

Policy Development and the Use of Human Milk and Breastfeeding in the United States

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Conflict of Interest/Disclosure



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We will discuss how experiences as a **Jonas Policy Scholar on the Expert Panel on Breastfeeding** successfully fosters advanced skills in

- 1. Mentorship**
- 2. Leadership**
- 3. Advocacy**

National Policy Timeline



Core Measures Set for Perinatal Care includes
“Exclusive breast milk feeding”



U.S. Surgeon General Call to
Action to **Support Breastfeeding**

2009

2010

2011

2012



Healthy People 2020:
Breastfeeding Objectives
Increase the proportion of
**infants who have ever been
breastfed to 81.9%**



Breastfeeding and
human milk are the
**normative
standards** for infant
feeding and
nutrition

Healthy People 2020

	2020 Goal	2010 Births	2010 Goals	2006 Births
Ever breastfed	82%	77%	75%	74%
At 6 months	61%	49%	50%	44%
At one year	34%	27%	25%	23%
Exclusively through 3 months	46%	38%	40%	34%
Exclusively through 6 months	26%	16%	17%	14%

MENTORSHIP



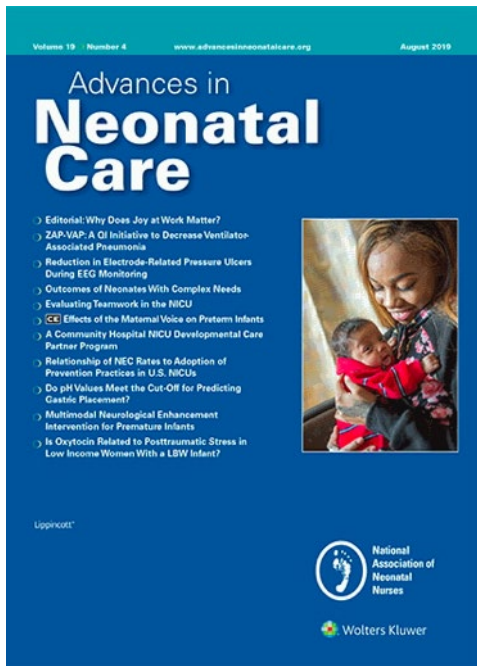
Breastfeeding Expert Panel 2017

LEADERSHIP



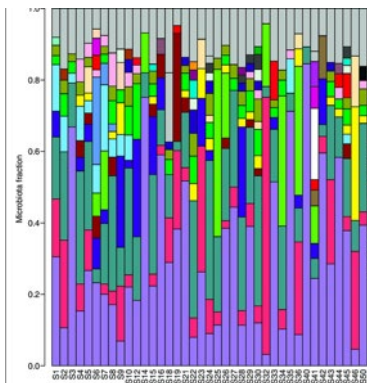
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10 Steps to Promote and Protect Human Milk and Breastfeeding in Vulnerable Infants



AWHONN

PROMOTING THE HEALTH OF WOMEN AND NEWBORNS

1969-2019 50 YEARS

SCHOLARSHIP: Women in the Military



Source: <https://abcnews.go.com/Health/photo-military-moms-breastfeeding-uniform-viral/story?id=33779505>

Policy Brief: [Call for improved military policy to support breastfeeding among U.S. armed forces](#). *Nursing Outlook* 65 (May/June 2017) 343-345.

SCHOLARSHIP:

Alternative Family and Community Structures



Source: <https://www.wowamazing.com/trending/bizarre/2-moms-breastfeed-each-others-babies/>

The 2 Moms Who Met as Strangers but Breastfeed Each Other's Babies

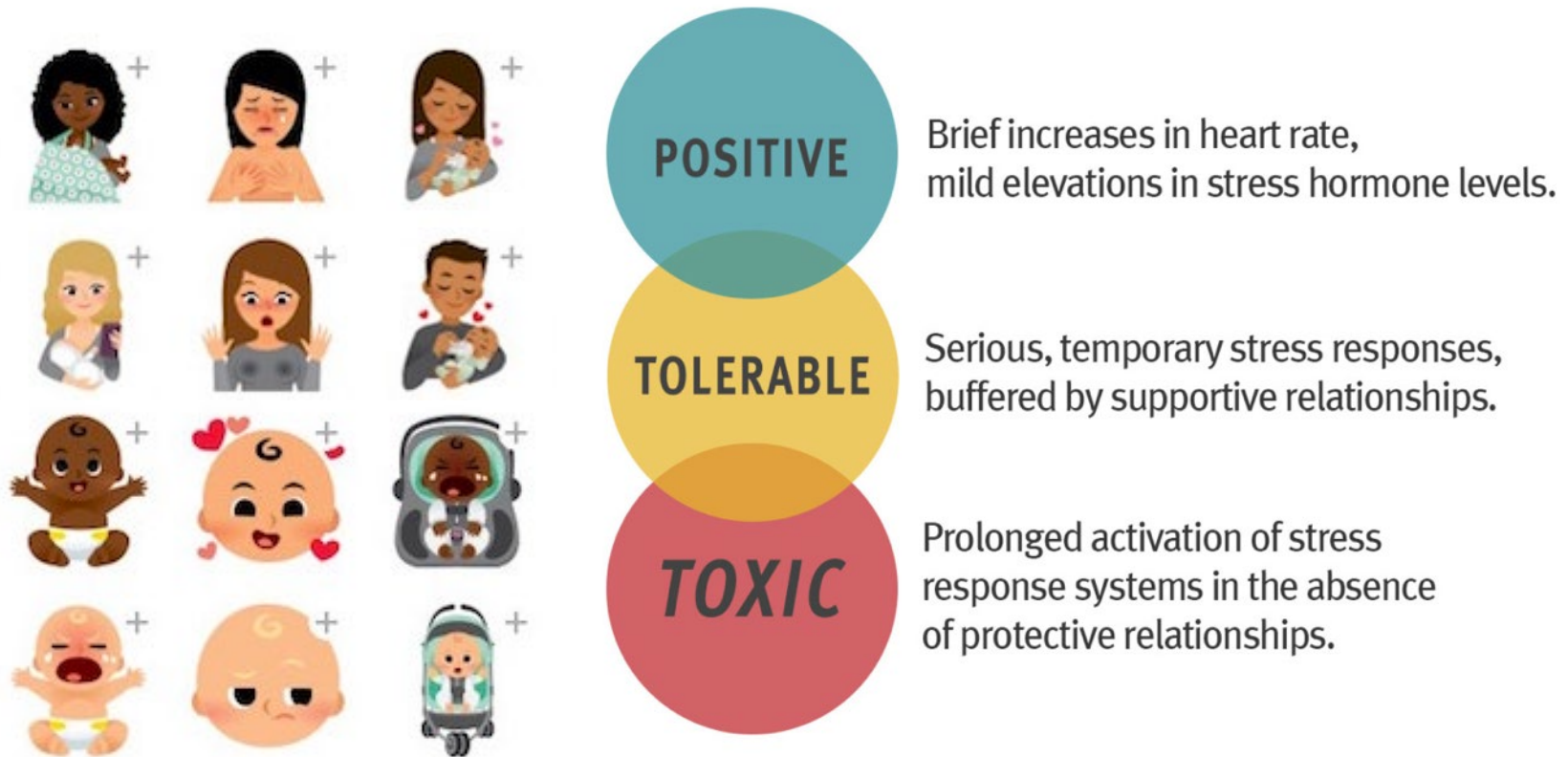
Policy Brief: [*Position statement regarding the use of informally shared human milk*](#). Nursing Outlook 64 (January 2016) 98–102.

The Use of Technologies to Support Human Milk & Breastfeeding



Froh, E.B., **Hallowell, S.G.**, Spatz, D.L. (2015). The Use of Technologies to Support Human Milk & Breastfeeding. *Journal of Pediatric Nursing*. doi: 10.1016/j.pedn.2015.01.023. 30(3) 521-3.

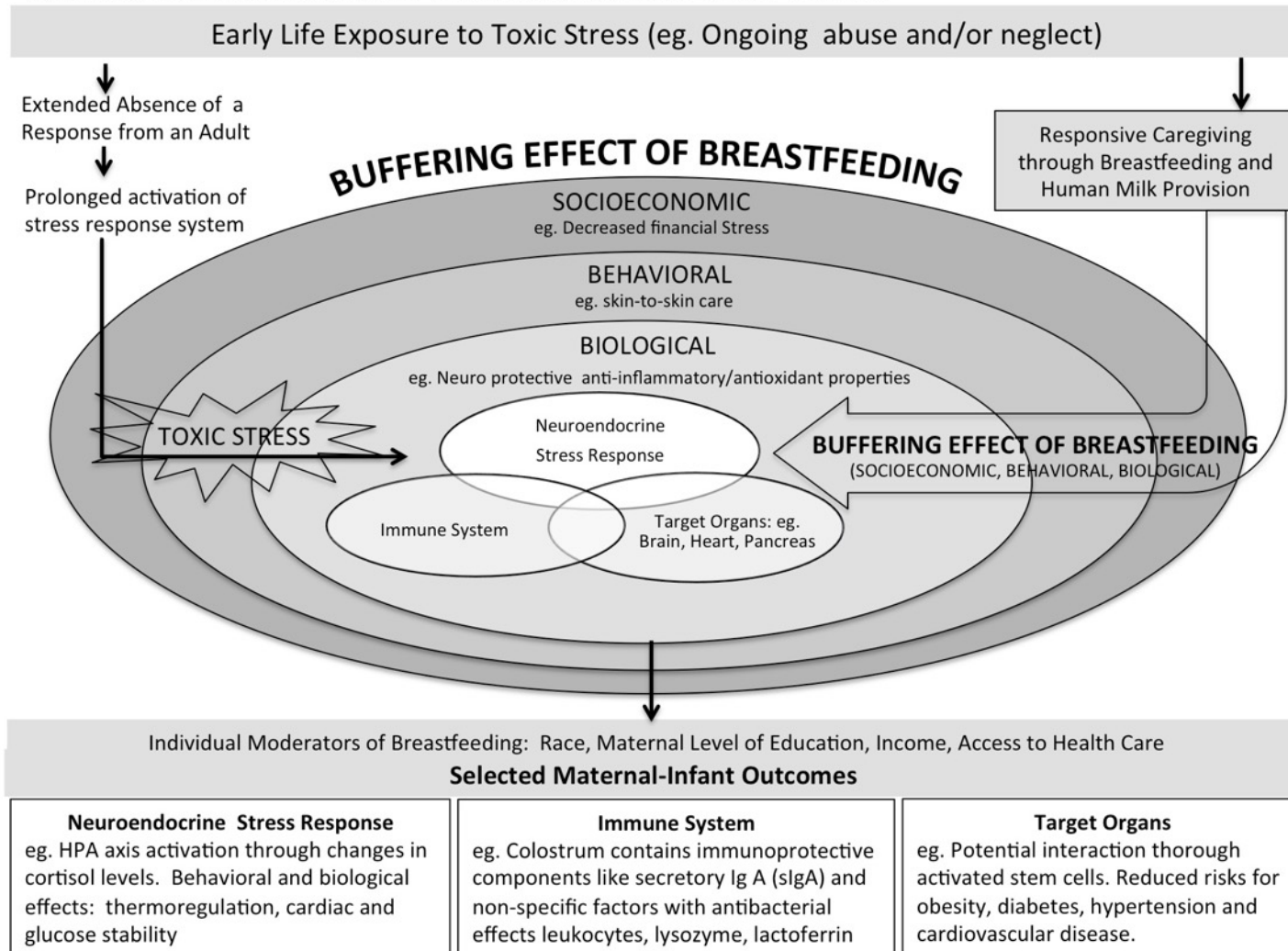
Human Milk and Breastfeeding: An Intervention to Mitigate Toxic Stress



Hallowell, S.G., Froh, E.B., Spatz, D.L. and the American Academy of Nursing Expert Panel on Breastfeeding (2016). Human Milk and Breastfeeding: An Intervention to Mitigate Toxic Stress, *Nursing Outlook*. (Jul 14. pii: S0029-6554(16)30125-7. doi: 10.1016/j.outlook.2016.07.007. [Epub ahead of print]

Human Milk and Breastfeeding: An Intervention to Mitigate Toxic Stress

Figure 1. Hypothesized buffering effect of breastfeeding mitigate the effects of toxic stress



Serve and Return Interactions



Source: <http://centreconnexions.org/wp-content/uploads/2017/11/serveandreturn.png>

Serve and return interactions shape brain architecture. Rich serve and return experiences occur when caregivers are sensitive and responsive to an infant's signals and needs.

Darcy Mahoney, A., Zauche, L., **Hallowell, S.**, Weldon, A., & Stapel-Wax, J. (2017). Leveraging the Skills of Nurses and the Power of Language Nutrition to Ensure a Better Future for Children. *Advances in Neonatal Care*, 17 (1):45-52. <http://dx.doi.org/10.1097/ANC.0000000000000373>

PING: AN INNOVATION



Bridging care from the hospital to home

PING

Patient Information Networking Group

Healthcare Innovators

SUPER USER / 26 JANUARY 2017




Source: <https://socialinnovationsjournal.org/editions/issue-31-innovation-awards/105-innovators/2286-healthcare-innovators>



Bridging care from the hospital to home



Breastfeeding in the Workplace



Where you are born
matters.

Over 98% of infants in the
U.S. are born in a hospital

79% of U.S. infants begin
life breastfeeding

Infants born in hospitals with better work environments, nurse staffing ratios and nurses with higher levels of education are more likely to receive breastfeeding support, breastfeed at discharge, have lower rates of infection and mortality.

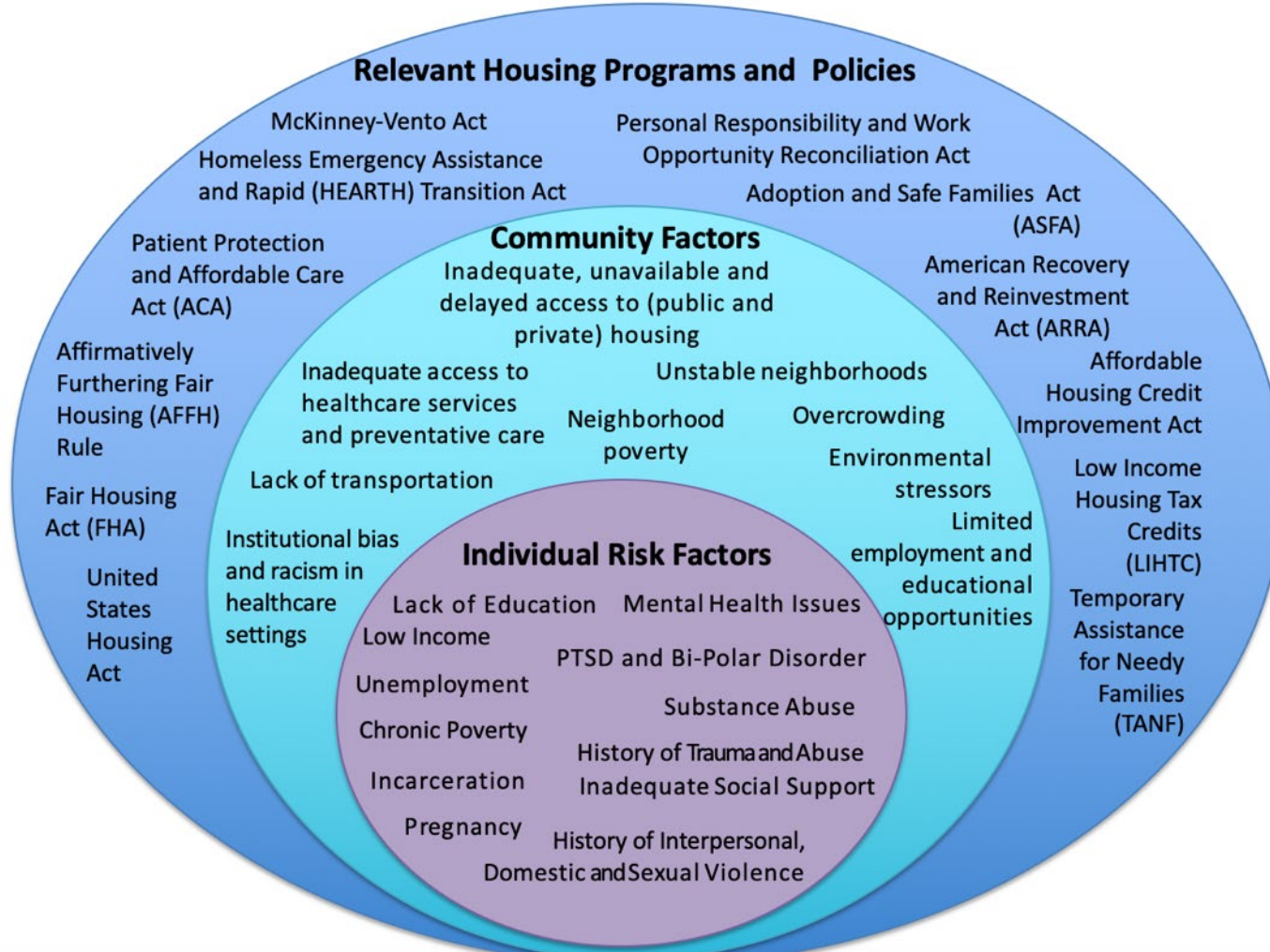
Factors Related to Homelessness for Women and Families in Philadelphia



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Factors Related to Homelessness for Women and Families in Philadelphia



Achieving better outcomes for infants born to women who are incarcerated



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Identifying Breastfeeding Resources for Incarcerated Pregnant and Postpartum Women in the United States

Beitrice Choo, Political Science, VU'19 and Sunny G. Hallowell PhD, PPCNP-BC, IBCLC

PURPOSE

To identify the concepts, policies, resources and barriers associated with the ability for infants born to incarcerated mothers to receive their own mothers milk.

SIGNIFICANCE

- In 2017 approximately **219,000 females**, including 4,600 youths, were incarcerated in the US.
- Between 2008 -2014 the number of **incarcerated women increased by more than 700%, rising from a total of 26,378 to 215,332**, respectively.
- On average, **five percent of women who enter state prisons are pregnant**.
- **6.9% of American children have had at least one parent who has spent time in jail**.
- **Lower risks of post partum depression** have been associated with women who breastfeed exclusively and with longer duration.
- Decades of research has demonstrated the **indisputable nutritional, immunological, behavioral and environmental benefits of human milk for infants**.
- One in five children in the U.S. is exposed to Adverse Childhood Experiences (ACEs) (eg.physical or emotional abuse, neglect, deprivation, or exposure to violence) in early childhood.
- **Breastfeeding** forms basic, essential, responsive relationships between infants and mothers and may hold the greatest potential to mitigate the effects of toxic stress from the moment of birth.

METHODOLOGY

Design: Integrative literature review of peer- reviewed data Sources: JSTOR, PubMed, Medline Articles were included if were published 2007-2017.

483 of records identified through database searching

56 records after duplicates removed & screened for relevance

56 abstracts assessed and examined for inclusion

40 full text articles assessed for eligibility and included

18 duplicate records removed

409 records excluded for lack of relevance

16 records excluded

Keywords searched: "breastfeeding" "prison" "pregnant" and "incarcerated".

Figure 1. PRISMA Diagram of Literature Review

FINDINGS

- Prisons with nursery programs that allow incarcerated women to care for their infants (eg. provide skin-to-skin contact postpartum, maternal education, and breastfeeding for an average of the first six months of life) have been associated with lower recidivism rates. However, only 13 states have implemented these programs.
- Mothers who have experienced child sexual abuse (CSA) may have an equal or higher intention to breastfeed when compared to women who have not been exposed to CSA. However, there is higher risk of early cessation in the former group and this data conflicts with prior studies that show that CSA negatively impacts the maternal desire to breastfeed.
- 22 states provide at least one of the following prenatal care resources; medical examinations, screening and treatment of high risk pregnancies, and prenatal nutrition counseling. Only 5 states provide all three resources.
- Little to no data exists to measure quality and outcomes associated with pregnant inmates, prenatal care, birth outcomes and outcomes in early childhood

CONCLUSIONS

- Evidence-based, non-separation for incarcerated women may be highly beneficial for both maternal and infant recovery especially through the transfer of human milk.
- Design and implementation of a newborn nursery model or human milk program for incarcerated mothers may provide a pathway to mitigate ACEs and promote optimal health for the infants born in these circumstances, especially for mother's exposed to CSA.
- Nurses are well positioned within the prison system to lead design and implementation of breastfeeding policy.

Policies to redesign the health care system alone are insufficient to improve the national health of women and newborns.

Investment in the development of future leaders through programs like the **Jonas Policy Scholar Program** may

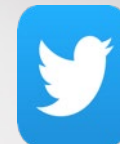
- spur innovative health care solutions
- foster cross-collaboration and
- mobilize advocacy efforts dedicated to providing better care and improved, cost-effective breastfeeding outcomes

Thank You!

Reference: Oerther, S., Hallowell, S., Rossiter, A., & Gross, D. (2018). The American Academy of Nursing Jonas Policy Scholars Program: Mentoring Future Nurse Leaders to Advance Health Policy. *Journal of Advanced Nursing*, 74(10), 2253-2257.



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