



2024 NZLCA CONFERENCE

Watch Online: 9 February to 3 March 2024

This is an online conference offering pre–recorded sessions which can be viewed at any time between 9 February and 3 March 2024.

Lactation Consultants and Breastfeeding Advocates from around the world are supporting NZLCA to provide you with up-to-date information and recommended best practices.

Accreditation

Total CERPs Allocated: 14.5 L and 6.25 E CERPs

Recognition Number: C202403
Pre-Exam Education Hours: 20.75

This event has been approved up to 20.75 hours by the NZ Midwifery Council.

Certificates will be provided based on the number of online presentations completed.

Registration fees

Member Earlybird prior to 5 December 2023 \$365 Member Full prior to 5 December 2023 \$415

Non-Member Earlybird prior to 5 December 2023 \$415 Non-Member after 5 December 2023 \$465

Evidence of NZLCA 2024 membership will be required for the member rate. Fees are in NZ dollars and include GST.

Your invitation to the NZLCA 2024 Online Conference



On behalf of the Board of the New Zealand Lactation Consultants Association, I have great pleasure in inviting you to attend this 2024 event – Mā to kotahitanga e whai kaha ai tātou: In Unity We Find Strength.

NZLCA has worked to provide a wide range of presentations to help you gain sufficient education hours to maintain your practice requirements. We have responded to your feedback and suggestions for topics and have provided a wide variety of high-quality international presentations along with a focus on New Zealand presenters, as you requested.

To get the best from this conference, we suggest that you register early, and allocate plenty of time, as if you were attending a face-to-face conference. Submit your applications for study leave or annual leave to your employer early (even earlier if you're applying for them to pay your earlybird registration fee) and be ready to enjoy some amazing presentations.

Before registering for this conference please note that there will be no extension of time after 3 March 2024, so please don't leave things until the last minute. Start on 9 February and pace yourself to watch as few or as many presentations as you choose over a 24-day period. There is no requirement to watch all the sessions offered. Your certificate will be amended accordingly.

Join me online, as leaders and change-makers help us to work towards our national goal:

"To advance the IBCLC profession in Aotearoa/ New Zealand through leadership, advocacy, professional development and research" In addition, we also invite you to attend our AGM at 7:00 pm on 20 February 2024.

Bev Pownall 2024 Conference Convenor

About the Conference

CONFERENCE FOCUS

This conference is designed for us to continue our learning utilising online opportunities around Aotearoa New Zealand and beyond.

CONFERENCE OBJECTIVES

- to provide a high quality, international event with opportunities to increase skills, knowledge and gain continuing education hours
- to challenge all participants to consider their own role in relation to climate change, food security, and civil defence emergencies
- to highlight factors that may influence how we communicate within our practice situations
- to provide opportunities for participants to reflect on their current practice, including a wide range of complex breastfeeding difficulties
- to network with other breastfeeding supporters via social media, to share ideas and developments.

ABOUT NZLCA

The New Zealand Lactation Consultants Association (NZLCA) is the professional association of the International Board Certified Lactation Consultant (IBCLC) in Aotearoa New Zealand. NZLCA members have all passed a fully accredited examination set by the International Board of Lactation Consultants Examiners (IBLCE). Opportunities for education provided by NZLCA for members and interested health professionals include workshops, and conferences which cover many aspects of lactation, often provided by international presenters.

For further information and to join NZLCA or renew your membership please go to: www.nzlca.org.nz

CANCELLATION & REFUND POLICY

No live sessions will be offered. Access to the pre-recorded presentations will be available from 9 February to 3 March 2024. Handouts will be available for downloading. No presentations will be available after 3 March 2024. No refund will be provided to those who do not access the presentations during the availability period.

NZLCA reserves the right to amend, postpone or cancel this event due to unforeseen circumstances. In such circumstances, every effort will be made to contact participants by email and/or phone in good time, and a full refund of registration fees will be offered but NZLCA will accept no further liability.

SPONSORSHIP OR EXHIBITING

NZLCA welcomes sponsorship from WHO Code (and subsequent WHA Resolutions) compliant companies. For further information please contact megan@allsortedlifestyle.co.nz

CONFERENCE DISCLAIMER

Statements of fact or opinion expressed by speakers are solely the responsibility of those speakers. NZLCA does not assume responsibility for the accuracy of the material and such material does not represent the official policy, opinion, recommendation, or endorsement of NZLCA. The appearance and content of advertisements contained in the final programme or registration inserts do not constitute a guarantee or an endorsement of the quality or value of the advertised products or services or of the claims made for them by their advertisers.

SPEAKER DISCLOSURES

Alison Hazelbaker discloses she is the owner of Aidan and Eva Press, LLC; and PanSophia Press, LLC; Lyndsey Hookway discloses royalties on books and course fees from educational programmes; Cecilia Tomori discloses royalties on books and has received research grants from the University of Michigan, John Hopkins University, NIH, HRSA and WHO.

All speakers will record a disclosure or non-disclosure at the beginning of their pre-recorded presentation. No other presenters have disclosed any affiliations which may have a bearing/ conflict of interest on the subject matter of their presentation.

2024 CONFERENCE PROGRAMME

JANET McGUINESS



Janet McGuinness, (BMid, IBCLC), has been working with mothers and babies for over 20 years. First as a registered midwife in New Zealand and then Ireland, where she developed a passion for working with mothers struggling to breastfeed. This inspired her to qualify as an IBCLC. She now solely operates Wai U Tairāwhiti, a community lactation consultant service in Gisborne/Tairāwhiti. Janet, a mother of 3, finds great joy in helping mothers grow in confidence to overcome the challenges of breastfeeding. 'Women are amazingly strong and resilient, and it is during breastfeeding and mothering challenges that she sees this the most.'

Cyclone Gabrielle: Experiences of a Tairāwhiti/Gisborne Lactation Consultant and colleagues during an emergency.

60 minutes | 1.0 L CERP

In February 2023 Cyclone Gabrielle hit the North Island of New Zealand. It caused flooding, landslides, loss of power and communication in many areas of New Zealand. Tairāwhiti/ East Coast region was without power for a time, lost all forms of communication for several days, ran out of water after the main waterline was swept away and was cut off from the rest of the country on both north and south roads. In emergencies, breastfeeding remains the safest, most nutritious and reliable food source for infants under the age of six months. This presentation will cover the experiences of a community lactation consultant and colleagues serving the Tairāwhiti area, the challenges that arose and the plans that were put in place to protect breastfeeding and aid the mothers of the East Coast.

LEARNING OBJECTIVES:

- 1. Learn about what happened post cyclone on the East Coast of New Zealand.
- 2. Identify risks and challenges that a lactation consultant may face in an emergency situation.
- 3. Create a plan for management and preparedness to enable you to continue to protect breastfeeding in an emergency.

NAOMI HULL



Naomi Hull (RN, IBCLC, MPH, Cert IV Breastfeeding Education (Counselling)) is a Registered Nurse, an IBCLC, volunteer Breastfeeding Counsellor and has a Master of Public Health (Nutrition). While completing her MPH she focused her dissertation on a review of stakeholder's perceptions of the implementation of the Australian National Breastfeeding (ABA) Strategy (2010-2015). Since then, she has gone on to lead and coordinate a national team in two assessments of Australian breastfeeding policies and programmes using the World Breastfeeding Trends Initiative (WBTi) Assessment Tool. Naomi feels strongly about removing the structural barriers to ensure women and babies are supported to breastfeed as long as they desire.

LIBBY SALMON



Libby Salmon (BVSc MVS PhD) is a researcher interested in regulation of women's food production for infants and young children through breastfeeding. She has just completed a PhD at the Australian Research Centre for Health Equity, School of Regulation and Global Governance, Australian National University, Canberra, on 'Sharing human milk in Australia: challenging regulatory regimes for infant feeding.' With qualifications and experience in agricultural systems and veterinary science policy and practice, Libby worked with Associate Professor Julie Smith from 2013 as a research associate at the Australian Centre for Economic Research on Health at ANU on a study of breastfeeding and childcare, and rapid evidence reviews for WHO on marketing of breastmilk substitutes and complementary foods and the 2018 ABA Strategy. Libby is a

breastfeeding counsellor with the ABA and a member of the core committee of the World Breastfeeding Trends Initiative (Australia).

Building Policy Coalitions: A Case Study of Reframing Breastfeeding Around First Food Security in Australia

75 minutes | 1.25 E CERPs

Emergencies and climate change increase the vulnerability of infants and young children, yet, in many countries, breastfeeding is missing in disaster planning and policy. In addition, commercial power continues to interfere in government investment in breastfeeding. These two problems can be tackled by reframing breastfeeding as 'first-food security,' to develop the urgency, coalitions and political will to shake up conventional views on infant and young child feeding.

- 1. Identify at least 1 example of how commercial power can interfere with infant feeding policy making.
- 2. Define breastfeeding as a 'first food security' issue for emergencies, everyday households and natural disasters and the impacts of climate change.
- 3. Discuss a local example of how to seize a political opportunity through a coalition of breastfeeding organizations (WBTi team, Australian Breastfeeding Association) and academics, using a case study from Australia.

JULIE SMITH



Julie Smith (BEc(Hons), /BA, PhD) is an Australian Research Council Future Fellow, and Honorary Associate Professor at the ANU College of Health and Medicine. Her recent research has focussed on economic aspects of breastfeeding and markets in mothers' milk. She has led research and development of the ANU/Alive & Description of the Anufolia Mothers' Milk Tool and the Green Feeding Tool. She was an expert advisor to WHO, US and Australian departments of health, and national and international NGOs, and previously worked as a senior economist and tax policy analyst in the Australian and New Zealand treasuries, the Australian Department of Environment and Water, the Commonwealth Parliamentary Research Service, and the Australia Institute.

Improving visibility and investments in breastfeeding

60 minutes | 1.0 E CERP

Breastfeeding is economically undervalued for its health cost-saving impacts, and transformational change to the environment for breastfeeding is also unrecognised as a climate change policy response. This presentation will describe the development and display key features of two new nutritional tools, report selected results, and highlight advocacy opportunities using these tools.

LEARNING OBJECTIVES:

Our global systems for measuring the productive economy reflect misguided and outdated principles about what is important and valuable. From this presentation, participants will come to:

- 1. Learn how the economic value of breastfeeding can be measured and calculated, why it isn't, and why addressing this gender inequity is important for breastfeeding policy advocacy
- 2. Understand how measuring unpaid care and breastfeeding in the statistical system for GDP supports key advocacy and action on breastfeeding
- 3. Recognise the human and planetary health costs of not breastfeeding, and the economic (opportunity) costs of mothers' investments in breastfeeding.

CECILIA TOMARI



Cecília Tomori (PhD, MA) is an Associate Professor and Director of Global Public Health and Community Health at the Johns Hopkins School of Nursing with a joint appointment at the Bloomberg School of Public Health. She is a Hungarian-American anthropologist and public health scholar whose work investigates the structural and sociocultural drivers that shape health, illness, and health inequities. Dr. Tomori is internationally recognized for her expertise on breastfeeding, infant sleep, and maternal child health. She is an author of the 2023 Lancet Breastfeeding Series, three books on breastfeeding and reproduction, and numerous publications on a range of public health issues.

The U.S. Formula Crisis: Colonial roots, contemporary inequities and policy solutions for overcoming lactation inequities

60 minutes | 1.0 E CERP

This presentation will provide an overview of the US formula crisis that was triggered by contaminated commercial milk formula (CMF), leading to an extended shut down of a major plant and acute shortages of CMF. The presentation will discuss the historical roots of the crisis in colonialism and racial capitalism and its unequal impacts on communities. Finally, the talk will provide policy solutions for how to establish a more equitable and resilient first-food system in the face of growing emergencies and climate change.

LEARNING OBJECTIVES:

- 1. Describe the colonial roots of the 2022 US formula crisis and identify the long-lasting, unequal legacies of exploitive corporate tactics that undermine breastfeeding.
- 2. Specify the inequitable health impacts of the corporate practices identified above.
- 3. Identify strategies to enact policies for addressing infant and young child feeding inequities, especially in the context of accelerating emergencies due to climate change.

Enabling Breastfeeding Success in a Market–Driven World: The 2023 Lancet Breastfeeding Series

60 minutes | 1.0 E CERP

This presentation will provide an overview of the key findings from the 2023 Lancet Breastfeeding Series, including the latest science on how breastfeeding impacts infant and young child health as well as maternal health and the global status of breastfeeding. The presentation will highlight how commercial milk formula industry tactics undermine breastfeeding and presents steps to create enabling environments for all who wish to breastfeed.

- 1. Describe the health impacts of breastfeeding across the lifecourse and the key determinants of breastfeeding success.
- 2. Identify how typical human infant behaviour is reframed by commercial milk formula marketing to increase profits.
- ${\bf 3.}\ Identify\ the\ elements\ of\ the\ commercial\ milk\ formula\ marketing\ playbook\ that\ undermine\ breastfeeding.$
- 4. Identify and take concrete steps to implement enabling and equitable systems to support breastfeeding.

CAOIMHE WHELAN



Caomihe Whelan (B.Eng, MSc, IBCLC) is passionate about supporting and empowering women in the early days of new motherhood, helping them to have an experience that they are happy with. Breastfeeding has been a big part of her life since having her first baby in 2008 -training as a Cuidiu breastfeeding counsellor (a volunteer for 10 years), having two more babies and then qualifying as an IBCLC in 2016. She is also a fully qualified yoga and pregnancy yoga teacher with 13 years teaching experience. She undertook qualitative research on the experiences of women breastfeeding with primary low milk supply, graduating with an MSc. Caomihe works in private lactation practice, presents at conferences, lectures on breastfeeding and lactation-related modules at UCD; and also teaches breastfeeding/lactation seminars for GP-training schemes and other

3rd-level healthcare-related courses.

Instagram and the IBCLC: Ethics, Privacy, Misinformation and Maternal Mental Health

60 minutes | 1.0 E CERP

This presentation explores the kind of parenting-related information and marketing that new parents are being exposed to on Instagram, and how it may be influencing their parenting choices and their mental health. The presentation also addresses considerations for IBCLCs and other lactation professionals who post on social media, including compliance with the WHO-Code on the Marketing of Breastmilk Substitutes and IBLCE's Code of Professional Conduct.

LEARNING OBJECTIVES

- 1. List at least 3 considerations professionals who work with parents antenatally and postnatally should think about before posting information on social media.
- 2. Describe the IBLCE advisory opinion on social media use and how to uphold the World Health Organization Code on the Marketing of Breastmilk Substitutes when posting on social media.
- 3. Describe how parents are marketed to on Instagram and how their mental health and parenting choices can be affected by the content they view.
- 4. Explain the meaning of the term 'sharenting' and outline some of its potential pitfalls.
- 5. Describe 2 ways in which breastfeeding and parenting self-efficacy can be undermined by Instagram use.

SONYA BOERSMA



Sonya Boersma (MScN, RN, IBCLC) has a wealth of experience in bolstering healthcare professionals' ability to deliver evidence-based care. Serving as a Provincial Health Promotion Consultant, she played a pivotal role in aiding healthcare organization in the implementation of the WHO's Baby- Friendly Initiative. In this role she coordinated crucial provincial breastfeeding protocols such as, Informed Decision Making: Infant Feeding and conducted IDM workshops across the province. With an MScN specializing in lactation, coupled with her status as an IBCLC and Registered Nurse, she has navigated the entire perinatal spectrum, for busy urban centres to remote northern regions, encompassing government-funded and independent practice She currently has a busy independent practice and is honoured with each parent and baby encounter.

Informed Decision Making: Gaining Skills with Tricky Breastfeeding–Related Conversations

60 minutes | 1.0 E CERP

It can be tricky as health professionals, wanting to build trust and support our clients, yet presenting evidence-based information on infant feeding can be uncomfortable. The purpose of this presentation is to enhance awareness, augment skills and comfort in having informed decision making (IDM) conversations around breastfeeding and breastmilk substitutes, so participants can more confidently engage with their clients.

LEARNING OBJECTIVES:

- 1. Articulate 3 scenarios where IDM conversations are needed.
- 2. Choose 1 relatable conversation starter for an IDM conversation.
- 3. Summarize 3 or more key components of an IDM conversation.

ELEANOR GATES



Eleanor Gates (MMID Hons, RN, RM, IBCLC) is a Nurse, Midwife, Lactation Consultant, who holds 3 different breastfeeding related roles at Te Whatu Ora - Waitemata. She initiated Waitemata's Midwife-lead Tongue Assessment Clinics, still runs one, and is 33.3% of the NZLCA educators jointly presenting the evidence-based tongue restriction programme she wrote, providing a credentialing pathway for employed midwives to perform simple frenotomy. Her second role is being 50% of the Waitemata Community Lactation Support Service, where various challenges cross her path regularly. She is 100% the Waitemata Level 2 BFHI Coordinator/Educator. She loves to swim, sew, read, cook, and is Oma to her 3 grandchildren.

Look, Listen, Learn – Breastfeeding and Lactation Clinical Case Studies

60 minutes | 1.0 L CERP

A selection of breastfeeding and lactation clinical cases from a Community Lactation Support Clinic are presented. All required referral for opinion/advice/treatment. Continuing study, although challenging at times, heightens personal practice, widens breastfeeding knowledge, and deepens understanding. It is vital to provide māmā and pēpē with appropriate care and support.

- 1. Become prepared to research things you haven't come across before.
- 2. Be confident in using local hospital-based librarian assistance to gain specific and most up-to-date knowledge.
- 3. Accept there is no loss of mana in asking women/wāhine for their consent when you need to investigate on their behalf they are normally grateful.

SABRINA BARBER



Sabrina Barber (BSN, RN, IBCLC, CD) is a Registered Nurse, International Board Certified Lactation Consultant and Childbirth Doula. She is the owner of Motherly Love Lactation Services and Co-Founder of Baby BLISS Feeding Collaborative of Central Florida. Sabrina has experience in Pediatrics, Obstetrics and Postpartum care and has presented for FLCA, USLCA, and the 2023 ILCA Conference. She is "mom" to two children. Her oldest child is autistic and has special needs. Providing collaborative care with her team for infants with complex medical histories is Sabrina's specialty. Sabrina's mission is to provide unbiased, culturally competent, and compassionate care for every family.

Providing Lactation Support for the Neurodiverse Family – A Team Approach

60 minutes | 1.0 L CERP

Breastfeeding/chestfeeding is a full sensory experience. Neurodiverse individuals may present with sensory processing challenges and experience significant barriers to achieving their feeding goals. It is recommended that all providers individualise care plans according to the parent's unique processing needs. Neurodiverse-affirming support will improve breastfeeding outcomes among this population.

LEARNING OBJECTIVES

- 1. Recognize at least 2 diagnoses that are classified under the neurodivergent umbrella.
- 2. Identify 2 barriers that a person with sensory processing challenges may experience when carrying out a feeding plan.
- 3. Identify 2 areas of process improvement in your practice that will screen the dyad appropriately and meet their needs.

ALISON HAZELBAKER



Alison Hazelbaker (PhD, IBCLC, FILCA, LMT, CST-T, RCST, PPNE) has been an IBCLC and Therapist in private practice for 40 years. She integrates multiple modalities into her practice as a lactation consultant including massage, craniosacral therapy, rhythmic movement and pre & Deprinated psychology. She is an expert on tongue-tie and infant sucking problems. She authored the Assessment Tool for Lingual Frenulum Function™®, the Hazelbaker Infant Suck-Swallow-Breathe Protocol™®, invented the Hazelbaker™ FingerFeeder™®, and has written several books and articles on tongue-tie and therapeutic approaches to infant sucking problems. She speaks and teaches worldwide.

Craniosacral Therapy and Tongue-tie: Natural Companions

90 minutes | 1.5 L CERP

In this presentation Dr. Hazelbaker discusses the use of craniosacral therapy relative to tongue-tie. She addresses the over-diagnosis of it and describes the way in which faux ties are confused for true ties. She then discusses the role craniosacral therapy plays in addressing the restrictions that are commonly misdiagnosed as true ties that cause breastfeeding problems.

LEARNING OBJECTIVES:

- 1. Define craniosacral therapy.
- 2. List three ways that craniosacral therapy addresses breastfeeding problems.
- 3. Discuss the role craniosacral plays as an adjunct or replacement for tongue-tie revision.

BEV POWNALL



Bev Pownall, Ngāti Apakura, Ngāti Kahungungu ki Wairarapa (RN, RM, IBCLC, BA Soc Sci, BSc Hons Midwifery, MPhil Midwifery, ONZM) graduated as a nurse in Whanganui, worked as a PHN, then became a midwife in London. After qualifying as an IBCLC, she held roles on the NZLCA Board, plus Issues and Staying ABREAST Editors and Conference Convenor. Bev's Master's degree focused on BFHI. She committed to the establishment of the NZBA, served on NZBA groups; trained as a BFHI Assessor, and is on the NZBA Board. She worked as a BFHI Coordinator and DHB Lactation Support Services Team Leader, leading the way for paid Māori and Pasifika breastfeeding advocate positions. She is currently working with Te Whatu Ora and others, on establishing a national human pasteurised human donor milk banking service. Bev worked with the NZ Ministry of Health on a

national tongue-tie guideline. She also co-facilitates a workshop for TWO staff and IBCLCs involved in accreditation for assessing and treating tongue-restriction in breastfeeding neonates.

Tongue-tie Pathways in Aotearoa New Zealand. How Far Have We Come?

60 minutes | 1.0 L CERP

This presentation provides a snapshot of key research, guidelines, classification systems, and screening tools relevant to IBCLCs, midwives, and others involved in assessing "tongue-tie" and referral for frenotomy in Aotearoa New Zealand.

- 1. Show awareness of how tongue-tie has been defined and classified over time.
- 2. Discuss key learnings from research on neonatal oral anatomy and the science of suckling.
- 3. Understand IBLCE's Advisory Opinion on Frenulotomy and some of Aotearoa New Zealand-based guidelines for health professionals.
- 4. Reflect on one's current practice in terms of ensuring skilled clinical assessment of breastfeeding/lactation and treatment or referral, when tongue restriction is identified.

LYNDSEY HOOKWAY



Lyndsey Hookway (PhD, RNC, SCPHN (HV), IBCLC) is an experienced paediatric nurse, children's public health nurse, IBCLC, researcher, responsive sleep/parenting advocate, and the author of 6 books. She has worked with children and families for more than 20 years within in-patient paediatrics, paediatric ambulatory care, NICU, and the community. Lyndsey is a researcher at Swansea University, exploring the needs and challenges of medically complex breastfed infants and children, and completed her PhD in 2023. In 2019 she founded the Breastfeeding the Brave project to raise awareness of the unique lactation needs of sick children in the paediatric setting. Lyndsey is the co-founder and clinical director of the Holistic Sleep Coaching program and Thought Rebellion. She is a respected international speaker and also provides regular training, advocacy

and consultancy to both NHS and private organisations.

"More breastfeeding support in a coffee shop than on the paediatric ward": Mothers experiences of breastfeeding their children with medical complexity. 60 minutes | 1.0 L CERP

Breastfeeding a child with illness or medical complexity in the paediatric setting is uniquely challenging and presents different obstacles than those commonly experienced by parents feeding healthy term newborns or preterm neonates. Current policies, BFHI standards, and training are weighted towards the initiation of breastfeeding or the establishment of effective pumping for a preterm infant. The needs and challenges of children beyond the neonatal period are largely unresearched. In this presentation, learners will understand how to view the paediatric population as distinct from the maternity and neonatal population and appreciate some of the unique difficulties that these families face. Learners will also develop understanding of the need to merge clinical and lactation skills in a collaborative approach to care. Finally, new insights and awareness of the importance of expanding current training to meet the needs of this population will be shared.

LEARNING OBJECTIVES:

- 1. Develop understanding of the paediatric population as distinct from maternity and neonatal clients in terms of management, structures and policy.
- 2. Learn some of the unique clinical lactation challenges experienced by children in the paediatric setting.
- 3. Appreciate the parent experience of continuing to breastfeed or provide breastmilk for this population.
- 4. Understand why targeted and specific paediatric breastfeeding training is appropriate in order to achieve the best outcomes.

How to support families with sleep while prioritising attachment and responsive feeding

60 minutes | 1.0 L CERP

Many parents reach out for sleep support, and in an era of unregulated sleep providers, and greater pressure on families than ever, many parents are keen to explore strategies that may be at odds with responsive, respectful parenting that is protective of the parent-infant bond, and optimal lactation. Equipping lactation supporters with robust, evidence based, effective and simple sleep optimisation strategies is pragmatic, as this may prevent parents from seeking support from a provider who is unqualified to make a full assessment of infant feeding. While many parents are content to be reassured about aspects of normal infant behaviour, feeding and sleep, other parents may feel they have no choice but to pursue non-responsive sleep training, which may jeopardise lactation. This presentation provides an opportunity to discuss the pressure to sleep train and provides gentle alternatives to equip lactation advocates to be able to provide responsive, lactation-friendly sleep support to families who need it.

LEARNING OBJECTIVES:

- 1. Locate sleep training recommendations in historical context.
- ${\bf 2.} \ Critically \ consider \ main stream \ recommendations \ in \ light \ of \ evidence.$
- 3. Evaluate the choices parents may need to make.
- 4. Present some countercultural sleep strategies.

TREASURE MAGUIRE



Associate Professor Treasure McGuire (PhD, BSc, BPharm, GradDipClinHospPharm GCHEd, CertIVTAE, FACP, FPS, MSHP) is an experienced clinical pharmacist, educator, and researcher. She holds two senior appointments in her hospital role (as Assistant Director of Pharmacy, Mater Health, Brisbane) with Bond University Medical School and The University of Queensland School of Pharmacy. Treasure has worked in a wide range of practice settings: women's and newborn health, medicines information and toxicology – in Australia, USA, and the Netherlands. Her research is translational and evidence-based, focusing on patient centred-care and quality use of medicines. She is a regular invited speaker at national and international conferences, with over 60 keynote addresses.

Cannabis Use While Breastfeeding: An Evidence-Based Approach

60 minutes | 1.0 L CERP

Cannabis is used by up to 5% of breastfeeding women globally, with extensive passage into breastmilk. Exposure impacts mother and infant (neurobiological alterations persisting beyond the first 1000 days). This presents significant challenges for lactation promoters. This presentation outlines the pharmacology, potential benefits and risks of cannabinoids and considerations when used in lactation.

- 1. Describe the pharmacology, ways cannabis is used therapeutically and as a recreational drug by breastfeeding mothers and its transfer into breast milk.
- 2. Identify safety and practical considerations for cannabis use in breastfeeding.
- 3. Develop realistic goals and strategies around harm minimisation.

MEGHAN McMILLAN



Meghan McMillin (MS, RD, IBCLC) holds a Master's Degree in Human Nutrition from the University of Illinois at Chicago. A Registered Dietitian (RDN) since 2013 and an International Board Certified Lactation Consultant (IBCLC) since 2019, Meghan lives outside of Chicago, Illinois and has a private practice called, The Lactation Dietitian. The mother of two young kids with food allergies, helping other families manage food allergies is her passion. Meghan is the coauthor of the eBook What To Eat When Your Baby Can't Tolerate Milk, Soy, or Egg Protein; Nutrition guidance for avoiding milk, soy, and/or eggs while lactating. She has presented for numerous organizations. In her spare time, Meghan enjoys working out and allergy-friendly baking.

How Lactation and Food Allergies Intersect: What We Know & How We Can Help

60 minutes | 1.0 L CERP

Though the overall risk of the development of food allergies in infants remains very low, prevalence has been increasing. And with that increase, we are also seeing more concerns for food allergies in the exclusively breast/chest fed infant. This presentation aims to educate on the different types of food allergies (IgE mediated vs non- IgEmediated) and their symptoms commonly seen in a breast/chest fed infant. We'll review the current feeding recommendations for an infant that presents with food allergies including maternal elimination diets. This presentation will also explore the role of the lactation consultant in managing food allergies and supporting our families that face this challenging situation.

LEARNING OBJECTIVES:

- 1. Recognize that there are different types of food allergies.
- 2. Understand lactation's role in allergy risk and prevention.
- 3. Identify common allergy symptoms that may present in a breast milk fed baby.
- 4. Address feeding issues that may mimic allergy symptoms.
- 5. Become familiar with care plans and referrals necessary for these.

SONIA SEMENIC



Sonia Semenic, (RN, PhD) is an Associate Professor at the Ingram School of Nursing, McGill University (Montreal, Quebec) and a Nurse Scientist at the McGill University Health Center, with a previous clinical background as an IBCLC and Clinical Nurse Specialist in maternal-child health. Her research programme involves knowledge translation processes in perinatal health, with a special focus on evidence-based practices to protect, promote and support breastfeeding. She is currently co-PI of a large randomized controlled trial to assess the impact of a breastfeeding self-efficacy-based intervention to improve breastfeeding and blood pressure outcomes among women with hypertensive disorders of pregnancy.

The impact of lactation on maternal cardiovascular health: A review of the evidence

60 minutes | 1.0 L CERP

There is mounting evidence that lactation has a significant impact on short- and long-term maternal cardiometabolic health. This presentation will review the latest research related to the association between lactation and cardiovascular outcomes, and will discuss specific populations to target for promotion of breast/chest-feeding for maternal cardiometabolic health.

LEARNING OBJECTIVES:

- 1. Discuss the research evidence related to the short- and long-term impacts of lactation on maternal cardiovascular outcomes.
- 2. Describe key mechanisms of action for the association between lactation and cardio-metabolic health.
- 3. Identify high-risk groups for targeted promotion of breast/chest-feeding to optimize cardiometabolic health.

CAROL SMYTH



Carol Smyth (IBCLC, MBACP, BABCP Accred.) is an IBCLC and Cognitive Behavioural Psychotherapist working in both Primary Care and in private practice in Northern Ireland. She provides training for HCPs on breastfeeding as well as parental workshops. With a background in psychology, she is driven by a passion to promote attachment-based and trauma-informed care to families and babies. She is the author of the Why Infant Reflux Matters book, both an HCP education resource and a self-help book for families worried about their baby's reflux and unsettled behaviours. She aims to increase understanding of normal (often misunderstood) baby behaviours and to explain why these are often different from what we expect. This understanding helps to lower parental anxiety and promotes attachment strategies proven to reduce crying. Carol is married with 2 boys who

taught her more about breastfeeding than she can ever say and gave her the drive to help others experience something similar.

What Does Breastfeeding Mean for Fertility?

60 minutes | 1.0 L CERP

The impact of breastfeeding on fertility has been neglected by research in recent years. There can be significant variation in when the menstrual cycle returns for parents, which can impact their plans for family expansion. Some who conceived easily before breastfeeding, can find it much more difficult to conceive while breastfeeding. Some who struggle with recurrent miscarriage can wonder if breastfeeding is impacting their ability to carry to term. Many are left wondering whether to wean their nursling in order to conceive again, which can be a very difficult decision to make, when that conception is uncertain. This presentation will review the research on how breastfeeding affects the menstrual cycle, how fertility is initially suppressed and how it returns, the ongoing effect that breastfeeding can have on fertility, how to use breastfeeding as a contraceptive method (if desired), how to maximise chances of conception (if desired) and whether it may affect a pregnancy after conception has occurred.

- 1. Understand how breastfeeding affects the menstrual cycle.
- 2. Understand the efficacy of breastfeeding as a contraceptive / the impact on family expansion.
- 3. Understand the how pregnancy affects lactation, and how lactation may affect pregnancy.

Managing Low Weight Gain & Low Milk Production in the Breastfeeding Dyad

60 minutes | 1.0 L CERP

This presentation explores assessment and clinical management of low weight gain in healthy, full-term babies within the community setting and corresponding low milk production in the mother / parent. The presentation covers how to assess milk transfer at the breast, including understanding the importance of the milk ejection reflex in milk transfer. It explores different impacts on milk production and when is a critical period to intervene. Breastfeeding techniques are discussed to improve weight gain and production, as well as when supplements are needed, how they should be managed and when / how they can be removed. Finally, but critically, it looks at the importance of compassionate counselling of the parent.

LEARNING OBJECTIVES:

- 1. Understand normal range of milk production and weight gain.
- 2. Understand how to assess healthy vs low milk supply through observing a breastfeed.
- 3. Understand when supplements are needed and how they should be managed to best meet the parent's breastfeeding goals.

JOHANNA SARGEANT



Johanna Sargeant (BEd, BA, IBCLC) is an IBCLC, teacher and writer based in Zurich, Switzerland. Originally from Australia, Johanna provides much-needed English-speaking support to many thousands of parents throughout Switzerland and across Europe through her private practice, Milk and Motherhood, and has recently created new education modules for the European Society of Paediatric Research and the European Society of Neonatology. She has taught at the University of Zurich, has spoken as a panelist for the WHO's Baby Friendly Hospital Initiative congress in Geneva, has been an expert speaker and facilitator for Google, and has presented at many international conferences.

Seeing the Bigger Picture: Finding Clues In Our Breastfeeding Clients' Surroundings

60 minutes | 1.0 L CERP

As someone who has worked with breastfeeding families from over 80 different countries, Johanna shares her experiences with home visits. Uncover ways to respectfully and stealthily gather vital information during a consult, learn the nuances of cultural humility, explore mental health red flags, and know some important measures for personal safety.

LEARNING OBJECTIVES:

- 1. Learn how to apply a deep sense of cultural humility when working in the homes of families from a wide array of backgrounds.
- 2. Know the signs to spot during a home visit that can signal the need for more in-depth mental health support for clients and their families.
- 3. Learn practical tips to implement at particular stages of the home visit that will ensure efficient information gathering, personal safety and time management.

When Evidence and Empathy Aren't Enough: Changing Your Lactation Practice to Boost Client Success

60 minutes | 1.0 L CERP

Lactation professionals often accompany clients through the process of making difficult decisions: The client who wants to exclusively breast/chestfeed but loves that their partner gives infant formula each evening; The client who wants to and doesn't want to stop pumping simultaneously; The parents who feel unsure about a potential frenotomy procedure; The client with breastfeeding aversion, desperately struggling with their 18 month old. Lactation professionals aim to provide empathetic care and to give the evidence needed to make informed decisions, and yet there are times where this is not enough and where clients continue to struggle to choose what works best for them. Here, learners will explore some Motivational Interviewing strategies that will actively empower clients, resulting in a significant shift in lactation practice overall. Discover how the strong desire to inform, advise and fix client problems can significantly reduce positive outcomes, and how a focus on the client's own 'change talk' and 'sustain talk' can actively mobilize them towards their goal. Learn specific tools to immediately apply in consultations so parents feel deeply supported, feel motivated towards change, feel ownership of their plan, and to ultimately increase the likelihood of their success.

LEARNING OBJECTIVES:

- 1. Understand the 'righting reflex': how our desire to give advice and to 'fix' situations can frequently result in worse outcomes overall. Know what to do instead.
- 2. Use oral assessment or other similar baby-centred activity as a tool to connect with parents, build rapport and trust, increasing the overall success of every consultation.
- 3. Identify and use'change talk'; and/or 'sustain talk' in our discussions with clients, enabling them to make difficult decisions that are often necessary for breastfeeding success.

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