

## Self-study Module to accompany the DVD: Breast is Best

### Introduction

This module can assist you to learn more about the importance of breastfeeding, practices that facilitate breastfeeding and how the environment affects breastfeeding. There are two parts:

1. Questions to think about for your learning and to discuss with others;
2. Twenty multiple choice questions to test yourself – don't look at the answers until you are finished!

The DVD is 45 minutes long. However, you will probably stop at sections to look again and take time to think about the questions. It will take longer than 45 minutes to complete all the questions. You may wish to divide your study into sections on the various topics.

### Learning Outcomes

The targeted learner is a health worker, volunteer counsellor, or other person assisting mothers and babies, though parents expecting a baby or with a new baby may also find the information useful.

After watching the DVD, considering the questions, and responding to the test questions, the learner should be able to:

1. List some reasons why breastfeeding is important to both mother and child;
2. Describe what practices can hinder and what practices can support breastfeeding both in the early days of establishing breastfeeding and later;
3. Provide basic techniques that can be helpful in situations such as a sleepy baby, plugged duct / mastitis, preterm birth or following a caesarean section;
4. Explain how long breastfeeding can continue for;
5. Relate the information presented in the DVD to the learner's local situation.

### The DVD is available from:

Video Vital AS, PO 5058 Majorstua, 0301 Oslo, Norway

Tele:+ 47 22554588 Fax:+4722561991 Email: [health-info@videovital.no](mailto:health-info@videovital.no)

Norwegian Resource Centre for Breastfeeding  
(Women and Children's Division)  
Oslo University Hospital, Rikshospitalet  
P.O. Box 4950 Nydalen, 0424 Oslo, Norway  
Phone: +47 23075400

The DVD is also available from [www.bestservices.ie](http://www.bestservices.ie) as well as other stockists of breastfeeding resources.

A Facilitator's Discussion Guide is available to download from [www.bestservices.ie](http://www.bestservices.ie)

The text of this Self-study module was prepared by Dr Genevieve Becker, IBCLC for the Norwegian Resource Centre for Breastfeeding/ Video Vital.

This module is available in English and Norwegian. Other languages are planned. Please contact the Norwegian Resource Centre for Breastfeeding to discuss translation rights.

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### Questions to think about during and after viewing the DVD

1. How does the culture or community that you live in support or hinder breastfeeding? Is breastfeeding recognised as important for baby? For mother?
2. How does the environment around you support or hinder breastfeeding? Is a mother welcome to breastfeed anywhere? Would the mother feel comfortable? How would those around her feel about her breastfeeding? Are there any laws to protect breastfeeding in public places?
3. What are the current breastfeeding rates in your area? Were the breastfeeding rates different in the past? Was breastfeeding in the early days more common or less common? And what about breastfeeding after the first few weeks?
4. Consider the information presented on the importance of breastfeeding to mothers. Do women recognise breastfeeding as valuable to themselves (not just to the baby)? Do you hear mother focused benefits discussed in your area?
5. If a baby is not breastfed what does it cost? There is formula, equipment, boiling water, cleaning and what else?
6. Try to observe a newborn baby in skin-to-skin contact with mother. Is baby dried well and covered – but not wrapped? Can you notice the baby making calling sounds, moving towards the breast, searching for the nipple?
7. Are practices different if the birth is by caesarean section?
8. Consider the information presented on the importance of breastfeeding to the infant and later in life. Was any of these protections and benefits new information to you? Do you think most expectant parents would be aware of all of these benefits?
9. What hospital practices can help starting to breastfeeding? Are these practices found in hospitals in your area?
10. What hospital practices can hinder starting to breastfeeding? Are these practices found in hospitals in your area?
11. The first few days after the birth can be hard work. Many babies want to be at the breast nearly the whole time. How could you explain this to a new mother and show how it is normal and natural behaviour for a newborn infant?
12. Try to observe a young infant just before feeding. What feeding cues can you notice and point out to the mother?



13. There are many different positions for the mother when breastfeeding: lying down, sitting in a chair, sitting on the floor, leaning over the baby, and others. Look the positions of the mothers in various sections of the DVD. What can you observe about the mother's back, her feet, and her arms? How would you feel in these positions?
14. There are many different positions for the baby too. Look the positions of the baby in various sections of the DVD. What can you observe about the baby's back/body, neck, head, and arms? Where is the baby in relation to the mother's body? Can you hold a baby or a (heavy) doll in these positions?
15. Are preterm or ill infants carded for in conjunction with the parents or are parents only visitors to the neonatal unit?
16. Expressed milk can be stored for later use. Are the times given in this DVD similar or different to the storage times given in other information that you use?
17. Being a mother is hard work and mothers get tired. Sleeping with baby, or with baby nearby, can help a mother to rest. In the DVD, observe how the baby is kept safe when co-sleeping. What can you see – position of baby, face clear, position of other people relative to the baby, blankets, pillow? Are there any guidelines for parents from hospitals, health authority or in the general community about co-sleeping?
18. Where would a new mother find mother-to-mother support in your area?
19. Some mothers do not breastfeed. Consider what practices presented in this DVD would also apply to the mother and baby not breastfeeding. Is skin to skin contact just for breastfeeding babies or for all babies? What other practices?
20. In your country, does a mother have rights to paid maternity leave and lactation breaks when she returns to work? How much time is there? Is the mother paid her full salary?
21. What are the ministry of health (or other national or regional authority) recommendations about the length of exclusive breastfeeding and continuing breastfeeding after other foods are added?
22. In the DVD you can see the older baby eating broccoli and then a piece of bread. Babies are used to controlling their feeding when breastfeeding because the baby decides to take the breast into her/his mouth and to suck or not to suck. Do you think an older baby can decide when to eat solid foods, what foods to eat and how much to eat?
23. Do you know women who have continued to breastfeed during the next pregnancy? And to breastfeed a baby and older child? What do you think of this practice? If possible, talk to one or more mothers who have done this and discuss why they feel it is beneficial to continue breastfeeding as a child gets older.

**Self-Study Module: Breast is Best DVD****Answer Sheet**

**CIRCLE THE LETTER OF YOUR ANSWER FROM THE QUESTION SHEET:  
(Be sure to mark only one answer on each line.)**

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| 1.  | (a) | (b) | (c) | (d) |
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| 19. | (a) | (b) | (c) | (d) |
| 20. | (a) | (b) | (c) | (d) |

## Self-Study Module: Breast is Best DVD      Questions to Test Yourself

1. When the baby is in a nursery and only brought to the mother for feeding at intervals, the effect on breastfeeding is most likely to be all of the following EXCEPT:
  - a. The regular routine ensures the baby feeds well when he/she goes to mother
  - b. Baby uses energy crying which affects weight gain and blood sugar levels
  - c. Supplements are more likely to be used to reduce crying
  - d. Mother's milk supply may be low if breasts are not stimulated.
  
2. Breastfeeding is important for the health of mothers. Women who breastfeed are likely to have lower risks in later life of all of the following EXCEPT:
  - a. Breast cancer
  - b. Diabetes
  - c. Obesity
  - d. Macular degeneration
  
3. When a healthy, alert newborn infant is put on the mother's abdomen, the infant is MOST likely to:
  - a. Move towards the breast and when the baby can hear the mother's heartbeat and smell the milk and areola, to relax and go into a deep sleep.
  - b. Rest on the mother's abdomen in a quiet, alert state until brought to the breast by the mother or health worker, and then baby starts to suckle.
  - c. Make small calling sounds, move her mouth and tongue, put hand to mouth, and move towards the breast by her/himself.
  - d. Rest on the mother's abdomen in a quiet, alert state until brought to the breast by the mother or health worker, and then nuzzle and lick the breast with no real suckling taking place at this time.
  
4. When observing a baby suckling, generally you see the chin touching the breast and small gap between nose and breast. If you thought the nose was not clear, which of the following might you do FIRST to help the baby breathe easier:
  - a. Position the baby more upright and let the baby tilt his/her head back more.
  - b. Ask the mother to use her finger(s) to compress her breast in front of her baby's nose.
  - c. Suggest that the mother use her hand on the baby's back to bring the baby's chest closer into the mother's body.
  - d. Help the baby to re-attach and to take in more of the underneath part of the breast.
  
5. When describing the baby's effective latch on the breast, this DVD uses the analogy of which of the following to illustrate a good latch:
  - a. Mouth open as if sucking strands of spaghetti
  - b. Mouth open as if taking a bit of a hamburger in a bun
  - c. Mouth open as if sucking on a section of an orange
  - d. Mouth open as if sucking milk through a straw
  
6. Many young infants spend time searching, rooting or bobbing at the breast before attaching. All of the following statements are true about this searching EXCEPT which one:
  - a. This searching is an indication that the infant needs help to attach correctly
  - b. This searching helps prepare the breast, stimulate hormones and help the nipple to protrude
  - c. This searching starts the baby's digestive system working and is a normal action
  - d. This searching helps to ensure the baby is fully alert and ready to attach. →

7. If a young baby needs some assistance to attach to the breast effectively, which of the following statements is TRUE:
- Start with the nipple opposite the baby's mouth, tease the lower lip with the nipple, and offer the breast so that the breast is centred in the baby's mouth.
  - Start with the nipple opposite the baby's nose, tease the baby's upper lip with the nipple, and offer the underside of the breast so it is the first part of the breast into the baby's mouth.
  - Start with the nipple opposite the baby's nose, tease the lower lip with the nipple, and offer the topside of the breast so it is the first part of the breast into the baby's mouth.
  - Start with the nipple opposite the baby's mouth, tease the baby's upper lip with the nipple, and offer the breast so that the breast is centred in the baby's mouth with the nipple pointing slightly towards the roof of the mouth.
8. You could suggest to parents that a sleepy baby can be encouraged to wake up and feed by all of the following ways EXCEPT:
- Skin to skin contact with mother so baby can smell the breast
  - Run a finger nail along the underside of the baby's foot
  - Massage of both cheeks at the same time
  - Gentle movement of the baby
9. This DVD describes care of the breast and nipples. Which of the following statements is TRUE?
- Nipples need to be kept dry; any milk left on the nipples should be washed off and the nipples patted dry.
  - Nipples need to be kept moist; any milk left on the nipples should be massaged into the nipple area and then the bra or clothing put on while nipples are still moist.
  - Nipples need to be kept dry; after feeding dry nipples in the air before putting the bra or clothing on.
  - Nipples need to be kept moist; after each feed put a mild cream over all the nipple area to seal in the moisture.
10. Some women have flat or inverted nipples. All of the following techniques are demonstrated in this DVD and may help these nipples to stretch and come out EXCEPT which one:
- Stimulate the nipple area by gentle handling
  - Use a pump to extend the nipple
  - Use a suitable sized nipple shield
  - Use a large, upside down and cut syringe to pull out the nipple
11. Which of the following statements is NOT true:
- Massaging the mother's back can help the milk to flow
  - When the baby pats the mother's breast this encourages the milk to flow
  - Waiting until the breast is full can help the milk to flow easier
  - Carrying the baby in close contact helps milk supply



12. This DVD demonstrates a technique to use on an engorged breast to make it easier for the baby to attach. This technique is done in which of the following ways:
- Support the breast by placing a folded cloth under the breast so that the breast is not hanging downwards and the nipple is pointing upwards
  - Use the hand held flat along the top of the breast to keep the full breast back from the baby's nose
  - Alternatively place warm and cold cloths on the breast until it softens sufficiently for the nipple to protrude
  - Place the finger tips in a circle near the edge of the areola and gently press inwards, and move fingers to a new position after a few minutes.
13. This DVD suggests practices that can support breastfeeding and practices that can hinder breastfeeding. Which of the following statements BEST summarises practices that can support the establishment of breastfeeding for an individual mother and her baby?
- Telling pregnant women the importance of breastfeeding to her and to her baby both in the short term and later in life
  - Skin to skin contact immediately after birth, keeping baby close, responding to feeding cues, holding baby in a position that makes it easier for baby to attach
  - Showing mothers how to position themselves and baby correctly, how to deal with sore nipples and with sore breasts
  - Environment and community that supports mothers to breastfeed when away from home and to continue breastfeeding after returning to employment
14. When a mother's breast has a painful red area that may be swollen, a temperature and flu-like symptoms, she is likely to have a plugged duct or maybe mastitis. Which of the following set of recommendations would be BEST for you to suggest to this mother?
- Before starting to feed, soak the breast in warm water and firmly massage all areas of the breast in a circular pattern to start the milk flowing, and position the baby so that he/she is sucking "uphill" which will give a stronger suck and empty the breast better
  - Use a pump or hand express after each feed by the baby; while the milk is flowing massage both breasts towards the nipple
  - Just before feeding warm the breast, position baby so there is least pressure on sore area, check for good attachment, feed or express at least every two hours,
  - Check the baby is attached well, feed frequently, keep warm and rest, contact the doctor for an antibiotic that is suitable when breastfeeding
15. New parents ask you what they can do to help their preterm baby. You might give all of the following information to these parents EXCEPT which information?
- A preterm baby can recognise her/his own mother and is more alert when in contact with mother
  - A preterm baby uses a lot of energy just to breathe and survive; providing additional stimulation to the baby can put the baby under stress
  - When a preterm baby is held in skin to skin contact at the breast, the baby's oxygen intake is higher and baby is warmer than in an incubator
  - A preterm baby can be tube fed while resting at his/her mother's breast and this helps to associate the breast with feeding



16. The baby signals an interest in feeding long before he/she starts to cry. Early feeding cues include all of the following EXCEPT:
- Hand to mouth and brief sucking on fist
  - Eyes open and squirming / whole body moving, arms moving
  - Tongue extending and “mouthing” occurs
  - Small sounds but not crying
17. Human milk is full of protective antibodies that support and mature the baby’s own immune system. According to the information in this DVD, which of the following statements is NOT true? Compared to formula-fed infants:
- babies who are breastfed are much less likely to get serious urinary tract infections and ear infections
  - babies who were breastfed have a lower risk of lung infections for years after the breastfeeding ended
  - babies who were breastfed are more likely to be physically active and thus at less risk of accidents
  - babies who are breastfed have a lower risk of cot-death and childhood cancer
18. Following a caesarean section and a healthy mother and baby, which of the following practices is BEST for assisting breastfeeding to become established?
- Immediately suction baby’s airway to remove mucus so the mucus does not go into baby’s tummy, which would give a feeling of fullness and less interest in sucking
  - Place baby in skin to skin contact with father so the baby remains warm and hears reassuring heartbeat, and then place on mother’s chest in the recovery room
  - Dry baby thoroughly and give immediately to the mother for skin to skin contact, covering both mother and baby for warmth
  - Keep mother and baby together when moving from recovery area to mother’s room
19. This DVD suggests practices that can support breastfeeding and practices that can hinder breastfeeding. Which of the following set of practices are NOT recommended when supporting breastfeeding?
- Introducing solid foods to all babies from four months of age, and continuing breastfeeding into the second year
  - Discussing with a pregnant woman the importance of breastfeeding to her and to her baby both in the short term and later in life
  - Safe co-sleeping and keeping baby close
  - Environment and community that supports mothers to breastfeed when away from home and to continue breastfeeding after returning to employment
20. Continuing to breastfeed when the child is older and during a pregnancy can include many benefits EXCEPT which of the following:
- The hormones of breastfeeding reduce the risk of miscarriage or early labour
  - Milk continues to provide antibodies to protect the child from illness
  - Breastfeeding helps the child’s own immune system to develop
  - The mother can sit and have a rest while child is at her breast

### END of QUESTIONS

The answers are meant to be upside down so that you do not accidentally read them before you complete the questions to test yourself.

1.	(a)	(b)	(c)	(d)
2.	(a)	(b)	(c)	(d)
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### Answers to Test Yourself