

## **Module 3 – *Loving Support*<sup>®</sup> Makes Breastfeeding Work**

### **Overview**

Despite the evidence that shows the positive impact of breastfeeding on the health of mothers and babies, many women choose not to breastfeed or discontinue breastfeeding early. Often this results from perceptions that physical, emotional, or social “costs” are associated with breastfeeding.

This third module addresses common barriers to breastfeeding, including embarrassment, time and social constraints, lack of social and familial support, fear of pain, and lack of confidence. The module also provides practical and appropriate strategies that peer counselors can use to help women make breastfeeding work for them.

### **Learning Objectives**

Upon completion of this module, the peer counselor will be able to:

- Identify two strategies for addressing common barriers to breastfeeding.

**Time Allowed:** 1 to 1.5 hours

### **Background Information**

Research with WIC mothers shows that most women are aware of and accept the health advantages of breastfeeding. They know that breastfeeding is the optimal infant feeding choice, and they want the special closeness with their babies that breastfeeding will provide. Despite this, many women choose not to breastfeed or discontinue breastfeeding early.

### **Checklist**

- AV Equipment
  - PowerPoint or overhead projector
  - TV/VCR or VCR to connect to PowerPoint projector
- Teaching Tools
  - Flip chart and markers
  - Yield poster
  - Dear Gabby letters
  - Video: *Breastfeeding: Another Way of Saying I Love You*

- Training Props
  - Infant receiving blanket for trainers (plus enough for half of the attendees).
  - Baby doll or stuffed animal for trainers (plus enough for half of the attendees).
- Handouts
  - Handout #3A – So You Wanna Buy a Car?
  - Handout #3B – The Cost to Breastfeed
  - Handout #3C – Dear Gabby Letters
  - Handout #3D – Addressing Barriers to Breastfeeding
- Resources
  - USDA “Fathers and Breastfeeding” pamphlets and video.
  - Mississippi WIC Video, *Breastfeeding: Another Way of Saying I Love You*. (Developed by the Mississippi State Department of Health WIC Program, and available through: Rose Greco Powers, 601-982-3350, e-mail: rgpowers6@cs.com)
  - “*Loving Support*© Makes Breastfeeding Work” pamphlets addressing barriers to breastfeeding. Available at: [www.beststartinc.org](http://www.beststartinc.org)

## Directions for Creating Training Props

### 1. So You Wanna Buy a Car?

- This skit can be produced by two trainers or staff members who have prepared it in advance or by using a peer counselor volunteer who follows the script or who spontaneously enters into the discussion with a car salesman.
- Instructions are provided on the handout and in this module.

### 2. Dear Gabby Letters

- This set of eight letters created for a fictitious newspaper columnist, Dear Gabby, covers common barriers to breastfeeding.
- The letters are provided on the CD-ROM.
- The letters can be printed on plain white paper or on flowery stationery in a script typeface to resemble actual letters.
- Change the names of cities and communities to reflect the areas where you are presenting material.

## Additional Learning Opportunities

- Allow peer counselors to observe counseling situations with WIC pregnant mothers to learn how the counselor helps women address barriers to breastfeeding.
- View the FNS/WIC video *Fathers Supporting Breastfeeding* and discuss the video guide and pamphlets.
- Read chapters “The Manly Art of Fathering” and “Meeting Family Needs” in La Leche League’s *Womanly Art of Breastfeeding*.

## Module 3 – Trainer Notes

### Slide #1

**Module 3: *Loving Support*© Makes Breastfeeding Work**  
“*Loving Support*© Makes Breastfeeding Work” is the WIC National Breastfeeding Promotion Program. It has been used in WIC Programs throughout the nation since 1997. The strategic plan and branding strategy for that program provide the foundation upon which the information in this module is based.

### Slide #2

#### **Learning Objectives**

Upon completion of this module the peer counselor will be able to:

- Identify two strategies for addressing common barriers to breastfeeding.

### [Activity]

*Learning Objective:* To lay the foundation for a discussion of overcoming barriers.

*Time:* 5-10 minutes

#### *Directions:*

- Ask trainees to write on an index card one personal accomplishment within the last year.
- Collect the cards before anyone shares information.
- Ask each trainee to select one card and read it aloud.
- Identify the person who matches the card and ask her to discuss the accomplishment and how it was done.
- Be sensitive to the possibility that some trainees may be less skilled at reading aloud than others. Ask for volunteers to read aloud if it appears some trainees are uncomfortable with the exercise.

### [Key Talking Points]

- Each of you has accomplished amazing things in your life and you should be very proud.
- The ability to work toward goals is an important attribute of a good peer counselor in the WIC Program.
- The mothers you help will need these same qualities to overcome their barriers to breastfeeding.
- Your positive encouragement will help mothers do this.

### Slide #3

### [Activity]

#### **Making the Infant Feeding Decision**

Facilitate a discussion on when and how the trainees made their feeding decisions for their infants.

[Key Talking Points]

- Women make infant feeding decisions based on:
  - What they have seen or heard in their family.
  - Influence of friends.
  - Personal experience.
- Women who lack confidence may be more reluctant to try breastfeeding.

**Slide #4**

### **When Infant Feeding Decisions are Made**

A mother makes her infant's feeding decision at varied times throughout her pregnancy, and even before her pregnancy begins.

[Key Talking Points]

- **Before pregnancy**
  - Many women actually have a feeding preference before they become pregnant.
  - More women make their decision by the end of their first trimester.
  - Most women decide based on what is the “norm” in their families or communities.
  - Women who decide early will breastfeed longer.
  - Early contacts with pregnant women increase the likelihood they will breastfeed.
- **During pregnancy**
  - Women who originally decide to formula feed may change their minds during their pregnancies when provided the right information and support.
  - Continued contacts throughout a mother's pregnancy can provide that necessary support.
- **After baby is born**
  - Some women (especially teens) wait until very late in their pregnancies, or even after their baby is born, to select a feeding practice.
  - Maintaining contact with mothers allows the peer counselor to support women who are late deciders.

**Slide #5**

### **What Women Know**

WIC women typically know that breastfeeding is the best way to feed their babies and need help in overcoming their barriers.

[Key Talking Points]

- WIC women know the health benefits of breastfeeding.
- However, they sometimes believe that, while breastfeeding is better, babies will do just as well on formula.
- Many women do not know about the personal health benefits associated with breastfeeding.

- Many women are challenged with combining breastfeeding and other competing demands.
- These “costs” or barriers to breastfeeding can be overcome through appropriate peer counselor support.

**Slide #6**  
[Activity]

**The Cost to Breastfeed**

*Learning Objective:* To help peer counselors understand the importance of using their counseling sessions with mothers to understand a mother’s concerns about breastfeeding rather than only trying to convince her to breastfeed based on the benefits.

*Time:* 5 minutes

*Handout:* #3A – So You Wanna Buy a Car?

*Directions:*

- Perform a short skit to demonstrate the concept of product benefits versus costs.
- Perform this as a preplanned skit using two trainers, WIC staff, or trainee volunteers.
- The skit can also be done as an impromptu exercise using the basic scenario provided on the handout.

*Discussion:*

- What was happening in this skit?
- Who wasn’t listening?
  - The car salesman did not listen to the concerns of the buyer and only focused on the features of the new car.
  - The buyer was so focused on the “cost” that she missed the features of the new car.
- How does it relate to counseling mothers about breastfeeding?

[Key Talking Points]

- Most new mothers know breastfeeding is best.
- However, many are focused on the barriers to breastfeeding:
  - Embarrassment
  - Lack of social support
  - Time and competing demands
- These “costs” make breastfeeding seem undoable.
- Allowing mothers to share their concerns is helpful.
- Counseling a new mother is most effective when benefits and barriers are explored.

[Instructional Guidance]

- For those who prefer not to use this exercise as a skit, engage the group in an open-ended discussion about their experiences with salespeople, using the following discussion questions:
  - Has anyone tried to sell you something you were unsure of?
  - How did that make you feel?
  - What did you do?
  - Did you tell the salesperson why you were unsure?
  - Was it easy or difficult to talk with the salesperson about your reasons?
  - What would have made it easier to talk with the salesperson?
- Discussion points include:
  - Women making infant feeding decisions don't respond well to pressure.
  - Listening to mothers opens the door to learn what they need, not what we need.
  - Sharing concerns with someone else is empowering.
  - Mothers will be more comfortable and trusting if they are able to talk about their concerns.

**Slide #7**

**Barriers to Breastfeeding**

WIC peer counselors can help mothers address their individual barriers to breastfeeding.

[Key Talking Points]

- Imagine the hurdles that a track athlete must jump over to complete the race.
- The athlete is aware of the hurdles but focuses on the finish line.
- New mothers often see hurdles or barriers to successful breastfeeding.
- A WIC peer counselor can help mothers identify their personal barriers and learn how to overcome them.

[Activity]

*Learning Objective:* To help peer counselors identify common barriers to breastfeeding among WIC mothers.

*Time:* 20 minutes

*Handout:* #3B – The Cost to Breastfeed

*Directions:*

- Divide peer counselors into small groups.
- Ask each group to identify three reasons why women may not breastfeed.
- Write the barriers using three of the price tags on the handout.

- Have the group select one of these “costs” and discuss ways to help a mother deal with it.
- Go through the series of six slides that follow.
- Ask the groups to report on strategies for dealing with each barrier.
- Allow other groups to share their ideas.
- Facilitate a discussion on any of the barriers not selected by any group.
- *For large training groups:* Divide into small groups of two or three to foster participation.
- *For small training groups:* For small trainings, this activity may be done as a general group discussion. Ask individuals to share what they think major costs might be, write them on a flip chart, and ask for ideas on how to deal with these barriers.

## Slide #8

### **Embarrassment**

Embarrassment is a primary barrier for women of all backgrounds and in all regions of the country. Peer counselors can help mothers by providing helpful strategies for dealing with this concern.

#### [Key Talking Points]

- Not all mothers will discuss their embarrassment readily.
- For some, even saying the word “breastfeeding” may be difficult.
- Embarrassment arises from cultural norms in the U.S. that include perceiving breasts in a sexual way rather than as the means for feeding infants.
- Some women are only shy about breastfeeding in public for fear their breasts will be exposed.
- Learning to breastfeed discreetly, without exposing the breast, is helpful for some women.
- Some women are only comfortable breastfeeding at home in private.
- Some women prefer that no one knows they are breastfeeding regardless of the privacy available.
- As babies grow, embarrassment can continue to be an issue.
- Being discreet can be more challenging with older babies.
- Some women are embarrassed by questions about continuing to nurse their older babies.
- Possible strategies for counseling mothers:
  - Provide reassurance that many women worry about embarrassment.
  - Discuss how understandable it is that she can’t imagine breastfeeding in public.

- Discuss how once the baby is born, many women grow more comfortable with the idea of nursing.
- Show her how to breastfeed by pulling her shirt up from the bottom, rather than from the top. This includes unbuttoning a blouse from the bottom, rather than the top.
- Discuss the use of nursing tops that make it easier to breastfeed discreetly. These are available at many maternity and discount stores.
- Discuss the benefits of pumping milk in advance and feeding with a bottle in public to avoid the embarrassment of nursing in public.
- Discuss the use of department store dressing rooms when her baby is hungry rather than restrooms.
- Inform mothers about stores and malls that provide private areas for breastfeeding.
- Suggest practicing discreet breastfeeding techniques in front of a mirror.
- Suggest having a partner or a friend observe practicing discreet breastfeeding.
- Teach women who are worried that people may see them breastfeeding to keep their eyes up and focused in another direction.
- Teach women how to cover up in public, using a sling or blanket.

[Activity]

*Learning Objective:* To give peer counselors a tool for helping mothers breastfeed discreetly.

*Time:* 10 minutes

*Directions:*

- Provide a blanket and a small stuffed animal or doll for each pair of trainees.
- Ask a peer counselor volunteer to play the role of a new mother.
- Ask the volunteer to hold a doll (or her own infant) in the cradle position.
- Teach how to grab the corner of the blanket and pull it over the shoulder to cover the baby.
- After latching on with the baby underneath the blanket, demonstrate how to adjust the blanket for comfort.
- After the demonstration, have trainees pair off and practice the skill with one another.
- At the conclusion of the activity, sign and date the peer counselor's Peer Counselor Skills Checklist Card, Module 3 – Discreet Breastfeeding section.

## Slide #9

### **Time and Social Constraints**

New mothers can benefit from information on how breastfeeding can be successfully combined with other commitments of their busy lives.

#### [Key Talking Points]

- New mothers are often overextended in their roles as:
  - Mother
  - Wife
  - Household manager
  - Employee or student
- Single mothers may have greater demands.
- For many mothers, breastfeeding is hard to imagine in their busy lives.
- Some mothers mistakenly assume breastfeeding will make their children too dependent.
- Breastfed children tend to be more secure, self-reliant, and independent.
- Inexperienced mothers may not be aware that breast milk can be expressed and frozen for later use.
- Mothers can benefit from information on how breastfeeding and employment can be combined.
- Possible strategies for counseling mothers include:
  - Encourage mothers to begin expressing milk soon after their babies are born to relieve fullness and freeze milk for later use.
  - Encourage mothers to talk with their supervisors at work (or school) during pregnancy about their plans to breastfeed.
  - Note: Module 11 provides information on breastfeeding, employment, and milk expression in greater depth.

## Slide #10

### **Lack of Social Support**

New mothers value the support from their family and friends in their infant feeding decisions.

#### [Key Talking Points]

- For most women, their mothers have the strongest influence on their decisions to breastfeed and how long they will breastfeed.
- Other female relatives are also influential.
- The woman's partner is also a strong influence in her decision.
- Many men are not aware of the importance of breastfeeding.
- Peer counselors can provide support to family members and friends through information and being good listeners.
- The baby's father can be intimately involved in the care and nurturing of a breastfed baby.

- Even when a baby and mother have a special bond through breastfeeding, a father can establish a strong bond with his baby in other important ways.
- Throughout the community, new mothers need support to feel confident about breastfeeding.
- Malls, grocery stores, workplaces, faith-based organizations, and health clinics are all places where mothers need support.
- Possible strategies for counseling mothers include:
  - Encourage mothers to talk with their partner and mother about infant feeding decisions and invite them to attend prenatal classes to learn more about breastfeeding. Give mothers communication tools that can be useful in talking with her family members.
  - Provide strategies on how the baby's father can be involved in ways that are appealing to dads, including:
    - Playing with the baby.
    - Burping the baby after breastfeeding.
    - Cuddling the baby after breastfeeding.
    - Singing or humming softly to the baby if fussy.
    - Holding the baby closely skin-to-skin.
    - Doing infant massage.
  - Provide strategies on how the woman's mother can be involved in ways that are appealing to grandmothers, including:
    - Bathing the baby.
    - Dressing the baby.
    - Cuddling and rocking the baby after breastfeeding.
    - Caring for other children who need special attention.
    - Nurturing her daughter, the new mother.
  - Approach local businesses in the community to seek their support in providing a breastfeeding mothers' room. Offer to advertise the room with other WIC mothers as an incentive for providing support.

**Slide #11**

**Fear of Pain**

WIC mothers benefit from receiving information on how to prevent the pain of breastfeeding.

[Key Talking Points]

- The fear of pain is a particular concern among teenaged mothers.
- While some breast tenderness is common in the first few days, true pain is a sign that a problem exists.
- Most painful situations can be prevented when the baby is positioned and latched correctly.
- Possible strategies for counseling mothers include:

- Encourage women to attend a prenatal class to learn how to properly position and latch their babies.
- Teach women warning signs that suggest a need for assistance with breastfeeding.
- Encourage mothers to contact someone for help if they think something is not going correctly.
- Note: This topic area will be dealt with in great detail in later modules.

**Slide #12**

**Lack of Confidence**

Underlying the common barriers to breastfeeding is a lack of confidence. Peer counselors can greatly assist by affirming new mothers and helping them feel good about their decisions to breastfeed.

[Key Talking Points]

- New mothers may feel vulnerable and overwhelmed with the responsibilities of motherhood.
- Examples of statements that may indicate lack of confidence include:
  - I don't think I'll make enough milk.
  - I might "try" to breastfeed.
  - Breastfeeding will be too hard.
  - I'm afraid I won't have any milk just like my mother.
  - I'm going to breastfeed...but I also want some formula "just in case."
  - My breasts are too small.
  - I'm not sure I can do it.
- Possible strategies for counseling mothers include:
  - Use the counseling techniques that will be taught in Module 4 to affirm women, giving them the confidence that they can be successful meeting their breastfeeding goals.
  - Always look for ways to praise mothers at every single contact. Find something she is doing right and let her know you are proud of her!

**Slide #13**

***Breastfeeding: Another Way of Saying "I Love You"***

Many women have found that breastfeeding can work, with a little loving support! This video tells the story of five WIC women who had the same concerns we have just discussed but found ways to make breastfeeding work for them.

[Instructional Guidance]

- Show the video, *Breastfeeding: Another Way of Saying "I Love You,"* produced by the Mississippi WIC Program.

**Slide #14**  
[Activity]

**Dear Gabby Letters**

*Learning Objective:* To help peer counselors apply their new knowledge in a skills-building activity.

*Time:* 10-20 minutes (depending on group size)

*Handout:* #3C – Dear Gabby Letters

*Directions:*

- Divide the group into eight smaller groups.
- Provide each group with a letter from a new mother written to Dear Gabby.
- Have each group read the letter and write a response from Gabby.
- Ask each group to read their letter to the entire group.
- *For large training groups:*
  - Divide attendees into eight groups of around three or four.
  - If the group is larger than 24, provide duplicate letters so that only small groups work to draft each letter.
- *For small training groups:*
  - If the group is not large enough to divide into small groups, use fewer letters or conduct as a general group discussion.
  - If done as a general group discussion, read the selected letters to the group and ask attendees to jot down at least three ideas of things they suggest including in the letter.
  - Facilitate a discussion on the ideas.