

Module 2 – Giving Babies the Best

Overview

This second module helps WIC peer counselors understand that breastfeeding remains the “gold standard.” It is the best possible way to provide optimal nutrition for infants. Breastfeeding also gives infants and mothers important protection from many health risks. This module helps peer counselors learn how to address the most common myths about breastfeeding they may hear from WIC mothers. It also prepares them to make appropriate referrals to other WIC designated breastfeeding experts when breastfeeding is not recommended.

Learning Objectives

Upon completing this module, peer counselors will be able to:

- Identify three ways breastfeeding benefits infants, mothers, and society.
- Name two common breastfeeding myths.
- List two exceptions to breastfeeding.

Time Allowed: 1.5-2 hours

Background Information

Peer counselors are likely to be aware of the basic benefits of breastfeeding since they made the choice to breastfeed their own infants. However, they may not understand the practice parameters of their roles.

This module addresses:

- Common myths surrounding breastfeeding.
- Exceptions when breastfeeding is not recommended.
- Limitations of the peer counselors’ roles.
- The Yield System and when to yield to other health professionals when situations arise outside their areas of expertise.

Checklist

- AV Equipment
 - PowerPoint or overhead projector
- Teaching Tools
 - Flip chart and markers
 - Wheel game board and gold nugget candy prizes
(see *Directions for Creating Training Props* section.)
 - Twelve ping pong balls numbered with a marker from 1 to 12
 - Set of two small flags (green and red) for each participant
(see *Directions for Creating Training Props* section.)
 - Yield poster
 - Six index cards with scenarios for Peer Counselor Skills Checklist activity

- Handouts
 - Handout #2A – Breastfeeding Wheel Game Questions
 - Handout #2B – Separate the Breastfeeding Myths and Facts
 - Yield Poster

Directions for Creating Training Props

1. Wheel Game

- Print wheel template in color found on the CD-ROM.
- Mount color wheel onto a 10-inch by 10-inch white foam board.
- Trim board to form the circle shape of the wheel.
- Attach the wheel onto an 11-inch by 14-inch piece of foam board.
 - Insert an aluminum screw post through the center of the wheel. Screw posts can be found at any hardware store.
 - Secure with nut on the back side of the wheel.

[Wheel game courtesy of Mississippi State Department of Health WIC Program.]

2. Flags

- Make a small red and green flag for each participant.
 - Cut flags into 4-inch by 6-inch by 6-inch sized triangles from felt.
 - Glue the 4-inch side onto 12-inch lengths of 1/2-inch diameter dowel rods.
- Alternate:
 - Cut flags out of construction paper or card stock and glue onto plastic drinking straws.
 - Or provide small squares of colored fabric or handkerchiefs.

3. Poster

- Print poster on 11-inch by 17-inch paper.

Additional Learning Opportunities

- Allow peer counselors to observe several counseling sessions with pregnant WIC mothers to hear how the reasons to breastfeed are appropriately discussed with women from varied situations.
- Read “Benefits of Breastfeeding” in Amy Spangler’s *Breastfeeding: A Parent’s Guide*.
- Read “Human Milk for Human Babies” in La Leche League’s *Womanly Art of Breastfeeding* for more information about the reasons to breastfeed for mothers, babies, and society.

Module 2 – Trainer Notes

Slide #1

Module 2: Giving Babies the Best

A peer counselor must be comfortable with interpersonal interactions to be successful. This is particularly important in their early encounters with new mothers. Being able to see parallels helps peer counselors get the right start in new relationships.

Slide #2

Learning Objectives

Upon completing this module, peer counselors will be able to:

- Identify three ways breastfeeding benefits infants, mothers, and society.
- Name two common breastfeeding myths.
- List two exceptions to breastfeeding.

[Activity]

Learning Objective: To help peer counselors understand motivations for breastfeeding among WIC mothers.

Time: 5-10 minutes

Directions:

- Ask attendees to share what they enjoyed most about breastfeeding.
- Understand that likely responses will be the bond they feel and/or improved health to their infants.

[Key Talking Points]

- Many mothers choose to breastfeed because of a desire to be close to their babies.
- Most mothers also know the health benefits of breastfeeding.
- Peer counselors can provide support and encouragement to other WIC mothers to help them decide to breastfeed their babies.

Slide #3

Breast Milk Versus Formula

A mother's milk has the perfect combination of nutrients needed for her baby's growth and development.

[Key Talking Points]

- Breast milk provides optimal nutrition for babies.
- A mother's milk has just the right amount of fat, sugar, water, and protein needed for her baby's growth and development.
- Breast milk has proteins that are easier for babies to digest than infant formulas.

- Breastfed infants grow exactly the way they should.
- Although infant formulas today have many added vitamins and nutrients to make them more suitable for humans, they are still very different from breast milk.

Slide #4

Breast Milk: The Standard by Which Everything Else is Measured

Breast milk has over 200 nutrients in the perfect combination to help babies grow healthy and strong. It is always clean and safe, is never too hot or too cold, and is always ready whenever babies need it.

[Key Talking Points]

- Breast milk is a living substance.
- It constantly changes to meet a baby's needs.
- It changes throughout the day and from week to week.
- The milk a mother makes for a newborn is different from the milk she makes for an older baby.
- A mother's body adjusts to her baby's growing needs and makes the perfect number and quantity of nutrients for her baby.
- Breast milk even changes with the seasons and is flavored by the things that mothers eat.
- Breast milk has important infection-fighting ingredients called antibodies that help babies resist infections.
- It is not possible to add these antibodies to infant formulas.

Slide #5

[Activity]

Breastfeeding Wheel Game

Learning Objective: To identify key ways breastfeeding helps babies and mothers enjoy optimal health and nutrition.

Time: 10 minutes

Handout: #2A – Breastfeeding Wheel Game Questions

Directions:

- Ask for eight volunteers to spin the wheel, one at a time. (Instructions for wheel provided earlier in this module.)
- Ask the question that corresponds to the number that comes up.
- Have one of the participants answer the question.
- Understand that each question is designed to be easy to answer. Most answers are “all of the above” or “true.”
- Provide a gold nugget candy treat for all answers, whether correct or not.

- Affirm peer counselors who answer incorrectly by stating “some of these are harder than others” or “these are some reasons to breastfeed that many people may not know.”

[Key Talking Points]

- **Question 1.** Babies who are breastfed are less likely to have (a) ear infections, (b) diarrhea, (c) respiratory illnesses, (d) allergies, (e) all of the above. *Answer: e.*
 - Babies who are formula fed are more likely to have ear infections, diarrhea, respiratory illnesses, and stomach problems.
 - This does not mean breastfed babies will never get sick but:
 - They are less likely to develop these illnesses.
 - If they do become ill, they are often sick for a shorter duration.
- **Question 2.** Breastfed babies have improved brain development. (a) true, (b) false. *Answer: a.*
 - Studies show that breastfed children have greater brain development than non-breastfed children.
 - Every parent wants a smart child, and breastfeeding is one way to give baby a good start.
- **Question 3.** Mothers who breastfeed have a lower risk of breast cancer. (a) true, (b) false. *Answer: a.*
 - Mothers who breastfeed enjoy significant health benefits including:
 - Lower risk of pre-menopausal breast cancer.
 - Lower risk of ovarian cancer.
 - Lower risk of cervical cancer.
- **Question 4.** One way to reduce a baby’s risk of childhood obesity is to breastfeed. (a) true, (b) false. *Answer a.*
 - Breast milk has the right composition of nutrients and other ingredients needed for a baby’s growth and development.
 - Breastfed infants are more likely to mature/grow exactly as they should.
 - They tend to gain less unnecessary weight.
 - This may result in a lower risk for being overweight later in life.

- **Question 5.** A mother who returns to work or school is not absent as often if her baby is breastfed. (a) true, (b) false. *Answer: a.*
 - Breastfed babies are healthier.
 - This is especially important for babies who go to childcare while mothers go to work or school.
 - Healthier babies reduce absenteeism for mothers.

- **Question 6.** How much money could breastfeeding save a family in the first year of a baby's life? (a) \$100, (b) \$500, (c) \$1,000. *Answer: c.*
 - Formula and all of the "stuff" that goes with it are very expensive.
 - A breastfed baby can save the family around \$1,000 in the first year just by not buying formula and baby bottles.
 - This does not count the cost savings of having a healthier baby that can amount to roughly another \$1,000 in the first year.

- **Question 7.** Breastfeeding mothers: (a) recover from pregnancy faster, (b) lose their pregnancy weight faster, (c) may have their menstrual cycle delayed, (d) have less risk of developing some cancers, (e) all of the above. *Answer: e.*
 - Mothers enjoy many advantages from breastfeeding.
 - After delivery, breastfeeding helps the uterus to contract and return to normal size more quickly, thus reducing bleeding.
 - After pregnancy, weight loss is enhanced because breastfeeding burns around 500 calories a day.
 - Full time breastfeeding may slow the return of the menstrual cycle.
 - Mothers who breastfeed may reduce their risks of developing breast and ovarian cancers.

- **Question 8.** Breast milk has everything a baby needs for the first six months of life. (a) true, (b) false. *Answer: a.*
 - Breast milk has the perfect combination of vitamins and nutrients to help babies grow healthy and strong.
 - For the first six months, breast milk is the only nutritional resource needed.
 - The American Academy of Pediatrics recommends that mothers:
 - Exclusively breastfeed for the first six months.
 - Continue breastfeeding after introducing solid foods until at least 12 months.

- Continue breastfeeding after that for as long as mother and baby want.

Slide #6
[Activity]

Breastfeeding in Everyday Life

Learning Objective: To teach other practical ways breastfeeding can help babies, mothers, and families.

Time: 10 minutes

Directions:

- Ask all participants to think about their own positive experiences with breastfeeding.
- Ask them to look through their purses or diaper bags or to look around the room to locate ordinary objects that remind them of practical reasons to breastfeed for babies and families.
- Offer a gold nugget candy treat to anyone who can find objects that relate to breastfeeding.
- Give a few examples, if needed:
 - Clock or watch – saves time.
 - Diapers – don't smell as bad.
 - Glasses – better eye development.
 - Small diaper bag – no bottles or paraphernalia to tote around.
 - Money – saves money.
 - Pencil or pen – better hand-eye coordination.
 - Mom's hand – free hand for other children.
 - Tampon – delays return of the mother's menstrual cycle.

[Key Talking Points]

- Many families know it's best to breastfeed.
- These objects from our everyday experience remind us that breastfeeding benefits the whole family.

Slide #7

Overcoming Myths About Breastfeeding

Many myths about breastfeeding have persisted through the years. Peer counselors can help mothers by providing correct information.

Discussion:

- What have you heard people say about breastfeeding that you now know is not true?
- How did you feel when you heard those things for the first time?
- How did you learn the truth about that incorrect information?

[Key Talking Points]

- At one time people were convinced the earth was flat.
- A myth is something commonly believed that is not based on facts.
- Myths may last long periods of time and may be passed from generation to generation as if they were true.
- It is not surprising that people believe myths about breastfeeding.
- Some myths about breastfeeding have lasted years because bottle feeding has been so common in the United States.
- People can have their misunderstandings corrected with proper support from a WIC peer counselor.

Slide #8
[Activity]

Separate the Breastfeeding Myths and Facts

Learning Objective: To identify common myths that peer counselors may hear from WIC mothers, along with correct information with which to dispel those myths.

Time: 10 minutes

Handout: #2B – Separate the Breastfeeding Myths and Facts

Directions:

- Use 12 ping pong balls, and number each one with a marker from 1 to 12.
- Ask peer counselor volunteers to read aloud the myth on their handout that corresponds to the number on their ping pong ball.
- *For large training groups:* Ask for 12 volunteers, or divide the group into small groups and conduct as a small group activity.
- *For small training groups:* Ask a few peer counselors to volunteer, or use the handout to discuss the myths as a general discussion.
- If the statement read by the volunteer or group is a myth, toss the ball into a container or box. Toss the balls that represent breastfeeding facts into a separate container or box to symbolize separating the myths and facts.

[Instructional Guidance]

- Adjust the “myth” statements to reflect common myths about breastfeeding believed by people in your community. Include myths about breastfeeding commonly held by various cultural groups served by WIC in your area.
- Other options for conducting this activity include:
 - Write each statement on a single piece of paper, and ask peer counselors to wad up the paper to symbolize dispelling the myth.

- Blow up 12 balloons and write each statement on the outside of the balloon. Use a pin to bust the balloon to symbolize busting the myth. Use caution if you choose to use balloons and small children are present who might be bothered by the noise. If peer counselors have latex allergies, consider using latex-free balloons.

[Key Talking Points]

- Women with small breasts do not make as much milk as women with large breasts. *Answer: MYTH*
 - The size of a woman's breast depends on how much fatty tissue she has.
 - Nearly every woman has the ability to produce sufficient milk for her baby, no matter the size of her breasts.
- A mother should never drink alcohol if she breastfeeds. *Answer: MYTH*
 - A mother can enjoy alcoholic beverages, in moderation, if she consumes a beverage only after she breastfeeds.
- It is normal for breastfeeding to hurt. *Answer: MYTH*
 - During the first few days, breastfeeding can cause breast tenderness.
 - Breastfeeding is not typically painful, especially if the baby is positioned properly.
 - More instruction about this will follow in another lesson.
- Mothers can breastfeed if they smoke. *Answer: FACT*
 - It is best for a mother not to smoke.
 - She should never smoke near her baby, in the house, or in the car.
 - If a mother does smoke she should continue to breastfeed.
 - This may help reduce the baby's risk of respiratory problems as a result of exposure to secondhand smoke.
 - Smoking 10 or more cigarettes a day may reduce milk supply.
- A woman can make enough milk, even if her mother did not. *Answer: FACT*
- Breast milk has enough iron for the baby. *Answer: FACT*
 - Infant formulas have added iron because the iron in cow's milk is not well absorbed by the baby.
 - The iron in breast milk is easily absorbed.
 - Iron supplements are not usually needed for infants younger than 6 months of age.

- If the mother is sick, she should stop breastfeeding immediately. *Answer: MYTH*
 - For most common illnesses, women should continue to breastfeed during their illnesses.
 - The baby has already been exposed to the illness.
 - The baby needs the antibodies provided in breast milk.
 - Continuing to breastfeed helps the mother avoid developing a breast infection in addition to her other illness.

- If the baby has diarrhea or vomiting, the mother should stop breastfeeding and give Pedialyte. *Answer: MYTH*
 - The best thing a mother can do for a sick infant is to continue breastfeeding.

- Most formulas are fairly close to breast milk. *Answer: MYTH*

- If the mother is taking an antibiotic she should stop breastfeeding. *Answer: MYTH*
 - Most medications, including most antibiotics, are safe to use while breastfeeding.
 - Peer counselors should encourage the mother to follow her doctor's advice, and refer her to the WIC designated breastfeeding expert.

- Holding a fussy baby will make the baby even more spoiled. *Answer: MYTH*
 - Babies need to be held often to foster confidence and security.
 - Many ways are used to calm a fussy baby.
 - Breastfeeding and keeping a baby close to mom or dad is an important way for a baby to feel loved.

- A breastfeeding mother who eats broccoli will make her baby fussy. *Answer: MYTH*
 - Most breastfed babies do just fine no matter what foods a mother eats.
 - If a certain food is suspect, discontinue the food completely for a week or more and watch for changes in the baby's response to breastfeeding.

Slide #9

Exceptions to Breastfeeding

In most cases, breastfeeding is possible. In a small number of situations, breastfeeding may not be recommended.

[Key Talking Points]

- For women who need extra help with breastfeeding, a peer counselor can be helpful by providing correct information and support.
- For a small number of women, breastfeeding is not recommended.
- When these situations arise, or if a peer counselor has any questions regarding a mother's situation, she should always and immediately refer the mother to her WIC designated breastfeeding expert.

Slide #10
[Activity]

Wave Your Flag

Learning Objective: To identify situations where breastfeeding is the exception.

Time: 10 minutes

Directions:

- Provide each participant with a set of two flags: red and green.
- Show a series of slides picturing challenging breastfeeding situations.
- Instruct trainees who believe the mother can breastfeed to raise the green flags.
- Instruct trainees who believe the mother should not breastfeed to raise the red flags.
- Encourage peer counselors to compete to raise the appropriate flag first and reward with affirmations and treats.
- *For large training groups:* Do the activity as small groups and have each group discuss and raise their flags.
- Facilitate discussion regarding the color selections and affirm their thinking. Answers follow.

Slide #11

Breastfeeding Twins

Answer: Green flag

[Key Talking Points]

- It is a challenge, but many mothers breastfeed twins, triplets, and more.
- Mothers of twins can learn to feed both babies at the same time.
- Mothers can make plenty of milk for both babies.
- Breastfeeding may make things easier on parents since babies are likely to be healthier.

Slide #12

Tattoo

Answer: Green flag

[Key Talking Points]

- A mother with a tattoo can breastfeed even if the tattoo is on her breast.
- The dyes used in tattoos do not affect breast milk.

Slide #13

Nipple Ring

Answer: Green flag

[Key Talking Points]

- A nipple ring does not affect the quality or quantity of a mother's milk.
- Nipple rings should be removed when breastfeeding to avoid a choking hazard for the baby.

Slide #14

Mother Who is HIV Positive

Answer: Red flag

[Key Talking Points]

- Breast milk may be a way the HIV virus can be passed to nursing babies.
- HIV positive women in the United States should not breastfeed.
- Peer counselors who learn a mother is HIV positive should encourage the mother to discuss her HIV status with her doctor or another health professional.
- This information should be referred to the WIC peer counselor's supervisor for documentation in the client's chart (Breastfeeding contraindicated, medical condition).

Slide #15

Mother Has Herpes Simplex II

Answer: Green flag

[Key Talking Points]

- Other than being HIV positive, breastfeeding can continue with most sexually transmitted diseases.
- However, if a mother has an active herpes lesion or open sore on her breast she will need to:
 - Nurse from the other side and pump the milk on that side to maintain her milk supply until the sore has healed.
 - Cover the lesion carefully so the baby has no risk of contact.
 - Consult a health care professional for treatments for Herpes Simplex II.

Slide #16

Baby Has a Cleft Palate/Lip

Answer: Green flag

[Key Talking Points]

- Babies with a cleft, or opening in their lip or palate, can breastfeed.
- However, this is a significant challenge and mothers will need special help from the WIC designated breastfeeding expert.
- Babies with a cleft palate/lip benefit significantly from breastfeeding because of its potential to reduce the incidence of ear infections, for which babies with cleft palate/lip are more susceptible.

Slide #17

Mother Has Hepatitis

Answer: Green flag

[Key Talking Points]

- Mothers with hepatitis B or C can continue to breastfeed.
- The immunological properties of breast milk will reduce the likelihood of transmission.
- Mothers with hepatitis can be treated with a vaccine.
- Newborns are usually given the vaccine at birth.

Slide #18

Mother Eats Junk Food

Answer: Green flag

[Key Talking Points]

- Mothers who eat a poor diet produce healthy milk.
- Unless a mother is in starvation mode, her milk has the same nutritional complement as a woman who eats a perfect diet.
- Babies get optimal nutritional/caloric intake from breast milk.
- The consequences of a poor diet impact only the mother.
- All mothers should be encouraged to eat a healthy diet to ensure her own health and vitality.

Slide #19

Mother Uses Illegal Drugs

Answer: Red flag

[Key Talking Points]

- Mothers who use “street” drugs such as heroine, cocaine, methamphetamines, or marijuana should not breastfeed.
- Drugs pass into the breast milk and can cause harm to the baby.
- A mother who uses illegal drugs should be referred to the peer counselor’s WIC designated breastfeeding expert.

Slide #20

Mother is Disabled

Answer: Green flag

[Key Talking Points]

- Mothers with a physical or mental disability, or who are blind or deaf, can make breast milk just as other mothers can.
- However, these mothers may need special help to learn how to care for their infants.
- Peer counselors should talk with their WIC designated breastfeeding expert about mothers who have a physical or mental disability.

Slide #21

Mother is Pregnant Again

Answer: Green flag

[Key Talking Points]

- Mothers who become pregnant while nursing a baby can continue to breastfeed.
- When their new baby is born, they may breastfeed both babies.
- This is called “tandem” nursing.
- During pregnancy, mothers may become uncomfortable and their nipples may become sore.
- This can become a natural weaning time for many mothers.
- If a mother has a history of miscarriage or has contractions when she nurses, refer her to her doctor.

Slide #22

Premature Baby

Answer: Green flag

[Key Talking Points]

- It is important for mothers of premature infants to provide their milk for their babies.
- The milk a mother produces provides a premature baby with high concentrations of certain vitamins and infection-fighting agents that are ideal for undersized infants.
- Mothers should be encouraged to pump their milk for their babies as early as possible.
- Some hospital neonatal intensive care units (NICUs) insist that mothers provide their milk because it is so important. When the baby is ready to begin feeding directly at the breast, the mother will need help from hospital staff members who are trained to deal with premature babies.

Slide #23

Mother with Previous Breast Surgery

Answer: Green flag

[Key Talking Points]

- Many mothers who have had surgery to make their breasts larger or smaller are able to breastfeed.
- Surgeries that reduce the size of a mother's breast may limit the amount of milk a mother is able to make.
- Mothers who have had a breast removed can breastfeed on the remaining breast.
- If a mother is worried about whether she can breastfeed because of surgery, she can speak with her doctor.

Slide #24

Yield

Peer counselors will encounter situations they are not prepared to handle. The Yield System will help peer counselors build a tracking system to know when to ask for help from more qualified breastfeeding experts or health professionals.

Handout: Copy of Yield Poster

[Key Talking Points]

- The Yield System is similar to the yield signs peer counselors encounter when driving through traffic.
 - Occasions arise when it is important to yield to other traffic.
 - This ensures traffic flows more smoothly and everyone is safe.
 - Drivers do not stop forever at yield signs. They continue on once the way is clear.
- Peer counselors need to know when to yield to others who have more expertise dealing with complicated breastfeeding or medical issues.
- Just as a driver does not stay at the yield sign, a peer counselor will continue to provide support to a new mother while the WIC designated breastfeeding expert is helping the mother.
- During training, peer counselors will develop a yield schedule to guide how they handle referrals.

[Instructional Guidance]

- Ask participants to remove their yield handouts.
- Remove the yield poster for Module 2 and post it on the wall.
- As the remaining activities are completed, help trainees identify yield situations and write those situations on the yield poster.

- Ask trainees to write the similar situations on their yield handouts for later reference.

Slide #25
[Activity]

Peer Counselor Skills Checklist

Learning Objective: To allow trainees to apply the knowledge about the benefits of breastfeeding in mock counseling situations.

Time: 10 minutes

Handout: Peer Counselor Skills Checklist Card

Directions:

- Prepare an index card with one of each of the counseling scenarios listed below.
- Provide one card to each small group or to individual volunteers.
- Identify at least three reasons why a mother, in each situation, should consider breastfeeding when making her infant feeding decisions.
- Ask trainees to present their ideas to the entire group and facilitate discussion.
- Encourage each peer counselor to contribute ideas so that she may check off this skills-building activity on her skills chart.
- *For large training groups:* Divide peer counselors into small groups of two or three.
- *For small training groups:* Do this activity as a general group discussion.
- Counseling scenarios include:
 - Mother has bottle fed three children, now ages two, three, and six. She is now pregnant with her fourth child.
 - Stay-at-home mother lives in a small rural area with more than an hour's drive to the city.
 - Single working mother is employed at Wal-Mart and pregnant with her second child.
 - Teen mother, age 16, plans to go back to school two weeks after she gives birth.
 - First-time mother lives with her parents. Nobody in her family has ever breastfed before.
 - A new mother lives in a crowded apartment complex in a large urban area of a city.
- At the conclusion of the activity, sign and date Reasons to Breastfeed on the peer counselor's Peer Counselor Skills Checklist Card.