



Breastfeeding Matters

Breastfeeding Coalition of Washington ~ a program of WithinReach

Vol. 14, No. 1
Spring 2012

Happenings

April 24, GOLD 2012: Global Online Lactation Discussion Keynote Address.
www.goldconf.com.

May 7-11, Certified Lactation Counselor Training Program. Pocatello, ID.
www.healthychildren.cc.

May 10, Advanced Topics in Lactation Support. Yakima, WA.
www.nutritionfirstwa.org.

May 11, Best Practices in Lactation Support. Yakima, WA. www.nutritionfirstwa.org.

May 15-16, Lactation Exam Review. Puyallup, WA.
www.breastfeedingoutlook.com.

May 30-June 1, Advanced Update and Exam Review. Portland, OR.
www.evergreenperinataleducation.com.

June 7, Advanced Topics in Lactation Support. Tacoma, WA.
www.nutritionfirstwa.org.

June 8, Best Practices in Lactation Support. Tacoma, WA. www.nutritionfirstwa.org.

June 12-14, Advanced Update and Exam Review. Bellevue, WA.
www.evergreenperinataleducation.com.

June 25-29, Professional Education in Breastfeeding and Lactation. Lynnwood, WA.
www.evergreenperinataleducation.com.

July 12, Advanced Topics in Lactation Support. Spokane, WA.
www.nutritionfirstwa.org.

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City of Seattle Unanimously Passes Breastfeeding Ordinance

On April 9, the Seattle City Council voted unanimously to pass an ordinance adding a mother's right to breastfeed her child in places of public accommodation to a list of protected civil rights for people in the City of Seattle. This legislation was brought forth by the Seattle Women's Commission and was sponsored by councilmember Bruce Harrell. "The bottom line is, it's a health issue for our community," said Councilman Harrell. "The benefits of breastfeeding are very clear. What we want to do is move the needle in terms of community acceptance of breastfeeding by having our local office of civil rights enforce the law." The Seattle Women's Commission advises the Mayor, City Council and city departments on issues that impact the women of Seattle. The Commission identifies areas of concern, recommends policy and legislation, and acts as a liaison between the women of Seattle and City government.

Preparing this legislation for presentation to the council was a concerted effort of the Women's Commission in its work to address infant mortality disparities in King County. "Infant mortality and low birth weight disproportionately impact Native American and African American women in King County"

noted Abigail Echohawk, co-chair of the Commission. Eliminating societal barriers to breastfeeding will enable more women to successfully continue to breastfeed their children for longer.

"Addressing this disproportionality has been a Seattle Women's Commission priority since 2006 and this local breastfeeding legislation can help reduce this disparity."

When testifying in support of the ordinance, representatives from the Breastfeeding Coalition of Washington, the Native American Breastfeeding Coalition of Washington, the King County



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**Anne Montgomery, MD, FAAFP,
FABM, IBCLC**

Eastern Region Chair, BCW

Tracy Corey, RN, IBCLC

Western Region Chair, BCW

Jean O'Leary, MPH, RD

WIC Breastfeeding Coordinator,
Department of Health

Rachel Schwartz, MSW, MPH

Program Manager, BCW

The Breastfeeding Coalition of Washington (BCW) is a program of WithinReach and works to promote, protect and support breastfeeding as a vital part of the health and development of children and their families. The BCW includes over 20 local breastfeeding coalitions across the state.

Breastfeeding Matters is published electronically three times a year by WithinReach, 155 NE 100th St, Suite 500, Seattle, WA 98125. The goal of this publication is to provide information and networking specific to the needs of those promoting breastfeeding. BCW and WithinReach do not accept responsibility for the application of any information to individual medical conditions where consultation with a health care provider is needed. The Breastfeeding Coalition of Washington is a program of WithinReach and is supported by Washington State Department of Health. Funds for this newsletter are provided by the Washington State WIC Program. The Washington State WIC Program is an equal opportunity provider and employer.

To view back issues and to receive this electronic newsletter go to:
www.breastfeedingwa.org/newsletter

If you have questions about the BCW or this newsletter, or would like to suggest an article for inclusion in a future newsletter, please contact:

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New Western Chair of the BCW

Tracy Corey, a Registered Nurse and International Board Certified Lactation Consultant, has been named the new Western Chair of the BCW.

Tracy is already an avid spokesperson for the BCW and is passionate about supporting breastfeeding moms. She first got involved with the Seattle-King County Breastfeeding Coalition and the BCW in 2005. Tracy brings a wealth of expertise to the Coalition, especially in the area of insurance reimbursement for breastfeeding-related supplies and lactation support. Tracy breastfed her two children, Joseph, 13 and Kayleigh, 10, for a total of four years. She is owner of Nurturing Expressions, a company that provides in-home lactation consultation, teaches breastfeeding classes, and provides breastpumps and lactation services to moms in home or in the hospital.



Nurturing Expressions also has a new breastfeeding supplies and support store in West Seattle. Visit www.nurturingexpressions.com to learn more.

BCW Presents 2012 Awards

On March 9, the Breastfeeding Coalition of Washington held its 2012 annual awards ceremony in Lacey, Wash. Over 120 people were in attendance for the awards, which was held during the lunch hour of the Secrets of Baby Behavior Conference featuring Jane Heinig, PhD, IBCLC and hosted by the South Sound Breastfeeding Network.

BCW Acknowledges Community Leaders

The 2012 recipient of the *BCW Outstanding Employer Award* is International Community Health Services (ICHS). ICHS is a nonprofit community health center that offers affordable health care services to Seattle and King County's Asian, Native Hawaiian, and Pacific Islander



Michael McKee and Dr. Grace Wang from International Community Health Services, the BCW Outstanding Employer award recipient for 2012.

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communities, as well as to other communities. ICHS has a holistic approach to breastfeeding and has worked to make their organization “breastfeeding-friendly” in the broadest of terms. They educate both their clients and employees about the importance of breastfeeding and support their employees through a written policy that allows staff time and flexibility to express milk. Additionally, ICHS provides breastfeeding education to their providers, who are pivotal in creating a culture that supports breastfeeding. ICHS’s WIC breastfeeding rates are well above the state average.

Spirit of Service Award

Lisa Whatley was awarded the *Nancy Danoff, MD Spirit of Service Award* in recognition for her commitment to promoting, protecting and supporting breastfeeding through her work as a Registered Nurse and International Board Certified Lactation Consultant. Lisa has been employed by Evergreen Healthcare in Kirkland since 2002 and is also a private practice lactation consultant providing home visits within the community. When receiving the award, Lisa demonstrated her tremendous work ethic, noting that, “I don’t know why I’m being honored for something that we all do or should be doing for families.” Lisa also has lots of personal experience, having breastfed her two older children for several years and still nursing her youngest. Reflecting on her career as a nurse and lactation consultant, she



2012 Physician Leadership Award recipient Dr. Jade McGaff, left, with award namesake Dr. MaryAnn O'Hara.

Physician Leadership Award

Jade McGaff, MD, an OB/GYN hospitalist with Providence Regional Medical Center Everett, was awarded the *MaryAnn O'Hara, MD Physician Leadership Award* this year. Dr. McGaff is the first obstetrician to ever receive this accolade. Dr. McGaff caught her first baby in 1979. Besides the standard training, she has had the fortune to work closely with Midwives, Doulas, Childbirth Educators, and Lactation Consultants to



2012 Spirit of Service recipient Lisa Whatley, left, with award namesake Dr. Nancy Danoff.

notes that she has covered the full spectrum of breastfeeding promotion and support: from the very first opportunities to assist nursing mothers immediately after giving birth, to supporting the most vulnerable breastfeeding families with sick or premature infants, to all that is involved in supporting the nursing mother as she transitions back to school or work. Lisa also chaired the Seattle-King County Breastfeeding Coalition for five years.

remember that birth is a sacred and transforming event for women and their families. Learning to balance ‘High Tech’ care with ‘High Touch’ care is one of her lifelong goals and supporting breastfeeding is central to this. Currently, as a Board Member of Mother Health International, Dr. McGaff is also supporting the work of Traditional Midwives in Haiti and Hawaii. When receiving the award, Dr. McGaff shared that “the more I learn about the miracles of human breast milk for human babies, the more

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2012 award recipients and BCW coalition members.

Awards.. cont. from page 3

inspired I am to educate as many people as possible about breastfeeding. And after 30 years as an Ob/Gyn doctor, I am also convinced that we should watch moms and newborns with less medical intervention when not necessary and create a world where breastfeeding is the norm and expected. Much of our current health care crisis could be averted with successful supported breastfeeding.”

To learn more about past BCW award recipients, and to nominate individuals or organizations for a future award, visit www.breastfeeding.wa/awards.

Group Health Sees a Jump in Exclusive Breastfeeding Rates: An Interview with Amanda Heffernan, RN, IBCLC

Group Health Cooperative’s Family Beginnings Birthing Center on Seattle’s Capitol Hill has been working towards becoming a Baby-Friendly accredited maternity unit for the past four years. As a result, Group Health started measuring their exclusive breastfeeding rates at discharge. The unit staff discovered in 2009 that their exclusive breastfeeding rates were at 59%, a much lower number than anticipated. Since Group Health has been working towards Baby-Friendly accreditation, their exclusive breastfeeding rates have increased from 59% in 2009 to 70% in 2010 and the rate is projected to be 74% for 2011. Their exclusive breastfeeding rates in the 3rd quarter of 2011 were 82% at discharge, which is an impressive increase from 2009.

The revision of policies and practices to support and increase breastfeeding rates at Group Health have been significant in increasing exclusive breastfeeding rates. These policies require unit physicians and midwives to complete three initial hours of breastfeeding education training and for RNs to complete twenty hours of training. After the initial training, providers participate in an annual breastfeeding skills lab. Amanda Heffernan, RN, IBCLC on the unit said “this training created a culture shift and has put an emphasis on breastfeeding”. The Birthing Center also increased their on the floor staffing for lactation consultation in May of 2010 from four hours a day Monday-Friday, to eight hours a day, seven days a week including holidays. In addition to the increase in lactation consultation staffing, the unit held a meeting with the Pediatric department to raise awareness about breastfeeding and start providing more opportunities for skin to skin care. Group Health is dedicated to a preventive medical model and realizes that breastfeeding is a huge part of prevention, and therefore has made breastfeeding a top priority and hope to become Baby-Friendly accredited in 2012.



Public Citizen Launches Campaign to Rid Healthcare Facilities of Infant Formula Marketing

One of the most significant factors limiting breastfeeding, and thereby potentially harming the health of babies and mothers, is the aggressive marketing of infant formula directly to consumers. The United States is one of just two ‘developed’ countries to allow direct to consumer advertising from pharmaceutical corporations. Research has clearly established that mothers who receive formula samples are less likely to breastfeed exclusively and breastfeed for shorter periods of time. In the United States, the majority of birthing hospitals dispense industry-sponsored samples of formula to new mothers after they give birth. Yet, all major healthcare provider organizations recommend breastfeeding for at least the first six months of life and beyond.

Formula Samples in Healthcare Facilities ‘Far From Free’

In 2007, the U.S. infant formula market accounted for \$3.5 billion in sales. “Brand name formulas that are distributed in hospital ‘discharge bags’ are up to 66 percent more expensive than store brands” according to *Hospital Influences on Early Infant-Feeding Practices*, an article published in the journal *Pediatrics*. “But mothers who start using one brand of formula are likely to stick with it in the long run, making formula samples far from ‘free’.”

In response to this norm of formula marketing in healthcare facilities, Public Citizen, a non-profit organization representing citizen’s interests in Washington D.C., has launched a campaign to encourage both hospitals and formula companies to stop marketing infant formula in healthcare facilities. Along with over 100 other organizations, including the United States Breastfeeding Committee, the National WIC Association, the Academy of Breastfeeding Medicine, the American Academy of Nursing, the American Public Health Association and most state breastfeeding coalitions, Public Citizen is calling on the over two-thirds of hospitals in the United States that still distribute industry-sponsored formula samples to new moms to stop this practice.

Campaign Includes Communication with Hospitals and Formula Corporations

“The Breastfeeding Coalition of Washington would like to acknowledge the many hospitals in Washington State that have done away with infant formula discharge packs, having recognized the adverse effect these have on breastfeeding outcomes” noted the BCW Program Manager. “We encourage those facilities who continue to

distribute formula at discharge to stop this practice and to contact the BCW for support in doing so.”

A letter has already been mailed to 2600 hospital facilities across the United States. Forty-one hospitals in Washington State have received the letter. Other components of this multi-faceted campaign include:

- Pressuring formula companies to cease marketing in healthcare facilities and to comply with the WHO/UNICEF *International Code of Marketing of Breast-milk Substitutes*. Letters will be sent to major formula companies from allied organizations, as will petitions signed by concerned members of the public and a pediatrician/healthcare provider sign-on letter.

- Facilitating local activism so community members can urge hospitals and healthcare facilities to take action and end formula marketing. Public Citizen will help supporters to organize local events and meetings with hospital officials.

- Raising media and public awareness around the issue of infant formula marketing. Newspaper op-eds and letters to the editor will be published in local and regional newspapers, blog posts will be written and diverse media outlets will be reached out to. (Source: Public Citizen)

To learn more about this campaign and the issue of formula marketing in healthcare facilities, to sign the petition, and to see which hospitals in your state received a letter, visit www.citizen.org/infant-formula.

Also, the *Ban the Bags* campaign, a long-standing effort to rid hospitals of corporate formula marketing, now has a Facebook page where community members can track updates and learn more. Visit www.facebook.com/BanTheBags.

Happenings. cont. from page 1

July 13, *Best Practices in Lactation Support*. Spokane, WA. www.nutritionfirstwa.org

July 25-29, *ILCA 2012 Conference and Annual Meeting*. Orlando, FL. www.ilca.org.

Sept. 10-14, *Foundations for Best Practice in Lactation Care: The 5 day Course*. Spokane, WA. www.evergreenperinataleducation.com

Sept. 13, *Advanced Topics in Lactation Support*. Everett, WA. www.nutritionfirstwa.org.

Sept. 14, *Best Practices in Lactation Support*. Everett, WA. www.nutritionfirstwa.org.

BCW One of 10 Coalitions Selected to Contribute to National Employer Database

The Breastfeeding Coalition of Washington, amongst nine other state breastfeeding coalitions, has been selected to work with Altarum Institute and Every Mother, Inc. in support of a U.S. Department of Health and Human Services Office on Women's Health (OWH) project. This project will develop an online searchable resource to showcase creative solutions for supporting breastfeeding employees, with a special emphasis on hourly, overtime-eligible employees and those working in more challenging work environments. The database will be available in Fall 2012.

To help populate the web-based resource, information and success stories are being gathered from businesses of all industry types. The project team will identify workplaces willing to share their solutions for both the time and space requirements of the Federal nursing breaks law, and have created an online submission site at www.everymother.org/workplace to make it easy. On this site, employers can enter their contact information and answer a few questions about their support services. A member of the project team may follow up to learn more. All information will be kept strictly confidential and no identifying information will be made public without permission from the employer. Among the employers being highlighted in Washington State are the City of Tacoma, Harrison Medical Center, Weyerhaeuser, Alaskan Copper and Brass Company, and Bastyr University.

Supporting nursing employees provides numerous bottom-line benefits to employers, including lower

health care costs, lower absenteeism rates, lower turnover rates, and higher productivity and loyalty among employees. These bottom-line benefits have been proven to result in a Return on Investment of 3 to 1, a key reason why many companies have been providing support services for nursing employees long before the Federal law took effect in March 2010.

This law, which amends the Fair Labor Standards Act of 1938, requires employers to provide both "reasonable time" and a "private space" for a woman to express her milk for her baby while she is at work. Most women use their regular breaks and meal period to express milk. There are many options for private space that can include designated rooms, temporary spaces created with partitions or other barriers, and flexible spaces used for other purposes such as a manager's office or a conference room. Mobile spaces are also increasing in popularity for outdoor worksites.

The online searchable resource at the OWH website will highlight some of these creative solutions. In addition, the HHS Maternal and Child Health Bureau released a FREE resource for business managers and human resource staff, *The Business Case for Breastfeeding*. The resource is available through www.ask.hrsa.gov, or can be downloaded at the Office on Women's Health at www.womenshealth.gov. As a part of the project, more than 3,000 individuals have been trained across the country to assist businesses with how to implement lactation support services.

Ordinance... cont. from page 1

Breastfeeding Coalition, Open Arms Perinatal Services and individual mothers, fathers, and healthcare providers spoke to the importance of passing a local ordinance and cited the numerous incidents of discrimination that breastfeeding mothers face.

The right of a mother to breastfeed her child in public has been attached to an ordinance that already existed within the city of Seattle encompassing several other protected classes. This includes discrimination against people with disabilities and other identities, including sexual orientation, national origin, race and religion. The Seattle Office of Civil Rights will enforce the law and provide education to community members and businesses about the ordinance, which goes into effect in May 2012.

Although Washington State already has a law protecting the right of women to breastfeed in public under anti-discrimination law, the local ordinance received substantial local and national press. Local enforcement will reduce the barriers for mothers to file claims of discrimination and is now one of many other statutes enforced at both the state and city level. Julie Nelson, Director of the Seattle Office for Civil Rights, commented when she presented the legislation to Seattle City Council's Public Safety, Civil Rights and Technology Committee, "This legislation is important because it will provide better customer service to the women of Seattle."

To read Council Bill #117416 in full, visit www.seattle.gov/civilrights/.

National Momentum to Support Breastfeeding

Public health agencies and private foundations are heeding the Surgeon General's Call to Action to Support Breastfeeding by providing financial and technical resources to improve breastfeeding support in the United States. Most recently, the Centers for Disease Control, National Initiative for Children's Healthcare Quality and the Kellogg Foundation have announced large, multi-year initiatives to remove the barriers to breastfeeding.

The National Initiative for Children's Healthcare Quality (NICHQ), with support from the Centers for Disease Control and Prevention (CDC), is leading a nationwide effort in close partnership with Baby-Friendly USA to help hospitals improve maternity care and increase the number of Baby-Friendly hospitals in the United States. Ninety hospitals will be accepted from across the country to participate in a 22-month learning collaborative to make system-level changes to maternity care practices in pursuit of Baby-Friendly designation. Participating hospitals will use quality improvement methods, following the Breakthrough Series approach pioneered by the Institute for Healthcare Improvement (IHI). Teams will work with each other and with national breastfeeding and quality improvement experts through in-person Learning Sessions and subsequent Action Periods. Regional collaboratives will be established to help participating teams better connect to each other and to local resources. In addition, senior administrators from participating hospitals will participate in a concurrent Leadership Track, highlighting their critical role in enabling and supporting change, and reinforcing their connection to their hospitals' project teams. Hospital recruitment is now open. To learn more, visit www.nichq.org and click on Best Fed Beginnings. (Source: www.nichq.org)

Kellogg Foundation Awards Grant to USBC to Build National and State Coalitions

In April, the United States Breastfeeding Committee (USBC) announced receipt of a \$694,000 grant from the W.K. Kellogg Foundation. The three-year award will fund a two-part initiative to build and sustain national and state coalitions to generate collective action to implement policy, systems, and environmental changes needed to increase breastfeeding rates and eliminate disparities.

"With 75% of mothers initiating breastfeeding, we know that most mothers want to breastfeed, but they encounter several barriers along the way that make it difficult to reach their personal breastfeeding goals," said USBC Chair Jeanne Blankenship. "As the national focus on breastfeeding continues to grow, we applaud the commitment of the W.K. Kellogg Foundation to

building the infrastructure to support the cross-sector collaboration necessary to tackle the complexity of this issue."

The Surgeon General's Call to Action to Support Breastfeeding, released in January 2011, identifies the USBC and its affiliated state coalitions as the primary partners in the implementation of its 20 recommended actions, along with the federal interagency work group on breastfeeding. Therefore, Part 1 of the grant initiative will focus on support for state breastfeeding coalitions, beginning with a comprehensive assessment to inform the design of customized technical assistance and enhanced training and networking opportunities for coalition leaders. At this time, the funds are to build national infrastructure and pursue the Collective Impact process on the national level. There are no funds to grant out to states or communities at this point.

On the national level, Part 2 of the initiative will apply the "Collective Impact" model with a specific focus on increasing access to and continuity of skilled support for breastfeeding between hospitals and community health settings. Collective Impact Initiatives, as defined by Kania and Kramer in the Stanford Social Innovation Review, are "...long-term commitments by a group of important actors from different sectors to a common agenda for solving a specific social problem. Their actions are supported by a shared measurement system, mutually reinforcing activities, and ongoing communication, and are staffed by an independent backbone organization."

Upon discharge from the hospital, many new mothers are unable to find or access skilled breastfeeding support. Hospitals, health care providers, and community organizations often lack systems to connect mothers to this skilled support. To address this gap, Action 8 of the Call to Action calls for the development of "systems to guarantee continuity of skilled support." The responsibility for building such systems is shared between hospitals, providers, and community organizations, making collaboration an imperative. As the national, multi-sectoral breastfeeding coalition, the USBC is uniquely qualified to lead this collective approach to systemic change to "help make breastfeeding easier," in the words of U.S. Surgeon General Regina Benjamin.

According to Blankenship, "the Call to Action truly paints the landscape of breastfeeding support in the United States, demonstrating a society-wide approach to removing the barriers to breastfeeding success. The USBC looks forward to working with members and partners, public and private, at the national, state, and community levels, so that mothers throughout the country receive the care and support they need and deserve." (Source: www.usbreastfeeding.org)



Breastfeeding Welcome Here

The Alaskan Copper and Brass Company, with headquarters located in Kent, Wash., is one of ten businesses being highlighted by the BCW for the Office on Women's Health national employer database for being a breastfeeding friendly employer (see page 6). Alaskan Copper and Brass has been a family owned business for over 100 years, and the Human Resources representative who has worked in the business for nearly 20 years, also used the rooms to nurse her son.

Alaska Copper and Brass complies with the federal Break Time for Nursing Mother's Law by providing a private-space (several actually) and reasonable break time for female employees to pump breast milk for their children. Accommodating women is not an option at Alaska Copper and Brass; when asked why they felt providing lactation accommodation is important, the Human Resources rep replied, "What is a nursing woman supposed to do? It's a given!" The HR rep also noted the providing this service benefits the business itself: "The longer you breastfeed, the less time you have to deal with a sick baby. This equals more company production."

New Breastmilk Storage Magnets Available

The BCW has revised their breastmilk storage magnets with the new storage guidelines put forth by the Western States Contracting Alliance. These guidelines were adapted from the recommendations of the US Department of Health and Human Services Office on Women's Health. Available in English and Spanish, these magnets for new breastfeeding

mothers can be ordered from WithinReach by e-mailing WithinReach material's coordinator Debbie Nakano at debbien@withinreachwa.org or visiting the WithinReach materials webpage: www.withinreachwa.org/ordermaterials_start.

Storing Breastmilk is Easy

These guidelines are for healthy full-term babies. If your baby is sick or premature, ask your healthcare provider how to store your milk safely.

	Counter top or table	Cooler with frozen ice packs	Refrigerator	Freezer compartment within a small refrigerator	Freezer with separate door
Temperature Ranges	60-85° F 16-29° C	59° F 15° C	39° F 4° C	5° F -15° C	24° F -4° C
Freshly Pumped Breastmilk	5 hours	24 hours	5 days	2 weeks	5-6 months
Thawed Breastmilk	1-2 hours	Don't store	24 hours	Never re-freeze thawed breastmilk	Never re-freeze thawed breastmilk

- Breastmilk separates after pumping. This is normal. Gently mix it before feeding.
- Pur frozen breastmilk in the refrigerator to thaw. After thawing, the frozen milk can be refrigerated, but can't be refrozen.
- Breastmilk can be given chilled or at room temperature.
 - If you choose to heat the milk: Heat it by submerging the bottle or bag of breastmilk in a bowl of warm water or under warm, running water.
- Never microwave breastmilk.

WIC, the Nutrition Program for Women, Infants and Children provides healthy food and support to prevent and treat malnutrition, women and children under age 5. For more information or to learn how to apply for WIC call: Family Health Hotline 1.800.322.2588 TTY (tty relay): www.FamilyHelp123.org. This program is an equal opportunity program. Washington State WIC Nutrition Program does not discriminate. To learn more about this program or to request a copy of the manual, call 1.800.322.2588 (TDD/TTY relay). *Babies were born to be breastfed!*

My Guide to W & BF

The BCW has updated the popular *Working and Breastfeeding: It's Worth It!* packet for new moms preparing to go back to work. The new *My Guide to Working and Breastfeeding* is a six-page color booklet that provides moms with tips and suggestions for how to continue breastfeeding upon their return to work or school. This free resource will be available for order from WithinReach by the end of May 2012 and will be available in English and Spanish. To order, e-mail Debbie Nakano, WithinReach Materials Distribution Coordinator at debbien@withinreachwa.org or visit www.withinreachwa.org/ordermaterials_start.

