

Join Coalition Committees

Please give your time to one or more of the following committees. To be included on our e-mail lists, check as many as you are interested in:

- Media** - Promote area media coverage of breastfeeding news.
- Physician education** - Update area doctors on breastfeeding.
- Ban the bags** - Publicize the costs to families when hospitals partner with the formula industry.
- Web site** - Add more resources for parents and professionals on www.chicagoareabfc.org.
- Grant writing** - Fund area breastfeeding promotion efforts.
- Conference** - Plan area educational and advocacy events.
- Community building** - Create events to bring breastfeeding supporters together.

I prefer to be contacted by (check one):

_____ E-mail
_____ Phone

Name _____

Address _____

City _____

State _____ Zip _____

Phone _____

E-mail _____

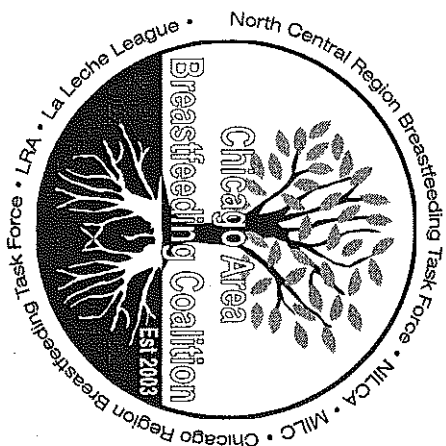
Please mail to: CABAC, c/o Mohrbacher, 115 W. Euclid Ave., Arlington Heights, IL 60004

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**Help Improve the
Health and Well-Being
of Infants and Families**

Join the

**Chicago Area
Breastfeeding Coalition**



Strength in Numbers
Creating One Breastfeeding Community

www.chicagoareabfc.org

Strength in Numbers

Founded in 2003, the Chicago Area Breastfeeding Coalition (CABC) is a network of individuals and organizations who believe that infant and family health can be improved by making breastfeeding the norm. We are dedicated to protecting, promoting, and supporting breastfeeding and increasing its acceptance in the greater Chicago area.

To achieve this, the Coalition encourages collaboration among Chicago area breastfeeding advocates and groups to create a supportive public environment where breastfeeding initiation and duration can be increased. Our goals include:

- Promote better communication among those who support breastfeeding.
- Provide education for professionals working with breastfeeding families.
- Increase public awareness of the positive outcomes associated with breastfeeding for babies, mothers, and communities.

The American Academy of Pediatrics and the World Health Organization recommend exclusive breastfeeding for the first six months, followed by continued breastfeeding with the addition of other foods for a minimum of one to two years.

We need everyone's help so that families in the greater Chicago area can more easily meet their breastfeeding goals.

~ *Creating One Breastfeeding Community* ~

Coalition Members Include:

- Parents
- Physicians
- Nurses
- Lactation Consultants
- Midwives
- Doulas
- Public Health Staff
- Childbirth Educators
- Occupational and Speech Therapists
- Mother-to-mother Breastfeeding Counselors
- Those wanting to support breastfeeding

Ongoing Activities

Bi-monthly meetings. Meet and network with area breastfeeding supporters at Coalition meetings held the second Monday of January, March, May, July, September, and November. For meeting time, place and directions, see www.chicagoareabfc.org.

Web site. See www.chicagoareabfc.org.

Physician education. With the encouragement of the American Academy of Pediatrics, Coalition members provide educational programs (in-services) to physician's offices and hospitals. To arrange for an in-service program, please contact us at: physicianed@chicagoareabfc.org.

Breastfeeding conferences. The Coalition provides affordable day-long breastfeeding conferences by internationally known speakers in the field.

How You Can Help

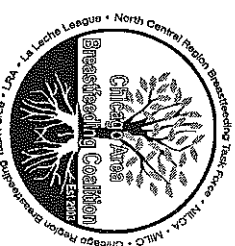
Attend a Coalition meeting.

Add your name to our contact list (see below and back flap) and we will notify you of Coalition educational and community events.

Encourage a physician to schedule an in-service program from our skilled presenters to learn more about breastfeeding.

Make a donation to support the cause. The Coalition has applied for 501(c)(3) non-profit status. When this status is awarded, all donations will be tax-deductible.

Tell us your areas of support and interest below and/or on the back flap and return by mail. You may also e-mail this information to us at: www.chicagoareabfc.org.



Notify me of Coalition educational and community events.

I'd like to arrange for a program for MDs

I am interested as a (check one or both):

_____ parent _____ professional

Please accept my donation (enclosed) of: \$ _____