

SCR6



UNIVERSITY OF HAWAII SYSTEM

Legislative Testimony

Written Testimony Presented Before the
Senate Committee on Health
Senate Committee on Education
Wednesday, March 30, 2011 at 1:20 p.m.

By

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and

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and

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SCR 6 Encouraging the John A. Burns School of Medicine and the School of Nursing and Dental Hygiene of the University of Hawai'i to Include Breastfeeding in Educational Curriculum to Educate Medical Professionals to Advocate and Promote Breastfeeding Among Expectant Mothers

Aloha Chairs Green and Tokuda and members of the Senate Committees on Health and Education, thank you for the opportunity to provide testimony from the School of Nursing and Dental Hygiene and John a. Burns School of Medicine on SCR 6.

School of Nursing and Dental Hygiene

Nursing education has always included the promotion and support of breast feeding in courses for both entry level and advanced practice students. The child family course provides specific content related to the physiologic components of breast milk, benefits to the maternal-infant pair, decision-making for breast feeding, and strategies to assist new mothers to be successful. At the graduate level, the pediatric and family nurse practitioner student course on women's health has a strong young family focus.

Faculty including Dr. Maureen Shannon, Frances Matsuda Chair in Women's Health, a nurse midwife and fellow of the American College of Nurse Midwives and Dr Carol Richardson ensure that students have the clinical experience working with your families to support breast feeding. We will be pleased to provide course syllabus if needed.

John A. Burns School of Medicine

The John A. Burns School of Medicine takes note of your resolution in support of education regarding breastfeeding, and we support your measure's intent.

We also wanted you to know that breastfeeding already is part of the curriculum for all our trainees in the medical school's Pediatrics Residency Program, which is housed at and works in partnership with the Kapi'olani Medical Center for Women and Children.

In fact, we are pleased to report that Kapi'olani was just presented the "IBCLC Care Award". This international award was established in 2010 to recognize and honor established IBCLC facilities that have demonstrated a commitment to breastfeeding support through clinician training and project implementation in the promotion and protection of breastfeeding. This is indeed an honor as only 192 facilities were selected worldwide.

At the medical school, allow us to provide, for your information, a brief rundown of our breastfeeding curriculum.

From GOAL 1: Delivery Room

- h. Discuss immediate breastfeeding and early bonding between baby and family; describe how hospital routines can facilitate or impede these natural processes.
- i. Describe how obstetricians and pediatricians can work together as a team to improve outcome at high-risk deliveries.
- j. Discuss prevalence of home deliveries by nurse midwives in one's own community; recognize risks and liabilities.

GOAL 4: Nutrition (Newborn). Understand how to manage breast and bottle feeding in the newborn period.

OBJECTIVES:

Assessment and screening

- a. Assess a newborn's nutritional status based on history (volume of feeding if formula, latch, suck duration, presence of swallowing etc if breast feeding, number and type of urine and stools) and physical exam (e.g., weight change from birth weight, fontanel, neurologic or oral/facial anomalies).
- b. Discuss mother's feeding choice and assess for potential risks/difficulties (e.g. previous breast surgery, previous failed breast feeding attempts, inverted nipples).

Health promotion/disease prevention

- c. Encourage and support mothers who will breast feed. Lactation consults when indicated.
- d. Counsel mothers who will bottle feed.
- e. Refer mothers to WIC and other resources for assistance with food purchase and nutrition education.

Common problems

- f. Recognize and manage these conditions:
 - 1. Common problems for breast feeding infants and mothers.
 - 2. Newborn who is a poor feeder.
 - 3. Feeding plans for the SGA infant.
 - 4. Feeding plans for the infant of a diabetic mother.
 - 5. Feeding plans for the infant with a cleft palate.

6. Feeding plans for neurologically depressed/abnormal newborns.

II. Medical students' pediatric rotation

Neonatal / Nursery rotation

They are six objectives for the student to accomplish during this rotation

Objective#2 refers to breast feeding. "The student will be able to assess and counsel mothers of newborns on feeding issues, especially common tips for successful breast feeding and management of common problems associated with breast feeding.

IV. Nutrition

Competencies

A. Knowledge

1. Describe the advantages of breastfeeding and describe common difficulties experienced by breastfeeding mothers.
2. Describe the signs and symptoms of common nutritional deficiencies in infants and children (e.g. iron, vitamin D, fluoride, and inappropriate caloric volume) and how to prevent them.
3. Identify children with specific or special nutritional needs (e.g. patients with chronic illness, prematurity, abnormal growth patterns, failure to thrive, obesity, or when family risk factors suggest the possibility that nutritional modification will be needed).
4. Describe nutritional factors that contribute to the development of childhood obesity and to failure to thrive.
5. Discuss risk factors for the development of cardiac disease and diabetes with families.
6. Describe the endocrine, cardiovascular, and orthopedic consequences of childhood obesity.

B. Skills

1. Obtain a dietary history in children of different ages that includes the following:
 - Infants: type, amount and frequency of breast or formula feeding, solid foods, and - dietary supplements (vitamins, iron, fluoride).
 - Toddler/school age child: milk, juice, soda, fast foods, and meal patterns
 - Adolescents: meal patterns, nutritional supplements, milk, juice, soda, alcohol, snacking, and fad diets
2. Determine the caloric adequacy of an infant's diet.
3. Provide nutritional advice to families regarding the following:
 - Breastfeeding vs. formula feeding
 - Addition of solids to an infant's diet
 - Introduction of cow's milk to an infant's diet
 - Healthy food choices for children and adolescents
 - Exercise and TV or video viewing and their effect on obesity

Processes: All students on the Pediatric Clerkship should see a patient or patients with self or parental concerns or questions about appropriate nutrition (e.g. failure to thrive, questions about breast vs. bottle feeding, questions about switching to formula, when to add solids). This can be in the context of a routine health care supervision visit.

Mahalo for this opportunity to tell you about part of the curriculum at the John A. Burns School of Medicine, where we continue to train physicians and physician specialists for Hawai'i.

The University of Hawai'i appreciates your continuing support of nursing and healthcare in Hawai'i.



Testimony by: Cheri Teranishi-Hashimoto, PT
SCR 6, Encouraging the John A. Burns School of Medicine and the
School of Nursing and Dental Hygiene of the UH to Include
Breastfeeding in Educational Curriculum to Educate Medical Professionals to Advocate and Promote
Breastfeeding Among Expectant Mothers
Sen HTH/EDU, Weds. March 30, 2011
Room 225, 1:30 pm **Position: Support**

Chairs Green and Tokuda, and Members of the Senate HTH and EDU Committees:

I am Cheri Teranishi-Hashimoto, P.T., and Legislative Committee member of the Hawaii Chapter – American Physical Therapy Association (HAPTA). HAPTA represents 250 physical therapists and physical therapist assistants employed in hospitals, nursing homes, the Armed Forces, the Department of Education and Department of Health (DOH) systems, and private clinics throughout our community. Physical therapists work with everyone, from infants to the elderly, to restore and improve function and quality of life. We are part of the spectrum of care for Hawaii, and provide rehabilitative services for infants and children, youth, adults and the elderly. Rehabilitative services are a vital part of restoring optimum function from neuromusculoskeletal injuries and impairments.

We support this measure that seeks to include breastfeeding as part of the educational curriculum and training for medical professionals. The active support and promotion of breastfeeding among expectant and new mothers will benefit the health and wellness of both the infant and mother in the short and long-term. The American Academy of Pediatrics cites some of those reasons:

- 1) Breastfeeding helps to protect infants against a variety of conditions and diseases inclusive of:
 - Ear infections
 - Respiratory problems
 - Bacterial meningitis
 - Diabetes (Type I & II)
 - Certain cancers: lymphoma, leukemia, Hodgkin's disease
 - Bowel problems: diarrhea, ulcerative colitis, Crohn's disease
 - Childhood overweight & obesity
- 2) Breastfeeding has maternal benefits as well:
 - Decreases the incidence of ovarian cancer
 - Decreases the incidence of premenopausal breast cancer
 - Decreases postpartum bleeding
 - Assists with rapid uterine involution
 - Assists with earlier return to pre-pregnancy weight

Further, the Surgeon General's Vision for a Healthy and Fit Nation 2010 recommends that all hospitals, work places and communities should make breastfeeding easy and sustainable for mothers as breastfeeding has been shown to decrease childhood obesity.

Your support of this measure is appreciated. I can be reached at 386-7322 if you have any questions. Thank you for the opportunity to testify.



DATE: March 28, 2011

TO: Committee on Education
Senator Jill Tokuda, Chair
Senator Michelle Kidani, Vice Chair

Committee on Health
Senator Josh Green, M.D., Chair
Senator Clarence Nishihara, Vice Chair

FROM: Jackie Berry, Executive Director

HEARING: Wednesday, March 30, 2011
1:20 p.m.
Room 225

RE: SCR 6 - Encouraging the John A. Burns School of Medicine and the School of Nursing and Dental Hygiene of the University of Hawaii to include breastfeeding in educational curriculum to educate medical professionals to advocate and promote breastfeeding among expectant mothers.

Testimony in Strong Support

Chairs Tokuda and Green, and the members of the Committees:

Healthy Mothers Healthy Babies (HMHB) is a statewide coalition of public and private agencies, and individuals committed to the improvement of maternal and infant health status in Hawaii through education, coordination and advocacy. **HMHB is testifying today in strong support of SCR 6.**

We are joined by organizations worldwide such as the American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, American Public Health Association, United Nations International Children's Emergency Fund (UNICEF), and the World Health Organization, all who recognize that breastfeeding is the best choice for the health of a mother and her baby.

SCR 6 aptly lists the myriad of factors attesting to the importance of breastfeeding, however, we would like to provide the following information:

Breast milk fights disease in babies. The cells, hormones and antibodies in breast milk protects babies from illness. This protection is unique; formula cannot match the chemical makeup of human breast milk.

Formula-fed babies have higher risks of ear infection, diarrhea, necrotizing enterocolitis (a disease that affects the gastrointestinal tract in pre-term infants), lower respiratory infections, skin rash, asthma, obesity, Type 1 and 2 diabetes and childhood leukemia. Breastfeeding has also been shown to lower the risk of sudden infant death syndrome (SIDS).

Breast feeding is good for the mother's health too. Breastfeeding is linked to a lower risk of health problems in women such as, Type 2 diabetes, breast and ovarian cancer, osteoporosis, and postpartum depression.

Breastfeeding benefits society. The nation benefits overall when mothers breastfeed. Recent research shows that if 90 percent of families breastfed for 6 months, nearly 1,000 deaths among infants could be prevented. The United States would also save \$13 billion per year – medical care costs are lower for breastfed infants than for never-breastfed infants. Breast fed infants typically need fewer sick care visits, prescriptions, and hospitalizations.

Breastfeeding also contributes to a more productive workforce because mothers miss less work to care for sick infants. Employer medical costs are also lower.

Breastfeeding saves money. Formula and feeding supplies can cost well over \$1,500 each year.

Breastfeeding is better for the environment. There is less trash and plastic waste compared to that produced by formula cans and bottle supplies.

We commend the Legislature for recognizing the importance of breastfeeding and the crucial role of health care professionals in educating, supporting and encouraging expectant mothers to breastfeed their babies. We urge you to pass SCR 6.

Mahalo for giving us the opportunity to offer testimony today.



Senate Health Committee
The Hon. J. Green, Chair;

March 28, 2011

Senate Education Committee
The Hon. J Tokuda, Chair

Honorable Chairpersons and Committee Members;

With regard to SCR-6 encouraging the development of strong breastfeeding components into the curricula of the schools of Medicine, Nursing and Dental Hygiene; we would like to go on record in **STRONG SUPPORT** of such changes in the educational experiences of Hawaii's professional schools.

Breast feeding is a win-win for everyone concerned; babies, mothers, families and society in general. It is the very best way to nourish infants, to prevent disease, to encourage healthy family dynamics, save money for and so on. Unfortunately, in recent years, many professionals in the health services industry have become a major impediment to a woman's attempt to successfully breast feed. Formula is offered almost from the moment of birth; women are frequently separated from their newborns for reasons that are expedient to hospital obstetric operations, not to successful breast feeding; staff is often unaware of the techniques that need to be taught to new mothers who want to breast feed, and so on.

Scr-6 will help change that by cultivating a new set of values and skills in those who complete health care training in Hawaii.

Thank you for this opportunity to support SCR-6 and encouraging breast feeding in Hawaii's professional schools.

Sincerely
Dan Domizio
PA,MPH
Clinical Programs Director
Puna Community Medical Center.

TO: Members of the Committees on Health and Education

FROM: Natalie Iwasa
Honolulu, HI 96825
808-395-3233

HEARING: 1:20 p.m. Wednesday, March 30, 2011

SUBJECT: SCR 6 Encouraging UH to Add Breastfeeding to the Curriculum for Medical Professionals

Aloha Chairs Green and Tokuda and Committee Members,

Thank you for allowing me to provide testimony in support of resolution SCR 6. Your "yes" vote for this resolution would be a "no brainer." I say "no brainer" because there is NOTHING better for babies than their mothers' own milk.

In addition to the benefits noted in the resolution, the composition of the milk changes as the baby grows. The taste also changes. It is *the* ideal food for babies.

It is important to note that in addition to teaching and promoting breastfeeding at the medical professional's level, mothers also need support. Unfortunately, there is some stigma attached to breastfeeding in public, and some mothers feel they should hide under blankets or feed their babies in rest rooms. Breastfeeding is one of the most basic and natural things a mother can do for her child. We must support mothers in their efforts to do the best for their children, and that includes educating society as well as doctors and nurses.

I am so glad both of my boys received breastmilk only until they were eight months old and continued to receive breastmilk well after that. Please pass this resolution so other mothers can learn about the benefits of breastfeeding.