

## Positive Breastfeeding Clinic Environment

- I. Education materials available to participants will portray breastfeeding as the preferred infant feeding method in a positive manner that is culturally and aesthetically appropriate to the population groups being served.
  - a. All printed and audiovisual materials will be free of formula product names. (Except for materials used to educate participants on the use of “sole source” formula.)
  - b. All office supplies such as cups, pens, note-pads, posters etc., will be free of formula product names.
- II. All local agency staff (clerical and CPA) will demonstrate a positive attitude toward breastfeeding.
  - a. This demonstration of positive attitude may include but is not limited to:
    - i. Appropriate words of encouragement for all women.
    - ii. Avoiding overt or subtle endorsements of formula.
    - iii. Appropriate issuance of formula and breastfeeding food instruments.
    - iv. Appropriate referrals to health professionals, e.g., dietitians, lactation educators, physicians, etc.
- III. Positive breastfeeding messages, pictures/images or text will be incorporated into all relevant education activities, materials, client information forms and outreach efforts where infant feeding is addressed.
  - a. Positive breastfeeding message, pictures/images or text will be included in the following, but not limited to:
    - i. Participant orientation programs and/or materials.
    - ii. Materials for professional audiences including printed, audio-visual, and display.
    - iii. Materials for clients including printed, audio-visual, and display.
  - b. Use of wording or images conveying an association or connotation with infant formula (e.g., bottles) will not be used on any promotional materials or forms representing WIC.

- c. All words and images (e.g., pacifiers) should be carefully assessed and should not conflict with promoting or endorsing long exclusivity duration rates.
  - d. Bottle/formula wording and images should be limited to individual instruction, as appropriate.
- IV. The visibility of infant formula and bottle feeding equipment will be minimized.
- a. Formula and formula boxes will be stored out of view of the participants.
  - b. Baby bottles and nipples will be stored out of view of participants.
  - c. Staff is encouraged not to accept free formula from formula manufacturer representatives for personal use.
- V. Formula food instruments will be provided only when specifically requested by the mother of the breastfed infant. A WIC CPA (a Lactation Educator is recommended) must authorize all distribution of infant formula to the breastfed infant.
- a. If a mother requests formula, the CPA must individually assess her situation and discuss possible options to continue exclusively breastfeeding (i.e., use pump, alter feeding schedule, etc.) as a researched and evidenced based preferred option.
  - b. The use of supplemental formula will be minimized for breastfeeding infants by providing only the amount of formula that the infant is consuming at the time of check issuance.
  - c. All breastfeeding women will receive information about the potential impact of formula on lactation and breastfeeding before additional formula food instruments are given. Counseling and appropriate educational materials must be provided to women requesting formula.
  - d. If a mother requests formula, she will be encouraged to supplement with iron-fortified powdered formula rather than concentrated fluid formula, unless she gave birth prematurely. Premature babies receiving formula shall be issued either liquid concentrate or ready-to-feed unless specified another type of formula is ordered by a health care provider on a FAFAF

or the mother reads and signs the Health Hazards of Powdered Formula Form.

- e. Formula food instruments will not be issued to exclusively breastfed infants.
- VI. A supportive environment where women feel comfortable in any location of the clinic to breastfeed their infants will be provided.
- a. Women will be welcome to breastfeed in any area of the clinic. The local WIC clinic needs to provide a private room with a comfortable chair for mothers to breastfeed, pump, receive counseling and personal assistance with latch or other breastfeeding issues. This private room needs to have a functional lock to ensure privacy.
- VII. The clinic should post signs and/or posters in prominent areas endorsing breastfeeding as supported and promoted in WIC clinics. These posters should be framed to show permanence and commitment, not taped or thumb tacked to walls.