



General Membership Meeting
February 6, 2019
Central Jersey Family Health Consortium
North Brunswick, NJ

Attendees: 33 (See sign in sheet).
Meeting called to order by Mary Turbek at 10:05 am

Welcome and Introductions

Attendees were asked to introduce themselves; icebreaker question was to rate your morning on a scale of 1-10. The majority of attendees rated their mornings between an 8 and a 10. Mary introduced the 2019 Trustees:

Cassandra Leahy, Jessica Libove, Ellen Maughan, Judy Schneider, Jill Wodnick, John Worobey.
President: Mary Turbek
Treasurer: Kay O'Keefe
Secretary: Ellen Shuzman

Attendees were asked to share their mission regarding birth/breastfeeding and to discuss their part in that work utilizing the "speaking stick". Participants shared the following visions, ideas and missions:

- That all physicians have adequate breastfeeding education and that physicians demonstrate a minimum number of CMEs in it.
- That all hospitals comply with the NJ hospital regulations and that at least one-half of hospitals become Baby-Friendly by 2020. Florence expressed that we are still fighting the same problems of 40 years ago.
- More collaboration and communication among breastfeeding supporters and among healthcare providers and even within hospital systems. The Monmouth-Ocean Breastfeeding Consortium's collaborative work was mentioned.
- Development of breastfeeding-friendly childcare centers in NJ and including toddler care. More sharing of best practices for childcare professionals.
- Need to foster equity and develop scholarships to IBCLC candidates to help with the economic barriers and eliminate barriers that stand in the way of achieving equity. Mentioned Capital Health's IBCLC internship program as one that allows non-RN IBCLC candidates.
- Need to address financial barriers to becoming an IBCLC, and the cost of the lactation pathway 2 program.

- Need to increase employers' awareness of pumping laws.
- Highlighting of breastfeeding and family leave laws and the fact sheet on the NJBC website. Everyone joined in on the discussion focusing on the new family leave law awaiting the Governor's signature. Discussion included that new law will increase wage reimbursement to 85% of weekly wage with a cap of \$850, with time off doubling to 12 weeks, which takes effect in July 2020. Dads will also be eligible to take family leave.
- Lactation needs to be regarded as preventative care. It isn't seen that way by society. Lactation care should be provided as "lactation checkups" so that moms could see LCs as a well-check, not just when there are problems. Discussion ensued about insurance.
- Need to shift medical focus away from only "numbers" which discourage mothers of preemies from continued efforts to breastfeed. Need for collaboration between lactation and nurses.
- More moms need to believe in themselves. Attendee is focusing on helping one mom at a time. Acknowledged how discouraging it can be with other providers who lack breastfeeding education.
- Collaboration between hospitals, WIC and providers is important with a common goal of not giving out so much formula.
- Sharing of information on the NY Milk Bank and their mission to see every parent be able to provide breastmilk for their babies. Discussion ensued regarding insurance coverage for donor milk. In NJ, unlike NY, straight Medicaid will not cover donor milk. Attendee indicated that the NY Breastfeeding Coalition provides scholarships for two IBCLC candidates each year.
- Need to encourage young mothers to see that breastfeeding is the first best thing that they can do for their babies. Attendee mentioned the many roadblocks mothers faced and highlighted the need for mothers to learn how to advocate for themselves and lose the "doctor is always right" mentality. She shared a story about how a mother was told at a childcare center that her baby needed to be weaned by 12 months.
- Attendee discussed NJ First Steps initiative where she is hoping to normalize breastfeeding among day care providers. She wants to find resources to help teach caregivers about the importance of breastfeeding, how to handle breastmilk, and how to include fathers.
- Attendee praised group's visions and stated they inspired her. "Breastfeeding deserts" exist. She is striving to make her WIC program an oasis for breastfeeding support and information. Her WIC program recognizes healthcare providers who are true or "first tier" breastfeeding supporters. She introduced her peer counselor to the attendees and praised her ability to counsel women of color, especially Creole-speaking parents.
- Attendee discussed lack of breastfeeding care some parents are receiving in the hospitals and emphasized the need for better collaboration between WIC offices and hospitals.
- Prenatal education "sets up" women for success. Need free prenatal education at OB offices. She believes that all prenatal breastfeeding education should be free.
- Need for prenatal breastfeeding education for OBs. At this attendee's hospital, they are now doing prenatal consults, but this requires administrative buy-in regarding lactation as a public health issue.
- Breastfeeding must be normalized not as a benefit, but as the norm that all babies deserve. All women deserve excellent care but systems are working against them. She is working with the Department of Health for more collaboration. She told the group that everyone's comments gave her hope, and that she admires everyone's resilience and persistence. She specifically

thanked all the peer counselors (PCs) who attended the meeting and opened the floor for them to speak.

- A PC attendee stated she visits all the local hospitals in her region and believes that pediatricians need to provide better initial feeding assessments for infants so that they can catch feeding problems earlier on.
- Need for more prenatal education so that more mothers could have confidence in themselves and their babies.
- Daycare providers need more education on breastfeeding.
- Need to help women advocate for themselves and their breastfeeding relationship, so they don't switch to formula when doctors recommend it or fear of losing their jobs if they ask to pump.
- Attendee commented that the size of the group at the meeting gave her hope for the future of lactation. She discussed work on licensure for LCs in NJ and suggested that we develop a scale for pediatricians to learn when a referral to an LC is necessary.
- Attendee thanked everyone for the inspiration and the positivity and spoke about ways to develop ideas into a movement for change. She mentioned the need for mothers to have space to tell their own stories, which is the best way to catalyze a movement from the ground up.

Mission and Vision Statements

Mary Turbek reviewed the newly revised mission and vision statements created at the Board of Trustees meeting. She recognized the work of some of the founding members of NJBC, such as Florence, Mary Lou, Ellen and Judy Schneider.

Statewide Breastfeeding Plan

Mary Turbek discussed the DOH grant through SNAP-Ed given to NJBC. The grant will fund a project manager to create a statewide breastfeeding plan. She indicated that everyone's input was needed, and that we would be forming focus groups to involve everyone from NJBC members to mothers and grandmothers.

Membership Policy

The membership policy was reviewed and an updated membership form will soon be available on the NJBC website. All are invited to be on the NJBC distribution list. The required \$30 membership fee has been removed, and donations are encouraged. Everyone who completes a membership form will have voting rights.

Legal Affairs Committee report

Ellen Maughan reported that a new breastfeeding law enacted on January 1 that requires insurers to pay for donor milk as long as certain conditions are met. More information about the new law will be added to the NJBC website. She recommended that those who work in the hospital setting develop donor milk policies and train staff to dispense milk. To obtain donor milk for outpatient infants, a pediatrician must provide evidence of medical necessity. It is important to get the word out about this new law, and Roseanne Motti discussed the policies and procedures they use at the Human Milk Bank of NY. Casi Leahy proposed the formation of a new subgroup on human milk sharing in the hospital setting, and proposed to gather names of those interested. Vickie proposed another subgroup on the

need for human milk policies outside of the hospital. The group will share templates of the “proof of need” document.

Administrative Reports

Corporation name: New Jersey Breastfeeding Coalition, Inc

IRS Nonprofit Application status: the application for 501C3 status is still pending Mary Turbek explained the reasons for pursuing this application. Treasurer Kay O’Keefe will complete a longer financial report at the next meeting.

USBC Update

The USBC conference has been moved from August to June. The NJBC is planning on sponsoring an attendee, as we did last year. Applications will be due soon.

Website and ZipMilk

Casi Leahy emphasized the importance of everyone having their updated contact information on the distribution list and on ZipMilk. She asked attendees to contact her if they wanted to add resources to the website, and if they want to change their ZipMilk listing. Casi also informed the groups that the Massachusetts Breastfeeding Coalition which runs ZipMilk can track monthly and yearly statistics of where users come from. We plan to exploit this resource as much as we can. She reminded people to take home ZipMilk and Breastfeeding Law cards.

Social Media

Judy reported that the NJBC facebook page has been very active and has had several “viral” posts. She asked everyone to “like” the Facebook page to boost our visibility. Lorraine Mejias volunteered to help the NJBC Instagram and Twitter feeds.

Next meeting in April is TBA. It be held in another geographic location to enable participation from around the state.

The meeting was adjourned at 12:05.