

Healthy Communities Strategy #6: Breastfeeding-Friendly Designation

Increase the number of facilities that are awarded and/or designated as breastfeeding-friendly.

Expected Outcome*:

Increase the number of facilities newly awarded and/or designated as breastfeeding-friendly.

Accepted awards or designations include: NC Maternity Center Breastfeeding-Friendly Designation; Mother-Baby Friendly Clinic Award; NC Breastfeeding-Friendly Child Care Designation; Breastfeeding-Friendly Community Partner Award; and Breastfeeding-Friendly Employer Award.

*Health Departments must select at least one type of breastfeeding-friendly award and/or designation that partner facilities must pursue. Award/Designation-specific interim outcomes for the current state program year include:

Maternity Centers

- Increased number of maternity centers with at least two new standards met for the NC Maternity Center Breastfeeding-Friendly Designation.

Clinics

- Increased number of online breastfeeding assessments for outpatient healthcare clinics completed, and
- Increased number of outpatient healthcare clinics with at least 2 new required components met for the Mother-Baby Friendly Clinic Award.

Childcares

- Increased number of childcare facilities with at least one new standard met for the NC Breastfeeding-Friendly Child Care Designation.

Employers

- Increased number of employers with all required components of the Breastfeeding-Friendly Employer Award met.

Community Partners

- Increased number of community partners with all required components of the Breastfeeding-Friendly Community Partner Award met.

Health Equity Planning Principals:

To address breastfeeding disparities, efforts should focus on racial and economic inequities. Establishing health equity related to breastfeeding requires the engagement and support of health care facilities, worksites and communities. Where applicable, projects should prioritize settings serving African American women of childbearing age and/or employers with nonexempt (hourly) employees with low hourly rates.

Priority populations should be engaged in the planning, implementation and evaluation of the strategy. This includes groups that have an increased susceptibility to adverse health outcomes and may be defined by demographic factors such as race/ethnicity,



income level, age, gender, education attainment, marital status, or health care coverage status; and/or geography such as a region of a state or a specific community. For example, women who return to low paying hourly jobs often face inequities in being provided time by their employers to pump at work, despite the 2010 amendment to the Fair Labor Standards Act – Break Time for Nursing Mothers provision – that requires employers to provide basic breastfeeding accommodations in the workplace. Once you identify the priority population for the strategy, you can select the best setting through which to reach the group.

Recommended Partners:

• local breastfeeding coalitions • local breastfeeding support groups • public health educators • community groups • community coalitions • community members that represent the population at greatest risk for health disparities related to breastfeeding • health organizations (e.g. hospitals, pediatric offices) • Women, Infants and Children (WIC) programs • faith communities • YMCAs • worksites • colleges and/or universities • local businesses • local civic groups • local chambers of commerce • lactation consultants

Intervention Examples:

- A. A maternity care practice follows eight of the 10 steps to successful breastfeeding including the development of a written breastfeeding policy for the facility and helping all mothers initiate breastfeeding within one hour of birth. They applied for and received the NC Four-Star Breastfeeding Friendly Designation. They are working toward completing all 10 steps and earning the full five-star designation.
- B. A pediatrics office adopted a breastfeeding-friendly office policy, and its providers have completed more than three hours of continuing education on breastfeeding. They refer clients to lactation specialists regularly.
- C. A coffee shop welcomes breastfeeding mothers, never asking them to leave, cover up or move. They have applied for the NC Breastfeeding-Friendly Community Partner Award and display the “We’re Breastfeeding-Friendly” window cling.
- D. An elementary school equipped a large storage room with a desk, comfortable chair and small refrigerator for breastfeeding employees to use as a quiet, private space to pump. Breastfeeding teachers are allowed reasonable breaks to pump, and the school meets criteria for the NC Breastfeeding-Friendly Employer Award.
- E. A small retail establishment earned the NC Breastfeeding-Friendly Employer Award by allowing breastfeeding employees to schedule breaks to express milk in a private office around the time the baby would normally feed.

Related Programs

The Community and Clinical Connections for Prevention and Health Branch (CCCPH) collaborates with state and local partners **to implement interventions supportive of breastfeeding** that address one or more of the following:

1. **Continuity of care** – working with primary care practices (e.g., pediatrics, OB/GYN, outpatient medical clinics serving pregnant and postpartum women) toward earning the Mother-Baby Clinic Award.



2. **Community support** – assisting community organizations (e.g., faith communities) and businesses with adopting breastfeeding-friendly policies and applying for the Breastfeeding-Friendly Community Partner Award.
3. **Workplace compliance with the federal lactation accommodation law** – collaborating with worksites to provide a private space and flexible breaks to express breast milk and applying for the NC Breastfeeding-Friendly Employer Award.

Recommended Tools /Resources:

- A. The Surgeon General’s Call to Action to Support Breastfeeding
www.surgeongeneral.gov/library/calls/breastfeeding/index.html
- B. Centers for Disease Control and Prevention – Breastfeeding Resource Library
www.cdc.gov/breastfeeding/resources/index.htm

North Carolina Resources:

- A. Application for NC Breastfeeding Coalition’s (NCBC) Breastfeeding-Friendly Employers and/or Community Partners Award
www.ncbfc.org/business-case-for-breastfeeding-1
- B. REQUIRED assessment to complete prior to applying for NCBC’s Mother-Baby Breastfeeding-Friendly Clinic Award.
<https://survey.alchemer.com/s3/5596303/Pre-Application-Assessment-NCBC-Mother-Baby-Breastfeeding-Fr2020>
- C. Preview of the pre-application assessment:
https://www.eatsmartmovemorenc.com/wp-content/uploads/2020/11/Preview_of_Pre-Application_Assessment_NCBC_Mother-Baby_Breastfeeding-Friendly_Award_updated_Aug_2020.pdf
- D. Application for NCBC’s Mother-Baby Friendly Clinic Award
www.ncbfc.org/mother-baby-friendly-clinics
- E. Making It Work Toolkit
www.WorkWellnc.com/NCMakingItWork.php
- F. Building a Breastfeeding-Friendly Environment in Your Faith Community Toolkit
www.eatsmartmovemorenc.com/resource/breastfeeding-friendly-faithcommunity/
- G. Handouts and support documents for moms and families in the community
www.eatsmartmovemorenc.com/myesmm/core-behavior-start-and-continue-to-breastfeed/
- H. Regional Breastfeeding Coordinators and Regional Nutrition Consultants by Region Contacts Map – reach out to your Healthy Communities Program Consultant for this resource

Data Sources:

- A. Social Determinants of Health by Regions
<http://nc.maps.arcgis.com/apps/MapSeries/index.html?appid=def612b7025b44eaa1e0d7af43f4702b>
- B. County Physical Activity and Nutrition Data Profiles
www.communityclinicalconnections.com/data

