH	59.9%	62.6%	65.4%	69.0%	69.3%	71.8%	73.9%	73.1%	73.4%	73.0%	74.0%	75.1%	76.1%	
—*— Other, NH	67.1%	67.3%	69.8%	74.3%	75.4%	78.2%	76.6%	77.5%	77.4%	76.5%	76.7%	77.0%	76.6%	

The Federal Fiscal Year (FFY) runs from Oct 1 through Sept 30.

Data source: Statewide WIC Information System (SWIS), Breastfeeding Initiation Rate (OutObj3A).

NH = non-Hispanic; note: Hispanics may be of any race.



Dr. Jewel Mullen
Commissioner

<<< Previous Level

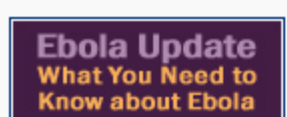
CT PRAMS Home

FAQs

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Connecticut Pregnancy Risk Assessment Monitoring System (PRAMS)

Working to make Connecticut babies and mothers healthier

About PRAMS

Connecticut PRAMS, the Pregnancy Risk Assessment Monitoring System, is a surveillance project of the Connecticut Department of Public Health and the federal Centers for Disease Control and Prevention (CDC). PRAMS collects information on maternal attitudes and experiences before, during, and shortly after pregnancy from a sample of postpartum women in Connecticut. Information from PRAMS will be used to help plan better health programs for Connecticut mothers and infants.

The goal of the PRAMS project is to improve the health of mothers and infants by reducing adverse outcomes such as low birth weight, infant mortality and morbidity, and maternal morbidity. PRAMS provides state-specific data for planning and assessing health programs and for describing maternal experiences that may contribute to maternal and infant death.



Women who participate in PRAMS are making a real difference.

Women who complete the PRAMS survey help not only themselves, but other women and babies as well.

Every pregnancy is different. To get a better overall picture of the health of mothers and babies in Connecticut, we need each mother selected to answer the questions. **We need to know what went right as well as what went wrong during your pregnancy.** Information from PRAMS helps the Department of Public Health improve existing programs and helps inform new ones to better meet the needs of Connecticut's mothers and babies. What we learn through PRAMS can also help doctors, nurses, and health organizations improve health care services and policies. Your help is really important to the success of our program. However, participation is voluntary and you may choose not to answer certain questions on the survey.

VIEW GRANT OPPORTUNITY

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CDC-RFA-DP13-1305

State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health

Department of Health and Human Services
Centers for Disease Control and Prevention

SYNOPSIS DETAILS

VERSION HISTORY

RELATED DOCUMENTS

APPLICATION PACKAGE

[Print Synopsis Details](#)

The synopsis for this grant opportunity is detailed below, following this paragraph. This synopsis contains all of the updates to this document that have been posted as of **2/20/2013**. If updates have been made to the opportunity synopsis, update information is provided below the synopsis.

If you would like to receive notifications of changes to the grant opportunity click [send me change notification emails](#). The only thing you need to provide for this service is your email address. No other information is requested.

Any inconsistency between the original printed document and the disk or electronic document shall be resolved by giving precedence to the printed document.

General Information

Document Type: Grants Notice	Posted Date: Feb 20, 2013
Funding Opportunity Number: CDC-RFA-DP13-1305	Creation Date: Feb 20, 2013
Funding Opportunity Title: State Public Health Actions to Prevent and Control Diabetes, Heart Disease, Obesity and Associated Risk Factors and Promote School Health	Original Closing Date for Applications: Apr 19, 2013 Letter of Intent Deadline Date: March 19, 2013, for enhanced component only Application Deadline Date: April 19, 2013 11:59 p.m. U.S. Eastern Standard Time
Opportunity Category: Discretionary	Current Closing Date for Applications: Apr 19, 2013 Letter of Intent Deadline Date: March

Implement practices supportive of breastfeeding in birthing facilities



- **Year 1** = Support for sustainable staff training. DPH and CBC partnered to bring Tricia Cassi, IBCLC from VDH, to provide a Train-the-Trainer workshop on VT's "*Birth & Beyond*" visual training platform. (Adapted from CDPH)
- **Year 2** = Partnering with CBC to conduct 5-6 focus groups about perception of Baby-Friendly Hospital Initiative (BFHI) and 10 Steps to develop effective consumer messaging.

SAVE THE DATE: May 15-16, 2014

Dates:
May 15-16, 2014

Time: 8:00am -4:30pm

Location:
Crowne Plaza
Hartford-Cromwell
100 Berlin Road
Cromwell, CT 06416

Attendees will be able to:

- Describe components of the training platform.
- Demonstrate proficiency in using the platform through practice teaching with peers.
- Identify best practice options for using platform in your facility to sustain training for new and veteran staff.



Exciting training opportunity for Connecticut Maternity facilities!

The Connecticut Department of Public Health in partnership with the Connecticut Breastfeeding Coalition's (CBC) Connecticut's Ten Step Collaborative is offering a free train-the trainer workshop for maternity facilities in Connecticut to support and sustain staff training in evidenced based maternity care practices.

According to Connecticut's [mPINC score](#), the Centers for Disease Control and Prevention (CDC) has recommended more support for maternity facilities for sustainable staff training and this workshop is designed to provide this assistance.

About the workshop:

- Hospital's are invited to send one representative to this two-day, interactive train-the-trainer workshop to learn how to adapt and implement the Vermont Department of Public Health's [Birth and Beyond: Empowering Mothers and Nurturing Babies training platform](#), based on the *Birth and Beyond California* (BBC) curriculum.
- BBC's curriculum teaches best practices to support early maternal-infant bonding through skin-to-skin contact for all mothers and babies, provides knowledge and skills to promote, protect and support a mother's decision to breastfeed. Vermont built on the BBC training with a focus on "The Ten Steps to Successful Breastfeeding," and added new content to fulfill the training objectives and the 15 hours required by WHO/UNICEF for the ["Baby-Friendly Hospital Initiative"](#).
- Platform developer, Tricia Cassi, BSS, IBCLC, is scheduled to present and assist hospital representatives in using the platform content. Registration information and detailed agenda to follow. **Space is limited.** Hospitals may send more than one representative on a first-come-first-served basis.

This training is supported with funds from the Centers for Disease Control and Prevention's 1305 grant.

Reactions to Birth and Beyond training

“This program was amazing! I will use this in teaching staff and patients right away!”

“Use for yearly BF QA. Wow! I am motivated to improve my presentations for the public!”

“Giving education to nurses about nurses being more hands off and allowing babies and moms to breastfeed.”

“Hopefully engaging staff with this method of education will make it easier for them to learn and apply in their daily work.”

Provide access to professional and peer support



Can We Talk?

Did you know your baby is already showing you what he needs? Babies use their faces, hands, voices, and bodies to give adults cues about what they need. WIC can help you understand your baby. Just ask us!



Created by the U.S. Child Welfare Information Center as part of the WIC Baby Behavior Study. This project has been funded in part by Federal funds from the U.S. Department of Agriculture, Food and Nutrition Service. The contents of this publication do not necessarily reflect the views or policies of the U.S. Department of Agriculture, its employees or trade names, nor does mentioning of trade names, commercial products, or organizations imply endorsement by the U.S. Government.



Provide access to professional and peer support

Summary of Year 1 trainings:

- Trained 80 FQHC staff between two locations
- Variety of FQHC staff trained = front desk to providers
- Both locations included WIC staff in training
- 2 two-hour trainings held at each FQHC two weeks apart
- Administered a PRE and POST test to assess content knowledge in addition to a training evaluation
- 6-month follow-up survey administered to determine level of use and/or implementation of training content

Ensure workplace compliance with federal lactation accommodation law





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Breastfeeding Coalition

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Connecticut Breastfeeding Coalition
Protecting, Promoting, and Supporting Breastfeeding

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You are here: [Home](#) > [Breastfeeding-Friendly Worksite Program](#) > [Why Become A Breastfeeding-Friendly Worksite](#)

WHY BECOME A BREASTFEEDING-FRIENDLY WORKSITE?

Helping moms meet their goals for breastfeeding is no small accomplishment. Worksites that assist employed mothers in breastfeeding successfully deserve to be recognized. If your worksite provides basic lactation support or goes above and beyond to make breastfeeding work for your employees, thank you! The Connecticut Breastfeeding Coalition (CBC) wants to publicly recognize your efforts and let people know your worksite is Breastfeeding Friendly.

Because Breastfeeding Benefits Employers

- Lower medical costs and health insurance claims for breastfeeding employees and their infants (up to three times for breastfeeding employees)
- Reduce turnover rates (86-92% of breastfeeding employees returning to work after childbirth when a lactation support program is provided compared with the national average of 59%)
- Lower absenteeism rates (up to half the number of 1 day absences)
- Improved productivity
- Raise employee morale and loyalty to company

Resources For:

- [Committee Structure Mothers and Families Communities](#)
- [Health Care](#)
- [Employment](#)
- [Research and Surveillance](#)
- [Public Health Infrastructure](#)

CBC Highlights

- [Selected CBC Accomplishments](#)



- [Why Become A Breastfeeding-Friendly Worksite?](#)
- [State and Federal Support](#)

Latest News

- [9/12/2014 For Immediate Release: CT Department of Public Health and CT Breastfeeding Coalition Supporting Businesses to Adopt Breastfeeding-Friendly Policies](#)
- [8/5/2014 Annual Connecticut Children's Medical Center Breastfeeding Conference to be held on September 15, 2014.](#)
- [3/24/2014 Save the Date! CT DPH has partnered with the CBC's Ten Step Collaborative to provide free training to meet the requirements of the Baby-Friendly Hospital Initiative education!](#)





Connecticut Breastfeeding Coalition
Protecting, Promoting, and Supporting Breastfeeding

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- Resources For:**
- [Committee Structure](#)
 - [Mothers and Families](#)
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- CBC Highlights**
- [Selected CBC Accomplishments](#)



- [Why Become A Breastfeeding-Friendly Worksite?](#)
- [State and Federal Support](#)

You are here: [Home](#) ▶ [Breastfeeding-Friendly Worksite Program](#) ▶ [Worksite Application](#)

WORKSITE APPLICATION

Employer

Employer Name *

Address 1 *

Address 2

City *

State * ▼

Zip Code *

Type of Business * ▼

Number of Employees * ▼

Website URL

Latest News

[9/12/2014 For Immediate Release: CT Department of Public Health and CT Breastfeeding Coalition Supporting Businesses to Adopt Breastfeeding-Friendly Policies](#)

[8/5/2014 Annual Connecticut Children's Medical Center Breastfeeding Conference to be held on September 15, 2014.](#)

[3/24/2014 Save the Date! CT DPH has partnered with the CBC's Ten Step Collaborative to provide free training to meet the requirements of the Baby-Friendly Hospital Initiative education!](#)

Breastfeeding in Connecticut: What are your Rights?

You have a right to breastfeed in public.

Connecticut laws* protect your right to breastfeed your child in any public place that you are allowed to be. This means that no one can limit your right to breastfeed your baby. It is against the law to not let you breastfeed or to ask you to move or cover up.

If you think your right to breastfeed in public has been violated: contact the Commission on Human Rights and Opportunities (CHRO).

Call 1-800-477-5737 or visit their website at www.ct.gov/chro

You have a right to breastfeed or pump at work.

The Connecticut law on breastfeeding at work states that your employer must allow you to breastfeed or pump breast milk at work. There is also a federal law about breastfeeding at work.

Here is how the Connecticut law works:

You may pump or breastfeed your baby at work during your meal or break time. Your employer does not have to pay you during that time unless you are using your regular break time. They must provide a room or other space that is close to your work area. If your employer doesn't provide break time, it doesn't have to do so under Connecticut's law. The space cannot be a toilet or bathroom stall and it must be private. This law is for all Connecticut employers.

If you think that your breastfeeding rights at work have been violated: contact the Connecticut Department of Labor.

Call 1-860-263-6791 or visit their website at www.ctdol.state.ct.us/wgwkstnd/forms/DOL-80.doc.

Here is how the federal law works:

If you work for a company that has more than 50 employees and you are paid hourly, then your employer must provide you with flexible break times that will be different for all women. They must also give you a private place to pump your milk. They do not need to pay you if you are using time that is not your regular break time.

You can also file a complaint with the U.S. Department of Labor. For information on filing a complaint, visit the U.S. DOL website: www.dol.gov/wecanhelp/howtofilecomplaint.htm.

You cannot lose your job for pumping or breastfeeding at work.

It is against the law to discriminate, discipline or take any action against you for exercising your rights under these laws.

Talk with your employer about working and breastfeeding.

Tell them about your breastfeeding plans as soon as possible. Women need to pump or breastfeed to continue making milk for their babies. Breastfeeding results in healthier women and children and lower health care costs. Healthier women and children mean that mothers don't have to miss work as often because they are healthier and so are their babies. Women who are able to combine work and breastfeeding are more satisfied with their jobs and don't quit as often. Everybody wins with breastfeeding! More information at: www.breastfeedingct.org

You have rights if you are called for jury duty.

Jury Duty Administration must have information on their website for breastfeeding women about options for their jury service, <https://www.jud.ct.gov/jury/faq.htm#9>. They must train their staff about the needs of breastfeeding jurors. For more information on postponement of jury duty or to ask the court staff to work with you to meet you and your baby's breastfeeding needs while on jury duty, call 1-800-842-8175 8a.m. to 8p.m. Monday through Friday, or go to the Jury home page at <https://www.jud.ct.gov/jury/default.htm>.



Go Team-

We need to hear from you...

- We are conducting an assessment of breastfeeding professionals across the state. (Adapted from Nebraska's DHHS)
- Why? Assess current practices and identify future training and support needs in Connecticut.
- Opportunity to have your voice heard!
- Please go to this link- to take the survey!

https://www.surveymonkey.com/s/LC_CTSurvey

If we Continue to Build it... they will (choose to) Breastfeed...



References

- <http://www.surgeongeneral.gov/library/calls/breastfeeding/index.html> U.S. Department of Health and Human Services. *The Surgeon General's Call to Action to Support Breastfeeding*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General; 2011.
- <http://www.usbreastfeeding.org/Coalitions/CDCUSBCBiMonthlyTeleconferences/2011TeleconferenceArchives/tabid/195/Default.aspx> *The Surgeon General's Call to Action to Support Breastfeeding: The Role of Breastfeeding Coalitions*, Larry Grummer-Strawn, PhD, Centers for Disease Control & Prevention Teleconference: Tuesday, February 8, 2011
- Centers for Disease Control and Prevention (CDC), National Center for Chronic Disease Prevention and Health Promotion, Division of Nutrition, Physical Activity and Obesity *Breastfeeding Report Card*, United States; 2014
- <http://healthvermont.gov/wic/food-feeding/breastfeeding/10steps/index.aspx> Vermont's *Birth and Beyond: Empowering Mothers and Nurturing Babies* visual training platform, VT WIC Program, VDH, VCHIP, VTAAP and VTAFM; 2012
- http://www.nal.usda.gov/wicworks/Sharing_Center/gallery/FitWICBaby.htm UC Davis Human Lactation Center, Fit WIC Baby Behavior Study, Davis, CA 2009.
- *The Business Case for Breastfeeding: Steps for Creating a Breastfeeding Friendly Worksite* U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau. 2008.
- <http://www.womenshealth.gov/breastfeeding/employer-solutions/index.html> Office of Women's Health. U.S. Department of Health and Human Services, 2014

Data Sources

- Data source (general population): Centers for Disease Control & Prevention (CDC), National Immunization Survey (NIS), Breastfeeding Report Card (2007 to 2014).
<http://www.cdc.gov/breastfeeding/data/reportcard.htm>
- Data source (WIC): Connecticut Department of Public Health, State WIC Program Statewide WIC Information System (SWIS), Quarterly Report OutObjQ3a. (FFY 2015)
- Data source: Statewide WIC Information System (SWIS), Breastfeeding Initiation Rate (OutObj3A FFY 2011-FFY 2013)

Let's get some chatter going...

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