

Indian Health Diabetes Best Practices—



Breastfeeding

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Is a Best Practice Breastfeeding Program right for your diabetes program?

➔ Do you want your diabetes program to be better at:

1. Promoting and supporting breastfeeding?

Yes No

What you will be doing: Promoting breastfeeding in clinical and community diabetes programs ♦ Promoting breastfeeding as a cultural norm ♦ Providing support measures for breastfeeding ♦ Encouraging family and societal support for breastfeeding ♦ Recognizing the effect of cultural diversity on breastfeeding

Who will be doing it: Community program staff ♦ Health care providers ♦ Organization leaders

2. Offering education on breastfeeding to health care providers?

Yes No

What you will be doing: Sharing current knowledge and skills to encourage and clinically manage breastfeeding with health care providers ♦ Surveying health care providers to determine their breastfeeding knowledge and practices ♦ Providing feedback on survey results to raise health care providers' awareness of the benefits of breastfeeding ♦ Encouraging health care providers to promote and provide patient education on breastfeeding ♦ Offering breastfeeding education through formal programs, conferences, and workshops

Who will be doing it: Community program staff ♦ Health care providers ♦ Organization leaders

3. Providing breastfeeding education to patients, their families, and the community?

Yes No

What you will be doing: Conducting community breastfeeding campaigns ♦ Providing education on the benefits of breastfeeding to patients and their families in community settings ♦ Conducting an inventory of education programs, lactation support providers, peer counselors, and support groups ♦ Collaborating with Women, Infant, and Children (WIC), Head Start, Early Head Start, and other programs ♦ Providing information on breastfeeding hotlines and warmlines

Who will be doing it: Community program staff ♦ Health care providers

4. Providing early and ongoing breastfeeding support and expertise?

Yes No

What you will be doing: Assisting pregnant women and mothers with breastfeeding ♦ Providing one-on-one counseling ♦ Developing and maintaining effective communication and coordination with other health care providers ♦ Conducting follow-up appointments ♦ Working collaboratively with breastfeeding groups and resources ♦ Providing breastfeeding support in clinics, workplaces, and public areas

Who will be doing it: Community program staff ♦ Health care providers

➔ If you answered "Yes" to many of these questions, go to page 2 to learn how a Best Practice Breastfeeding Program can benefit your diabetes program!

Why is breastfeeding important to diabetes care?

Breastfeeding has many benefits for the baby and mother. Mothers who exclusively breastfeed their babies for at least two months can protect their babies from developing diabetes and overweight.

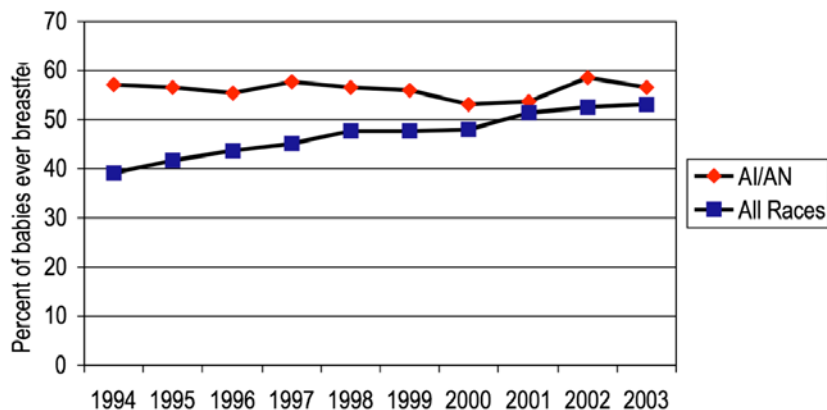
Why is breastfeeding important to American Indian and Alaska Native communities?

- Exclusive breastfeeding for the first two months of life is associated with a 40% reduction in type 2 diabetes among some American Indian communities.
- Babies who were breastfed are less overweight as adults. Longer duration of breastfeeding is associated with less overweight.
- The Phoenix Indian Medical Center (PIMC) found that children who were breastfed exclusively for the first six months of life experienced overweight and obesity at a rate of 23%, as compared with 64% in children who were exclusively fed formula.
- PIMC has used breastfeeding support as a diabetes intervention for the past six years. During this time, PIMC has observed a 12% increase in breastfeeding at eight weeks of life.

The good news about breastfeeding...

Breastfeeding offers an opportunity for intervention because it can be done for a fairly short period of time, yet it still provides babies with life-long benefits. Breastfeeding interventions appear to be an ideal *primary* prevention intervention for type 2 diabetes and overweight. Furthermore, breastfeeding is consistent with American Indian and Alaska Native cultural practices.

Percentage of babies ever breastfed, 1999–2003



Source: CDC Pediatric Nutrition Surveillance System, 2003 Report (Includes data from five American Indian and Alaska Native WIC programs)

Breastfeeding is an important intervention that can have life-long benefits and may be especially important in preventing type 2 diabetes and overweight. Rates of breastfeeding among American Indian and Alaska Native mothers are higher than the general population, yet have remained fairly constant over time. What is your program doing to encourage and support breastfeeding?

A Best Practice Breastfeeding Program will require a coordinated approach. Here are some tips on how health care providers, community programs, health care administrators, and tribal leadership can work together.

➔ Working together to increase breastfeeding:

1. Who can help?

Ask for and enlist support from: WIC programs ♦ Head Start and Early Head Start programs ♦ Healthy Start initiatives ♦ Childcare centers ♦ Birthing classes ♦ Boys and Girls Clubs ♦ Local breastfeeding experts ♦ Health care providers

2. Why is it important to work together?

Working with clinic, community, and leadership partners will help you: Leverage resources ♦ Avoid duplicating services ♦ Share staff, ideas, and resources ♦ Get support for your common goal of improving the health of your community

3. How can you work together?

Work with your partners to: Share what you are doing ♦ Determine what each partner will do ♦ Assign tasks and timelines ♦ Plan and establish programs and activities ♦ Develop and implement goals and objectives ♦ Design evaluation plans ♦ Maintain regular contact with each other