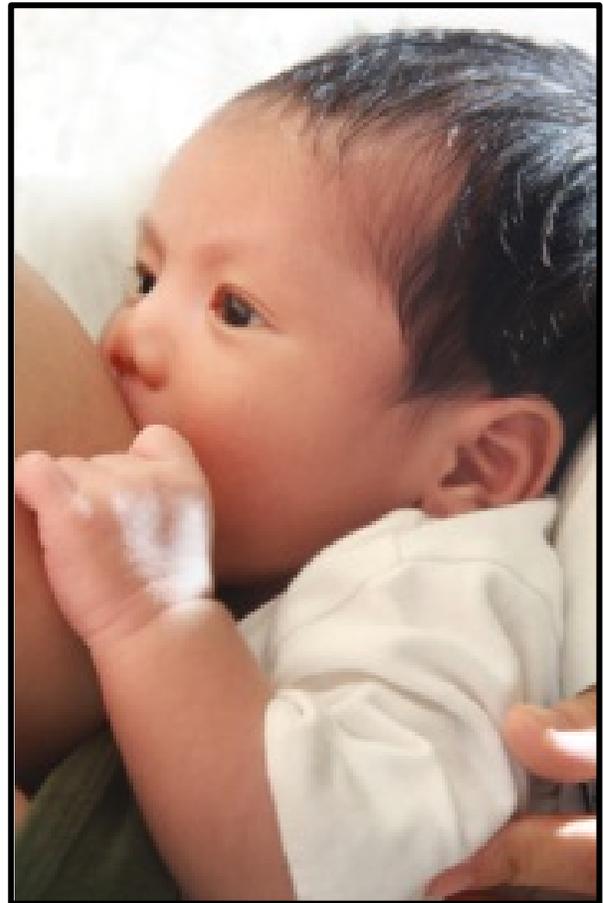




IDAHO DEPARTMENT OF HEALTH & WELFARE
DIVISION OF PUBLIC HEALTH

Idaho WIC Training **Breastfeeding Course**

Trainer



Modules 1, 2 & 3

Trainer's Steps:

- Have the Learner complete each activity either individually or with other Learners. As the trainer, you may decide whether or not to be present while the Learner works on the activities. Many of the questions in the activities are not addressed in the module so you will need to discuss the answers with the Learner.
- Once finished, the Learner(s) shall meet with the trainer to review activity 1. Please answer all questions the Learner may have and clarify any incorrect answers.
- Verify the Learner fully understands the information.
- Note: Arizona WIC developed this course so Arizona resources are listed. For Idaho breastfeeding resources please visit our [Breastfeeding Support](#) page.
- Note: There is no pre- and post-test for this course

Note: If needed, each activity identifies a specific slide(s) in the course or resource in which you can find the information necessary to complete the activity



Activity 1

COMPETENCIES:

1. Learner understands their role in breastfeeding promotion and support.
2. Learner is able to explain the types of services your local agency provides breastfeeding women.
3. Learner is able to describe breastfeeding services available in your community.
4. Learner is able to explain the breastfeeding supplies provided by your local agency to breastfeeding WIC participants.

With your trainer:

1. Discuss the Learner's role in breastfeeding promotion and support.

Some possible answers may include:

- Discuss breastfeeding early and often with participants
- Create a breastfeeding friendly environment in the clinic
- Teach breastfeeding classes and encourage attendance
- Offer breastfeeding advice and encouragement to participants and their families
- Refer to breastfeeding peer counseling program, if available
- Educate participants about the additional benefits they receive if breastfeeding
 - Greater variety and quantity of food
 - Receive WIC benefits 1-year postpartum as opposed to 6 months for non-breastfeeding women
 - Access to breast pumps and equipment if needed
 - Mom to Mom support through the Breastfeeding Peer Counseling program

2. What breastfeeding services are available for WIC participants in your *local agency*?

This will vary per local agency, but may include

- Free breast pumps and equipment to those who qualify
- Prenatal and postpartum education/classes
- Peer Counseling services
- Breastfeeding specialists (IBCLC, CLE or CLC) who can help with breastfeeding issues.
- Breastfeeding support groups

3. Which breastfeeding services are available for WIC participants in your *community*? (Module 3, page 5 – the Family Health Hotline and website are not resources for Idaho participants).

The Breastfeeding Resource sheets list services available in each region.

4. Discuss which breastfeeding supplies are provided by your *local agency* for WIC participants. (Module 3, page 4)

This will vary per local agency, all available inventory can be found in WISPr under Agency/Clinic Administration/Breastfeeding Equipment

Module 4: Introduction – Getting Started

Trainer's Steps:

- Once the Learner has finished Module 4, the trainer shall facilitate Breastfeeding Activities 2 and 3.
- Answer any questions the Learner may have.
- Verify the Learner fully understands the information in activities 2 and 3.



Activity 2

COMPETENCY:

1. Learner is able to ask a variety of questions to determine how breastfeeding is going so proper referrals for support can be made.

Instructions: A postpartum participant is in the office for her certification and she states she is breastfeeding. Practice asking probing questions to assist in gathering more information about breastfeeding. The purpose of a probing question is to gain more insight about a situation, and the intent is to solve real problems. What are questions you can ask to determine whether breastfeeding is going well? What are questions you can ask to identify possible breastfeeding concerns?

NOTE: Lead the Learner(s) in a brainstorming session of potential questions to ask the breastfeeding participant.

Possible responses are within the scope of practice of a WIC employee *without* completion of at least 35 hours of breastfeeding education:

- ◆ How do you feel the baby is breastfeeding?
- ◆ How does breastfeeding your baby make you feel?
- ◆ What kind of education did you receive on breastfeeding prior to having your baby?
- ◆ Who is your support and encouragement for breastfeeding?
- ◆ Is breastfeeding comfortable? If no, why?
- ◆ Tell me how this breastfeeding experience compares to your breastfeeding experience with your older children.
- ◆ Throughout this breastfeeding experience, do you remember a time or breastfeeding session you felt was a great success? Can you tell me more about it?



Activity 3

COMPETENCY:

1. Understand the Scope of Practice for providing breastfeeding education to WIC participants.

Four roles typically found in a WIC Local Agency and/or clinic.

- ★ WIC employee *without* advanced breastfeeding training
- ★ Certified Breastfeeding Consultant or Educator (WIC employee *with* completion of at least 35 hours of formal breastfeeding education)
- ★ Breastfeeding Peer Counselor
- ★ International Board Certified Lactation Consultant (IBCLC)

Instructions: Learn to recognize a WIC employee's Scope of Practice when providing breastfeeding education to WIC participants. Review the following breastfeeding scenarios. Identify which of the four roles listed above are trained to handle each scenario. Each scenario may have more than one answer.

1. Mom thinks she needs to pump, even though she is not going back to work and breastfeeding is going well. Discuss what makes her think she needs to pump, and the advantages and possible disadvantages of pumping.
Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, IBCLC (pump issuance is out of the scope of practice for a WIC employee *without* advanced breastfeeding education, see Chapter 6-B-2 – 6-B-6 of the Idaho WIC Policy and Procedure Manual)
2. Mom has a two week old baby who has not re-gained to his birth weight. The baby has had one poopy diaper in the past 24 hours and is nursing 15 times per day. Mom has nipple damage.
IBCLC (this is out of the scope of practice for a Breastfeeding Peer Counselor, Local Agency Breastfeeding Authority, and a WIC employee *without* advanced breastfeeding education)
3. Mom wants to supplement with formula because she thinks it is the best of both worlds. Who should discuss with mom her perspective of the situation, the benefits of breastfeeding, and her support system?
All 4 roles: WIC employee *without* advanced breastfeeding education, Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, and IBCLC (NOTE: A WIC employee *without* advanced breastfeeding education may not tailor the food package to include formula, see Chapter 6-A-6 of the Idaho WIC Policy and Procedure manual).
4. Mom of a newborn pumps two ounces of breast milk and thinks she has low milk supply. She would like help assessing whether or not her milk supply may be low.
Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, IBCLC (a breastfeeding assessment is out of the scope of practice for a WIC employee *without* advanced breastfeeding education)
5. A breastfeeding mom is two months postpartum and interested in joining a breastfeeding support group. Who can provide mom information about breastfeeding support groups offered by your local agency and community?
All 4 roles: WIC employee *without* advanced breastfeeding education, Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, IBCLC

6. Mom of a six week old thinks she is losing her milk supply since baby is constantly feeding. Who will determine what factors make mom think she is losing her milk supply?
Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, IBCLC (this is out of the scope of practice for a WIC employee *without* advanced breastfeeding education)
7. Mom is two months postpartum. She is complaining of the following symptoms: hard breast, skin shiny on the breast, breast larger than normal, breast warm to the touch, and breast pain. The symptoms appeared for the first time this morning, and her baby slept seven hours without nursing last night for the first time. Who can discuss how to treat and prevent engorgement?
Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, IBCLC (this is out of the scope of practice for a WIC employee *without* advanced breastfeeding education)
8. The mother is 12 days postpartum. She tells you her baby consistently refuses to nurse on the left breast. She also complains the left breast is hard, larger than normal, and she has breast pain.
Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, IBCLC (this is out of the scope of practice for a WIC employee *without* advanced breastfeeding education)
9. Mom says her baby is growing well and eating 10 times per day, however, she is concerned baby often has trouble swallowing all the milk released and seems to choke and cough while feeding. She would like you to observe a feeding so you can better assess the situation.
Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, IBCLC (observing a feeding and providing suggestions related to the observation is out of the scope of practice for a WIC employee *without* advanced breastfeeding education)
10. A pregnant WIC participant is in your office and contemplating whether or not she would like to breastfeed. Who will share with her the benefits of breastfeeding to both mom and baby?
All 4 roles: WIC employee *without* advanced breastfeeding education, Certified Breastfeeding Consultant or Educator, Breastfeeding Peer Counselor, IBCLC

NOTE: Please clearly explain scope of practice and how a new WIC employee should handle breastfeeding issues that require more experience than the new employee has. If an employee has not completed at least 35 hours of breastfeeding education, any breastfeeding topic that is beyond basic education and support must be referred to a qualified person.



Think It Through

1. Identify the employees in your clinic and/or local agency with the IBCLC credential.
2. Identify the employees in your clinic and/or local agency who have successfully completed at least 35 hours of breastfeeding education and are Certified Lactation Counselors or Educators.
3. If applicable, identify the breastfeeding peer counselors in your clinic and/or local agency.
4. If applicable in your agency, what are the responsibilities of the breastfeeding peer counselors?

Modules 5, 6 & 7

Trainer's Steps:

- Have the Learner complete each activity either individually or with other Learners. As the trainer, you may decide whether or not to be present while the Learner works on the activities. Many of the questions in the activities are not addressed in the module so you will need to discuss the answers with the Learner.
- Once finished, the Learner shall meet with the trainer to review the answers to the activities. Please answer all questions the Learner may have and clarify any incorrect answers.



Activity 4

COMPETENCY:

1. **Understand the myths and facts about a breastfeeding woman's dietary intake.**

True or False? Test your breastfeeding IQ regarding mother's nutrition and breastfeeding. (Module 4, Slide 19, 21 and Module 5 Video)

1. **T** or **F** If a breastfeeding woman's diet is not perfect, the milk will still be good for her baby.
Although eating well is good for you, an ideal diet is not necessary to produce good quality milk. As breastfeeding expert Ruth Lawrence, MD, writes: "All over the world women produce adequate and even abundant milk on very inadequate diets." Studies have found it takes famine conditions for several weeks before a mother's milk is affected.
2. **T** or **F** A breastfeeding woman should eat or avoid eating certain foods.

There are no foods a breastfeeding mother must have, and there are no foods a breastfeeding mothers must avoid.

3. T or F A breastfeeding woman needs to eat more than usual to make enough milk.
Just “eat to hunger.” Extra calories do not seem to be as important as once thought. A breastfeeding woman’s fat stores at baby’s birth provide much of the fuel needed to make milk. Research has found a woman’s metabolism may be more efficient while breastfeeding than at other times. This may reduce the need for extra calories. More active mothers will need more calories, but they will likely also feel hungrier too.
4. T or F It is okay for a woman to lose weight while breastfeeding.
In fact, this may be the best time, as breastfeeding helps burn fat stores. But it is best to go slowly and lose weight gradually. Any breastfeeding diet should include at least 1,800 calories per day.
5. T or F It is acceptable for a breastfeeding woman to drink caffeinated drinks.
As with all parts of your diet, think moderation. One or two cups of coffee, or other caffeinated drinks such as teas or colas, are not likely to cause a reaction. Unless a baby is unusually sensitive, there is no need to abstain.
6. T or F A guideline for hydration while breastfeeding is to “drink to thirst.”
“Drink to Thirst” is the simple guideline. Research has not yet found a link between the fluids a mother drinks and her milk production. Milk production is based on the number of times per day your milk is drained well from your breasts. If your urine is dark yellow, this is a sign you need more fluids. To make it easy to get a drink when thirsty, keep a container of water or juice at your usual nursing spot.
7. T or F If a breastfeeding woman eats garlic, broccoli, cabbage, or spicy foods, it can give the baby gas.
There are no foods a breastfeeding woman must avoid. In most cases, there is no need to steer clear of chocolate, spicy foods, onions, garlic, broccoli, or cabbage. The key is: everything in moderation. In one study, mothers had lots of garlic—more than anyone could eat with a meal, and their babies breastfed more. They liked the taste! In many countries, such as Thailand and Mexico, mothers eat spicy foods while breastfeeding with no ill effects on their babies.
8. T or F Certain foods will increase milk production.
**There are no known foods that increase breast milk production. Milk production is based on how many times the milk is drained from the breasts each day. The more times a woman breastfeeds or expresses her milk, and the more drained the breasts are, the more milk the mother will make. For information on herbal and prescribed medicines that increase milk production, talk to your lactation consultant.
The Idaho WIC Program does not suggest, prescribe, or endorse any medication or herbal supplement to participants. If asked about a specific medication or herbal supplement, WIC employees should refer to Thomas Hale’s “Medications and Mothers Milk” book or online resource for information. It is strongly recommended WIC employees copy or print the information directly from the reference material and give the information to the participant for review.**

9. or **F** If a breastfeeding woman suspects a food is affecting her baby, try avoiding it. **Keep in mind, almost all babies have fussy periods and reactions to breast milk are unusual. The baby's fussiness is probably unrelated to the mother's diet. Besides fussiness, other signs in a baby are dry skin, congestion, bloody stool, rash, and wheezing. If a breastfeeding mother suspects a food is affecting her baby, try avoiding it. Then try eating it again. If the baby reacts, you'll know to avoid that food for a few months. Most babies will not react after about six to nine months of age. The most likely culprits are protein foods such as dairy, soy, egg white, peanuts, and fish. Only changing the mother's diet will tell you for sure.**
10. or **F** If a breastfeeding woman is a vegetarian, she needs to either eat foods with vitamin B₁₂ (such as eggs or dairy), eat foods with vitamin B₁₂ added, or take a vitamin B₁₂ supplement. **If a breastfeeding woman is on a vegan (no animal products) or any other diet that does not include animal products, they should be sure to get enough vitamin B₁₂.**

NOTE: To more accurately assess the Learner's competence, it is highly recommended to review the competency checklist with the Learner on an individual basis.

Breastfeeding Post Test

**Learner needs 19 or more correct answers for a passing score

1. Man-made formula provides an infant with the same nutrients and benefits as breastmilk. **(False)**

Formula manufacturers try to duplicate what is in breastmilk, but it will never be the same.

2. There are situations where mom should not breastfeed. **(True)**

Some situations include if the mother is HIV positive or if she is taking some type of drug that may harm her baby.

3. If a mother decides NOT to breastfeed, it will not adversely affect her health in any way. **(False)**

Some ways **NOT** breastfeeding may adversely affect the mother's health include: longer recovery from childbirth, greater risk of blood loss after birth, earlier return of fertility in most women, increased risk for breast and ovarian cancer.

4. When mom is on medications, always check a reputable reference to confirm that the drug is safe for baby. **(True)**

Reputable references include the healthcare provider the book *Medications and Mother's Milk* by Thomas Hale.

5. Breastfeeding infants should receive a multi-vitamin supplement. **(False)**

Vitamin D is the only extra vitamin needed by infants.

6. Drinking extra water won't make more milk. **(True)**

7. Formula fed babies are less fussy than breastfed babies are. **(False)**

Many babies have fussy times in the evening. This happens with both breastfed and formula fed babies.

8. Colostrum is the first milk made by the breasts. **(True)**

It is specially made for a newborn and should be the only food or drink given to baby.

9. Mom doesn't have to eat a perfect diet to make high-quality breast milk. **(True)**

While every new mother should be encouraged to eat a healthy diet, moms with a less than perfect diet should still be encouraged to breastfeed.

10. Breastfeeding should be discontinued if the baby is jaundiced. **(False)**

Breastfeeding should be continued if the baby is jaundiced.

11. Newborn babies generally nurse 8-12 times in 24 hours. **(True)**

12. Mother's mature milk should come in by the end of two weeks after birth. **(False)**

Mother's mature milk should come in by day 3 or 4.

13. It is normal for baby to lose a little weight after birth; however, they often regain it by day 10. **(True)**

14. Severe pain is normal for breastfeeding. **(False)**

Brief discomfort at the beginning of a nursing session is normal, but severe pain is not normal and should be assessed by a lactation specialist.

15. The WIC program is there to make every woman breastfeed. **(False)**

Mothers have come to trust WIC for skilled help with breastfeeding. Support is an important part of what WIC does for breastfeeding mothers. WIC is there to remind mom that someone appreciates the fantastic job she is doing as a mother. WIC is there to listen, and offer information in a non-judgmental manner.

16. All nursing mothers need a breast pump. **(False)**

Not all breastfeeding mothers need a breast pump. So, gather information from the mom on why a pump might be needed. Sometimes the introduction of a pump could interfere with breastfeeding.

17. Moms who smoke should still breastfeed. **(True)**

Some nicotine does pass from mother to baby when mom's smoke, but smoking mothers should continue to breastfeed to ensure babies get important nutrients from breast milk and the protective factors to help fight damage from secondhand smoke exposure.

18. Milk can be stored in a refrigerator for 5 days. **(True)**

19. Infant formula is made from human breast milk. **(False)**

Infant formula is a processed product made of cow's milk or soybean protein, corn syrup or sugar, added fats, and vitamins.

20. Name some resources that can help WIC moms with breastfeeding. Select all that apply:

- a) **WIC staff**
- b) **La Leche League**
- c) **Hospital Support Group**
- d) **Peer Counselors**

21. When is it most beneficial to talk to a pregnant woman about breastfeeding?

- a) **2nd Trimester**
- b) Two weeks before delivery date
- c) At the point she knows she is pregnant

22. Which one of the following is NOT a treatment for sleepy baby:

- a) Wake the baby to feed about every three hours
- b) Check positioning at the breast
- c) **Give the baby a pacifier**

23. What is NOT one of Baby's early feeding cues:

- a) Makes licking, smacking or sucking movements with his mouth
- b) **Crying**
- c) Sucks on his hands
- d) Roots (opens mouth wide, turns head in search of breast)

24. Which of the following statements are accurate? Select all that apply.

- a) Baby should poop 1-2 times a day for the first 10 weeks
- b) Baby should not poop at all until milk comes in
- c) **Baby should poop 4-5 times a day for the first six weeks**
- d) **Baby's stool will change color in its first few days**

25. When should breastfeeding stop?

- a) At 6 months
- b) When the baby gets teeth
- c) 1 year
- d) **When mom and baby decide to stop**