Breastfeeding: New Hampshire 2011

Human milk is the ideal food for most infants. It is well known that breastfeeding provides the mother and infant with protective health benefits. In addition, breastfeeding offers psychosocial, economic, and environmental benefits to families, communities, and the nation as a whole.

The Surgeon General’s Call to Action to Support Breastfeeding, released in early 2011, highlights the risks associated with formula feeding and early weaning from breastfeeding. Formula feeding is associated with increases in common childhood illnesses, such as diarrhea and ear infections. The risk of acute ear infection is 100 percent higher among exclusively formula-fed infants than in those who are exclusively breastfed during the first six months. The increased risk for severe lower respiratory infections and leukemia is also higher for formula-fed infants. The risk of hospitalization for lower respiratory tract disease in the first year of life is more than 250 percent higher among babies who are formula fed. Infants who are never breastfed have a 56 percent greater risk of Sudden Infant Death Syndrome (SIDS). Higher risks for type 2 diabetes, asthma, and childhood obesity are associated with formula feeding. In addition, exclusive breastfeeding and longer duration of breastfeeding are associated with improved maternal health outcomes, such as a decreased risk of breast and ovarian cancer.

The National Immunization Survey (NIS) is a nationwide survey that primarily provides estimates of vaccination coverage for children ages 19 to 35 months. Since July 2001, questions have been added to assess breastfeeding practices. According to NIS, approximately 75.0 percent of infants born in the United States in 2007 were breastfed or fed breast milk. In New Hampshire 78.6 percent of infants were breastfed.

Breastfed infants in New Hampshire, by birth year, NIS, 2001-2007

* Final estimates for children born in 2007 will be available in August 2011.

* The term “formula” includes all human milk substitutes.
New Hampshire is one of ten states that achieved all five Healthy People 2010 breastfeeding objectives as listed below.  

**Breastfed infants, born in 2007, compared with Healthy People Goals**

<table>
<thead>
<tr>
<th>Breastfed Infants</th>
<th>Healthy People 2010 Goal</th>
<th>Healthy People 2020 Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ever breastfed</td>
<td>78.6%</td>
<td>75.0%</td>
</tr>
<tr>
<td>Breastfed at 6 months</td>
<td>50.0%</td>
<td>50.0%</td>
</tr>
<tr>
<td>Breastfed at 12 months</td>
<td>25.9%</td>
<td>25.0%</td>
</tr>
<tr>
<td>Exclusively breastfed through 3 months</td>
<td>47.2%</td>
<td>40.0%</td>
</tr>
<tr>
<td>Exclusively breastfed through 6 months</td>
<td>18.8%</td>
<td>17.0%</td>
</tr>
</tbody>
</table>


According to the 2009 PedNSS data, 68.8 percent of NH WIC infants were ever breastfed (61.7 percent nationally) and 26.0 percent were breastfed for at least 6 months (27.0 percent nationally). During the same year, 21.2 percent of NH WIC infants were exclusively breastfed for at least 3 months (9.9 percent nationally) and 6.9 percent were exclusively breastfed for at least 6 months (5.3 percent nationally).

**Breastfed infants enrolled in NH WIC, PedNSS, 2001-2009**
Results from the 2007 Maternity Practices in Infant Nutrition and Care (mPINC), a nationwide survey of breastfeeding-related maternity practices conducted by CDC, indicate that most states need to improve mother-baby care at hospitals and birth centers in order to more successfully meet national quality of care standards for perinatal care and to increase breastfeeding rates. In New Hampshire, 23 out of 25 eligible hospitals responded to the survey. All the responding hospitals include breastfeeding education in their prenatal classes and provide breastfeeding advice and instruction to mothers who are breastfeeding, or intend to breastfeed, but improvements are still needed. Sixty-seven percent of responding hospitals adhere to the standard clinical practice guidelines of not routinely supplementing breastfed babies with formula, water, or glucose water. Less than a quarter (24 percent) have comprehensive breastfeeding policies, 33 percent annually assess for staff competency in basic breastfeeding management and support, and 20 percent use combined mother-baby postpartum care throughout the hospital stay. Practices such as these need to be strengthened to provide a supportive environment for breastfeeding.

The mPINC Survey assesses several aspects of evidence-based maternity care on a scale of 0 to 100 with regard to: labor and delivery care, feeding breastfed infants, prenatal and postpartum breastfeeding assistance, mother-baby postpartum care, facility discharge care, staff training, and structural and organizational aspects of care delivery. Despite needed improvements, New Hampshire ranked first in the nation with a composite quality practice score of 81 out of 100 points.

* The term “hospital” includes hospitals and birthing centers. New Hampshire had 25 maternity hospitals in 2007 and has 21 in 2011.
Baby-Friendly Hospital Initiative

A set of optimal maternity care practices have been identified to better support breastfeeding outcomes. The Baby-Friendly Hospital Initiative (BFHI), established by the World Health Organization and UNICEF in 1991, endorses maternity practices known as the Ten Steps to Successful Breastfeeding. The BFHI recognizes hospitals that give mothers the information, confidence, and skills needed to successfully initiate and continue breastfeeding their babies. To achieve the Baby-Friendly Designation, hospitals must register with Baby-Friendly USA; complete all of the requirements; and ultimately demonstrate during an on-site assessment that they have integrated all ten steps into their practice for healthy newborns. To date, New Hampshire has 21 maternity care hospitals, of which three are Baby-Friendly: Alice Peck Day Memorial Hospital in Lebanon, Concord Hospital in Concord, and St. Joseph Hospital in Nashua. Only 16 percent of live births in New Hampshire occur at a Baby-Friendly Hospital.

Breastfeeding-Friendly Communities and Worksites

Breastfeeding-friendly communities are evaluated using several process indicators related to birth facilities, number of health professionals, public infrastructure, and state legislation. New Hampshire has a law protecting a woman’s right to breastfeed in public. NH RSA 132:10d states: Breast-feeding a child does not constitute an act of indecent exposure and to restrict or limit the right of a mother to breast-feed her child is discriminatory. Forty-nine states have laws that allow women to breastfeed in any public or private location; twenty-four states have laws related to breastfeeding in the workplace.

With passage of the Patient Protection and Affordable Care Act on March 23, 2010, employers are required to provide “reasonable break time for an employee to express breast milk for her nursing child for 1 year after the child’s birth each time such employee has need to express the milk.” Employers are also required to provide “a place, other than a bathroom, that is shielded from view and free from intrusion from coworkers and the public, which may be used by an employee to express breast milk.”
New Hampshire has an estimated 6.2 International Board Certified Lactation Consultants per 1,000 live births compared with 2.4 nationally. The New Hampshire Department of Health and Human Services had a half-time equivalent dedicated to breastfeeding at the time of the 2007 mPINC survey, primarily providing services in the WIC Program. Since 2007, New Hampshire has increased the capacity to one full-time equivalent in response to the growing interest and national support around breastfeeding. New Hampshire also has a breastfeeding task force with a public website (42 states nationally) 7.

Healthy People 2020
The Healthy People 2020 Goals for individual behavior are to increase the percentages of: infants who are ever breastfed to 81.9 percent; infants breastfed at 6 months to 60.6 percent; infants breastfed until 1 year to 34.1 percent; infants exclusively breastfed through 3 months to 46.2 percent; and infants exclusively breastfed through 6 months to 25.5 percent.

The 2020 edition of this national document added goals that address maternity care practices and worksite lactation support 8. The new maternity care objectives include reducing the proportion of breastfed infants who receive formula supplementation within the first two days of life to 14.2 percent and to increase the proportion of live births that occur in facilities that provide recommended care for lactating mothers and their babies to 8.1 percent. The new worksite objective aims to increase the proportion of employers who have worksite lactation support programs to 38 percent. Nationally, only 25 percent reported that they provide on-site lactation space (for pumping) in 2009. Meeting these goals in maternity care practices and worksites will provide supportive environments that help increase breastfeeding initiation, duration, and exclusivity.

References