



Contacting WIC Mothers

Frequent, proactive contact with pregnant and breastfeeding women is the most important tool breastfeeding peer counselors (BFPCs) use to build rapport with clients, prevent breastfeeding problems and help moms reach their breastfeeding goals. This document provides guidance about when to contact WIC mothers and how many to contact per month. If these goals are hard to meet, the local agency (LA) may need to increase the total BFPC hours or schedule the BFPC(s) to be in the clinic more often.

Goal 1: The monthly contact goal is 50 percent of the agency's total prenatal and breastfeeding caseload. For example, if the agency's monthly prenatal and breastfeeding caseload is 200, the BFPC(s) should contact 100 mothers.

Goal 2: The LA should schedule the BFPC(s) so that at least 50 percent of their total contacts are face-to-face interactions with participants, such as a clinic visit, home visit or hospital visit. Scheduling pregnant and breastfeeding moms on days the BFPC is in the clinic is the most effective way to achieve this goal.

	When to Call or Text Mothers
Pregnancy	✓ Monthly. ✓ More frequently (weekly, if possible) as her due date nears.
One to two weeks after delivery	✓ Every two or three days during the first weeks. ✓ Within 24 hours if a problem occurs.
Two to four weeks after delivery	✓ Weekly. ✓ Within 24 hours if a problem occurs.
One to six months after delivery	✓ Monthly. ✓ Within 24 hours if a problem occurs. ✓ Two weeks before she plans to return to work or school and two or three days after she starts back. ✓ Around the time baby's appetite spurts occur: - Six weeks. - Three months. - Six months.
Seven to 12 months after delivery	✓ Monthly. ✓ Within 24 hours if a problem occurs.
One year and until breastfeeding ends	✓ Every three months. ✓ Within 24 hours if a problem occurs.

Tools to use: BI Portal reports: Participant Count with Year to Date Totals; Prenatals by Due Date Detail; Breastfeeding Women Detail.