



Hono Ngā Hononga Ora

CULTIVATING POSITIVE CONNECTIONS

CULTIVATE YOUR KNOWLEDGE BY WATCHING:

2025 NZLCA ONLINE CONFERENCE

Saturday, 8th February to Sunday, 2nd March 2025

The online conference offers 18.75 hours of pre-recorded sessions which can be viewed at any time between 8am Saturday 8th February and Midnight Sunday 2nd March 2025 NZT. Breastfeeding advocates from all over the world are supporting NZLCA to provide you with up-to-date information, ideas and recommended best practices at a lower registration cost than 2024.

PLUS CONNECT WITH OTHER PROFESSIONALS

LIVE MASTERCLASS WORKSHOP

ON LINE

Nancy Mohrbacher

LIVE IN AUCKLAND on Saturday, 8 February 2025 9.30am - 4:00pm - Limited spaces - book early!

NZCLA AGM

BY ZOOM Wednesday, 19th February, 7:00pm

Accreditation

IBCLE Pre-exam education hours: up to 18.75 hours have been approved.

This event has up to 18.75 hours which can be logged in your professional portfolio.

Certificates with CERPs and DCO (Detailed Content Outlines) will be provided based on the number of online presentations completed.

Masterclass Workshop Certificates will be sent out on workshop evaluation completion.

Registration fees

Member Earlybird prior to 6 December 2024 \$355 Member Full after 6 December 2024 Non-Member Earlybird prior to 6 December 2024 \$415 Non-Member after 6 December 2024 \$460 Masterclass Workshop: Limited places

Full conference registration and NZLCA 2025 membership are required to register for the add-on masterclass.

Booking early is recommended.

Evidence of NZLCA 2025 membership will be required for the member rate. Fees are in NZ dollars and include GST.

INTRODUCTION

Your invitation to the NZLCA 2025 Online Conference





On behalf of the Board of New Zealand Lactation Consultants Association, I have great pleasure in inviting you to attend this 2025 event; Hono Ngā Hononga Ora - Cultivating Positive Connections.

I have sought to provide you with a wide range of presentations to help you gain sufficient education hours to maintain your practice

requirements, whilst deepening your knowledge. NZLCA has responded to your feedback and suggestions for topics wherever possible.

NZCLA is delighted to offer multidisciplinary New Zealand practitioners' presentations, alongside a variety of high-quality international presentations.

In addition, our first 'hybrid conference' with a face-to-face Masterclass Workshop is available on the opening day of the online conference.

Prompt 2025 membership subscription and conference registration allows the first 40 registrant NZLCA members to attend this optional add-on. We hope this will be a success that we can possibly expand and offer in two different cities in 2026.

Please note before registering for this conference we can only keep the cost low by having a limited time of access; no extensions of time are possible after 2nd March 2025 under any circumstances.

Start on 8 February and pace yourself, to watch as few or as many presentations as you choose over the 23 day period. There is no requirement to watch everything on offer, your certificate of completion will be amended accordingly.

To make the most of the online conference it is best that you treat it as though it is an in-person conference by applying for study or annual leave from work, also submit your request early for funding if you wish to secure the early bird price.

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

"To advance the IBCLC profession in Aotearoa New Zealand through leadership, advocacy, professional development and research" - be ready to enjoy some amazing presentations!

Eleanor Gates
2025 Conference Convenor

About the Conference and Masterclass Workshop

CONFERENCE and MASTERCLASS WORKSHOP FOCUS

This conference is designed for us to continue our learning utilising online opportunities around Aotearoa, New Zealand and beyond. The Masterclass Workshop examines a single topic in depth, using multiple learning modes, lead by an International Speaker.

CONFERENCE and MASTERCLASS WORKSHOP OBJECTIVES

- To gain a high quality, international event with opportunities to increase skills, knowledge and gain appropriate continuing education hours, including Detailed Content Outlines for IBCLCs, for the first time
- To challenge all participants to consider their own role in Cultivating Positive Connections; with people of different ethnicities, with other health professionals and breastfeeding advocates, with the whānau/families who support the parents we work with, as well as helping dyads to connect in the most physical sense
- To provide opportunities for participants to reflect on their current practice, including what changes they may make to their practice

 To network with other breastfeeding supporters through social media sites during the conference, sharing ideas, thoughts and developments

Specific to those attending the Masterclass Workshop;

- To physically network with other IBCLCs after 'the Covid years'
- Examine the benefits of early skin-to-skin contact for breastfeeding and explore ways to negate barriers encountered.
- Learn specific strategies involving positioning and latching newborns that make breastfeeding easier

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Marsha Walker Ouch! Nipple and Breast Pain (Can a Nipple Actually be Too Short?)	9	SPONSORSHIP NZLCA welcomes sponsorship from WHO Code (and subsequent WI Resolutions) compliant companies. For further information please	НА
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David Grayson Ethnic Disparities in a NZ Multidisciplinary Tongue Restriction Service: A Five Year Review.		SPEAKER DISCLOSURES Two presenters have disclosed affiliations which may have a bearing conflict of interest on the subject matter of their presentation. The disclosures are listed below;] /
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Leila Masson Creating a Healthy Infant Microbiome for Lifelong Wellness	12	NZ WHO Code Compliance Panel, and Health Practitioners Disciplina Tribunal." All speakers will record a disclosure or non-disclosure at the beginning of their pre-recorded presentation.	-

2025 CONFERENCE PROGRAMME



ZOË TIPA

Zoë Tipa (PhD, MPhil, BHSc(Nursing), RN) Kai Tahu, Kahungunu, is the Pou Whakarae Tapuhi (Chief Nurse) for the Whānau Āwhina Plunket. Zoë is committed to increasing the accessibility and cultural safety of health services for Māori. Her PhD research asked whānau, "What matters

to them?" when accessing WCTO services. Working alongside whānau, Zoë developed a framework for cultural responsiveness outlining the key elements that optimise engagement with WCTO services. Zoë is based in Whangārei.

Cultivating Positive Connections Using a Mahi Ngātahi Care Model

60 minutes 1.0 L-CERP DCO - V & VII

The Mahi Ngātahi framework is presented as a model of care which is embedded within Whānau Āwhina Plunket. Plunket nurses and health workers promote and support breastfeeding within whānau, and need to build relationships

based on trust to work effectively and responsively with whānau and tamariki. This includes working in ways that protect and enhance the mana of whānau across Aotearoa.

LEARNING OBJECTIVES

- 1. To understand the development of Mahi Ngātahi
- 2. To understand the application of Mahi Ngātahi to practice with whānau Māori
- 3. To understand the way Mahi Ngatahi can inform culturally responsive health service design and delivery



BARBARA TAUNTON-CLARK

Barbara's passion for breastfeeding support began with NICU nursing. She became a midwife (1980) and was in the first cohort to take the IBCLC exam in NZ (1990). Barbara contributed to setting up NZLCA and was involved in initiating BFHI in NZ; she is an experienced NZBA auditor. Barbara feels honoured to be a lifetime member

of NZLCA. During her worldwide travels, she has collected lactation 'aids' from various conferences and maternity units and realised she now has a social history of marketing to breastfeeding parents. Barbara and her husband have two grown daughters, they enjoy an NZ Sav!

Lactation Aids Over Time and the Ethical Considerations for Their Use

60 minutes 0.5 L-CERP 0.5 E-CERP DCO - VII A, B & C

A light hearted look at some of the past and present lactation aids/devices. The more serious message concerns awareness of the impact of today's marketing on choice, and the Health Professionals responsibilities in gaining informed consent for ongoing care when aids may be considered as part of a breastfeeding care plan.

- 1. To increase the awareness of what was, and still is available as lactation aids
- 2. To consider personal ethical responsibilities as a Health Professional in recommendation or introduction of lactation aids
- 3. To ensure as a Health Professionals we obtain informed consent prior to recommending or introducing lactation aids



NANCY MOHRBACHER

Nancy Mohrbacher (IBCLC, FILCA) began helping nursing families in 1982 as a volunteer peer supporter. She became an IBCLC in 1991 and spent 10 years growing a large private lactation practice in the Chicago area, where she worked one-on-one with thousands of families. Nancy is the author or coauthor of three current books for nursing parents and two for lactation

specialists. Her Breastfeeding Solutions app is used worldwide, and her YouTube channel has millions of views. She currently creates innovative lactation education for aspiring and recertifying lactation consultants online at LactaLearning.com and speaks at events around the world.

Helping Families Who Combine Breast & Formula

60 minutes 1.0 L-CERP DCO - V, VI & VII

Exclusive breastfeeding is recommended for the first six months, but during this period, many nursing families also use formula. What do parents need to know during pregnancy about combining breast and formula? What does the research tell us about how to most effectively navigate mixed feeding? Which strategies can help nursing parents keep their milk

production steady over time and nurse longer? Finally, how can we help families feel more positively about whatever volume of human milk their baby receives?

LEARNING OBJECTIVES

- 1. To list three positive health effects of partial breastfeeding
- 2. To describe three risks of early formula use appropriate to share during pregnancy
- 3. To explain the impact of storage capacity on the number of daily milk removals needed to keep milk production steady over time

Masterclass Workshop with Nancy Mohrbacher

Masterclass Details:

Date: Saturday, 8 February 2025 Add-on option open to the first 40 applicants only.

Time: 9.30am - 4:00pm This Masterclass will NOT be available as a recorded session.

Venue: PHAB Building, 8 Auburn Street, Online conference registration and NZLCA 2025 membership are

Takapuna, Auckland 0622 required to register. Booking early is recommended.

Cultivating Positive Connections – Hono Ngā Hononga Ora: Positioning & Latching

240 minutes 4.0 L-CERPs DCO - I, II, V & VI

The masterclass workshop leads you through;

- A research based examination on the benefits of early skin-to-skin contact on breastfeeding, which is then applied to your
 practice within guided small group discussions. Participants will develop specific ideas which may negate barriers for new
 parents in implementing more skin-to-skin contact.
- You will learn strategies involving early positioning and latching that make early breastfeeding easier for both new families
 and their supporters. This includes further guided small group discussions helping to translate theory into clinical practice.
- Finally, Nancy will explain her breastfeeding initiation strategy which reduces the common issues families may encounter, you then can practice in a clinical context, with the new breastfeeding dyads attending this workshop.

- 1. Describe the effects of skin-to-skin contact after birth on infant stability and breastfeeding initiation
- 2. Summarise three barriers to implementing skin-to-skin contact after birth and strategies for overcoming them
- 3. Explain the research on newborns' innate feeding behaviours and how parental body position affects them
- 4. Implement a simplified breastfeeding initiation strategy designed to reduce the incidence of the most common problems during the first weeks after birth



JESSICA ALTEMARA

Jessica has invested in looking deeper into lasting outcomes for breastfeeding challenges for over 20 years. She has a private practice in North Carolina, USA and also provides integrative care through the North Carolina Tongue Tie Center. Jessica worked to develop Bridge for Breastfeeding, a program for those who wish to empower families with high quality

prenatal preparation and is an active Board member of ICAP. Through these collaborative efforts, Jessica is hopeful in seeing families more fully supported in all their postpartum needs. She enjoys time with her four children, traveling, food adventures, and working toward equity in healthcare.

The Endocrinology of Lactation: Understanding the Mechanism of the Hormones That Support Lactation and Concrete Steps for Optimising Milk Supply

60 minutes 1.0 L-CERP DCO - II. III & IV

Many people providing clinical lactation care feel like they're taking a shot in the dark when it comes to supporting parents in increasing milk supply. With a thorough understanding of how the endocrine system works, peripheral to and overlapping lactation, true trouble shooting can be done. Learn about investigative lab work and targeted,

individualised, approaches for low milk supply. This presentation offers a deeper, actionable understanding of endocrinology and lactation.

LEARNING OBJECTIVES

- 1. Understand the production cycle and process of the hormones of lactation
- 2. Understand pituitary function and factors that affect it
- 3. Learn which lab tests to order for people with low milk supply, and how to interpret results specific to lactation



WENDY INGMAN

Prof Wendy Ingman BSc (Hons) PhD leads the Breast Biology & Cancer Unit at the University of Adelaide, based at The Queen Elizabeth Hospital. Her research investigates the biology of breast development and function to better understand how disease states occur,

including lactation mastitis and breast cancer. Wendy's multidisciplinary approach integrates immunology, protein chemistry, biomechanics, and machine-learning research methods to explore new concepts in breast biology in order to improve breast health across the life course.

The Central Role of Macrophages in Breast Health and Successful Lactation

60 minutes 1.0 L-CERP DCO - I B, II B, & III B

Macrophages are immune system cells that were first recognised for their ability to take up tissue debris. Their roles in innate and adaptive immunity are important in protecting the breast against disease states including infection and cancer. However, macrophages are also now well recognised for being essential in healthy breast development during

puberty, lactation and involution. This presentation will outline the diverse functions of macrophages in successful lactation, and their pivotal role in the health and risk of disease in the breast.

- 1. Macrophage biology and role in innate and adaptive immunity
- 2. Macrophage function in breast development and successful lactation
- 3. Macrophage function in breast cancer risk



ALISON BARRETT

Dr Alison Barrett BSc, MD, LLB (hons), FRCS(C), FRANZCOG, MNZM trained in medicine and obstetrics & gynaecology in Toronto, Canada, she was the Chief of OBGYN at Stevenson Memorial Hospital, Ontario, and Clinical Director of Obstetrics at Waikato Hospital in New Zealand. Alison graduated from law school at the University of Waikato. She serves on a

number of committees in health regulation. Alison's heart is in women's health and improving health care systems for patients by preventing iatrogenic harms. In 2022, her work was recognised in the NZ New Year's Honours list when she was made a Member of the Order of New Zealand for services to Women's Health.

Custodial Decisions, Lactation and the Breastfed Child

60 minutes 0.5 L-CERP, 0.5 E-CERP DCO - IV E, V F, G, H, I & K, VI D & E, VII A, B, C, D & E

There are many types of custodial arrangements that may impact breastfeeding. While legal systems differ around the world, all courts consider the best interests of the child in custodial decisions. Lactation consultants can assist decision makers on how to protect the child from untimely loss of breastfeeding and what measures to consider to support

and maintain lactation if separation must occur. Special situations such as the early days, night time, in the setting of substance abuse, the impact of missed feeds and bottles, attachment to the mother and others will also be discussed

LEARNING OBJECTIVES

- 1. To understand the legal principles that underpin custodial decisions
- 2. To describe what decision makers need to know in order to minimise the impact of custodial arrangements on breastfeeding continuity and success
- 3. To understand the supportive measures that can be implemented to help sustain breastfeeding, even in challenging custodial situations



KATE ANDERSON

Kate was a Plunket RN and BFHI Coordinator. Her personal breastfeeding journey began in 2010 when meeting breastfeeding challenges with her 2nd baby. With IBCLC support and her local breastfeeding community group, she breastfed her son until he was three years old; she subsequently became an IBCLC (2015). Kate observed clients' babies who received

Craniosacral Therapy showed significant breastfeeding improvement; this lead her to further study to qualify as a Biodynamic Craniosacral Therapist. Her private IBCLC and Craniosacral Therapy practice supports whānau from Wellington to the Wairarapa. Kate power lifts to keep fit and is mum to three beautiful children

Biodynamic Craniosacral Therapy and the Breastfeeding Dyad

60 minutes 1.0 L-CERP DCO - III A & B

This presentation introduces the role of bodywork (namely Biodynamic Craniosacral Therapy) in supporting the breastfeeding dyad, to other health professionals working in the perinatal space. Attendees will understand what signs and symptoms may indicate referral to a bodyworker,

and be able to help the families they work with to choose a reputable and safe practitioner.

- 1. Understand what Biodynamic Craniosacral Therapy is, how it works and the difference between Biodynamic, Craniosacral, Osteopathy and other "bodywork"
- 2. Identifying when "bodywork" might be beneficial to the breastfed infant or breastfeeding parent
- 3. How to recognise "safe" practitioners in your community and how to describe their work to families



ILANA LEVENE

Dr Ilana Levene (BM BCh MRCPCH DPhil) is a neonatal doctor in the United Kingdom with a particular interest in lactation in the newborn care unit. She has a PhD from the University of Oxford related to breastmilk expression after very preterm birth. She is co-chair of the UK Hospital Infant Feeding Network.

Can We Improve the Way We Recommend Parents Express Milk When Exclusive Expressing is Needed?

60 minutes 1.0 L-CERP DCO - I, III, V, VI & VII

This presentation leads to greater understanding of expressing dynamics which support the establishment of lactation for parents of very premature babies.

It examines the evidence relating to; i) timing of the first milk expression, ii) the pattern of expressing and iii) the target quantity of breastmilk.

LEARNING OBJECTIVES

- 1. Understand the available evidence related to the pattern of milk expression
- 2. Understand the available evidence related to the target quantity of milk expression
- 3. Understand the available evidence related to timing of first milk expression

Does Recommending Relaxation Interventions Benefit Lactating Parents?

45 minutes 0.75 L-CERP DCO - I, II, III, V, VI, & VII

This presentation will examine the evidence for the impact of relaxation interventions (targeted at the lactating parent) on lactation outcomes such as milk quantity, breastfeeding duration, and milk constituents.

Data comes from a systematic review and meta-analysis carried out by the presenter.

- 1. Understand the evidence available for the impact of relaxation interventions on human milk quantity and composition
- 2. Understand the evidence available for the impact of relaxation interventions on maternal mental health
- 3. Be able to source breastfeeding related relaxation interventions



JUDITH BEATTIE

Judith started her career as a nurse, but soon found a passion for midwifery. Counties Manukau is her home base where she has spent 20 years plus developing a special interest in high-risk pregnancy and teaching. She returned to nursing in 2017 to cancer care, where she spent three years working for Breast Cancer

Foundation NZ. During this time, she developed a package of education for midwives and nurses on breast cancer in the childbearing years. Judith lives in Auckland with her husband, three children and two cats. She enjoys yoga classes, reading or drinking coffee/wine with friends.

Breast Cancer Awareness, How Breastfeeding Protects Against Breast Cancer: A Lactating Mother Shares Her Lived-in Cancer Experience

60 minutes 1.0 L-CERP DCO - I B, III B, V & VII B

Daily nine women are diagnosed with Breast Cancer in New Zealand; one will be under 45 years. As women delay pregnancy in the childbearing years, a small proportion of women develop breast cancer. A mother shares her breastfeeding journey and breast cancer experience. Midwives/ Nurses are the best health professionals to promote strategies that prevent breast cancer, of which, breastfeeding is one.

LEARNING OBJECTIVES

- 1. At the end of the session participants will be able to name the nine signs of breast cancer
- 2. Participants will feel confident to have a conversation about breast health
- 3. Participants will be aware of referral pathways for a woman with a concerning breast symptom



MARSHA WALKER

Marsha (RN, IBCLC) has been assisting breastfeeding families in hospital, clinic, and home settings since 1976. She advocates for breastfeeding at USA state and federal levels. She has served ILCA as president in the past and has served as Board Member on multiple USA breastfeeding groups. She serves as Associate Editor of Clinical Lactation, and president of the

National Lactation Consultant Alliance. Marsha is an international speaker, and an author of numerous publications including ones on the hazards of infant formula use, International Code issues (USA), and Breastfeeding Management for the Clinician: Using the Evidence, 5th edition.

Ouch! Nipple and Breast Pain (Can a Nipple Actually be Too Short?)

60 minutes 1.0 L-CERP DCO - III, IV & V

Nipple and/or breast pain can be a breastfeeding dealbreaker. If breastfeeding is not supposed to hurt, then why do so many mothers experience pain while breastfeeding? Is it maternal anatomy, faulty physiology, infant sucking alterations or anomalies? This presentation looks at nipple anatomy, nipples changes in pregnancy, precursors and causes of nipple pain, and a possible simple screening tool for potential breastfeeding problems. Breast pain, the unwelcome lactation guest, is also explored.

- 1. Participants will be able to describe contributing factors to sore nipples
- 2. Participants will be able to discuss interventions for nipple pain resolution
- 3. Participants will be able to describe approaches to managing breast pain and mammary dysbiosis



KRISTINA MACONAGHIE

Kristina lives in Taupo and works for Health New Zealand Te Whatu Ora Lakes as a Lactation Consultant in the Kia Wana breastfeeding service. Originally training in anthropology and philosophy, Kristina was a university lecturer in healthcare ethics before she had her four children, then became an active volunteer with Parents Centre, Playcentre and La Leche League. Kristina facilitates two local mum to mum support groups, is social media co-ordinator for LLLNZ and Treasurer on the NZLCA board. Kristina is a collaborator on the latest edition of the BreastFedNZ app.



KAREN PALMER

Karen has nursed in paediatric and neonatal settings, then became a midwife, spending many years as a LMC. She was a BFHI Coordinator for 10 years and worked in two different areas, creating multiple breastfeeding resources including the BreastFedNZ app. Karen now focuses on community breastfeeding

support in Kaupapa Māori service in the BOP and Waikato. She is passionate about equitable access to breastfeeding support. Currently Karen is working in the Cook Islands supporting them in gaining BFHI and improving breastfeeding services. Karen is partner to Lee, māmā to four, and granny to six.

An in Depth Look at the Breastfednz App (3rd Edition)

60 minutes 1.0 L-CERP DCO - I, II, III, IV, V, & VI

Nau mai Welcome to the BreastFedNZ app! This resource is grounded in both experience and evidence, with content thoughtfully curated by the team and informed by the personal stories of whānau/families. Our primary audience

is breastfeeding whānau/families based in Aotearoa New Zealand, but this app is also a useful resource for breastfeeding helpers.

LEARNING OBJECTIVES

- 1. Explore the 3rd edition of the BreastFedNZ app and relate app information to core breastfeeding knowledge and skills
- 2. Apply the app as a tool in a range of breastfeeding help scenarios
- 3. Discuss use of the app for workforce development and training



LENORE GOLDFARB

Dr. Lenore Goldfarb (PhD, CCC, IBCLC) has been helping mothers to breastfeed their babies born via surrogacy or adoption for many years. She is a Certified Canadian Counsellor, an, International Board Certified Lactation Consultant, and researcher at the Goldfarb Breastfeeding Clinic in Montreal, Canada. Lenore is best known for her research on induced lactation and she is frequently asked to lecture throughout the world. Lenore has been

married over 20 years, has two sons born via gestational surrogacy, and breastfed both by successfully inducing lactation for each of them. Dr. Goldfarb earned her Ph.D. in interdisciplinary studies with a concentration in art and science and a specialisation in human lactation and reproductive counselling in 2010. She received the Union Institute & University International Alumni Association Board (IAAB) Legacy Alumni Award in 2019.

Never Say Never: Induced Lactation

60 minutes 1.0 L-CERP DCO - I, II , V & VII

There are millions of infertile couples but only approximately 1.5% seek Assisted Reproductive Technology (ART). Many seek adoption and others form their families with the aid of surrogacy. Of these, some seek out protocols and procedures to induce lactation/relactate/breast-chest feed available online. However, there exists a paucity of published studies

on those who breast-chest fed infants to whom they did not give birth. The purpose of this presentation is to provide an overview of what adoptive parents and parents via surrogacy have been doing to induce lactation/relactate based on available research, in order to inform clinical practice.

- 1. To provide an overview of what adoptive parents and parents via surrogacy have been doing to induce lactation/relactate
- 2. To explore available research
- 3. To inform the health professional's clinical practice



DAVID GRAYSON

Dr Grayson is a Paediatric Otolaryngologist with over 20 years experience.

He has been a member of the multidisciplinary tongue tie service at Waitematā since 2017 up until his recent move to Taranaki where he will continue his practice and spend more time in the garden.

Ethnic Disparities in a NZ Multidisciplinary Tongue Restriction Service: A Five Year Review.

Comparison of Scissor Vs Laser Methods and Impact on Wound Healing

60 minutes (two 30 min sessions) 1.0 L-CERP DCO - III A, V, VII D

Background: The tongue assessment service at Waitematā provides multidisciplinary assessment and intervention for the largest district in NZ averaging 6700 births annually.

Results: A total of 2,073 breastfeeding and tongue assessments were conducted out of 33,605 births (6%) and 1,164 scissor frenotomies performed (3.5%). The respective rates per ethnicity per birth for assessment and frenotomy were Māori 6% and 3%; Pacific 3.7% and 2.2%, Other 6.5% and 3.7%.

Conclusions: Both assessment and frenotomy rates were low in the Pacific group compared with Māori and Other, reflecting possible access issues. The overall frenotomy rate of 3.5% compares favourably with international data.

Also, a surgeon's perspective of oral mucosal healing processes.

LEARNING OBJECTIVES

- 1. Understand the importance of identifying disparities to improve service equity
- 2. Evaluate the differences between frenotomy techniques in terms of pain and wound healing
- 3. Appreciate the special nature of oral mucosal wound healing and the effects of interventions on healing



CARINA KRASNOFF

Dr Krasnoff MD, is a Paediatrician, Public Health Specialist, IBCLC, and accredited Infant Masseur. Carina serves on the National Breastfeeding Committee of the Argentine Society of Paediatrics; she reviews breastfeeding articles for their Scientific Journal, and is a founding member of the Association of Breastfeeding Consultants of Argentina. She passionately, respectfully,

and holistically educates perinatal health professionals and families, in breastfeeding, childcare, and the importance of 'Nurturing Touch', throughout Latin America and Argentina. Carina's specific focus is on emphasising the fundamental nature of contact in primary processes. She and her husband have two daughters; they live in Buenos Aires, Argentina.

The Skin to Skin Contact That Enables Dyadic Synchrony and Enhances Lactation Processes

60 minutes 1.0 L-CERP DCO - I, II & VI

Sensations such as warmth, cold, intense or dim light, gentle or aggressive touch can both stimulate and inhibit our autonomic nervous system and oxytocinergic system. During skin-to-skin contact with mother, baby's hands "massage" his mother's chest, generating oxytocin pulses. Baby's pressure exerted on mother's body generates a tactile

stimulus that triggers a strong associated vagal response of calm and wellness. The mother of senses is touch, bringing warmth and closeness to their bodies providing the dyad input to the oxytocinergic system which plays an integral role in the biological-behavioral regulation of lactation. These encounters generate states of wellbeing and pleasure.

- 1. Explain the importance of skin to skin contact in relation to breastfeeding
- 2. Describe the relation between skin to skin contact, the autonomic nervous system and the release of oxytocin
- 3. List three strategies to offer families to improve closeness when due to various circumstances the dyad must be separated



LEILA MASSON

Dr Leila Masson (IBCLC) is a Sydney based consultant paediatrician and author, specialising in nutritional and environmental medicine for children's health issues. Leila speaks four languages and studied in Berlin (MD), San Francisco (Paediatrics), Harvard (Master in Public Health) and London (Diploma in Tropical Health).

Leila has worked in the USA, Europe, Aotearoa, and volunteered for two years setting up a rural clinic in Pakistan. She is highly involved in a variety of specialist boards, and is a professional advisor for LLLNZ. Leila lectures internationally on the subject of children's nutrition and an integrative medicine approach to paediatric issues.

Creating a Healthy Infant Microbiome for Lifelong Wellness

60 minutes 1.0 L-CERP DCO - I, III & V

The human microbiome, comprising trillions of microorganisms that inhabit our bodies, is increasingly recognised for its crucial role in maintaining overall health. Since the human microbiome project was launched in 2007 there has been an explosion of research studies into

the importance of the gut microbiome not only for gut health. These microorganisms are involved in essential physiological processes such as immune function, digestion, neurodevelopment, and mental health; breastfeeding is an important factor.

LEARNING OBJECTIVES

- 1. Increase primary healthcare providers' awareness of the impact of their recommendations on the microbiome in the first years of life, and life-long health outcomes
- 2. Present opportunities from before the birth through the first years of life to make positive choices for the microbiome
- 3. Discusses specific lifestyle habits and interventions that can either promote the growth of a healthy microbiome or harm it



KATHRYN STAGG

Kathryn Stagg is mum to four boys, twins and two subsequent singletons living in NW London, UK. She began her breastfeeding supporter journey 18 years ago as a peer supporter and continue through breastfeeding counsellor and eventually sat the IBCLC exam six years ago. Kathryn is founder and trustee of Breastfeeding Twins and Triplets charity and is passionate about delivering high quality breastfeeding support to twin and triplet families. She is the author of Breastfeeding Twins and Triplets; a guide for professionals and parents.

Breastfeeding Multiples: Sharing a Lived-in Experience to Support Families on Their Breastfeeding Journey

60 minutes 1.0 L-CERP DCO - I, II, III, V & VII

Kathryn shares her personal experience which will help you understand the challenges of a multiple pregnancy and birth. Discover preparations that can help ease stress and increase success in lactation. Learn how to support families experiencing premature birth. You will understand the best way to help parents establish breastfeeding their multiples,

even with late preterm/early term birth. This session will help attendees gain an understanding of how to navigate the challenges of breastfeeding multiples and how to support families effectively during the different stages of their breastfeeding journeys.

- 1. Understand the challenges of multiple pregnancy and birth
- 2. The impact of premature birth and late preterm/early term birth on establishing breastfeeding multiples
- 3. How to navigate the challenges of feeding multiples and support families effectively during the different stages



CHRISTINE STARICKA

Christine Staricka (IBCLC) is a trained childbirth educator, who has over 23 years experience providing clinical lactation care and support both in the hospital and the community. The author of the book 'Evolving the Modern Breastfeeding Experience: Holistic Lactation Care in the First 100 Hours', Christine also hosts a podcast called Evolve Lactation. Christine is a

Fellow of the International Lactation Consultant Association. She has been married for 30 years, lives in California, and is the proud mother of three amazing daughters. You can find more information about Christine and access free resources and downloads at www.ChristineStaricka.com

Connecting the Dots and Strengthening Parent/Baby Bonds: Breastfeeding Late Preterm Infants

60 minutes 1.0 L-CERP DCO - II, III, V, VI & VII

Absent other health issues, late preterm dyads are often discharged home shortly after birth, leaving them more vulnerable to lactation problems than term infants due to inherent physical characteristics which make them more likely to feed poorly at the breast. Health care practitioners need to offer tailored information to the families of late preterm dyads

about how to ensure adequate milk intake for proper growth and maintenance of milk production, what to expect in terms of timetables for improvement, how to recognise signs of progress, and additional ways to facilitate bonding and connection for normal development in late preterm babies.

LEARNING OBJECTIVES

- 1. Recognise and name three characteristics of the late preterm newborn which affect their capacity to chest/breastfeed effectively
- 2. Strategise three breastfeeding techniques which can positively impact chest/breastfeeding and milk production in the late preterm dyad
- 3. Assess three ideas for supporting the lactating parent of a late preterm newborn to optimise nutrition, growth, and maintenance of human milk feeding for as long as desired



CAROLE DOBRICH

Carole Dobrich (B.Sc, RN, IBCLC, RN) is Co-director/ PDE for Health e-Learning-IIHL and Step 2 Education International (BFHI training). She's an advocate for the WHO International Code & Code training.

She volunteers for organisations supporting the International Code and IYCFE. Carole believes

in sharing knowledge through education, mentoring, supporting research, advocacy and putting it all in to good ethical practice. She is the proud mother of four adult children. She lives in Montreal, Canada and will return to Australia in 2025 to pursue further studies in Lactation.

Conflicts of Interest Among Health Professionals: Actual and Potential?

60 minutes 1.0 E-CERP DCO - VII B, C & E

As health professionals we have an obligation to avoid Conflict of Interest. We have ethical boundaries and in the field of lactation we must understand the International Code of marketing of Breastmilk Substitutes (Code) including the World Health Assembly (WHA) Resolutions especially related to conflict of interest. As health professionals we have an obligation to avoid Conflict of Interest. We have ethical boundaries and in the field of lactation we must understand the International Code of marketing of Breastmilk Substitutes

(Code) including the World Health Assembly (WHA) Resolutions especially related to conflict of interest. This presentation will discuss what is a conflict of interest, identify COI related to infant feeding and describe the role of Health Professionals (HP) related to COI. Examples of conflict of interest and International Code violations will be discussed as well as discussing the potential COI when health professionals engage with products that have a potential, perceived or real issue of conflict of interest and what they can do about it.

LEARNING OBJECTIVES

- 1. Understand what is a Conflict of interest (COI)
- 2. Identify COI related to infant feeding
- 3. Describe the role of Health Professionals (HP) related to COI

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Bonus Presentation



NIGEL ROLLINS

Dr. Nigel Rollins joined the WHO Department of Maternal, Newborn, Child and Adolescent Health and Ageing in 2008 as a Scientist and until very recent retirement, was the acting head of research for the Department. His work focuses on research to improve child survival, growth

and development. This includes implementation research related to infant feeding, prevention and management of growth faltering and wasting in children and the prevention of mother-to-child transmission of HIV.

The Breastfeeding Paradox: Evolving Science, Competing Values, and Conflicting Interests

60 minutes DCO - V & VII

Despite high quality evidence that breastfeeding provides optimal nutrition and is associated with lifelong health benefits, less than half of all young children are breastfed as recommended by WHO. It is clear that at all levels – political, health system, work, societal and family – mothers do not receive the support necessary to enable breastfeeding for 24

months or longer. This is due to conflicting priorities including commercial interests that disrupt and distort the health environment where decisions are taken, and consequent lack of investment.

LEARNING OBJECTIVES

- 1. Awareness of WHO data regarding breastfeeding and the initiatives created to protect breastfeeding
- 2. Understanding it is commercial interests that drive governments and milk manufacturers
- 3. Compassion for parents making feeding choices based on emotional marketing ploys

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