

Month 12 Breastfeeding Questionnaire

1. Are you currently breast feeding or providing breast milk to your baby?
 - Yes → 1a
 - No → go to 2

- 1a. Is the breastmilk you are giving to your baby...
 - Your breast milk only
 - Donor human milk only
 - A combination of your breast milk and donor human milk
 - Don't know

2. How old was your baby when you stopped breast feeding or providing breast milk?
 - 0-2 weeks of age
 - 2-4 weeks of age
 - 4-8 weeks of age
 - 2-3 months of age
 - 4-6 months of age
 - 6-9 months of age
 - 9-12 months of age
 - I did not breast feed my baby

3. How old was your baby when he/she first received formula?
 - 0-2 weeks of age
 - 2-4 weeks of age
 - 4-8 weeks of age
 - 2-3 months of age
 - 4-6 months of age
 - 6-9 months of age
 - 9-12 months of age
 - I did not give my baby formula

Here are some questions about liquids and foods you might have given your new baby other than breast milk. If you have never given your new baby any of these, just check the box at the bottom of each question.

4. How old was your baby the first time he or she drank liquids other than breast milk or formula (such as water, juice, tea, or cow's milk)?
 - 0-2 weeks of age
 - 2-4 weeks of age
 - 4-8 weeks of age
 - 2-3 months of age
 - 4-6 months of age
 - 6-9 months of age
 - 9-12 months of age
 - My baby has never had any liquids other than breast milk or formula

5. How old was your baby the first time he or she ate food (such as baby cereal, baby food, or any other food)?
 - 0-2 weeks of age
 - 2-4 weeks of age

- o 4-8 weeks of age
- o 2-3 months of age
- o 4-6 months of age
- o 6-9 months of age
- o 9-12 months of age
- o My baby has never eaten food

For those who had stopped breastfeeding or never breastfed:

6. Which of the following are reasons you stopped feeding or never fed your baby with any breast milk. Please select all that apply.

- I fed my baby breast milk as long as I had planned.
- My baby was sick and could not breastfeed.
- My baby stopped nursing; it was the baby's decision.
- I was working at a paying job or school, and other people were feeding the baby.
- It was too hard with my own health challenges.
- I had trouble getting breastfeeding going well.
- Someone close to me discouraged continuing.
- Formula or solid food was more convenient.
- I did not have enough help to work through the challenges.
- I had to take medicine and didn't want my baby to get it through breast milk.
- I choose not to breastfeed
- Decline to state
- Other, please specify: _____

7. Since your new baby was born, have you or your new baby been on WIC? (WIC is Women, Infants, and Children Supplemental Nutrition Program.)

- o Yes → go to 7a.
- o No

7a. What benefits have you liked getting from the WIC program? Check ALL that apply.

- Support for breastfeeding
- Help getting a breast pump
- WIC Checks for baby formula
- WIC Checks for food
- Information on health and nutrition
- One on one education or counseling
- Group classes
- Information on how to get health care services
- Information on community programs
- Other, please specify: _____
- None of the above