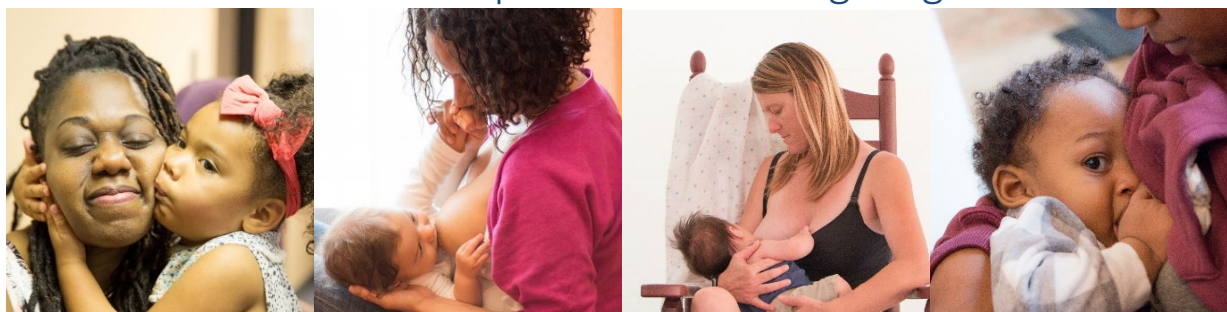


# Minnesota WIC Breastfeeding Guidance

2020-2021

This document provides tips for developing the local nutrition education plan and for ongoing reference.



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## Background & information: 2020-21 nutrition education plan

WIC is a health, nutrition and breastfeeding program. We are making progress in supporting breastfeeding, and as of calendar year 2017, 25 out of 54 local MN<sup>1</sup> WIC grantees have met the Healthy People 2020 goals for breastfeeding initiation. Many more will meet goals for initiation and duration by 2020. We've also made some progress in promoting exclusive breastfeeding and reducing disparities in breastfeeding; there is more work to be done. This document provides background information and resources to help in developing local breastfeeding goals and activities, and for ongoing reference.

**Celebrate your successes**, and then identify how your agency can build additional support for breastfeeding, to help every Minnesota infant to have the opportunity to be breastfed and every Minnesota mom to have the opportunity to be supported in breastfeeding.

### The MN WIC breastfeeding goal for 2020-2021.

Increase breastfeeding exclusivity and decrease early cessation of breastfeeding and improve breastfeeding rates for *all* Minnesota WIC participants by:

- preparing WIC participants for a great start to breastfeeding in the hospital and early weeks,
- coordinating with hospitals for continuity of care, consistent messaging and referrals to WIC for breastfeeding support, and
- providing early postpartum support.

There are three related breastfeeding objectives.

**Objective 1** relates to assessing the current rates of breastfeeding in the state within your local agency and needs.

**Objective 2** relates to counseling, information and identifying support systems to help women get a great start with breastfeeding.

**Objective 3** relates to collaborating with others, with a focus on hospitals, to build continuity of care and consistent messaging.

**Background.** Exclusive breastfeeding<sup>2</sup> to a year and longer is recommended for all infants. What happens in the prenatal period and hospital can impact exclusivity and

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<sup>1</sup> Breastfeeding initiation and Duration at two Weeks and Two, Three, Six and Twelve Months for Minnesota WIC Infants. Calendar year 2017. By Grantee. Downloaded from Infoview 6/23/2019. CY2018 not yet available. For agencies with small numbers of participants your rate may not be calculated on this report. We suggest combining two years of data to calculate your rates.

<sup>2</sup> Breastfeeding or providing breastmilk, any medically necessary medications, and the addition of complementary foods when developmentally ready, around 6 months of age.

duration, and a woman's confidence that she can and will breastfeed. When women believe they can breastfeed, are prepared for a great start in the hospital, have information on what to expect when they are home, to navigate their planned return to work or other possible challenges, they are empowered to breastfeed, and often breastfeed more exclusively and for longer duration. WIC information and support can help empower women. Minnesota hospital staff have shared that WIC participants are often better prepared for breastfeeding.<sup>3</sup> WIC participants also share that information they received from WIC while pregnant helped them initiate breastfeeding and overcome early challenges. How WIC counsels pregnant women about breastfeeding, overcoming barriers, and building on strengths DOES make a difference. When WIC staff understand hospital birthing practices and breastfeeding support, and hospital staff understand how WIC and others work with pregnant women to initiate and continue breastfeeding, there is often better consistency of information and continuity of breastfeeding support.

This year's state goal is a continuation of the 2018-2019 goal, with some changes to objectives and strategies, and relates to helping all women get a great start with breastfeeding through anticipatory guidance and early postpartum support, exclusive breastfeeding in the hospital, and supporting exclusive breastfeeding.

Promoting exclusive breastfeeding does not mean forcing women to breastfeed. It is providing information and support, and helping change the environment so all women and infants have the opportunity to do so. While we promote optimal nutrition and breastfeeding, there are occasional times when supplemental formula is needed (e.g. due to low supply or a challenging work situation.) Some women who could produce a full milk supply if they didn't receive an unnecessary supplement may unintentionally reduce their milk supply by supplementing. We work to assure that WIC does no unintentional harm to milk supply by issuing formula. We encourage WIC staff to approach each woman assuming she will exclusively breastfeed. Work from there to address her questions and concerns, reassuring her that we want to help her and her baby get the best start possible, and will support her whatever her situation and needs. If the CPA assessment determines that it is appropriate to issue formula, it is important to provide the minimum amount of formula to meet the assessed need and to refer and follow-up when concerns about milk supply are identified.

The importance of a great start in the hospital and feeding only breastmilk is illustrated by the next graph. (Data is from MN WIC agencies who are using the special use fields to collect this information.)

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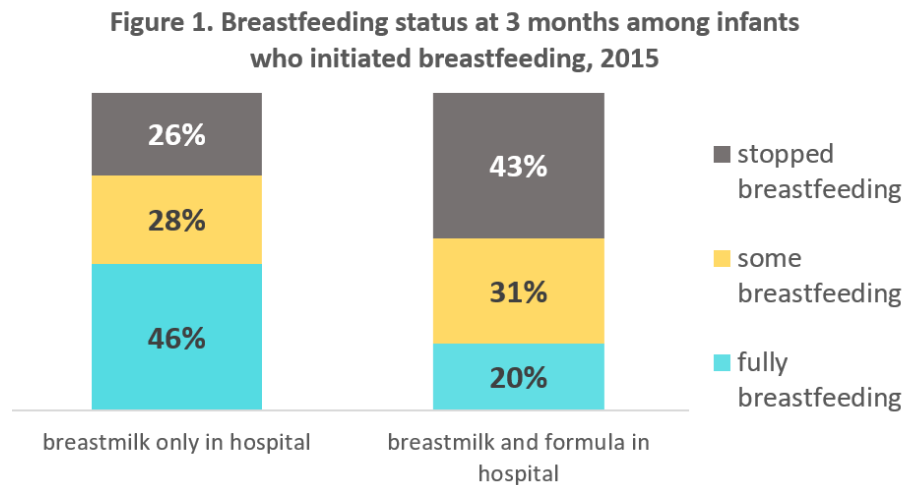
<sup>3</sup> Personal communication with Minnesota State WIC Breastfeeding Coordinator.

## Breastfeeding at 3 months among infants in the Minnesota WIC program

At three months of age, breastfeeding status varied depending on whether breastfed infants had been given formula during their hospital stay. Infants who had been exclusively breastfed in the hospital were

- more likely to continue to breastfeed (74% vs. 51%), and
- 2.3 times as likely to be fully breastfeeding compared to those who were given formula in the hospital. (Figure1)

Also see: *The importance of exclusive breastfeeding during the hospital stay* and other [Minnesota WIC Fact Sheets](#).



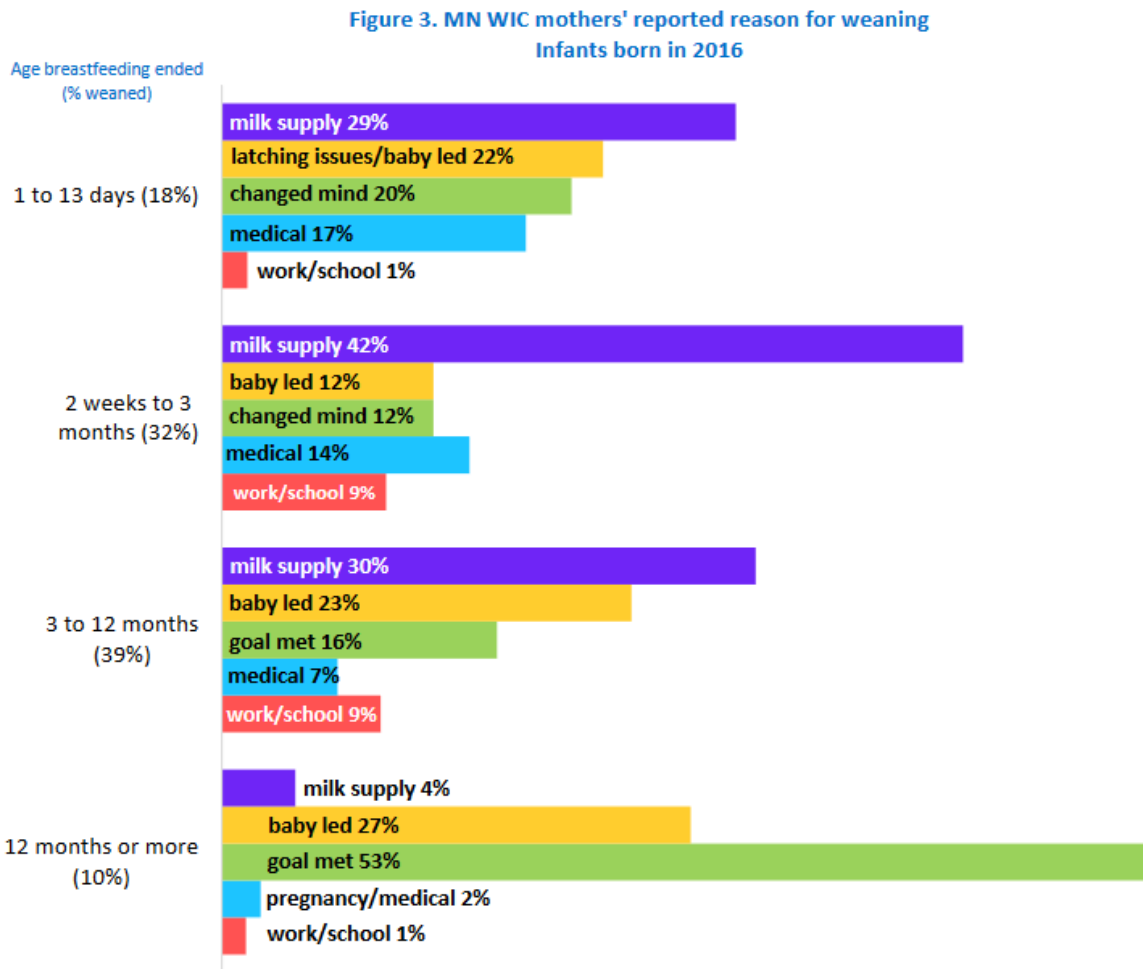
## Overcoming barriers that lead to breastfeeding cessation.

Concerns about milk supply remain a primary reason women start supplementing or stop breastfeeding in the first days, weeks, and months. Addressing individual concerns about milk supply, and providing anticipatory guidance on infant feeding cues, early baby behaviors, and expectations about the amount of early milk (colostrum) that is needed can help women get off to a great start and continue breastfeeding with confidence.

Baby-led weaning is surprising to see in the first year, and even more surprising that it is identified as one of the most frequent reasons for stopping breastfeeding. Early infant feeding behaviors, such as head bobbing, head shaking, or when baby appears to be pushing away from the breast can be misinterpreted as rejection of the breast. Teaching about baby behaviors/feeding cues and infant feeding reflexes can help prevent these misinterpretations of infant behavior. Understanding these behaviors and how they relate to feeding can help women develop confidence and not feel that their baby is rejecting them or rejecting breastfeeding.

Each woman, whatever her cultural-ethnic background or age, should be approached as an individual, with individual knowledge, beliefs, and supports. Recognizing that some cultural and ethnic groups face more challenges, the State WIC Program is working to identify opportunities for breastfeeding promotion and to change the environment for those groups. Within each cultural, ethnic and age group there are women who exclusively breastfeed and do so for a long time. **What can we learn from these women?**

A chart with data from HuBERT is shown below. The more accurately this field is completed in HuBERT the more accurate the report. See appendix D for information on finding this data for your agency.



Currently 15 to 20% of WIC participants who were on WIC more than 3 months during pregnancy stop breastfeeding before 2 weeks. The top reason for cessation is perceived or real milk supply concerns. With preparation before delivery, and coordination with the hospital and others, we hope that women can find the help they need and continue breastfeeding well beyond those first two weeks, and have confidence in their ability to produce milk and the understanding that early and exclusive breastfeeding will help

them do so.

We can do a lot within WIC; however, WIC participants are influenced by family, friends, the public and the places where they receive health care, child care, where they work or go to school, and more. Collaborating with others to build consistent messages and create supportive environments is the focus of objective 3.

Suggested activities related to this objective also include coordination with and outreach to hospitals and other organizations, so health care providers and others know that WIC is a health, nutrition *and breastfeeding* program. The Collective Match Reports include tools, including an outreach video, to help hospital staff learn about WIC. It is important for health care professionals to know that WIC is a place to send their patients for nutrition and breastfeeding information while pregnant and for support after the baby is born.

This is important for family, friends and the public to know also.

For your reference, a copy of the 2020-2021 Breastfeeding Goal and Objectives is included as Appendix A. Resources related to each of the objectives begin on the next page.



## Resources - Objective 1

### Sources of breastfeeding data and how to access.

There are many sources of data on breastfeeding in Minnesota WIC and in counties, cities, CHBs or local WIC agencies.

**Data Wheel.** The [data wheel](#), located on the Minnesota WIC Website under reports has breastfeeding information in several places:

[Health Indicators tab.](#) Here you will find:

- [Breastfeeding progress](#) for MN WIC. (Initiation, duration for 1 mo., 3 mo., 6 mo. and 12 mo.) Breastfeeding progress for MN WIC by grantee and agency is found in Infoview<sup>4</sup>

[Breastfeeding tab.](#) Here you will find:

- annual summary reports,
- annual reports by race / ethnicity (scroll down to see unduplicated race/ethnicity, unduplicated by cultural identity-Asian and unduplicated by cultural identity-black, and race/ethnicity alone or in combination.)
- breastfeeding fact sheets (including the fact sheet on exclusive breastfeeding) and
- maps showing breastfeeding rates by county.

In the data wheel annual reports are available by CHB of residence, county of residence, and city of residence. If there are two or more WIC programs in a county or if your WIC program is tribal, you will find the specific information about the rates in your WIC program in the annual reports that are found on the Infoview site. See the information below, and Appendices C & D, for accessing reports in Infoview.

**Infoview:** Current rates of breastfeeding within your agency and the state can be found in Infoview. These are the types of reports found in Infoview.

- Annual breastfeeding reports.
- Summary statistics reports (monthly) See appendix C in this guidance document.
- Infoview ad hoc reports. See the Infoview information on the MN WIC Website or contact the state WIC office.

[Information about Infoview](#) is found on the Minnesota WIC website. On this page you will find:

- Infoview Login
- Infoview Guidance Documents
- Infoview Report Templates Reference
- Quick Reference (Infoview basics)
- Infoview Training Modules

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<sup>4</sup> To find the agency and grantee health indicators (include breastfeeding) by county or grantee, within Infoview go to folders / public folders /annual reports / Nutrition Ed Plan / Health Indicators / Grantee/Agency (pages by Grantee and by Agency are included in the same report)

Screen shots with information on finding the Summary Statistics Breastfeeding and other reports in Infoview are found in Appendix C.

Additional detail about Infoview breastfeeding reports and the reports to use to find various types of data is included in Appendix D.

## Collecting exclusive breastfeeding information

We highly recommended that you use this question to track exclusive breastfeeding information for your agency. Because a required State Use question must be filled out for all WIC types (including women and older children), *this question will remain **optional***.

**The following State Use question is currently available for local agency use.**

- It is in ***Demographics, AdditionalInfo1 tab: First time formula/other given to infant (meds ok)***
- Additional information and definitions of the drop down choices are in [Breastfeeding Exclusivity HuBERT State Use Question #1 Guidance and Definitions](#).

If your agency is interested in using this field to track initiation and exclusivity, please contact [Marcia McCoy](#) or [Joni Geppert](#) for more information.

## Resources - Objective 2:

### Information, training, and materials to help women get a great start with breastfeeding

#### Staff training

A list of [Lactation trainings](#) offered in Minnesota or Neighboring States is found on the Minnesota WIC Website.

There is also a [MN WIC Calendar](#) that lists nutrition and breastfeeding workshops and conferences as well as other key dates for local WIC staff. See the Wednesday Update each week for more information on the calendar.

Other training including training on Baby Behaviors ([Baby Behavior Training Guide for New WIC Employees](#)), is listed on the WIC training page. Or to find the training: go to the **Local Agency** page, and the **Training/Nutrition** tab.

Also see the new staff training, which includes breastfeeding.

## Participant education Materials and Ideas

### Prenatal tool kit.

The Minnesota Breastfeeding Coalition has developed a [prenatal tool kit](#) that can be useful as a visual aid for training and teaching. Hospitals, clinics and others are using this information.

### Materials from Minnesota WIC

The State WIC Office supplies materials to local WIC programs free of charge. Materials can be found on the [Minnesota WIC Materials Order Form](#). (Materials available include posters, pamphlets, DVDs, and visuals for teaching. (For example you can filter by posters to find the breastfeeding posters; if you search for breastfeeding you may miss some materials – contact the state WIC office for more information on breastfeeding materials available; and if you search for behavior (name field) you will find the Baby Behavior brochures and DVDs.)

[Breastfeeding cards](#) can be ordered from Brush Art. Topics include: Thinking about breastfeeding?, Getting Started with Breastfeeding, First Months of Breastfeeding, Breastfeeding an Older Baby, Dads Are Important, Moms Helping Moms (peer program), Returning to Work or School, Combination Feeding, also see Paced Bottle Feeding (in the infant area.)

Electronic versions of the cards are also found here:

- English <https://www.health.state.mn.us/people/wic/nutrition/morenutinfo.html#bfwomen>
- Spanish <https://www.health.state.mn.us/people/wic/bf/spanish.html>
- Somali <https://www.health.state.mn.us/people/wic/bf/bfsomali.html>

### Breastfeeding video clips linked from the Minnesota WIC Website.

On the Minnesota WIC Website go to local agency / breastfeeding/ Minnesota WIC Clinic Resources. Here you will find links to the following video clips

- [Hand Expression of Milk \(Video\)](#)
- [Biological Nurturing \(Photos\)](#)
- [Biological Nurturing \(Video\)](#)
- [10 Hour Old Baby](#)
- [Demonstrating difference between good latch and poor latch \(Video\)](#)
- [Really good drinking at the breast \(Video\)](#)
- [Baby Led Mother Guided \(Video\)](#)

- [4 Day Old After Tongue-tie Release With Compressions \(video\)](#)
- [Faa'iidooyinka ku jira caanaha naaska kaliya oo la siiyo dhalaankaaga](#)  
(The Benefits of Exclusively Breastfeeding Your Baby – video in Somali)
- [Paced Bottle Feeding](#)
- [Global Health Media Project Breastfeeding Videos.](#)  
From this page choose breastfeeding, then the language from the drop down, then select the video that says "for mothers." (Other videos on this page are for training health professionals.)

### Information for dads

- New dad manual <http://www.newdadmanual.ca/manual.php?SectionID=2&ArticleID=7>
- Fathers want to bond <http://www.mothering.com/articles/8-tips-fathers-want-bond-breastfeeding-babies/>
- USDA WIC Breastfeeding Support: Dads <https://wicbreastfeeding.fns.usda.gov/dads>
- Dedicated Dads Online <https://www.rkcaa.org/health/health-kenosha/dedicated-dads>

### Many local WIC or public health programs offer classes or support groups.

For information on some of the groups offered in various communities contact your community hospital, coalition, Breastfeeding Coordinator, or for examples of what is available in other communities, the State WIC Breastfeeding Coordinator.

### Contact women a few weeks before their due date.

You can run an Infoview report to use in contacting women close to their delivery date. You can make a call to see if there are questions about breastfeeding. This can be especially helpful for agencies that don't have peer programs.

If you agency has a peer program, refer a participant to a peer during pregnancy whenever possible.

## Resources-Objective 3:

### Working in collaboration with others to help change the environment to better support breastfeeding.

**Coordinating with hospitals.** Minnesota WIC Agencies received "Match Reports" for each of the hospitals where their participants deliver. The report also lists other WIC agencies with participants who deliver at the same hospital. The back side of the report has links to the following resources that provide a starting point as you plan various activities. Resources include:

- Facilitated Meeting
- Hospital Tour

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- WIC Clinic Tour
- Hospital Task Force
- About WIC Presentation
- At the bottom of the Match Report, under Access Here, you will find:
  - *WIC Referral Training video*
  - *Making Referrals to WIC* (a document about WIC to share with hospital staff, includes ideas for working WIC into conversation with new moms)

### Other Resources

Minnesota Breastfeeding Coalition website. <https://mnbreastfeedingcoalition.org/>

List of Local Breastfeeding Coalitions <https://mnbreastfeedingcoalition.org/bfa-in-mn/>

Information on the Statewide Health Improvement Program (SHIP)

<http://www.health.state.mn.us/people/oshii/ship/communities/> and Tribal SHIP

<https://www.health.state.mn.us/communities/tribes/index.html>

Share information on [lactation training](#) opportunities with others in your community. (And if you know of a training that is not listed here, please let us know so it can be added.)

The WIC Coordinator and / or Breastfeeding Coordinator can introduce yourselves to clinic managers at the hospital, clinics, and to staff from other programs in your community.

Share information on the [MDH recognition programs](#) for Breastfeeding Friendly maternity centers, child care, and workplaces. Consider applying for recognition as a Breastfeeding Friendly Health Department.

## Assessment

As you develop your nutrition education plan review the data for your agency and also think about what you hear from participants – Are they frustrated with workplace support (or lack of support)? What is helping the women who are doing great with breastfeeding succeed? How can other women achieve the same successes? What do WIC staff think are key areas that will help to promote and support breastfeeding?

There are two documents that you can use to gather comments and ideas from WIC staff and for you to use to summarize breastfeeding comments and data for your agency. These documents are found on the Minnesota WIC website: [Minnesota WIC Breastfeeding Guidance](#)

- Breastfeeding assessment and planning tool: staff
- Breastfeeding assessment and planning tool: agency

The documents are in Word. You can print them as is, modify the questions, whatever will be helpful. These documents are for your use, to help you with planning. You do not need to turn them in.

## PowerPoint: Add Local Data to Share with Staff

If you would like a PowerPoint document that you can use to share background on the breastfeeding goals for the nutrition education plan, and add your local data contact the State WIC Breastfeeding Coordinator.

## Setting Breastfeeding Goals

Breastfeeding initiation, duration and exclusivity rates will vary somewhat from month to month (and more in smaller agencies.) Looking at annual reports, or several months of monthly reports, will give you a picture of breastfeeding in your agency and may help you see some areas to work on. If your initiation rates are high, how long are women breastfeeding? For some areas of the state women are stopping in the first days and weeks. Refer to the graph in the background section of this document<sup>5</sup> that shows the impact of exclusively breastfeeding in the hospital on breastfeeding rates. How do we prepare more women and families to be ready and confident to exclusively breastfeed in the hospital? Why do about 4% of WIC participants statewide stop breastfeeding the first day? (And about 12% in the first week.) How can we prepare them to be confident in breastfeeding? How can we work with hospitals and clinics for consistent messaging? The goals that are appropriate for your agency will be different than the goals and needs in another.

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<sup>5</sup> Contact the State WIC Breastfeeding Coordinator if you would like a PowerPoint document that includes this graph and other information from the Background section of this document, with space for you to add local information.

## Appendix A. Copy of 2020 - 21 Breastfeeding Goal 2 and objectives.

### Goal 2:

Increase breastfeeding exclusivity, decrease early cessation of breastfeeding and improve breastfeeding rates for all Minnesota WIC participants.

There are three related objectives.

- Objective 1 relates to assessing needs and monitoring progress.
- Objective 2 relates to counseling, information and building support systems to help women get a great start with breastfeeding
- Objective 3 relates to collaborating with others, with a focus on hospitals, to build continuity of care and consistent messaging.

### Goal 2, Objective 1. Assess breastfeeding rates and needs, set goals, monitor progress.

The State Agency will continue to assess breastfeeding rates and needs, set state goals, and by July 1, 2019 provide guidance to local agency staff for assessing their own rates, setting goals, identifying potential strategies to achieve the goals, and communicating this information to their staff.

- By July 1, 2021 early cessation of breastfeeding among infants born to women who participated in WIC more than 3 months during pregnancy, will decrease 10%, from a baseline of 17% cessation in first two weeks as of the final quarter of 2018 (Minnesota WIC Summary Statistics Report – Breastfeeding for Oct, Nov, Dec 2018) to <15.3% by January 2021.
- By July 1, 2021 statewide exclusive breastfeeding rates for all participants, including all racial/ethnic and cultural identify subgroups, will increase. See *CY excl trends report*, found in Infoview.
- By July 1, 2021 the statewide % of infants receiving the fully breastfeeding food package will increase by 15% from a baseline of 23% (Certification dates 1/1/2019-4/15/2019) to 26.5% as measured by the *Count of Infants Certified by Breastfeeding Amount and State/Agency* Infoview Report. (Also review changes as reported in Infoview Report *Monthly Participation Count of Infants by BF Amount & Age.*)
- If participants receive any formula, they will receive the minimum amount to meet assessed and documented needs; the majority will receive no formula or lower amounts within the mostly breastfeeding category. Review changes as reported in Infoview Report *BF Infants by Cans of Formula Issued and Age, and subtabs MBF by Age Cat & MBF by Age in Mos. (Mostly BF) and SBF by Age Cat and SBF by Age in Mos. (Some Breastfeeding.)*
- By July 1, 2020. 80% of WIC grantees will report they have a contact at the hospital(s) where their participants deliver and at least 40% of WIC grantees will report they have

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completed at least one of the activities identified on the Match Reports for building connections with at least one hospital. By July 1, 2021 this will increase to 90% with a hospital contact and 60% with at least one Match Activity completed.

### **State Agency Activities for Goal 2, Objective 1:**

- Continue to assess breastfeeding rates.
- Set breastfeeding goals.
  - Report on progress toward meeting breastfeeding goals.
- Share breastfeeding guidance:
  - Document for WIC Coordinators/Breastfeeding Coordinators to use to gather staff comments on breastfeeding in their agency and summarize baseline data and trends.
  - PowerPoint document that Coordinators / Breastfeeding Coordinators can use to share information on breastfeeding information related to the 2020/2021 state and local plan and goals.
  - How local staff can use the annual reports to assess baseline information about breastfeeding.
  - How local staff can use Summary Statistics reports to assess early cessation of breastfeeding and set goals.
  - How local staff can use the state use fields to measure breastfeeding exclusivity.
  - How local staff can use Infoview to measure the number of cans of formula provided to participants in their agency.
  - How local staff can collect information on exclusive breastfeeding
  - How local staff can use the information on exclusive breastfeeding.
  - How local staff can identify breastfeeding rates for cultural / ethnic groups within their WIC population.

### **Local Agency Goal 2, Objective 1:**

**By September 1, 2019 and on-going, the local agency will identify breastfeeding promotion and support needs and progress by reviewing breastfeeding rates for their agency.**

Suggested Activities for Local Agencies for Goal 2, Objective 1 (Additional tips on using the reports are found in the breastfeeding guidance document. A document that agencies can use to obtain staff feedback on breastfeeding, and a document to help summarize local breastfeeding information, are also found in the guidance section. Contact the state WIC office for an Excel spreadsheet to use for tracking over time.)

- Use the staff feedback document to gather their views on breastfeeding in your agency.
- If using the state use fields to measure breastfeeding exclusivity, review the data for your agency. (Infoview, see guidance document for more information.)
- If not using the state use fields to measure breastfeeding exclusivity, begin collecting this information. (See Guidance document for more information.)
- Use Infoview to identify the number of cans of formula provided to infants at different ages and breastfeeding statuses. (See Guidance document.)
- If not using the state use fields for collecting additional cultural/ethnic data, consider collecting this information. Contact the state WIC office for information.



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- Review breastfeeding rates for cultural/ethnic groups we serve. (See annual reports in data wheel or, if there is more than one WIC program in your CHB, use the ones in Infoview. See Appendix D.)
- Share information gathered from review of data reports with others in local agency and / or community who are working on promoting and supporting breastfeeding (e.g., other public health programs, hospital, coalition, etc.).
- After reviewing reports, set at least one measurable breastfeeding goal, as appropriate for your agency. A possible format is shown below. There is a space in the online nutrition education plan for your to add your unique goal or goals:
  - By July 2021 breastfeeding (initiation, duration, exclusive breastfeeding, cessation in first two weeks, etc.) will have increased/decreased from baseline of (add baseline information) as of (date) from (name of report) for (agency name)

### **Goal 2, Objective 2. Prepare women for a great start to breastfeeding.**

By July 1, 2019 and on-going, the State Agency will provide information and materials to help local agencies prepare women for a great start to breastfeeding.

#### **State Agency Activities for Goal 2, Objective 2:**

- In collaboration with others, work to identify ways to better promote and support breastfeeding in Somali, U.S.-Born African American, American Indian, and Hmong populations, and identify and/or develop and share information and resources as available.
- Provide breastfeeding materials tailored to specific time periods and for common situations, in print and electronic format, translated into Spanish and Somali, and available on MN WIC website.
- Offer lactation education opportunities.
- Inform local agencies of lactation education training opportunities provided by other organizations.
- Provide information on using Infoview to generate lists of women near their delivery date.

**Local Agency Goal 2, Objective 2:** Our agency will train staff on counseling, materials and referrals to prepare women for a great start to breastfeeding.

#### **Suggested Activities for Local Agencies for Goal 2, Objective 2**

- Within our agency, share and discuss health disparities, breastfeeding rates within racial and ethnic populations in our agency and how to reduce disparities / how approaching each woman as an individual and helping prepare her for a great start in the hospital can help decrease the disparities.
- Review the [Minnesota Breastfeeding Coalition \(MBC\) Prenatal Toolkit](#) as a teaching tool for use in clinic.
- Encourage staff to welcome key support people to WIC appointments. (Dads, grandmothers, friends – as identified by the pregnant woman.)

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- Develop a timeline for reviewing each of the breastfeeding educational materials used in the agency, related supportive materials (such as links to videos or websites) and discuss how staff are using the material / feedback from participants.
- Provide and/or develop and provide a resource list on sources of lactation support in the community.
- If agency has peers, provide an opportunity for WIC staff to meet the peers and encourage referrals for peer support.
- We currently offer or help support a group for pregnant and breastfeeding women, Baby Café, or similar support group and plan to continue this.
- We plan to start or coordinate with others to develop a group for pregnant and breastfeeding women, Baby Café or similar.
- Use peer breastfeeding counselors to reinforce breastfeeding education and provide support during pregnancy, early postpartum and beyond.
- If agency does not have peer counselors, have a WIC CPA contact women near their due date to ask if they have questions and provide support.
- Other activities we plan to help prepare women for a great start in the hospital and early weeks postpartum: There is space in the nutrition education plan to add your unique goals/activities.

State Agency Goal 2, Objective 3: Build support for and decrease barriers to breastfeeding.

Work to build support for breastfeeding and decrease barriers to breastfeeding in the state and places where WIC participants deliver their babies, receive health care, have child care, work, and live by working in collaboration with others.

**State Agency Activities for Goal 2, Objective 3:**

- Participate actively in the Minnesota Breastfeeding Coalition.
- Provide opportunities for building WIC-hospitals collaboration through Coffective Match Reports
- Provide guidance on coordinating with hospitals / using the Match Report toolkit.
- Provide opportunities for WIC breastfeeding coordinators to share their successes and challenges in coordinating with hospitals to develop continuity of lactation care and referrals to WIC.
- Provide opportunities for WIC breastfeeding coordinators to offer feedback on the tools provided with the Match Reports.
- Share information and partner with other programs and organizations as opportunities permit.
- Share information on recognition programs for breastfeeding friendly health departments, worksites, child care and hospitals.
- Share information on the Statewide Health Improvement Program and opportunities for building supportive environments in local communities.
- Share information about local breastfeeding coalitions and resources for developing coalitions.
- Build consistent messages by offering training opportunities to staff from other organizations as opportunities and resources permit. (e.g. “Building Bridges for Breastfeeding”, opening WIC lactation training to other organizations when possible.)
- Conduct outreach to other organizations through exhibits, meetings, networking and other methods to build understanding of WIC as the health, nutrition and breastfeeding program.

**Local Agency Goal 2, Objective 3:**

Share information and collaborate to build support for breastfeeding and decrease barriers to breastfeeding in places where WIC participants receive health care, child care, work, and live.

**Activities for Local Agencies for Goal 2, Objective 3**

- Coordinate with other WIC programs identified on the Match Reports to plan a meeting with one or more local hospitals.
- Develop a plan and timeline to reach out to all hospitals where our participants deliver, in coordination with other WIC programs.
- Participate in Collective Webinars
- Review the tools that accompany the Match Reports and plan related activities.
- Invite staff from a local hospital or hospitals to visit WIC.
- Share WIC referral video with hospital staff (Linked from the bottom of page 2 on the Match Report)
- Share WIC referral document with hospital staff. (Linked from the bottom of page 2 on the Match Report)
- Share WIC brochures and how to order via the outreach materials order form with hospital staff.
- If hospital is on the Baby-Friendly pathway discuss how coordination with WIC can help in achieving [step 10](#), and how WIC helps with step 3.
- Share information with local hospitals on the *Prenatal Education Toolkit* from the Minnesota Breastfeeding Coalition.
- Share information with local hospitals on [MDH hospital recognition program](#).
- Introduce yourself to and collaborate with local staff working on developing plans for the SHIP program.
- Participate in a [local breastfeeding coalition](#).
- Start a local breastfeeding coalition.
- Plan a community networking event to meet and collaborate with others that serve mothers and babies.
- Other local activities: space to write local goal or goals

## APPENDIX B: BF Resources & References for Health Professionals

For a more complete list that can be printed and shared, order through the WIC materials order form or contact the MN WIC Breastfeeding Coordinator.

### Hospital / Clinic Practice and Protocols

- **Academy of Breastfeeding Medicine (ABM):** <http://www.bfmed.org/>  
Membership info, protocols, news releases & more.
- **Baby-Friendly Hospital Initiative:** UNICEF Baby-Friendly USA at 1-508-888-8092 or [info@babyfriendlyusa.org](mailto:info@babyfriendlyusa.org) or <https://www.babyfriendlyusa.org/faqs>  
Evidence for the ten steps to successful breastfeeding. World Health Organization, Geneva, 1998. [http://www.who.int/nutrition/publications/evidence\\_ten\\_step\\_eng.pdf](http://www.who.int/nutrition/publications/evidence_ten_step_eng.pdf)
- **CDC Guide to Breastfeeding Interventions:** Evidence-based interventions, including maternity care practices, support for breastfeeding in the workplace, and others. [http://www.cdc.gov/breastfeeding/pdf/breastfeeding\\_interventions.pdf](http://www.cdc.gov/breastfeeding/pdf/breastfeeding_interventions.pdf)
- **A Breastfeeding-Friendly Approach to Depression in New Mothers:** Curriculum by New Hampshire BF Task Force. 2009. <http://www.nhbreastfeedingtaskforce.org/> (Scroll to bottom of page to find it.)
- **International Code of Marketing of Breastmilk Substitutes “WHO Code”**  
[http://www.who.int/nutrition/publications/code\\_english.pdf](http://www.who.int/nutrition/publications/code_english.pdf) (Open and scroll down to see the document)

### Medications and Potential Contraindications to Breastfeeding

- **Centers for Disease Control.** <http://www.cdc.gov/breastfeeding/disease/index.htm>
- **NIH Toxnet / Lactmed:** <http://toxnet.nlm.nih.gov/cgi-bin/sis/htmlgen?LACT>

### Emergency preparedness

- **Infant Feeding In Disasters.** <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/breastfeeding/documents/infantnutritiondisaster.pdf>
- **Disaster Planning:** Infant and Child Feeding, CDC. <https://www.cdc.gov/features/disasters-infant-feeding/index.html>

### Patient Education and Referral Resources

- **Prenatal Toolkit from the Minnesota Breastfeeding Coalition.** The toolkit is a teaching tool that providers can use as a conversation guide. <https://mnbreastfeedingcoalition.org/prenatal-toolkit-2/>
- **Translated Breastfeeding Information**
  - **Global Health Media Project.** <https://globalhealthmedia.org/videos/smallbaby/> Video clips on expressing milk, cup feeding and more. Several new in 2017. Main page shows the videos available in English. Use the drop down to see videos that are available in other languages (21 languages, including Spanish, Hmong, Vietnamese, more)
  - **Video in Somali promoting exclusive breastfeeding.** (Developed by Allina and Wellshare.) <https://www.youtube.com/watch?v=lbqmqElmpfU>
  - **National Women’s Health Information Center.** Information on-line in English, Spanish, Chinese. *An Easy Guide to Breastfeeding.* (Print version no longer free but can be downloaded.) <https://www.womenshealth.gov/publications/our-publications/breastfeeding-guide/>
  - **Spanish:** <http://www.womenshealth.gov/espanol/publicaciones/nuestras-publicaciones/guia-lactancia/guiafacillactancia-general-espanol.pdf>
  - **WIC Works website:** search by language. <https://wicworks.fns.usda.gov/> includes photos from Alaska that can be downloaded

- **Minnesota WIC Breastfeeding Handouts (electronic version)** Thinking about breastfeeding?, Getting Started with Breastfeeding, First Months of Breastfeeding, Breastfeeding an Older Baby, Dads Are Important, Moms Helping Moms (peer program), Returning to Work or School, Combination Feeding, also see Paced Bottle Feeding (in the infant area.)
  - **English** <https://www.health.state.mn.us/people/wic/nutrition/morenutinfo.html#bfwomen>
  - **Spanish** <https://www.health.state.mn.us/people/wic/bf/spanish.html>
  - **Somali** <https://www.health.state.mn.us/people/wic/bf/bfsomali.html>

### **Working and Breastfeeding**

- **Comprehensive website on breastfeeding and working.** Much information, including solutions, stories and photos from different types of worksites (such as lodging, food service, education, health care, manufacturing, and many more.).  
<http://www.womenshealth.gov/breastfeeding/employer-solutions/index.php>

### **Affordable Care Act / Babies at Work/Breastpumps for military personnel (not covered by ACA)**

- **New Benefits for Breastfeeding Moms: Facts and Tools to Understand Your Coverage under the Health Care Law** <http://www.nwlc.org/resource/new-benefits-breastfeeding-moms-facts-and-tools-understand-your-coverage-under-health-care->
- **Breastfeeding in combat boots.** Breastpumps covered as of June 2015, tips for breastfeeding women in the military, and related information. <https://www.mom2momglobal.org/breastfeeding-in-combat-boots> Tricare lactation policy: <https://tricare.mil/breastfeeding>
- **Parenting in the workplace institute.** Information on policies related to babies in the workplace. <http://www.babiesatwork.org/>

### **MHCP Provider Manual with Breast Pump Policy. (MN)**

- Information on types of pumps and billing codes for MHCP recipients. Open the site. Click on “Billing” and scroll down to the Breast Pumps section.  
[https://www.dhs.state.mn.us/dhs16\\_137814](https://www.dhs.state.mn.us/dhs16_137814)

### **Training Resources**

- **MN WIC Lactation Ed Listing.** All lactation education opportunities in MN and neighboring states that we learn of. Not just for WIC.  
<http://www.health.state.mn.us/people/wic/localagency/bf/bfconted.html>

## Legislation: Work, Indecent Exposure Exemption, TSA

The United States Breastfeeding Committee (USBC) developed a *Guide to the Rights of Breastfeeding Employees in Minnesota*, and several other excellent and comprehensive resources for employees and employers. Guides are being developed for legislation in 28 states, DC, Guam, and Puerto Rico. They are published in the [Online Guide: What You Need to Know About the “Break Time for Nursing Mothers” Law](#) section “[What if your state already has a law?](#)” Each state has a webpage featuring a web version and downloadable PDF of the document. For Minnesota, the [Guide to the Rights of Breastfeeding Employees in Minnesota](#) includes links to the MN Nursing Mothers law and related statutes, such as enforcement; as well as Federal laws. A table provides much additional information, including employees who are covered by State and / or Federal law, and specifics within each law (e.g. frequency, length of time, duration of milk expression breaks, space requirements, much more.) Key Links:

- Online Guide: *What You Need to Know About the “Break Time for Nursing Mothers” Law*: [www.usbreastfeeding.org/workplace-law](http://www.usbreastfeeding.org/workplace-law)
- Guide to the Rights of Breastfeeding Employees in Minnesota: [www.usbreastfeeding.org/workplace-guide-mn](http://www.usbreastfeeding.org/workplace-guide-mn)
- Resource and Referral Guide for Breastfeeding Employees and their Employers: [www.usbreastfeeding.org/workplace-help](http://www.usbreastfeeding.org/workplace-help)
- **Minnesota Law:**
  - **Work Place Support:** <http://www.revisor.leg.state.mn.us/stats/181/939.html>
  - **Indecent Exposure Exemption:** <http://www.revisor.leg.state.mn.us/stats/617/23.html>
- **Legal Protections for Nursing Mothers in Minnesota.** Combines information from Minnesota law and the federal Patient Protection and Affordable Care Act. <http://www.publichealthlawcenter.org/webinar/worksites-breastfeeding-and-your-responsibilities-under-law-2016> <http://www.publichealthlawcenter.org/topics> then choose Healthy Eating, then breastfeeding or <http://www.publichealthlawcenter.org/sites/default/files/resources/Protections%20Nursing%20Mothers%20Sept%202014.pdf>
- **Q. Who should a Minnesota employee call if they are not being provided time or space to express milk at work? A:** For help with these requirements, the employee should call the Minnesota Department of Labor and Industry at (651) 284-5070 or 1-800-342-5354.
- **Bottles and Breastfeeding Equipment Screening Act (BABES Act)** Information on traveling with pumped milk, training for TSA agents. <http://www.usbreastfeeding.org/babes-act>

## Breastfeeding Goals and Rates

- **Healthy People 2020:** (Maternal, Infant and Child Health / infant care / breastfeeding. MICH-21, 22, 23, 24) <http://www.healthypeople.gov/2020/topicsobjectives2020/default.aspx>
- **Breastfeeding data** (national and state): <http://www.cdc.gov/breastfeeding/data>
- **Breastfeeding data** (Minnesota WIC): <http://www.health.state.mn.us/people/wic/localagency/reports/bf/index.html>

## Other

- **Becoming a Lactation Consultant.** IBLCE web site: <http://www.iblce.org/>.

NOTE: Many other resources are available. This is not a complete list of available resources, and is not meant as an endorsement. You are welcome to copy this list. Information subject to change.

Revised April 2019. All links current as of that date. For an updated version local WIC program can order via the WIC materials order form. Others please contact your local WIC program or the Minnesota WIC Program.

Please send updates to [mary.b.johnson@state.mn.us](mailto:mary.b.johnson@state.mn.us).

## APPENDIX C: Breastfeeding Reports and Information in Infoview

### Links for Infoview information

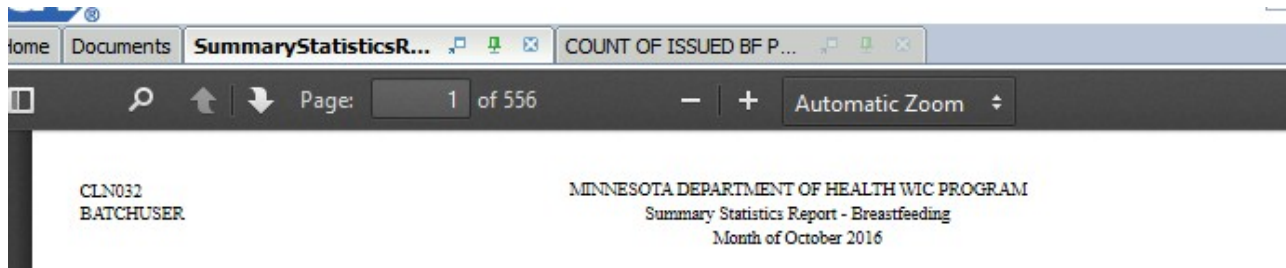
[Information about Infoview](#) is found on the Minnesota WIC website. On this page you will find:

- Infoview Login
- Infoview Guidance Documents
- Infoview Report Templates Reference
- Quick Reference (Infoview basics)
- Infoview Training Modules

### Summary Statistics Breastfeeding

Within Infoview you can find the Summary Statistics Breastfeeding Report that we have used to track breastfeeding rates over time.

Here is a sample of the header on this report. You can see that this is the Summary Statistics Report – Breastfeeding from October 2016. You can use the search feature to find the reports for your agency. If you search from the bottom up you will find the report for the entire agency first, with the clinic reports before that.

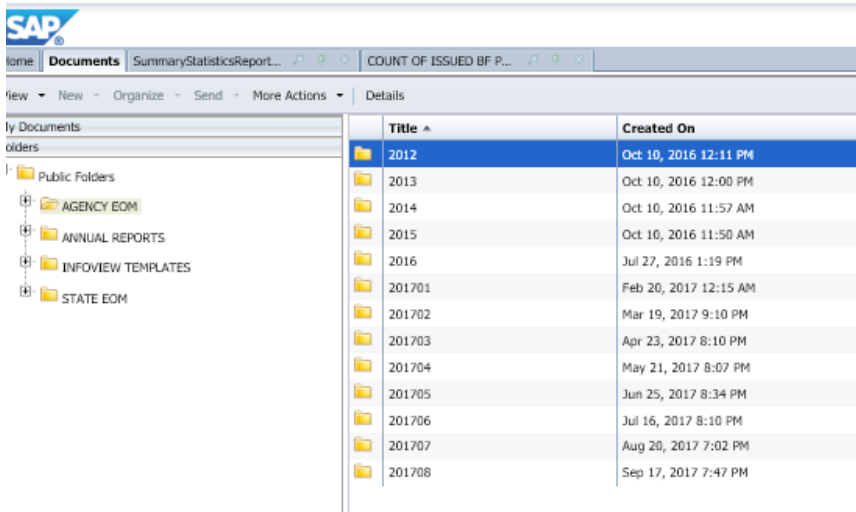




## MINNESOTA WIC BREASTFEEDING GUIDANCE 2020-2021

To find the Summary Statistics Breastfeeding reports

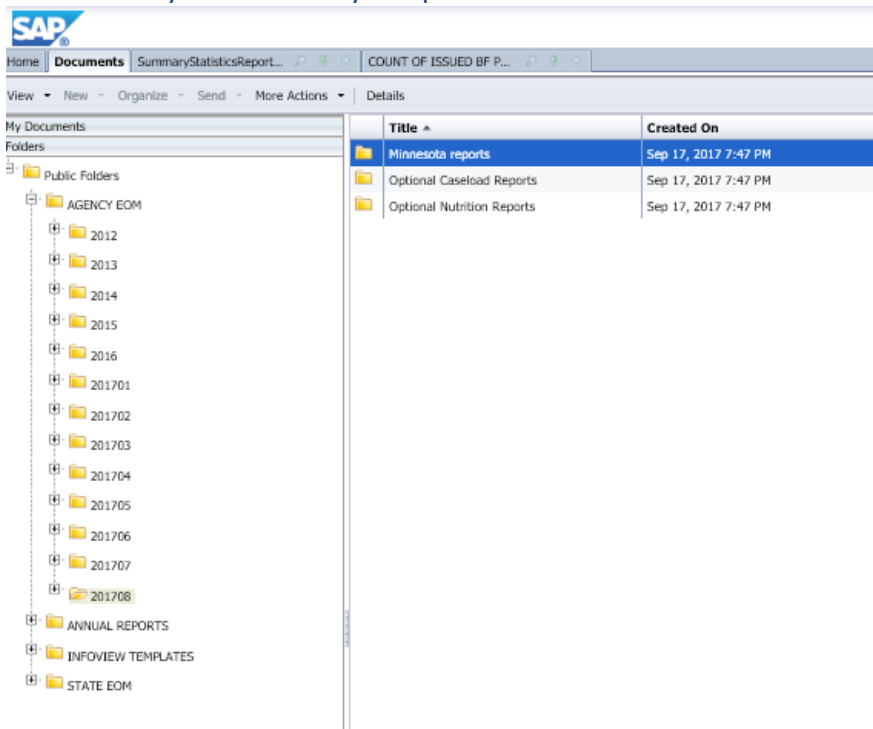
Go to documents (you may need to look towards the bottom of the screen on the left to find the documents folder), public folders, Agency EOM, then you will see the folders by year and the most current year (2017 in this example) files below them. The current year files are listed by month, not yet grouped by year.



The screenshot shows the SAP Documents interface. The left pane displays a tree view of folders under 'Public Folders', including 'AGENCY EOM', 'ANNUAL REPORTS', 'INFOVIEW TEMPLATES', and 'STATE EOM'. The main pane shows a table of folders with columns 'Title' and 'Created On'.

Title	Created On
2012	Oct 10, 2016 12:11 PM
2013	Oct 10, 2016 12:00 PM
2014	Oct 10, 2016 11:57 AM
2015	Oct 10, 2016 11:50 AM
2016	Jul 27, 2016 1:19 PM
201701	Feb 20, 2017 12:15 AM
201702	Mar 19, 2017 9:10 PM
201703	Apr 23, 2017 8:10 PM
201704	May 21, 2017 8:07 PM
201705	Jun 25, 2017 8:34 PM
201706	Jul 16, 2017 8:10 PM
201707	Aug 20, 2017 7:02 PM
201708	Sep 17, 2017 7:47 PM

This is what you will see if you open the 2017 08 folder:



The screenshot shows the SAP Documents interface with the '201708' folder selected in the left pane. The main pane displays a table of folders with columns 'Title' and 'Created On'.

Title	Created On
Minnesota reports	Sep 17, 2017 7:47 PM
Optional Caseload Reports	Sep 17, 2017 7:47 PM
Optional Nutrition Reports	Sep 17, 2017 7:47 PM

Then choose Minnesota reports

# MINNESOTA WIC BREASTFEEDING GUIDANCE 2020-2021

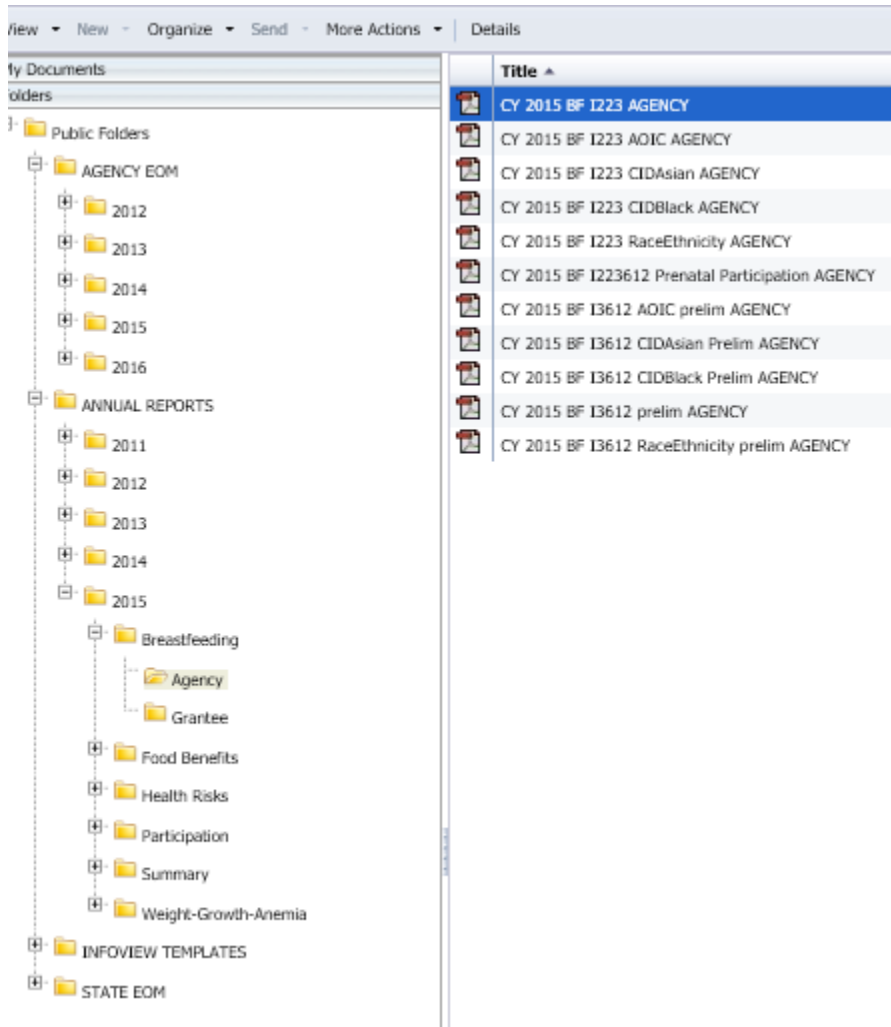
Within the Minnesota reports you will see the Summary Statistics Report-Breastfeeding

The screenshot shows the SAP Documents interface. On the left, a folder tree is visible under 'My Documents' and 'Public Folders'. The 'AGENCY EOM' folder is expanded, showing sub-folders for years 2012 through 201708. Under 201708, there are sub-folders for 'Minnesota reports', 'Optional Caseload Reports', and 'Optional Nutrition Reports'. Other top-level folders include 'ANNUAL REPORTS' and 'INFOVIEW TEMPLATES'. On the right, a table lists documents with columns for 'Title' and 'Created On'.

Title	Created On
Formula Issued - Local Agency Breakdown	Sep 18, 2017 8:04 AM
Formula Issued - State Summary	Sep 18, 2017 8:03 AM
Initial and Closeout Participation by Clinic, Agency and Grantee	Sep 17, 2017 7:49 PM
SummaryStatisticsReport	Sep 17, 2017 7:49 PM
SummaryStatisticsReport-Breastfeeding	Sep 17, 2017 7:50 PM

## Where to find the **Annual reports by agency and grantee**

Annual reports year Breastfeeding choose either agency or grantee (reports are the same as on the data wheel by county)



## APPENDIX D: Breastfeeding Reports and Information Found on the Data Wheel and in Infoview

### Breastfeeding Initiation

- ***Breastfeeding Initiation and Duration at Two Weeks and Two, Three, Six and Twelve Months for Minnesota WIC Infants by CHB of Residence:*** use this one: <https://www.health.state.mn.us/people/wic/localagency/reports/bf/annual/index.html>
- ***Breastfeeding Initiation and Duration at Two Weeks and Two, Three, Six and Twelve Months for Minnesota WIC Infants by Agency (this is the title on the report);*** Infoview. Report title **CY 2018 BF AGENCY (this is the title of the file)**. Infoview/Folders/Annual Reports/2018/Breastfeeding then choose agency or grantee.
- ***Summary Statistics Breastfeeding.*** Breastfeeding initiation for infants with mothers on WIC longer than 3 months in pregnancy, compared to all WIC participants. Infoview/Folders/Agency EOM/ (desired year/desired month). Screen shots are found in the 2018/2019 Guidance Document for information on finding and using the Summary Statistics breastfeeding reports.

### Breastfeeding Rates/Race Ethnicity

- ***Breastfeeding initiation by race / ethnicity – data wheel.*** ( <https://www.health.state.mn.us/people/wic/localagency/reports/bf/annual.html> )
- ***Breastfeeding Initiation and Duration at Two Weeks and Two, Three, Six and Twelve Months for Infants in the Minnesota WIC Program by Race/Ethnicity-data wheel*** (2012 to 2017), Initiation, duration to 2 weeks, 2, 3, 6 and 12 months for state and by region. Total, American Indian, NH, Asian NH, Black NH, White NH, > 1 race and Hispanic all races.)
- ***Breastfeeding Initiation and Duration at Two Weeks and Two, Three, Six and Twelve Months for Infants in the Minnesota WIC Program by Unduplicated Race/Ethnicity-data wheel*** (By calendar year for CHB, County, or City. Total, American Indian, NH, Asian NH, Black NH, White NH, > 1 race and Hispanic all races) Similar reports in Infoview by agency and grantee. (In **Infoview** the report is called **CY 2018 BF Agency** and is found in: documents/ Annual Reports/2018/Breastfeeding and then choose either the agency or grantee folder. As of July 2019 the 6 month and 12 month rates are not available for CY 2018. Use the CY2017 report for 6 and 12 months.)
- ***Breastfeeding Initiation and Duration at Two Weeks and Two, Three, Six and Twelve Months for Asian Infants in the Minnesota WIC Program by Cultural Identity-data wheel*** (Similar to report above. Includes data for Total Asian, Hmong, KaRen, Bhutanese Nepali, Cambodian, Karenni, Laotian, Vietnamese, and other.) Scroll down in the *Unduplicated Race/Ethnicity* area to find this report. We encourage you to use State Use Question #6 – Cultural Identity.

### Breastfeeding cessation and duration.

- ***Summary Statistics Breastfeeding.*** Breastfeeding initiation and early breastfeeding cessation by days, and by WIC participation more than 3 months in pregnancy and all. See information on Summary Statistics Breastfeeding Reports, including screen shots, in NEP Guidance 2018/2019.
- ***CY 2018 BF prenatal participation Agency.*** Breastfeeding initiation and duration by months of prenatal maternal participation in WIC. Infoview/Folders/Annual Reports/2017(or 2018)/Breastfeeding/ Agency (or Grantee)/Prenatal Participation.
- ***Breastfeeding Initiation and Duration at Two Weeks and Two, Three, Six and Twelve Months for Minnesota WIC Infants by CHB of Residence.*** See the breastfeeding initiation section above for more detail on accessing these reports.

- **WIC Health Indicators Summary. Infoview.** Compares breastfeeding initiation and duration to 1, 3, 6 and 12 months for 2012 and 2016. Infoview/Folders/Annual Reports/Nutrition Ed Plan / Health Indicators

## Breastfeeding exclusivity

- **Report name: *CY excl trends sel CIDs Agency (or Grantee) Infoview.*** Annual reports / Multi-year / Breastfeeding /Exclusivity/Race/Ethnicity and Cultural Identify – choose either Agency or Grantee. (This report uses information gathered from the special use fields and will be more accurate for your agency if you gather information through the special use fields.) For more detail on exclusivity and how to collect the data see ***Breastfeeding Exclusivity (State Use Code #1) by Race/Ethnicity Guidance Document*** in Infoview templates / state use questions / #1-breastfeeding exclusivity.

## Fully Breastfeeding Food Package Issuance / Tailoring

- ***Count of Infants Certified by Breastfeeding Amount and State, Agency and Clinic. Infoview.*** Provides count and % of Fully BF, Mostly BF, Some BF and not BF by agency and clinic. Infoview folders/Infoview templates / Breastfeeding/ Count of Infants Certified by BF Amount for State, Agency & Clinic.
- **Other Infoview reports for more detail on food package issuance:**
- ***Infants by BF Status, Cans of Formula Issued & Age (Agency)*** Infoview folders/Infoview templates / Breastfeeding/ Count of Infants Certified by BF Amount for State, Agency & Clinic. The tab ***MBF by Age in Mos.*** Shows % of infants with various amounts of formula by months and can be used to help asses if packages are being tailored to the minimum amount of formula needed.
  - Additional tabs on this report include SBF by Age in Mos. Large quantities (Clinic ID, State WIC ID, and # cans) and Infant details (ID, age, quantity/description of formula issued, and more detail.)

## Reasons breastfeeding stopped.

- ***BF Stopped Reasons*** -Infoview: BF Stopped Reasons. Tab two provides a list of the reasons for breastfeeding cessation, for the specified time frame, by agency. Infoview/folders/Infoview templates/Breastfeeding/BF Stopped Reasons.

## Tips:

- Each Infoview Report has an accompanying Guidance Document. The Guidance Document will be helpful in finding and using the report.
- If you print these reports check your printer settings. Some reports are landscape or legal size.

## APPENDIX E: Healthy People 2020 Breastfeeding Goals

MICH-21 Increase the proportion of infants who are breastfed

**MICH-21.1 Ever**

Baseline: 74.0 percent of infants born in 2006 were ever breastfed as reported in 2007–09

Target: 81.9 percent

Data Source: National Immunization Survey (NIS), CDC, NCIRD, and NCHS

**MICH-21.2 At 6 months**

Baseline: 43.5 percent of infants born in 2006 were breastfed at 6 months as reported in 2007-09

Target: 60.6 percent

Data Source: National Immunization Survey (NIS), CDC, NCIRD, and NCHS

**MICH-21.3 At 1 year**

Baseline: 22.7 percent of infants born in 2006 were breastfed at 1 year as reported in 2007–09

Target: 34.1 percent

Data Source: National Immunization Survey (NIS), CDC, NCIRD, and NCHS

**MICH-21.4 Exclusively through 3 months**

Baseline: 33.6 percent of infants born in 2006 were breastfed exclusively through 3 months as reported in 2007–09

Target: 46.2 percent

Data Source: National Immunization Survey (NIS), CDC, NCIRD, and NCHS

**MICH-21.5 Exclusively through 6 months**

Baseline: 14.1 percent of infants born in 2006 were breastfed exclusively through 6 months as reported in 2007–09

Target: 25.5 percent

Data Source: National Immunization Survey (NIS), CDC, NCIRD, and NCHS

**MICH-22 Increase the proportion of employers that have worksite lactation support programs.**

Baseline: 25 percent of employers reported providing an on-site lactation/mother's room in 2009

Target: 38 percent

Data Source: Employee Benefits Survey, Society for Human Resource Management (SHRM)

**MICH-23 Reduce the proportion of breastfed newborns who receive formula supplementation within the first 2 days of life**

Baseline: 24.2 percent of breastfed newborns born in 2006 received formula supplementation within the first 2 days of life as reported in 2007–09

Target: 14.2 percent

Target-Setting Method: 10 percentage point improvement

Data Source: National Immunization Survey (NIS), CDC, NCIRD, and NCHS

**MICH-24 Increase the proportion of live births that occur in facilities that provide recommended care for lactating mothers and their babies**

Baseline: 2.9 percent of 2007 live births occurred in facilities that provide recommended care for lactating mothers and their babies as reported in 2009

Target: 8.1 percent

Data Source: Breastfeeding Report Card, CDC, NCCDPHP

Background on the HP 2020 Goals and Objectives: <http://www.healthypeople.gov/2020/about/default.aspx>

### MINNESOTA WIC PROGRAM

Minnesota Department of Health

PO Box 64882

St. Paul, MN 55164-0882

1-800-WIC-4030

[www.health.state.mn.us](http://www.health.state.mn.us)

07/16/2019

07\_16\_2019\_BF\_GuidanceNEP2020\_2021\_FINAL

*To obtain this information in a different format, call: 1-800-WIC-4030*