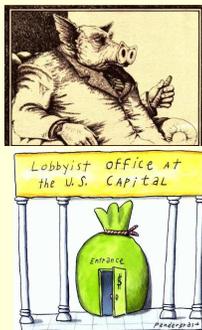


Become a Change Agent

Marsha Walker, RN, IBCLC
Marshalact@aol.com

Lobbying

- To attempt to influence (a public official or decision-maker) in favor of a specific opinion or cause.
- Lobbying is the art of persuasion. It is an activity protected by the First Amendment to the Constitution: (1791)
- *"Congress shall make no law ... abridging the freedom of speech, or of the press; or the right of the people peaceably to assemble, and to petition the Government for a redress of grievances."*



Advocacy

- the act of arguing in favor of, or supporting something
- the practice of supporting someone to make their voice heard



Speaking Up

- Lobbying or advocating is done by almost all special interest groups
- insures that our interests and concerns are heard, as well as competing interests and views, so that legislators have a broad base of information on which to base their decisions.
- Lobbying attempts to persuade an individual, institution, or organization to support a certain course of action. You lobby when you encourage someone to agree to your way of thinking.
- We call ourselves “advocates” because we speak for those whose voices are often silent – breastfeeding mothers and babies.



Know What You Want

- What are your goals?
- Do you want to:
 - Correct an injustice
 - Influence policy
 - Create new legislation
 - Work with the state department of public health
 - Work at the local, state, or federal level
- Do you want to engage in indirect lobbying such as educational campaigns (World Breastfeeding Week for instance) that are designed to mobilize public opinion and deliver a message to legislators and policy makers from a large public sector?

Do Your Homework

- research on legislative, regulatory, and policy issues
- identify the critical players in the political arena
- who else is working on the similar issues
- professional associations legislative and policy agenda
- consider joining with others
 - State breastfeeding coalitions, Moms Rising, lobby days, listservs, professional organizations



Follow the Money

- Learn to swim in the money stream
- Federal dollars (WIC, federal health agencies, Title V, NIH and other research funding)
- Political contributions to legislators
- Sponsorships of professional associations
- Hospital income sources
- Third party payers
- Employers
- Industry (formula companies)



Who is Already Working on Breastfeeding Issues



- National Alliance for Breastfeeding Advocacy
- US Breastfeeding Committee
- State breastfeeding task forces and coalitions
- La Leche League Intl
- US Lactation Consultant Association (USLCA)
- Academy of Breastfeeding Medicine
- Local breastfeeding organizations
- Breastfeeding advocacy groups
 - FirstRight.org
- WABA <http://www.waba.org.my/>



Who Are the Players

- Grassroots lobbying can directly affect actions taken in Congress and in governmental agencies
- The daily business of the Senate and House is carried out through their respective committees
- staff control the flow of information to the lawmakers, advise them on issues, and influence their position on particular pieces of legislation
- Get to know these people
- **Senate Committees**
 - Senate Appropriations
 - Committee on the Budget
 - Committee on Finance
 - Committee on Labor & Human Resources
- **House Committees**
 - House Appropriations
 - Committee on the Budget
 - Committee on Education & Labor
 - Committee on Energy & Commerce
 - Ways & Means Committee

USDA

Federal Agencies

- USDA houses the WIC program
- DHHS has oversight responsibility for most of the other child health programs.
 - Maternal & Child Health Bureau (MCHB) contains the infrastructure for delivery of health care services to all mothers and children in the US.
 - done through the MCH Services Block Grant, enacted in 1935, as Title V of the Social Security Act.
- MCHB also helps states in implementing other relevant legislation and in achieving the Healthy People 2010/2020 objectives for the nation that relate to maternal and child health.

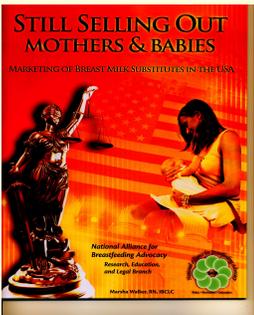
International Code of Marketing of Breastmilk Substitutes

International Breastfeeding Advocacy Tools

- International Code of Marketing of Breastmilk Substitutes
- Protecting, Promoting, and Supporting Breastfeeding: The Special Role of Maternity Services
 - 10 Steps to Successful Breastfeeding
- Innocenti Declaration
- Baby Friendly Hospital Initiative
- International Code Documentation Center
- IBFAN (International Baby Food Action Network)
 - INFACD Canada
 - National Alliance for Breastfeeding Advocacy (NABA)

National Alliance for Breastfeeding Advocacy (NABA)

- IBFAN's US organization
- Monitors the Code in the United States
- Sits on the USDA's Breastfeeding Promotion Consortium
- Sits on the US Breastfeeding Committee
- Publishes US country reports on Code violations



National Breastfeeding Advocacy Tools

- Surgeon General's Report 1984
- Follow-Up Report 1985
- Second Follow-Up Report 1991
- Healthy People 2000
- Healthy People 2010
- Call to Action: Better Nutrition for Mothers, Children & Families
- Nutrition Action Themes for the US: A Report in Response to The International Conference on Nutrition
- The Child Nutrition Act
 - WIC Program
- Indian Health Care Act
- Social Security Act
 - Title V MCH Program
- Federal breastfeeding bills
 - Breastfeeding on federal property
 - Rep Maloney's (D-NY) bills
 - Worksite section in health reform bill

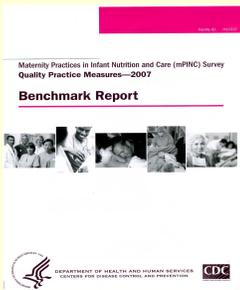


Federal Register

- Published by the [Office of the Federal Register](#), National Archives and Records Administration (NARA), the Federal Register is the official daily publication for rules, proposed rules, and notices of Federal agencies and organizations, as well as executive orders and other presidential documents.
- <http://www.gpoaccess.gov/fr/>

Centers for Disease Control and Prevention (CDC)

- Infant Feeding Practices Study I and II
- Breastfeeding report card
- National Immunization Survey
- Maternity Practices in Infant Nutrition and Care (mPINC) survey
- CDC Guide to Breastfeeding Interventions
- Breastfeeding crib cards
- <http://www.cdc.gov/breastfeeding/>





Department of Health and Human Services (HHS)

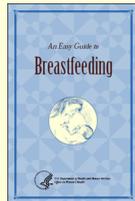
- Agency for Healthcare Research and Quality (AHRQ)
 - Primary care interventions to support breastfeeding
 - <http://www.ahrq.gov/clinic/uspstf/uspstfbrfd.htm>
 - Breastfeeding and Maternal and Infant Health Outcomes in Developed Countries
 - <http://www.ahrq.gov/downloads/pub/evidence/pdf/brfout/brfout.pdf>
- National Women's Health Information Center, Office on Women's Health
- <http://www.4women.gov/>
- National Breastfeeding Awareness Campaign
- <http://www.womenshealth.gov/breastfeeding/index.cfm?page=Campaign>
- HHS Blueprint for Action on Breastfeeding
- <http://www.womenshealth.gov/pub/hhs.cfm>

National Breastfeeding Awareness Campaign (the one that got away!)



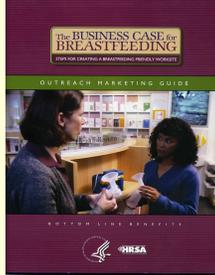
HHS Office on Women's Health

- Toll free breastfeeding help line
800 994-9662
- Free publications
Easy Guide to Breastfeeding in English, for African American Women, for Native American women, Chinese



Health Resources and Services Administration (HRSA (HHS)

- Business Case for Breastfeeding
- Multifaceted approach to improving worksite support for breastfeeding
- State breastfeeding coalitions receiving training in implementing this program
- <http://ask.hrsa.gov/detail.cfm?PubID=MCH00254&recommended=1>





Healthy People 2020

- Healthy People provides science-based, 10-year national objectives for promoting health and preventing disease. Since 1979, Healthy People has set and monitored national health objectives to meet a broad range of health needs
- Objectives are currently being developed for HP2020
 - [Increase the percentage of employers who have worksite lactation programs.](#)
 - [Decrease the percentage of breast-fed newborns who receive formula supplementation within the first 2 days of life.](#)
 - [Increase the percentage of live births that occur in facilities that provide recommended care for lactating mothers and their babies.](#)
- <http://www.healthypeople.gov>

US Department of Agriculture

- **USDA Breastfeeding Promotion Consortium**
- The Breastfeeding Promotion Consortium includes more than 25 organizations representing health professional associations, breastfeeding advocacy groups and Federal agencies. The Consortium meets twice a year to exchange ideas on how the Federal Government and private health interests can work together to promote breastfeeding throughout society

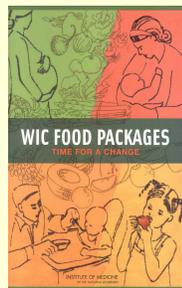
Food & Nutrition Service WIC

- State breastfeeding coordinators
- "Loving Support Makes Breastfeeding Work" program
- USDA National Breastfeeding Promotion campaign
- Using Loving Support to build breastfeeding-friendly communities
- Using Loving Support to implement breastfeeding peer counselors
- Fathers Supporting Breastfeeding
- MyPyramid for pregnancy and breastfeeding
- Tips for breastfeeding moms
- Legislation for breastfeeding within Child Nutrition Act (WIC)
- FNS breastfeeding mothers' room



New WIC food packages

- Provide incentives for initiation and continuation of bf
- Fully bf mothers receive more variety and larger quantities of foods, plus a \$10 voucher for fruits and vegetables.
- Fully bf infants get ↑ quantities, more types of baby food
- Minimize early supplementation with infant formula
- No routine issuance of infant formula in birth month to bf babies
- Partially bf infants get less formula
- Complementary infant foods are introduced at 6 months of age.
- New Food Packages distinguish between the fully breastfed, partially breastfed & fully formula fed infant.

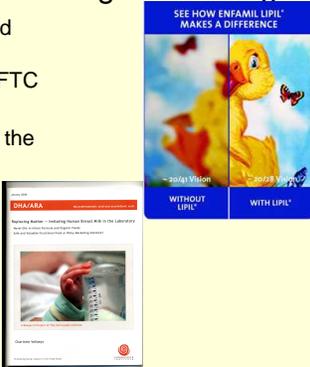


Federal Trade Commission

- The FTC is charged with protecting consumers from "unfair methods of competition" and "unfair or deceptive acts or practices" in the marketplace
- it requires that all claims be nondeceptive and substantiated in print ads, broadcast ads, and on the Internet

False and Misleading Advertising

- Report all false and misleading advertising to the FTC at www.ftc.gov
- File a petition with the FTC to address formula company deceptive advertising



National Quality Forum

- The National Quality Forum (NQF) created to develop and implement a national strategy for health care quality measurement and reporting. <http://www.qualityforum.org/>
- NATIONAL CONSENSUS STANDARDS FOR PERINATAL CARE
 - National Quality Forum endorsed 17 perinatal standards to measure and thereby improve care received by mothers and babies during the third trimester of pregnancy through hospital discharge. Consensus standards improve quality of care by standardizing measurement in care settings and encouraging accountability and public reporting

National Quality Forum

- “Exclusive breastfeeding at hospital discharge”
- Measure description
 - Livebirths not discharged from the NICU who were fed by “breast only” since birth.
- Function as perinatal standards for standardized measures in the field of perinatal care to assess and publicly report on the safety and quality of care
- Perinatal standards measure care at critical points for mother/baby from the third trimester to hospital discharge and reflect aspects of care that can be substantially influenced by provider performance.
- Now part of the Perinatal Core Measure set



US Breastfeeding Committee

- Collaborative partnership of organizations and federal agencies www.usbreastfeeding.org
- Facilitates activities with all state breastfeeding coalitions
- Hosted 3 national state coalition conferences with leaders from every state, plus several territories and Indian Nations.
- With funding from the CDC, a new **Coalition Mini-Grants Program** to provide \$18,000 in funding will support the work of state/territory/tribal breastfeeding coalitions.
- On-line advocacy platform
- Join the [News and Action Alerts e-mail list](#) to receive future announcements!
- <http://org2.democracyinaction.org/o/5162/signUp.jsp?key=394>

State Breastfeeding Coalitions

- <http://www.usbreastfeeding.org/State-Coalitions/index.html>
- Participate in bi-monthly conference calls facilitated by USBC and CDC
- work on
 - state legislation
 - breastfeeding advocacy
 - Business Case for Breastfeeding
- Provide a mechanism for advocacy in your state



Ban the Bags

- A project of the Massachusetts Breastfeeding Coalition
- www.banthebags.org
- Close to 400 hospitals have eliminated the distribution of formula company discharge bags
- New York City has removed the bags from all public hospitals
- Portland, OR has no hospitals where commercial bags are distributed
- Used the state hospital (perinatal) regulations rather than legislation

Why are hospitals marketing baby formula?



Give the Bag the Boot!



Hospitals should market health, and nothing else.

**This "free" bag comes with a \$700 price tag.
So why does Gov. Romney want your hospital to hand it out?**



This "free bag" comes courtesy of big drug companies. They want to start your baby on their expensive brand of baby formula.

- ☛ If you choose to formula-feed, that "gift" starts your baby on a brand that costs \$700 more a year than store brands.*
- ☛ If you choose to breastfeed, research shows that you are more likely to start using formula if you take home a bag.**
- ☛ Health advocates want hospitals to stop marketing formula to new mothers. Gov. Romney tried to scuttle their regulations in February. A final decision is due May 23.

Visit our web site, www.masshc.org. Learn more about formula marketing, sign our petition and email Gov. Romney, or call him at 617-725-4035. Tell him you don't want drug companies protected at your expense. Rest assured, formula will always be available in hospitals for mothers who choose it.

Hospitals should market health, and nothing else.



*O'Brien et al. "BYC" and the Real Price of Infant Formula. Food Assistance and Nutrition Research Report No. 84 (NDR) 11, June 2014. **Children: How Free? University of Wisconsin, 2010. 2. CTR02071



Ban the Bags

- You may need
 - Ethics committee to provide opinion on the medical ethics of distributing formula samples
 - Risk management to decide if non-sterile powdered formula is safe to distribute without stock control mechanism for recalled products
 - Corporate compliance for anti-kickback ruling
 - Marketing department, hospital auxiliary or foundation for money to create hospital's own discharge bag
 - Purchasing department to enforce vendor policy to keep reps from bringing bags to maternity unit

State Breastfeeding Legislation

- [State Legislation that Protects, Promotes, and Supports Breastfeeding](#) (2005) USBC
- [Protect, Promote, and Support Breastfeeding Through Legislation](#) (2008) USBC
- 10 categories of state breastfeeding legislation
- Legislative recognition
 - Importance of breastfeeding contained in preambles to legislation
- Breastfeeding in Public
 - Most frequent law that declares or clarifies a woman's right to breastfeed in public
 - Often amends sections on indecent exposure

State Legislation

- Employment
 - Break times
 - Unpaid breaks
 - Caveats, such as the employer is not required to provide break time if it disrupts operations of the employer, or the employer is held harmless if reasonable effort has been made in complying, weakens the legislation

State Breastfeeding Legislation

- Breastfeeding Promotion, Information, and Education
 - Several laws mandate that breastfeeding information be made available at point-of-care locations
 - Some ask for a public education campaign
- Jury Duty
 - Various conditions are usually delineated on how a breastfeeding mother could be exempt from jury duty

State Breastfeeding Legislation

- Family Law
 - 3 states have provisions regarding breastfeeding in decisions on child custody and visitation during divorce or separation procedures
- Milk Banks
 - Texas has provisions for procurement, processing, distribution, and the use of human donor milk by milk banks

State Breastfeeding Legislation

- Nursing in prison
 - New York allows a nursing infant under 1 year of age to accompany his mother in jail
- Breastfeeding Equipment/Assistance Privileges
 - Maryland exempts breastfeeding equipment from state sales tax
 - Texas requires that the health insurer of a maternity patient discharged before the minimum stay compensate the mother with coverage of post delivery services including breastfeeding assistance, training, and consultations

Hospital Level Advocacy: Learn to Work the System

- Perinatal Practice Committee
- Quality Improvement Department
- Ethics Committee
- Risk Management Department
- Corporate Compliance Department
- Marketing Department
- Hospital auxiliary, foundation
- Billing Department
- Purchasing Department

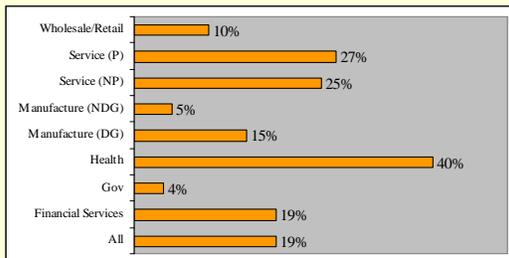
Employers

- Legislation
- Research
- Cost effectiveness
- Letter from physician
- Unions
- Chamber of Commerce

Barriers to Corporate Lactation Programs

- Negotiation and prioritization of benefits (health and non-health)
 - Lactation programs are in “competition” with immunization, cancer treatment, vacation time, and salaries
- Fairness doctrine
 - Issue of “extra breaks” & “special rooms”
 - What about safe, pleasant rooms for insulin-dependent diabetics or those with anxiety disorders,
- Hassle factor
 - Logistics, space, security
 - Coordination of time is difficult especially in regulated industries, plants, among small work units
- Liabilities
 - Milk storage/safety concerns (e.g., HIV, communicable diseases, etc)

Lactation Program Benefits By Industry



Source: SHRM Benefits Survey 2006.

Hints from the pros

- Educate women and men to stimulate demand
 - Learn from the pink bracelet
- Emphasize that lactation support isn't just a "family-friendly benefit" it is a **health** benefit
 - Draw parallels between worksite lactation programs and well accepted health promotion and disease management programs
- Use medical evidence as a criteria for inclusion in benefit packages (women's/human rights perspective is important but isn't salient to an employer)
- Build the business case
 - Provide short and long term cost-savings/ health impact for baby and mother

Making the Case

- Businesses lose when employees don't breastfeed
- For every 1000 formula feeding babies, it is estimated that their mothers miss a total of a full year of employment in excess of breastfeeding mothers, to care for sick children (Ball and Wright, Pediatrics, 1999)
- New mothers who aren't breastfeeding have 3 times as many 1-day absences from work as breastfeeding mothers, because their children are sick more often (Cohen, Mrtek, Mrtkek, Am J Health Promot, 1995)

Breastfeeding mothers are good for employers

- Absenteeism can cost more than 15% of a company's base payroll and up to \$775 per employee
- Investing in a company lactation program can result in a 3 for 1 dollar return on investment
- Companies with lactation programs enjoy an 80-90% retention rate of their maternity workforce.
- Employee turnover can cost \$50,000 to replace a \$50,000 employee

Biggest “Barrier” Low Demand

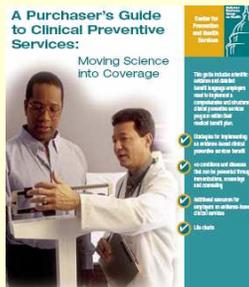
- Benefits are crafted by cost, demand, voice-power, medical evidence, etc
- Employers provide (within reason) what employees value AND act on: many women are silent on the value of lactation rooms.
- There is a reason large employers are more likely to offer “accupressure” benefits than lactation support (hint: it isn’t a medical reason)

National Business Group on Health

- The National Business Group on Health members are primarily Fortune 500 companies and large public sector employers - including the nation’s most innovative health care purchasers - who provide health coverage for more than 50 million U.S. workers, retirees, and their families. The Business Group fosters the development of a safe, high quality health care delivery system and treatments based on scientific evidence of effectiveness
- <http://www.businessgrouphealth.org/>

Model Benefits

- Model benefits resource
- http://www.businessgrouphealth.org/healthtopics/maternalchild/investing/docs/mch_toolkit.pdf



Preventive Postpartum Care

- Recommends coverage for 5 lactation consultant visits per pregnancy
- Lactation consultants credentialed by the International Board of Lactation Consultant Examiners (IBCLCs) are approved for the provision of breastfeeding counseling, training, and support
- Lactation consultation visits may be used at any point during pregnancy and in the year after birth
- These recommendations were put forward by the USBC and accepted into the model benefits package

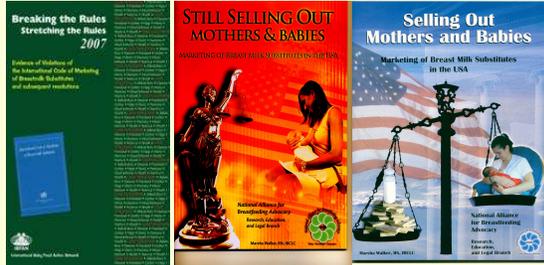
Insurers: Getting their attention

- Tell insurers what they can do to “make a difference” in simple, actionable language
 - Baby-friendly hospitals
 - Preferentially select baby-friendly hospitals and birth centers for inclusion in health plan networks
 - Provide incentives and rewards for beneficiaries who birth at baby-friendly hospitals
 - Reduced co-pays/co-insurance for services rendered at baby-friendly hospitals
 - Educate beneficiaries on the importance of breastfeeding

Using the Media

- Media kit
- Contacting reporters
- Pitching your story
- Careful use of language
- Talking with reporters
 - Reframe, don't react
 - “choice” is the language of breastfeeding opponents
 - Identify yourself as a health care provider
- Social media (Facebook, Twitter, etc)
- <http://www.usbreastfeeding.org/Coalitions/NationalConference/2010Conference/2010NCSBCEPresentationHandouts/tabid/163/Default.aspx>

Code Monitoring



Feeding Bottles are Within the Scope of the Code

- **Article 2. Scope of the Code**
- The Code applies to the marketing, and practices related thereto, of the following products: breastmilk substitutes, including infant formula; other milk products, foods and beverages, including bottle-fed complementary foods, when marketed or otherwise represented to be suitable, with or without modification, for use as a partial or total replacement of breastmilk; feeding bottles and teats. It also applies to their quality and availability, and to information concerning their use.

Feeding Bottles

- Dr. Brown: "As close to breastfeeding as your baby can get"
- Avent: "Results more like breastfeeding than any other bottle"
- Munchkin: "Match mom's natural flow"
- Second Nature: "Truly works like mom's breast"

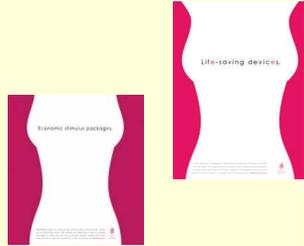


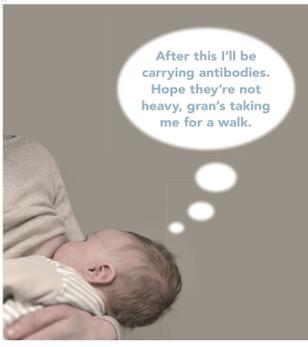
Breastfeeding promotion in the community Marin Breastfeeding Coalition





- Library display of breastfeeding books
- Baby fairs
- Community baby shower at churches
 - Target high risk mothers
- Best for Babes





Breastfeeding a baby can help reduce the risk of tummy bugs, breathing problems, ear infections and allergies including eczema and asthma. So by supporting mum when she's breastfeeding, GP's, pharmacists and friends can help make sure that baby gets the most from the best food we have for growing and healthy babies. Whether it's milk in the park, milk train or even changing nappies, any time spent together is fun. **Breastfeeding: The best food for babies.**

National Breastfeeding Helpline: 0300 100 0312 www.breastfeedingaction.org.uk

Meanwhile.....

- Nancy Mohrbacher calls regarding the acquisition of Ameda by a company that manufactures infant feeding bottles and artificial nipples, asking if I would speak to this company about Code issues



- CEO of Evenflo states that they wish to become Code compliant





Addressing the Problem

- Ameda meets its obligations under the Code, Evenflo does not
- Effect on Ameda if Evenflo does not meet Code obligations
- The Code does not address the issue of mergers and acquisitions
- How will engaging in Code compliant behaviors affect Evenflo
 - Time
 - Expense
 - Reaction from the breastfeeding community



The Road to Compliance

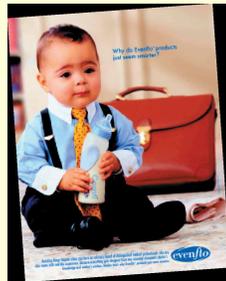
- Conversations and meetings to mesh corporate goals with what's in the best interest of breastfeeding
 - Code compliance is in the best interest of breastfeeding
 - If Evenflo wishes to help promote and protect breastfeeding than moving to Code compliance fulfills this goal
- Education of employees and management regarding the Code

Easier Said than Done

- The Code can be quite vague and imprecise
- It is a compromise document
- It is open to interpretation
- It says very little about feeding bottles and artificial nipples
- The internet did not exist in 1981
- Code interpretation and monitoring is subject to opinions, it can be interpreted in a narrow or broad manner, and is often based on precedent
- Code compliance is a dynamic and fluid process that is adhered to and monitored over time

So Where Do We Start?

- Print ads in professional or parent magazines had been discontinued several years earlier
- This ad was in the New Parent magazine in 2005
- Since 2005 there has been no direct advertising of bottles or nipples by Evenflo
- All print ads have ceased



Website

WHA Resolution 54.2 - 2001

- "...despite the fact that the Code states that there should be no advertising or other forms of promotion of products within its scope, new modern communication methods, including electronic means, are currently increasingly being used to promote such products..."

Infant Feeding Information

- All infant feeding information (breast or bottle) was removed from the website, including handouts on breastfeeding for childbirth educators to distribute to parents
- Evenflo does not produce any infant feeding booklets, handouts, or publications for parents or health care professionals
- Only a referral listing for breastfeeding resources directs the public to non-commercial sources of breastfeeding help

Packaging

- Article 9.1 Labels should be designed to provide the necessary information about the appropriate use of the product, so as not to discourage breastfeeding
- Article 9.2 Neither the container nor the label should have pictures of infants, nor should they have other pictures or text which may idealize the use of infant formula

DROP-INS™ SYSTEM

The Drop-Ins™ System is the only bottle that has been clinically shown to help reduce gas, colic and spitting up. It is also clinically shown to mimic breastfeeding. Additionally the liners and nipples are Bisphenol-A Free and Phthalate Free.

Research has shown us that most moms want their bottle systems to do four things:

1. Reduce gas and colic for baby
2. Act like the breast so baby can go seamlessly from breast to bottle with no confusion
3. Pre-sterilized liners for a clean bottle every time
4. Be easy to clean so she can spend more time with baby.

The Playtex® Drop-Ins™ System has all four. This system has been clinically shown to help reduce gas, colic and spitting up.

[Click here to see it in action.](#)



Criteria for Labels

- No idealization
- No comparisons to the real thing
- Contain warnings about inappropriate use
- Contain instructions for proper use
- The information is informative and factual
- Do not contain pictures of babies







Consultation and Collaboration at its Best

- “Best for Babies” slogan on infant feeding products could be construed as implying that bottles/artificial nipples were better for infants than breastfeeding
 - Evenflo changed this slogan to “Breastfeeding Best for Babies” and it will appear on all products covered within the scope of the Code (bottle and artificial nipple packages)
 - It will also appear on Evenflo breastfeeding products and accessories as reinforcement of company’s commitment to breastfeeding

Oh Happy Day!

- With these changes Evenflo will be the first and only bottle manufacturer to take these steps towards a genuine commitment to promoting breastfeeding by removing commercial barriers to breastfeeding
- As a manufacturer and distributor of products that fall under the scope of the Code Evenflo has made significant changes in the marketing and labeling of these products in order to meet its obligations under the Code, demonstrating its commitment to the protection and support of breastfeeding

