

District of Columbia Breastfeeding Resource Guide



A Publication of the DC Breastfeeding Coalition

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Inclusivity Statement

While the terms mother, maternal, and breastfeeding are used throughout this publication, we recognize that these are gender terms. Their use is not meant to exclude transgender or non-binary parents who may be providing human milk for their child.

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Mission Statement

The DC Breastfeeding Coalition, a 501(c)(3), was established to increase the breastfeeding rates of all infants living in the District of Columbia. Working in partnership with maternal and child health professionals, community health organizations, and mother-to-mother support groups, the DC Breastfeeding Coalition seeks to promote, protect and support culturally sensitive programs and activities that build awareness and understanding of the preventive health benefits of breastfeeding. Through its breastfeeding research, advocacy and educational activities, the Coalition seeks to reduce health disparities -- particularly among racialized families living in DC communities with less resources.

Coalition Objectives

- To increase the number of mothers who breastfeed in the early postpartum period and promote continued breastfeeding for at least 1 year or beyond.
- To promote achieving the Healthy People 2030 breastfeeding goals.
- To increase the number of physicians and other primary health care providers in Washington, D.C. who include breastfeeding counseling and referral as part of routine care.
- To provide accurate and consistent breastfeeding information to families, health professionals, and the community.
- To encourage breastfeeding-friendly policies and procedures in all area hospitals and birthing centers.

Medical Disclaimer: The information presented here is not intended to diagnose health problems, breastfeeding problems, or to take the place of professional medical care. If you have persistent breastfeeding problems, or if you have further questions, please consult your health care provider. The DC Breastfeeding Coalition does not share partnership with, or have any vested interest in, any of the businesses that may appear on this site, or sites that may be accessible by links herein contained.



DC Child Right to Nurse Law

On February 14, 2008 Mayor Adrian M. Fenty signed a law to protect nursing mothers. This law is called the “Child’s Right to Nurse Human Rights Amendment Act of 2007” (Bill B17-0133). **The law makes it legal to breastfeed ANYWHERE a woman has the right to be with her child in DC.**

The law means employers **MUST** provide:

- Fair, unpaid break periods everyday
- A clean area so that breastfeeding mothers are able to breastfeed or pump milk for their babies

If you think you have been treated unfairly while breastfeeding, contact: Office of Human Rights at 202-727-4559 to learn about filing a complaint. You can also learn about the complaint filing process on OHR’s website by clicking the link for “File Discrimination Complaint”. Complaints can be made in person or online. All forms needed to file a complaint can be downloaded from OHR’s website. Please let the DC Breastfeeding Coalition know about any breastfeeding-related complaints filed with OHR at info@dcbfc.org.



Policy Statements on Breastfeeding

United States medical organizations dedicated to the health of women and children include but are not limited to the following:

American Academy of Family Physicians

[AAFP - Breastfeeding, Family Physicians Supporting \(Position Paper\)](#)

American Academy of Pediatrics

[AAP - Breastfeeding and the Use of Human Milk](#)

American College of Nurse-Midwives

[ACNM - Position Statement - Breastfeeding](#)

American College of Obstetricians and Gynecologists

[ACOG - Policy Priorities: Pregnant and Breastfeeding Women's Rights and Protections](#)

[ACOG - Optimizing Support for Breastfeeding](#)

Academy of Nutrition and Dietetics

[AND - Nursing Your Baby? What You Eat and Drink Matters](#)

[AND - Dads and Breastfeeding](#)

Association of Women's Health, Obstetric, and Neonatal Nurses

[AWHONN Position Statement - Breastfeeding](#)

National Association of Pediatric Nurse Practitioners

[NAPNAP Position Statement](#)

World Health Organization

[WHO - Breastfeeding](#)

The agencies listed above support and encourage mothers to breastfeed. They recognize breastfeeding as the normal method of infant feeding and the best source of nutrition for the health and development of growing infants.

Breastfeeding is the best feeding method for all infants including premature and sick infants, with very few exceptions. Exclusive breastfeeding provides the nutrients a baby needs, with the gradual addition of appropriate complementary foods after approximately six months. Then, breastfeeding should continue throughout the first year and beyond, or as long as desired by the breastfeeding family. To read the specific statements of each organization go to their websites.

Steps to Support Breastfeeding for Healthcare Professionals

1. Make a commitment to promoting the importance of breastfeeding.
2. Train all physicians, healthcare workers, and office staff in the skills necessary to support breastfeeding.
3. Inform women and families about the benefits of breastfeeding to mom and baby during pregnancy.
4. Schedule newborn follow-up visit 2-3 days after discharge.
5. Provide education and support for establishing and maintaining breastfeeding even when mom returns to work.
6. Encourage early feeding within the first hour after delivery and on demand thereafter.
7. Promote exclusive breastfeeding until 6 months, then gradually add complementary foods for the first year and beyond; support breastfeeding for as long as mutually desired by the mother and baby.
8. Perform breast assessment during pregnancy and make appropriate recommendations as needed.
9. Advocate support for breastfeeding in the work environment.
10. Assist with expanding the network of support for breastfeeding by encouraging insurance carriers to pay for breastfeeding services. You can also provide lactation support in your office.

Tips for Healthcare Providers

- Educate the health plan about the benefits of breastfeeding and how it will save health care costs for both the baby and the mother.
- Remind the health plan that the Affordable Care Act requires coverage of breastfeeding services and equipment without a copay to families.
- Remind the health plan that the American Academy of Pediatrics passed a resolution recommending that 3rd party payers provide lactation services as a cost-effective measure.
- Work with families to submit claims several times, each time with more detailed explanations. This works—so keep trying!
- Ask the breastfeeding service provider for a detailed bill with the insurance code numbers. Attach the doctor's prescription to the insurance claim form.
- If the baby has a health problem (is premature, allergic to formula, etc.), payment for breastfeeding services should be submitted on the baby's health insurance claim. If the mom has a health problem, payment should be applied for on the mom's claim.

DC Healthy Families (Medicaid)

Since April 1, 2014, the District's Medicaid program has covered breast pumps and lactation supplies for mother of infants ages 0 through 11 months when considered medically necessary. Individual electric breast pumps may be provided when nursing mothers are separated from their infant on a regular basis such as being employed. Call Member Services - 202-842-2810 to see what breastfeeding services are covered.

Coding:

- Hospital grade electric pumps, use CPT code E0604
- Individual Electric Breast Pump, use CPT E0603
- Manual Breast Pump, use CPT E0602

Benefits of Breastfeeding for Baby

Babies who breastfeed ...

Are healthier babies -

Breastfed babies have:

- Less diarrhea and constipation
- Fewer colds
- Fewer ear infections
- Fewer bladder infections
- Fewer severe infections
- Lower risk of getting meningitis (brain infection)
- Lower risk of sudden infant death syndrome (SIDS)

Premature babies have all of the above benefits plus -

- Better eyesight
- Less chance of premie bowel disease (also known as NEC)

Are healthier children -

Breastfed babies have:

- Fewer allergies
- Less asthma
- Less eczema
- Better teeth and smiles



Babies who breastfeed ...

Are healthier adults -

Breastfed babies have:

Lower risk of getting breast cancer

Lower risk of inflammatory bowel diseases

Lower risk of developing diabetes

And are less likely to be obese

Are smarter and more well-adjusted -

Some studies show that breastfed babies have higher IQs. The longer a baby is breastfed, the more benefit he or she receives.



Benefits of Breastfeeding for Mothers

Mothers who breastfeed...

Have healthier bodies-

In the first week, breastfeeding helps the womb return to its normal size and protects a woman from losing too much blood after delivery.

In the first three months, breastfeeding helps a woman rebuild her iron supply and prevents anemia.

After she stops breastfeeding, a mother who breastfed her baby has stronger bones and less chance of breaking her hip (Less Osteoporosis).

Lower risk of breast cancer and ovarian cancer.

Have healthier minds -

Less postpartum depression

Less anxiety and stress

More stable moods

A closer bond with their babies

Save money -

Breastfeeding saves approximately \$1,300 a year

Women who breastfeed miss fewer days of work because their babies are healthier.

Have more time -

Breast milk is always ready when you nurse. There's no measuring, mixing, or warming.

Get their bodies back in shape sooner-

Breastfeeding helps a nursing mother return to her pre-pregnancy weight, especially noticed in her belly and thighs.

Breastfeeding and COVID-19: Unmasking the Risk

Much is unknown about COVID-19 and breastfeeding. However, limited studies on women with COVID-19 show that the virus has not been found in breast milk. Breast milk provides protection against many illnesses. The World Health Organization states that [mothers with COVID-19 can breastfeed](#). Current CDC information on COVID-19 and breastfeeding is available [here](#).

The World Health Organization and the American Academy of Pediatrics recommend that mothers who room-in or breastfeed should follow strict hand washing and use of masks. Both also recommend that the expressed breast milk may be fed to infants.

The WHO provides answers to frequently asked questions (FAQs) regarding COVID-19 and breastfeeding as follows:

Can COVID-19 be passed through breastfeeding?

Transmission of active COVID-19 through breast milk and breastfeeding has not been detected to date. There is no reason to avoid or stop breastfeeding.

In communities where COVID-19 is prevalent, should mothers breastfeed?

Yes. In all socio-economic settings, breastfeeding improves survival and provides lifelong health and development advantages to newborns and infants. Breastfeeding also improves the health of mothers.

Following delivery, should a baby still be immediately placed skin-to-skin and breastfed if the mother is confirmed or suspected to have COVID-19?

Yes. Immediate and continued skin-to-skin care, including kangaroo mother care, improves the temperature control of newborns and is associated with improved survival among newborn babies. Placing the newborn close to the mother also enables early initiation of breastfeeding which also reduces mortality.

The numerous benefits of skin-to-skin contact and breastfeeding greatly outweigh the potential risks of transmission and illness associated with COVID-19.

Can women with confirmed or suspected COVID-19 breastfeed?

Yes. Women with confirmed or suspected COVID-19 can breastfeed if they wish to do so. They should:

- *Wash hands frequently with soap and water or use alcohol-based hand rub and especially before touching the baby.*
- *Wear a medical mask during any contact with the baby, including while feeding.*
- *Sneeze or cough into a tissue. Then dispose of it immediately and wash hands again.*
- *Routinely clean and disinfect surfaces that mothers have touched.*

It is important to replace medical masks as soon as they become damp and dispose of them immediately. Masks should not be reused or touched in the front.

I have confirmed or suspected COVID-19 and am too unwell to breastfeed my baby directly. What can I do?

If you are too unwell to breastfeed your baby due to COVID-19 or other complications, you should be supported to safely provide your baby with breast milk in a way possible, available, and acceptable to you. This could include:

- *Expressing milk*
- *Donor human milk*

If expressing breast milk or donor human milk are not possible, then consider infant formula milk with measures to ensure that it is feasible, correctly prepared, safe, and sustainable.

I had confirmed or suspected COVID-19 and was unable to breastfeed, when can I start to breastfeed again?

You can start to breastfeed when you feel well enough to do so. There is no fixed time interval to wait after confirmed or suspected COVID-19. There is no evidence that breastfeeding changes the clinical course of COVID-19 in a mother. Health workers or breastfeeding counselors should support you to relactate.

I have confirmed or suspected COVID-19, is it safer to give my baby infant formula milk?

No. There are always risks associated with giving infant formula milk to newborns and infants in all settings. The risks associated with giving infant formula milk are increased whenever home and community conditions are compromised, such as reduced access to health services if a baby becomes unwell, reduced access to clean water and/or access to supplies of infant formula milk are difficult or not guaranteed, affordable and sustainable.

The numerous benefits of breastfeeding substantially outweigh the potential risks of transmission and illness associated with the COVID-19 virus.

Can a breastfeeding woman get vaccinated against COVID-19?

Yes, women who are breastfeeding can take the vaccine when it becomes available to them.

None of the currently approved vaccines use the live virus, so there is no risk of passing the virus to the baby through breastmilk.

There is also some evidence that, after vaccination, antibodies are found in breastmilk, which may help protect the baby against COVID-19.



Delta Variant

The Delta variant causes more infections and spreads faster than earlier forms of the virus that causes COVID-19. It might cause more severe illness than previous strains in unvaccinated people.

- Vaccines continue to be highly effective at preventing hospitalization and death, including against this variant.
- Fully vaccinated people with breakthrough infections from this variant appear to be infectious for a shorter period.
- Get vaccinated and wear masks indoors in public spaces to reduce the spread of this variant.

For more information on this topic, visit:

<https://www.who.int/news-room/q-a-detail/coronavirus-disease-covid-19-breastfeeding>

Check out the [Top 7 Things you Need to Know](#), also [available in Spanish](#).

Last Updated Aug. 16, 2021

Content source: [National Center for Immunization and Respiratory Diseases \(NCIRD\), Division of Viral Diseases](#)

Academy of Breastfeeding Medicine. (2020, March 10). Retrieved from ABM statement on coronavirus 2019 (COVID-19): . (<https://www.bfmed.org/abm-statement-coronavirus>)

American Academy of Pediatrics. (2020). American Academy of Pediatrics. AAP FAQs |: management of infants born to mothers with suspected or confirmed COVID-19.

Centers for Disease Control. (2020). Retrieved from <http://www.cdc.gov/coronavirus/2019-ncov/hcp/inpatient-obstetric-healthcare-guidance.html>

World Health Organization. (2020). Retrieved from <http://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-on-covid-19-pregnancy-and-childbirth>

Breastfeed: You Can Do It!

1. START EARLY –

Start thinking about breastfeeding while you are pregnant, so you can be ready. Breastfeed your baby as soon after birth as possible. An early start and frequent feedings will help your newborn learn easier and avoid problems.

2. GET COMFORTABLE –

There are 4 positions most moms use to breastfeed: cradle, cross-cradle, football or side lying. Learn and use all 4 positions to help prevent your breasts from becoming sore.

[*see page 20 for more information on breastfeeding positions*](#)

3. NURSE OFTEN –

In the first weeks, try to nurse your baby at least 8-12 times a day. Your baby may be really sleepy the first few days after birth. A sleepy baby will not feed well. Changing the diaper or stroking the soles of the feet are good ways to wake a baby.

4. CHECK THE LATCH –

Make sure your baby is latched onto the areola, not just the nipple. Before you leave the birthing facility ask the nurse or lactate on specialist to assist you.

[*see page 19 for more information on latching*](#)

5. NURSE ON DEMAND –

Don't wait for your baby to cry! Crying is a late sign of hunger. If he seems hungry feed him; let him be the judge of how long and how often he wants to nurse. Most babies will feed every 2 hours in the beginning. Remember the nighttime feedings. Listen for swallowing; you should hear your baby swallowing for at least 10 minutes. This is a good sign that your baby is getting enough breastmilk.

[*see page 18 for more information on better understanding if your baby is hungry*](#)

6. OFFER BOTH BREASTS –

Offer both breasts at each feeding. During the first few days you may only be able to get your baby to finish one breast at a feeding. That is OK, just start with the opposite breast at the next feeding.

7. CARE FOR YOUR BREASTS –

Express a little milk from your breast and apply it to your areola, the dark area of the breast. Let the breast air dry a few minutes after each feeding. Do not use soap or lotion on your breast. You may use pure lanolin if your nipples are sore. Caution: Do not use lanolin if you are allergic to wool.

8. HOLD OFF ON BOTTLES OR PACIFIERS –

Wait until your baby is 4-6 weeks old to introduce a bottle. Babies can get confused and then refuse to take the breast when they suck a bottle or pacifier. Your baby may suck less at the breast if she spends energy sucking a pacifier.

9. CALL FOR HELP –

Ask your partner, family, and friends for help with household tasks.

See pages 24-31 for a list of community resources.

10. RELAX –

Your baby will feel any tension you have. Create a quiet space, dim the lights, or play soft music. Breathe slowly in through your nose and out your mouth. Use your quiet voice as you gently stroke your baby.



How to Better Understand Your Baby

Hearing your baby cry can be stressful! There are many reasons babies cry. Babies need to cry sometimes but knowing why can help you prevent some crying.

Reasons baby cry:

Needs a diaper change	Wants to be near you
Too hot or cold	Tired
Wants to do something different	Lonely
Too loud or bright in the room	Hungry

Babies have other ways to tell us what us what they need. They move their bodies and make noises in ways that talk to us. We call these 'baby cues'.

There are several main cues:

They are saying, "I want to be near you! "

Eyes are open and face is relaxed

Try to reach toward us

Lift their faces and smile

They are saying, "I need a break!"

Turn head or whole body away from us

Stiffen their bodies and fuss a little

Yawn, rub their eyes, or give other tired signs

They are saying, "I'm hungry!"

Bring hands to mouth

Sucking on things

Tight fists over tummy

Awake and alert



Adapted with permission from:

https://wicworks.fns.usda.gov/sites/default/files/media/document/Infant_Nutrition_and_Feeding_Guide.pdf

Latching

Latch: the way the baby's mouth closes around your breast. Getting the baby to latch on well may take time and practice.

Signs of a Good Latch

The latch feels comfortable to you

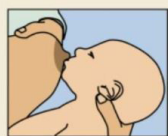
Baby's head and body are turned towards your chest without baby needing to turn his or her head

Baby's mouth covers your entire nipple and some or all of the areola (dark area around your nipple)

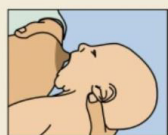
More of the areola is showing on the top of than the bottom

Baby's mouth is open wide with lips turned outwards Baby's chin touches your breast wide with lips turned outwards

Baby's chin touches your breast



- Tickle your baby's upper lip or nose with your nipple so your baby opens his mouth WIDE.



- When your baby's mouth is wide open, bring your baby close so the chin touches your breast first and your baby's mouth goes up and over your nipple



- Your baby's mouth should be wide open with the lips turned outwards. You can hear your baby sucking and swallowing.

Adapted with permission from the Office on Women's Health, U.S. Department of Health and Human Services: <https://www.women-health.gov/breastfeeding/learning-breastfeed/getting-good-latch>

Breastfeeding Holds

Some mothers find these positions help their baby latch. You may need to try different holds to find the one that works best for you.

Signs of a good Hold



CLUTCH OR "FOOTBALL" HOLD: useful if you have had a C-section, or if you have large breasts, flat or inverted nipples, or a strong let-down reflex. This hold is also helpful for babies who like to be in a more upright position when they feed. Hold your baby at your side with the baby lying on his or her back and with his or her head at the level of your nipple. Support your baby's head by placing the palm of your hand at the base of his or her head.



CROSS-CRADLE OR TRANSITIONAL HOLD: useful for premature babies or babies with a weak suck because this hold gives extra head support and may help the baby stay latched. Hold your baby along the area opposite from the breast you are using. Support your baby's head at the base of his or her neck with the palm of your hand.



CRADLE HOLD: an easy, common hold that is comfortable for most mothers and babies. Hold your baby with his or her head on your forearm and his or her body facing yours.



LAIID-BACK HOLD [STRADDLE HOLD]: a more relaxed, baby-led approach. Lie back on a pillow. Lay your baby against your body with your baby's head just above and between your breasts. Gravity and an instinct to nurse will guide your baby to your breast. As your baby searches for your breast, support your baby's head and shoulders but don't force the latch.



SIDE-LYING POSITION: useful if you have had a C-section, but also allows you to rest while the baby breastfeeds. Lie on your side with your baby facing you. Pull your baby close so your baby faces your body.

Adapted with permission from the Office on Women's Health, U.S. Department of Health and Human Services, <https://www.womenshealth.gov/breastfeeding/learning-breastfeed/getting-good-latch>

How to Find Breastfeeding Support

Sometimes new mothers and families have questions or concerns. This is normal. There are ways for you to reach out for the support and encouragement you need to enjoy breastfeeding your baby.

Breastfeeding support services, both before and after your baby is born, can give you valuable information and help.

Breastfeeding Classes:

Classes may be held at a local birthing facility, in a clinic, or in an instructor's home. These classes teach:

- The benefits of breastfeeding for you and your baby
- How to hold your baby for a feeding
- How often and how long to feed
- How to tell your baby is getting enough breast milk
- Milk collection and storage for returning to work
- When to call for help

Don't be afraid to ask where you can find a class. There may be a small fee for the class.

Breastfeeding Specialists:

These are specially trained people that have many different titles and they are able to help you either in the birthing facility and/or at home. You may see IBCLC, CLC, CLE, and CLS after their name; they can all give you excellent advice.

Feel free to ask what the initials mean, how long they have been helping breastfeeding mothers, where they were trained, or any other questions that are important to you.



Breastfeeding Support

Before Your Baby is Born

Begin thinking about breastfeeding, read breastfeeding materials, take a class on breastfeeding, and ask your health care provider for support. See the breastfeeding resources on page 19 for places you can get help and information.

After Your Baby is Born:

Before you leave the birthing facility, schedule your baby a doctor's appointment and be sure you have information on breastfeeding help for when you are at home. Ask about:

- Breastfeeding specialists who can visit you at home
- Places you and your baby can go for breastfeeding help, inquire about fees, location, and hours of operation
- Telephone numbers to call for help

Breastfeeding Support Groups:

Mothers need and enjoy the support, encouragement, praise, and friendship from a group of women they can relate to with babies who are about the same age. Look for these groups:

- Breastfeeding USA
- Mocha Moms
- La Leche League
- WIC
- Local Birthing Facility Groups

Breastfeeding Books:

There are many good breastfeeding resources at nearby libraries. Most have books in several different languages. Sometimes birthing facilities, breastfeeding specialists, and support groups have books that can be read at their location or borrowed. Local bookstores have a wide selection of books as well. *Please do not depend on materials written by a formula company.*

See Breastfeeding Resources on pages 24-31 for phone numbers for classes and specialists.

Breastfeeding Resources

Area Lactation Consultants

Jane J. Balkam, PhD, APRN, CPNP, IBCLC

Business Name: Babies n Business Specializing in services for the working mother

Location: Bethesda, MD

Phone: 301-656-2526

Email: jbalkam@babiesnbusiness.com

Website: www.worksitelactation.com

Sliding scale: No

Ann B. Faust, IBCLC, LLL

Business Name: Baby and Me Lactation Services

Services: Home visits, adoptive and induced lactation, some hospital visits; also sees clients in Columbia office

Location: 5457 Twin Knolls Rd Suite 300-N16 Columbia MD 21045
(serves Howard County and some areas of Montgomery and Baltimore Counties)

Contact: Moira Thomas, Practice Manager

Email Moira: MoiraT@babyandmeLC.com

Phone: 240-893-3808

Email: annfaust@babyandmeLC.com

Website: www.BabyandMeLC.com

Sliding Scale: Yes + free services to some WIC clients

Ania Gold, IBCLC

Services: Home, office, and telehealth consults.

Location: Montgomery County and DC.

Phone: 301 529 5433

Email: ania@lactationroom.com

Web site: www.lactationroom.com

Tamika Harris, IBCLC, RLC

Services: Private lactation counseling (home, office, or electronic) and breastfeeding education

Serves: District of Columbia, Maryland, and Northern Virginia

Phone: 443-889-3947

Email: tamika.harris@breastfeedingusa.org

Website: <https://www.lactationtraining.com/tamika-harris>

Susan Howard, RN, IBCLC

Business Name: Arlington Lactation & Feeding Therapy, LLC

Services: Virtual breastfeeding support offered to families locally, nationally, and internationally. Special interest in feeding difficulties in the first year including tongue ties, bottle refusal, starting solids and supporting the medically complex mother-baby dyad.

Virtual and recorded feeding & parenting classes on pumping, starting solids, and bottle refusal

Weekly feeding & parenting support groups available at no cost

Location: PO Box 5616, Arlington, VA 22205

Phone: 703-651-6466

Email: hello@ArlingtonLactation.com

Website: www.ArlingtonLactation.com

Facebook: [Arlington Lactation](#) and [Susan Howard IBCLC](#)

Instagram: [Susan Howard IBCLC](#)

Kathleen Logan, DNP, RN, CPNP, IBCLC

Services: Telelactation visits as well as home visits (In-home lactation consultations)

Location: Arlington, Alexandria, and NW DC

Phone: 703-869-6222

Email: kathlogan@gmail.com

Sliding scale: Reduced rates may apply

Kathleen McCue, DNP, FNP-BC, IBCLC-RLC

Business name: Metropolitan Breastfeeding

Services: Consulting services in your home or one of my offices

Location: Bethesda and Columbia, MD; Chantilly and Woodbridge, VA

Phone: 301-943-9293

Email: metropolitanbreastfeeding@gmail.com

Website: www.metropolitanbreastfeeding.com

Sliding scale: Yes

Lactation Centers

Breastfeeding Center for Greater Washington

Our mission is to support families from pregnancy through the transitions of early parenthood with relationship-based care, evidence-based instruction and resources, and integrative health service for lactation and postpartum. We're here to help you navigate pregnancy, lactation, and postpartum with greater ease and joy, and give you the tools to make informed and empowered decisions that feel best for you and your family.

Services: Private appointments with IBCLCs and SLPs in office, in home, and via telehealth; pump and scale rentals; free classes and parent groups; donor milk. Breastfeeding accessories also available for sale. (appointment required).

Address: 1020 19th St NW, Suite 150, Washington, DC 20036

Phone: 202-293-5182

Email: gina@breastfeedingcenter.org

Website: www.breastfeedingcenter.org

Children's National East of the River Lactation Support Center

Services: Prenatal breastfeeding classes, breastfeeding and back-to-work consultations, mom-to-mom support groups. Services are FREE.

Address: 2101 Martin Luther King, Jr Ave SE, Washington, DC 20020

Phone: 202-476-7821

Email: lactationsupport@childrensnational.org

Website: <https://childrensnational.org/visit/resources-for-families/family-services/lactation-services>

Georgetown University Hospital Lactation Center

Services: Office visits, prenatal breastfeeding classes, support group, sale and rental of breastfeeding equipment/pumps. Discounted rate for patients with financial need.

Address: 3800 Reservoir Rd NW, Washington DC 20007

Phone: 202-444-6455

Website: www.medstargeorgetown.org/our-services/womens-health/treatments/parenting-and-lactation-services/

INOVA Fair Oaks Breastfeeding Center

Address: 3600 Joseph Siewick Drive, Fairfax, VA 22033

Phone: 703-391-3908

Website: www.inova.org/healthcare-services/womens-health/locations/inova-fair-oaks-hospital/childbirth-services/breastfeeding-center.jsp

Lactation Center at INOVA Alexandria Hospital

Address: 4320 Seminary Rd, Alexandria, VA 22304

Phone: 703-504-7867

Website: <https://www.inova.org/healthcare-services/womens-health/locations/inova-alexandria-hospital/childbirth-services/index.jsp>

National Breastfeeding Support Center (NBSC)

Services: Breastfeeding classes, consultations, and perinatal education (English/Spanish). Free for WIC clients.

Address: Howard University Hospital, 2041 Georgia Ave NW, Towers Building Suite 3300, Washington, DC 20060

Phone: 202-865-1316

E-mail: GWest@huhosp.org

E-mail: kysharpe@huhosp.org

Website: www.huhealthcare.com/

Shady Grove/Adventist HealthCare Outpatient Lactation Services

Services: Lactation consultation; Breastfeeding Education, Support & Togetherness (BEST) support group

Address: 9901 Medical Center Drive, Rockville, MD

Phone: 240-826-6667

Website: www.shadygrovebaby.com

Mother-To-Mother Support Groups

Breastfeeding USA

The mission of Breastfeeding USA is to provide FREE evidence-based breastfeeding information and support, and to promote breastfeeding as the biological and cultural norm.

Please contact your local chapter or visit www.breastfeedingusa.org/ for more information.

Northern Virginia: www.facebook.com/breastfeedingusaNOVA/ Montgomery County, Maryland: www.facebook.com/BreastfeedingUsaMontgomeryCountyMDChapter/

La Leche League of DC

Provides FREE phone support and monthly support meetings.

Location: Online search website by city or zip code for support groups in your area

Phone: Warm line 877-452-5324; 877-4-LaLeche

Website: <http://www.llusa.org/>

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Website: <http://www.llusa.org/>

Mom's Got Milk Club – East of the River Lactation Support Center

Meets every 2nd Thursday of the month at 1:30 PM

Location: 2101 Martin Luther King Jr Ave SE, Washington, DC 20020

Phone: 202-476-6941

Mocha Moms

Metro D.C.

For more information about this chapter, please contact:

metrodcmochas@gmail.com.

You can also visit them on [Facebook](#) and [Instagram](#).

Southern D.C.

For more information about this chapter, please contact:

sdcmochamoms@gmail.com.

Request More Information

If there is no chapter in your area and you are interested in learning about chartering a chapter or connecting with possible new interest groups in your area, please contact:

Mid-Atlantic Regional Director (DC, DE, MD, VA and WV)

midatlantic@mochamoms.org

Community Resources

Community of Hope Family Health and Birth Center

Provides well woman and prenatal care (including group prenatal care), with the option to deliver in a hospital or birthing center; provides primary care services for children and adult men and women. Breastfeeding peer counselors are available to all women receiving pediatric care at the birth center for up to a year postpartum. Phone: 202-398-5520

DC WIC

FREE breastfeeding counselors in many locations throughout the city. Mothers returning to school or work or with medical needs may receive breast pumps. Call to see if you meet the income guidelines. Please ask about sites that offer foreign language services.

Phone: 800-345-1WIC; 202-442-9397

Healthy Babies Project

Provides FREE parenting education for teen clients and home visits for all clients enrolled in the program.

Location: 4501 Grant Street, NE, Washington, DC 20019

Phone: 202-396-2809

Website: www.healthybabiesproject.org

Pacify

Pacify provides unlimited, on-demand access to 24/7 lactation and infant feeding support - all through a smartphone app. The service is FREE for eligible WIC participants who live in the District of Columbia and it is also available for purchase to the general public. Contact your local WIC clinic to learn more or sign up today by visiting this website:

<https://www.pacify.com/dc-wic/>

Website: pacify.com



Birthing Facility Breastfeeding Services

Birthing facilities have special staff, “lactation consultants,” that offer breastfeeding services usually to their own patients who have delivered babies in that birthing facility. These services are given in the birthing facility. Once a mom goes home, phone support is available, and some birthing facilities provide outpatient drop-in services and classes at the birthing facility.

Community of Hope Family Health and Birth Center	202-398-5520
George Washington University Hospital	202-715-4248
MedStar Georgetown University Hospital	202-444-6455
Howard University Hospital	202-865-1316
Sibley Memorial Hospital	202-243-2321
MedStar Washington Hospital Center	202-877-2838

Breast Pump Rentals and Breastfeeding Supplies

Ameda

Phone: 1-866-99AMEDA; 1-866-992-6332

Email: ParentCare@ameda.com

Website: www.ameda.com

Medela, Inc.’s Breastfeeding National Network

Phone: 1-800-TELLYOU; 1-800-835 - 5968

Website: <https://www.medela.us/breastfeeding/>

NEB Doctors

Breast Pump Order Form and Authorization

FAX Form to 1-888-335-3060

Or mail to PO BOX 226 White Marsh, MD 21162

Storkpump

Phone: 844-993-3740

FAX: 267-443-6019

Email: orders@storkpump.com

Website: storkpump.com

Special Resources and Training

Lactation Education Resources

Specialists in lactation management! Providing training for professionals over 20 years. Online and onsite classes available. Lactation Consultant Training (45 and 90 hours), Baby-Friendly Hospital Training (20 hours), Breastfeeding Resource Nurse (45 hours), In-Patient Breastfeeding Specialist (7 hours) and much more.

Phone: 443-203-8553

Contact: Kirra Brandon, MD

Email: Support@LactationTraining.com

BLESS Initiative

Breastfeeding Lactation Education Support Services (BLESS)

Location: Howard University Hospital ([see NBSC on page 27 for details](#))

Phone: 202-865-1316

National Women's Health Information

Phone: 1-800-994-9662; 202-690-7650

Website: www.womenshealth.gov/breastfeeding



Women, Infants, and Children (WIC)

Beautiful Beginnings Club

The Beautiful Beginnings Club provides support so that mothers can give their babies a healthy start in life with breast milk.

Beautiful Beginnings gives breastfeeding mothers, pregnant women and family members a chance to meet and talk to other pregnant women and new mothers. They share ideas and learn more about breastfeeding from each other and Breastfeeding Peer Counselors. The club offers special programs and activities to give mothers a chance to relax, have fun, and to learn from experts. Mothers receive special gifts and awards for their breastfeeding successes.

Ask your WIC nutritionist for a form to join the Beautiful Beginnings Club or come to the next meeting. You do not need to be a member to attend. Meetings are held monthly at all clinics, and WIC staff can provide you with a meeting schedule.

Call your local clinic or the WIC State Agency for more information at 202-442-9397.



Mothers, When Choosing What to Feed Your Baby

Please be aware of the following:

- Formula is an inferior substitute for breast milk.
- **Unlike breast milk** - formula cannot help protect your baby against colds, ear infections, diarrhea, and pneumonia.
- **Unlike breast milk** - formula cannot help protect your baby against Type 1 Diabetes, Type 2 Diabetes, and Childhood leukemia.
- **Unlike breastfeeding** – formula cannot help protect your baby against Sudden Infant Death Syndrome (SIDS).
- **Unlike breast milk, formula does not** contain everything that supports brain function. Breastfed infants have higher IQ's than formula fed infants.
- **Breastfeeding helps you lose weight** – you can burn 1,000 calories a day if you exclusively breastfeed your baby.
- **Breastfeeding helps protect you against** Type 2 Diabetes, ovarian cancer and breast cancer.
- It costs about **\$1,300.00 per year to formula feed**. If you get formula from WIC, remember, it is a supplement. It will run out before the month does. WIC supplies more food for mothers to eat when they breastfeed.

Formulas try to imitate breast milk. **Breast milk is the best milk for your baby**. Anything else is less than the best for your baby. It is your choice. Please choose wisely.

If you are taking street drugs you should not breastfeed. Mothers who smoke (tobacco or marijuana) or drink alcohol should try not to do so when breastfeeding.

Mothers who have HIV and are on medicines that control their viral load should consult their doctor for guidance on whether they are candidates for breastfeeding.

Michal A. Young M.D., FAAP, FABM
 Affiliate Associate Professor
 Department of Pediatrics and Child Health
 Howard University College of Medicine
 Chapter Breastfeeding Coordinator, DC AAP
 Revised 8/31/2021



Calling all Dads!

Did you know that breastmilk...

- Will protect your baby from ear infections, colds, diarrhea, as well as Sudden Infant Death Syndrome (SIDS) and other childhood illness?
- Has all the nutrients your baby needs to be healthy and grow strong?
- Is the perfect food for growing your baby's brain to its fullest potential?

And that breastfeeding can...

- Save you \$1,300 a year because it's FREE?
- Give your baby a head start in life and make your baby smarter?
- Let you have more time to rest instead of making bottles in the middle of the night?
- Provide health benefits for the mother too?

So, what can you do?

- Support your mate's decision to breastfeed. Your support can make a difference!
- Change diapers, burp the baby, cuddle and hold the baby close to you to soothe him.
- Take baby out with you while mom gets some rest, run errands, or help with household chores.
- Enjoy the love that breastfeeding creates.

Talk to other men about breastfeeding issues by visiting [Programs for Fathers](#)

DCHS Fatherhood Resources

The D.C Healthy Start Fatherhood Program (HSFP)

DC Healthy Start is committed to giving men the tools and support they need to become the fathers they truly strive to be, and their children need them to be.

DC Healthy Start Fatherhood Workshops

24/7 Dad is a comprehensive fatherhood program available with innovative tools, strategies, and exercises for fathers of all races, religions, cultures, and backgrounds. Developed by the National Fatherhood Institute, it focuses on the characteristics men need to be good fathers 24 hours a day, 7 days a week. 24/7 Dad® focuses on key fathering characteristics like masculinity, discipline, fathering roles and responsibilities, which help men evaluate their lifestyle and parenting skills.

More information:

<https://dchealth.dc.gov/service/dc-healthy-start>

DC Healthy Start Partnerships & Collaborations

1. Mayor's Office on Fathers, Men & Boys

Person of Contact: Jason Wallace

Phone: 202-442-8150

Email: Jason.Wallace@dc.gov

Resources Provided: positive fatherhood image campaign (Flip The Script), monthly Fatherhood Outings/Events, and Fatherhood supportive services.

2. East River Family Strengthening Collaborative

Person of Contact: Terrance Davis

Phone: 202-397-7300 | Cell: 202-870-0779

Email: Tdavis@erfsc.org

Resources Provided: Crisis intervention and case management services, including parenting training and Fatherhood support.

3. Commission of Fathers, Men & Boys

Person of Contact: Michael A. Dodson II

Phone: 202-774-0425

Email: Michael.dodson3@dc.gov

Resources Provided: addressing the disparities that affect men of color in the District including but not limited to education, economic opportunity, health and well-being.

4. Fathers to The front

Phone: Main: 202-328-6608 | Direct: 202-421-6922

Email: fatherstothefront@gmail.com

Resources Provided: Provide fathers and male caregivers with access to employment, job interviewing skills, resume building, parenting classes and family court knowledge and information, including representation for child support and custody cases.

5. Department of Corrections

Person of Contact: Kevin Burrell

Cell: 202-790-6715

Email: Kevin.Burrell@dc.gov

Services Provided: Inside Out Dad Fatherhood Workshops and Work release program.

What's Health Insurance Got to Do with It?

It's very important to have health insurance if you are pregnant or have a new baby.

If you don't have health insurance, the DC government has different programs to provide you with health care. Most DC pregnant women or new moms are eligible for a health insurance program. There is also a program for undocumented DC residents.

Call 800-620-7802 to find out how you can get health insurance for you and your baby. They will tell you about the options available in DC: Alliance and Medicaid Managed Care Plans (CareFirst Community Health Plan District of Columbia, and AmeriHealth Caritas District of Columbia, Inc., MedStar Family Choice, and Health Services for Children with Special Needs). The Affordable Care Act (ACA) requires insurance companies to cover comprehensive breastfeeding support and counseling by a trained provider during pregnancy and/or in the postpartum period without cost sharing (i.e., no copay).

However, coverage can vary between plans. The DC Healthy Families plans provide coverage of lactation services as of April 2014 for up to 60 days post-partum.

Services that may be covered by insurance include:

1. Lactation consultation, education, and support provided by a physician, a nurse practitioner, a nurse mid-wife or a certified lactation consultant.

Here are some tips:

- Ask about what breastfeeding services your health plan covers before you choose a health plan.
- Call your health plan's Member Services to find out what they pay for.
- Ask your doctor if they have a breastfeeding specialist in their office. If not, you can ask for a referral.
- Call the resources listed in this guide if you need help.

2. Health plans may pay for a breast pump.

Breast pumps are very important when you need to be away from your baby to go back to work or school. However, some health plans do not pay for breast pumps for these purposes.

The DC Breastfeeding Coalition is dedicated to working to encourage DC area health plans to pay for breast pumps. Until then, here are some tips.

Ask questions:

- Call Member Services and ask about the rules for getting a breast pump.
- Ask your doctor to write a prescription for a breast pump
- Since August 1, 2012, the Affordable Care Act requires non-grandfathered private health insurance plans to cover the cost of renting breastfeeding equipment without cost sharing (i.e., no copay).

Health plans may pay for a breast pump if:

- Mom or the baby has a medical need.
- Baby is being fed only with breastmilk
- Baby remains in hospital after mom is discharged

If you have private insurance, there may be paperwork to do:

- You may need to file a claim with your insurance company to get back the money you paid.
- Save your breast pump receipt. Some health plans may reimburse you for all or part of it.

As of April 1, 2014, the District's Medicaid program covers breast pumps and lactation supplies for mother of infants ages 0 through 11 months as "durable medical equipment" when considered medically necessary. Individual electric breast pumps may be provided when mothers who need to maintain lactation are separated from their infant on a regular basis such as being employed.

Also, exclusively breastfeeding WIC clients returning to work/school or with medical need may be able to receive free electric pumps through WIC.

Choosing a Breast Pump

There are many types of breast pumps. For best results, consult with a breastfeeding specialist who will help you choose the best pump to fit your needs.

Before choosing a pump, remember:

- Normally, a breast pump is not needed to make enough milk for your baby.
- Feeding baby at the breast is usually the easiest and best way to make enough milk.
- If not used correctly, breast pumps may decrease milk supply.
- Do not use pumps that were used by other people as these may cause infection or have broken or missing parts.
- Read manufacturer instructions to learn how to use and care for your breast pump.
- If you have breast pain, bleeding, or other unusual symptoms while using a breast pump, STOP using it and talk to a lactation specialist working with a medical professional if necessary.

Different Breast Pump Types and Uses

Hand Expression

The best pump can be the one attached to your arm! Getting breast milk out by using only your hand can be effective, easy, and helpful in emergencies. Some mothers actually prefer hand expression. For instructions on how to hand express, see the video link: [Expressing the First Milk - Small Baby Series](#)

- When mother and baby can't be together for short periods of time
- In a medical emergency if other types of pumps are not available

Manual/Hand Pumps

- To relieve breasts that are too full for baby to latch on and suckle
- To extend flat or inverted nipples so baby can latch on
- When mother and baby can't be together for short periods of time

Personal Use Electric Pumps

- Mother is away from her baby for 4 hours or more a day due to work or school
- Mother and baby are having feeding difficulties and are in the care of a lactation specialist
- Mother needs to build milk supply
- Mother needs to rebuild her milk supply after it has decreased

Hospital Grade Pumps

- Mothers experiencing long term separations due to prematurity, hospitalization, or for other reasons
- Severe breastfeeding problems or medical need, requiring the help of a lactation specialist working with a medical professional

Additional Resource:

Morton, Jane. “Hand Expression of Breastmilk.” Hand Expressing Milk | Newborn Nursery | Stanford Medicine, Stanford University Hospital | [Stanford Medicine - Hand Expression of Breastmilk](#).



Back to School/Work Timetable

Identify a sitter or day care center that is supportive of breastfeeding mothers (in some areas there may be a long waiting list for childcare, so start early, even before the baby is born)

10 - 14 days before:

- Begin to offer a bottle (baby may take it better if it contains breast milk and someone other than mom gives it). If mom is going back to school/work before the baby is 6 months old, then bottles should be started between 4 and 6 weeks of age to avoid bottle refusal.
- If mom is going to pump, start using the pump; try it before the morning feed or whenever baby only takes one side. See “Tips for Successful Pumping” ([page 43](#)) for more information.
- Ask your employer about a private place to pump while at work. Plan to pump every 3-4 hours.
- Think about clothes for school/work that will make pumping easy, such as loose-fitting tops.

7 - 10 days before:

- Leave baby with sitter for short time that includes at least one feeding period.
- If you are not going to pump at school/work, begin dropping one feeding every three days so your body can adjust. Only drop the feedings that would occur during school/work hours.

Night before:

- Pack the diaper bag, lunch, healthy snack for yourself, and your pump along with milk storage equipment.
- Plan dinner for the next night and decide with your partner who will cook.

First morning:

- Allow 30-60 minutes extra for getting dressed, nursing your baby, and packing for two people.

Every morning:

- Allow enough time to nurse the baby before you leave.
- Start dinner or start it defrosting in the refrigerator.

When you come home:

- Sit down and relax with your baby!!

Adapted with permission from #5 of the Babies First Series from The Learning Curve of Weingart Design 1997 by Michal Young, MD, FAAP 9/1997, revised



Tips for Successful Pumping

- Pump around the same time each day.
- If away from your baby, pump on the schedule your baby usually feeds.
- A relaxed environment, warm compresses and gentle breast massage will improve milk flow. Looking at a picture of your baby may help!
- When pumping one breast at a time, move the pump back and forth between breasts several times during the pumping session to increase the amount of milk you get.
- Don't give up if you don't get much milk on the first few tries. If you continue to pump regularly, you will usually get enough milk production in one to two weeks.
- Store milk in the amount your baby usually takes in a single feeding to avoid waste.
- Milk may be stored in glass or hard plastic baby bottles. Label bottle with date, time of collection & any unusual food or medicine taken. Do not store in polyethylene containing products.
- Milk should be placed in the coldest part of the refrigerator or freezer (in the rear/away from the door) when storing. See the chart on next page for how long you can store milk. Breast milk often separates on standing; just swirl gently to remix.
- Warm breast milk by putting the bottle in a bowl of warm water. Do NOT heat in boiling water or a microwave; this can burn your baby and may lessen the health benefits of the breast milk.
- Your baby may not want to take milk in a bottle. Using a newborn size, slow flow nipple, and having someone else offer the feeding may make it easier. Depending on the age of the baby, cup or spoon feeding may be more acceptable. BE PATIENT! If you need help, please call one of the listings in the Resources section.

Storing & Handling of Human Milk

For Your Healthy, Full-Term Baby

Location or Storage	Temp (°F)	Optimal Storage Duration	Comments
Room Temperature	60-85	4 hours	<ul style="list-style-type: none">• 6-8 hours acceptable under very clean conditions• Best to chill or refrigerate as soon as possible is not planning to use
Cooler with Ice Packs	59	12 hours	<ul style="list-style-type: none">• Limited evidence available
Refrigerator	-39.2	4 days	<ul style="list-style-type: none">• 5-8 days acceptable under very clean conditions
Freezer	<24.8	6 months	<ul style="list-style-type: none">• 12 months acceptable• Store in back of freezer to prevent intermittent rewarming due to freezer door opening• Keep away from walls of self-defrosting freezers• Container should be well sealed to prevent contamination

Table 1. Information adapted from ABM Clinical Protocol #8: Human Milk Storage Information for Home Use for Full-Term Infants, Revised 2017

- Never add freshly pumped/warm milk to milk that has already been cooled or frozen. Wait until it has been cooled to mix it with other cooled milk.
- If your child prefers warm/body temperature milk, it is best to do this over 20 minutes in lukewarm water.
- Do not leave previously frozen milk that has been thawed for 24 hours out at room temperature for more than 2 hours.
- No recommendations can be made on refreezing thawed milk at this time, so it is best to avoid this.

Thawing Frozen Human Milk

In general, it is best to use the oldest frozen milk first unless your doctor/lactation professional tells you to do otherwise.

There are 3 ways to thaw frozen milk:

- Place milk storage bag/bottle in refrigerator until milk becomes liquid (Note: this way causes less fat to be lost during the thawing process).
- Place milk storage bag/bottle under cool running faucet water.
- Place milk storage bag/bottle in a container of warm water.

Separation of the milk components is normal during thawing. Once milk is thawed fully, gently swirl the container to mix.

DO NOT SHAKE.

******NEVER MICROWAVE HUMAN MILK******



Photograph courtesy of Jessica Nash

How to Keep Your Breast Pump Kit Clean

Keeping your pump and pump parts clean is critical because germs can grow quickly in breast milk or breast milk residue. Following these steps can help prevent contamination and protect your baby from infection. If your baby was born prematurely or has other health concerns, your baby's health care provider may have more recommendations for pumping breast milk safely.

Before every use

- Wash hands with soap and water.
- Inspect and assemble clean pump kit. If your tubing is moldy, discard and replace immediately.
- Clean pump dials, power switch, and countertop with disinfectant wipes, especially if using a shared pump.

After every use

- Store milk safely. Cap milk collection bottle or seal milk collection bag, label with date and time, and immediately place in a refrigerator, freezer, or cooler bag with ice packs.
- Clean pumping area, especially if using a shared pump. Clean the dials, power switch, and countertop with disinfectant wipes.
- Take apart breast pump tubing and separate all parts that come in contact with breast/breast milk.
- Rinse pump parts that come into contact with breast/breast milk by holding under running water to remove remaining milk. Do not place parts in sink to rinse.
- Clean pump parts that come into contact with breast/breast milk as soon as possible after pumping. You can clean your pump parts in a dishwasher or by hand in a wash basin used only for cleaning the pump kit and infant feeding items. Follow the cleaning steps given on the next page.

Cleaning Your Pump Kit by Hand

- Place pump parts in a clean wash basin used only for infant feeding items.
- Do not place pump parts directly in the sink!
- Add soap and hot water to basin.
- Scrub items using a clean brush used only for infant feeding items.
- Rinse by holding items under running water, or by submerging in fresh water in a separate basin.
- Air-dry thoroughly. Place pump parts, wash basin, and bottle brush on a clean, unused dish towel or paper towel in an area protected from dirt and dust. Do not use a dish towel to rub or pat items dry!
- Clean wash basin and bottle brush. Rinse them well and allow them to air-dry after each use. Wash them by hand or in a dishwasher at least every few days.

Cleaning Your Pump Kit in The Dishwasher (Optional)

- Clean pump parts in a dishwasher if they are dishwasher- safe. Be sure to place small items into a closed-top basket or mesh laundry bag.
- Add soap and, if possible, run the dishwasher using hot water and a heated drying cycle (or sanitizing setting).
- Remove from dishwasher with clean hands. If items are not completely dry, place items on a clean, unused dish towel or paper towel to air-dry thoroughly before storing. Do not use a dish towel to rub or pat items dry.

After Cleaning

For extra protection, sanitize

- For extra germ removal, sanitize pump parts, wash basin, and bottle brush at least once daily after they have been cleaned. Items can be sanitized using steam, boiling water, or a dishwasher with a sanitize setting. Sanitizing is especially important if your baby is less than 3 months old, was born prematurely, or has a weakened immune system due to illness or medical treatment.

Storage

- Safely store dry items safely until needed. Ensure the clean pump parts, bottle brushes, and wash basins have air-dried thoroughly before storing. Items must be completely dry to help prevent germs and mold from growing. Store dry items in a clean, protected area.

For detailed instructions, visit [CDC - Infant Feeding Hygiene](https://www.cdc.gov/infantfeedinghygiene/)



Becoming a Breastfeeding-Friendly Employer

Employers who increase the support they provide for breastfeeding mothers have found that there are company and family benefits including:

- Reduced staff turnover and increased retention of skilled workers after the birth of their child
- Reduced leave time for parents of breastfed infants who are more resistant to illness
- Lower and fewer health care costs associated with healthier breastfed infants
- Higher job productivity, employee satisfaction, and morale
- Enhanced loyalty among employees
- Added recruitment incentives for women
- Improved positive image in the community

Three essential requirements to ensure that employees can successfully combine work and breastfeeding include:

Time: Sufficient break time to pump, or flexible work hours.

Space: Provide a clean, comfortable, and private space for breastmilk expression. Access to a sink for hand and pump washing is necessary. The bathroom is not an acceptable option! Nearby, or on-site childcare would facilitate employees breastfeeding while on break or during lunch.

Support: Develop “mother-friendly” workplace policies; improve attitudes towards breastfeeding by educating workers and management about the benefits of breastfeeding. Survey your employees to assess the need to establish a place to pump on your work site.

To become a breastfeeding-friendly employer see: [OWH - Business Case for Breastfeeding](#)



Workplace Award Recipients

The DC and Maryland Breastfeeding Coalitions joined hands to recognize work sites within the District, Maryland and Northern Virginia that are committed to promoting and protecting their female employees' right to provide human milk to her infant as long as she may choose. The Workplace Awards were established in 2010 thanks to funding support from a grant from the Health Resources and Services Administration called the "Business Case for Breastfeeding." The following businesses have been recognized so far:

Large Businesses (500+ Employees) Gold

- Adventist Healthcare (2019)
- AOL (2011)
- AstraZeneca (2019)
- Baltimore City Health Department (2014)
- Carroll Hospital Center (2018)
- Catholic Relief Services (2017)
- Children's Health Center-Northwest Clinics (2017)
- Children's National Medical Center (2011)
- Consumer Financial Protection Bureau (2016)
- DC Health (2019)
- Defense Information Systems Agency Wellness Center (2017)
- Defense Intelligence Agency (2013)
- Dept. of State - Educational & Cultural Affairs/International Informational Programs (2014)
- Educare DC (2016)
- Environmental Protection Agency, Headquarters (2019)
- Fairfax County Government (2010)
- Georgetown University Hospital (2010)
- George Washington University (2013)
- Greater Baltimore Medical Center (2011)
- Holy Cross Hospital (2012)
- Howard Community College (2018)
- Howard County General Hospital (2015)
- Howard University Hospital (2015)
- Johns Hopkins Bayview Medical Center (2014)
- Johns Hopkins East Baltimore Medical Campus (2010)



- Kaiser Permanente of the Mid-Atlantic States (2011)
- John Hopkins Lactation Support Program (2019)
- Marriott International (2016)
- MedStar St. Mary's Hospital (2013)
- MedStar Washington Hospital Center (2012)
- NASA Goddard Space Flight Center (2012)
- National Institutes of Health (2011)
- National Public Radio (2013)
- National Security Agency (2012)
- Prince George's Hospital Center (2015)
- Queen Anne's County Department of Health (2016)
- Shady Grove Adventist Hospital (2012)
- Sinai Hospital (2018)
- Sodexo (2012)
- U.S. Census Bureau (2013)
- U.S. Department of Agriculture (2012)
- U.S. Food and Drug Administration (2014) (2017)
- U.S. Office of Personnel Management (2010)
- U.S. Department of Transportation (2016)
- USAID (2016)
- Union Hospital of Cecil County (2014)
- University of Maryland Baltimore (2010) (2017)
- University of Maryland Baltimore County (2016)
- Upper Chesapeake Medical Center (2013)
- University of Maryland Medical Center (2019)
- Virginia Hospital Center (2015)
- Walter Reed National Military Medical Center (2012)

Silver

- Accenture (2019)
- Anne Arundel County Health Department (2010)
- Anne Arundel County Medical Center (2010)
- AstraZeneca (2018)
- Baltimore City Health Department (2011)
- Charles County Government (2019)
- Children's National Medical Center (2010)
- D.C. Department of Health (2012)
- George Washington University (2012)
- Hyatt Regency Chesapeake Bay Resort (2016)
- Kaiser Permanente of the Mid-Atlantic States (2010)
- Mary's Center (2019)
- Nestle USA (2019)
- Northwest Hospital (2011)
- Perkins Eastman (2019)
- Save the Children (2019)
- Towson University (2017)
- Towson University Department of Occupational Therapy (2018)
- US Environmental Protection Agency (2018)
- US Naval Research Laboratory (2018)
- Washington Adventist Hospital (2011)



Bronze

- Calvert Cliffs Nuclear Power Plant (2014)

Medium Businesses (50-500 Employees)

Gold

- American College of Obstetricians & Gynecologists (2014)
- BCS, Inc. (2013)
- Children's Health Center of Anacostia (2016)
- Choptank Transport (2016)
- Community Clinic, Inc. (2011)
- Continental Realty Corporation (2019)
- Fahrney-Keedy Senior Living Community (2013)
- Frederick County Bank (2016)
- Girl Scout Council, Nation's Council (2017)
- Holy Cross Hospital Germantown (2015)
- Howard County Health Department (2010)
- James G Davis Construction (2017)
- Latham & Watkins LLP (2018)
- Naval Health Clinic Patuxent River (2013)
- National Restaurant Association (2018)
- Network for Good (2013)
- PANDORA Jewellery (2016)
- Proteus Technologies (2016)
- United Medical Center (2015)
- United Therapeutics (2014)
- University of Maryland Pediatrics (2018)
- University of Maryland
School of Medicine Department of Anesthesiology (2017)

Silver

- American Society of Health-System Pharmacists (2013)
- Avalon Consulting Group (2019)
- Bryn Mawr School (2018)
- Bolton Partners Inc. (2017)
- Central Special School (2012)
- Chizuk Amuno Congregation and Schools (2017)
- Edmund Burke School (2017)
- Frederick County Department of Social Services (2016)
- Garrett County Health Department (2017)
- Housing Opportunities Commission of Montgomery County (2014)
- International Youth Foundation (2019)
- John Snow, Inc. (2019)

- Maryland Pediatric Group (2019)
- Pikesville High School (2018)
- Pompeian Inc. (2019)
- Ritchie Park Elementary School (2019)
- SECU of Maryland (2019)
- Segue Technologies (2018)
- St Mary's County Department of Social Services (2019)
- Third Way (2019)
- Visit Baltimore (2017)

Bronze

- Progressions Salon Spa Store (2014)
- Maryland Public Television (2012)
- Space Telescope Science Institute (2012)
- Tri-County Council (2019)

Small Businesses (to 50 Employees) Gold

- 3 Sigma Software (2015)
- Alliance for the Chesapeake Bay (2018)
- Association of Maternal & Child Health Program (2017)
- Baltimore Healthy Start (2018)
- Chesapeake Pediatrics (2018)
- Child First Authority (2019)
- Children First Pediatrics (2016)
- Deep Creek Seafood (2018)
- Evolution Oral Surgery (2016)
- iHire, LLC (2016)
- KAI Research, Inc. (2017)
- Kaiser Permanente (2018)
- MD Dept. of Health and Mental Hygiene (2015)
- Maryland WIC Training Center (2015)
- Metropolitan AME Church (2019)
- Metropolitan Breastfeeding (2018)
- Mosaic Power (2014)
- Open Works (2019)
- Soft and Cozy Baby (2013)
- Sumit Bhutani, MD. LLC (2017)
- The Literacy Lab (2017)
- Temple Isaiah (2018)
- Trustify (2017)
- Venable (2018)
- Viva Center (2018)

Silver

- AFI Silver Theatre (2012)
- Association of Schools and Programs of Public Health (2017)
- Baltimore County Public Library: Woodlawn Branch (2019)
- Bush Advanced Veterinary Imaging (2016)
- Commerce Title Company (2019)
- Cornrows & Company (2014)
- Dream Dental (2018)
- Institute for Market Transformation (2018)
- Kivvit (2017)
- Strathmore (2012)
- Ultimate Image Spa (2015)

Special Commendations

For continued efforts of gold level businesses to provide an exceptionally supportive work environment for breastfeeding families

- Anne Arundel County Public Schools (2019)
- Baltimore City Health Department (2014)
- Shady Grove Adventist Hospital (2013)
- UMMC Medical ICU and Emergency Department (2019)
- University of Maryland Baltimore (2013)
- U.S. Department of Agriculture (2013)
- Walter Reed National Military Medical Center (2013)





Health Care Provider Award Recipients

Large Health Care Providers (30+ Employees)

Gold

- Annapolis Pediatrics (2016)
- Children's Health Center -Northwest Clinics (2017)
- Children's Health Center at Children's National (2014)
- Community of Hope Family Health and Birth Center (2014)
- Johns Hopkins Bayview Medical Center Ob/Gyn (2017)

Medium Health Care Providers (15-30 Employees)

Gold

- Children's National Anacostia (2016)
- Greenspring Pediatrics Associates (2014)
- Midwives of MedStar (2014)
- Mt. Airy Children's Dental Associates (2017)

Small Health Care Providers (Up to 15 Employees)

Gold

- Children First Pediatrics (2016)
- Evolution Oral Surgery (2016)
- Hirsch Pediatrics (2016)
- Johns Hopkins Bayview Medical Center OB/GYN (2017)
- Laura Lieberman, MD, PA and Melissa Levine, MD (2017)

Baby-Friendly Hospitals and Birthing Centers

The Baby-Friendly® Hospital Initiative is an international program sponsored by the World Health Organization and the United Nations Children's Fund which certifies hospitals and birthing centers that provide optimal breastfeeding support. In order to be designated as Baby-Friendly®, facilities need to fulfill the Ten Steps to Successful Breastfeeding and undergo a rigorous evaluation process.

The Ten Steps are endorsed and promoted by the major maternal and child health authorities in the United States, including:

CRITICAL MANAGEMENT PROCEDURES:

- 1 A. Comply fully with the International Code of Marketing of Breast-milk Substitutes and relevant World Health Assembly resolutions.
- 1 B. Have a written infant feeding policy that is routinely communicated to staff and parents.
- 1 C. Establish ongoing monitoring and data-management systems.
2. Ensure that staff have sufficient knowledge, competence and skills to support breastfeeding.

KEY CLINICAL PRACTICES:

3. Discuss the importance and management of breastfeeding with pregnant women and their families.
4. Facilitate immediate and uninterrupted skin-to-skin contact and support mothers to initiate breastfeeding as soon as possible after birth.
5. Support mothers to initiate and maintain breastfeeding and manage common difficulties.
6. Do not provide breastfed newborns any food or fluids other than breastmilk, unless medically indicated.
7. Enable mothers and their infants to remain together and to practice rooming-in 24 hours a day.
8. Support mothers to recognize and respond to their infants' cues for feeding.
9. Counsel mothers on the use and risks of feeding bottles, artificial nipples (teats) and pacifiers.
10. Coordinate discharge so that parents and their infants have timely access to ongoing support and care.

[Baby-Friendly USA ~ 10 Steps & International Code](#)

The following DC hospitals have been designated as Baby-Friendly:

MedStar Georgetown University Hospital
MedStar Washington Hospital Center

The following DC hospitals have filed their letter of intent to become Baby-Friendly and are currently pursuing designation:

Howard University Hospital

Notes

[illegible]

Howard University Hospital

B.L.E.S.S. INITIATIVE

Breastfeeding, Lactation, Education and Support Services



National Breastfeeding Support Center

Have Breastfeeding questions or concerns?

Call for appointments 8:30am – 4:30pm

Beautiful Beginnings Club

Monthly baby feeding support meetings.

Childbirth Education Classes

Learn what to expect during labor and how to give your baby the best start by breastfeeding!

BLESS Team

Adora Okogbule-Wonodi, MD

Medical Director of Lactation Services **202-865-4541**

Davene M. White, RN, NNP, MPH

Director Public Health Programs **202-865-7012**

Lactation Consultants: **202-865-1316**

Gwendolyn R. West, IBCLC, RLC

Kymberly C. Sharpe, BSN, RN, IBCLC

WIC Breastfeeding Support: **202-865-7919**

Tamara White, BFPC

Call 202-865-1316 for locations, appointments, and schedules

**A Project of the Department of Pediatrics and
Family Services and HUH WIC**

Call 202-865-3505

for locations, appointments, and schedules

Howard University Hospital

2041 Georgia Avenue, NW

Washington, DC 20059



Welcome

欢迎

Bienvenida

Bienvuene

Byenveni

Are you . . .

- ✓ Looking for training for emerging lactation consultants?
- ✓ Considering becoming an IBCLC?
- ✓ Recertifying or deepening your skills?

Lactation Education Resources has what you need!

- **Highly rated courses** with 35+ handpicked expert instructors
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"I love the course offerings and can't wait to do more. I put what I learned into practice every day."



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CENTER *for greater washington*

202-293-5182
breastfeedingcenter.org

Private Consultations

with Board Certified Lactation Consultants
insurance accepted!

Group Classes

childbirth - breastfeeding - pumping - massage
return to work - babywearing - nutrition

Breastfeeding Boutique

pump rentals - bra fittings - spare pump parts
baby carriers - shower gifts - supplements

Donor Breastmilk

HMBANA milk available for pick up.
Donors needed!

Insurance-Covered Breast Pumps that Fit Your Lifestyle



Scan here or visit
storkpump.com to
place your order



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#1076
Lithonia, GA 30058



ROSE
Reaching Our Sisters Everywhere

Reaching Our Sisters Everywhere (ROSE), Inc.
seeks to:

enhance
encourage
support
promote
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support



breastfeeding throughout the USA



Breastfeeding is healthy and
helps you bond with your baby.



Pacify provides unlimited, on-demand access to 24/7 lactation and
infant feeding support - all through a smartphone app.

The service is FREE for eligible WIC participants who live in the
District of Columbia and it is also available for purchase to the
general public.

Contact your local WIC clinic to learn more or sign up today by
visiting this website: <https://www.pacify.com/dc-wic/>





Children's National

East of the River

Lactation Support Center

Services offered

- Prenatal Breastfeeding Education Classes
- Community Lactation Support
- Mom's Got Milk Club
- Back-to-Work Breastfeeding Consults

Hours

Monday – Friday
8:00 am – 4:30 pm

Call 202-476-6941 for more information

or email LactationSupport@cnmc.org
2101 MLK, Jr Ave, Washington, DC 20020

This institution is an equal opportunity provider.



In partnership with **DC BREASTFEEDING COALITION**

Business Card
2" X 3 1/2"

Half Page
3 1/8" X 4 1/2"

Advertisement Request Form

Advertise your business in the next DC Breastfeeding Resource Guide developed by the DC Breastfeeding Coalition, Inc.

Our resource guide lists breastfeeding information, services and providers that help Washington, D.C. families receive the breastfeeding support that they need.

Over 50,000 FREE copies of our guide have been provided to families and practitioners in Washington, DC.

Business Card Size	\$75 for two years
Half Page	\$150 for two years
Full Page	\$300 for two years

Please contact resourceguide@dcbfc.org for more information.

Make check payable to:

DC Breastfeeding Coalition

Mail to:

PO Box 29214, WDC 20017

Business Card Size Approx. 2" x 3 1/2"

Half Page Ad Approx. 3 1/8" x 4 1/2"

Full Page Ad Approx. 6 1/4" x 4 1/2"

** We prefer digital media with camera-ready graphics. All ads will need to be pasted into the final document for printing.*

***We reserve the right to accept or reject any advertising based on guidelines established by the DC Breastfeeding Coalition, Inc.*



www.dcbfc.org

Email: info@dcbfc.org