



Breastfeeding Experiences and Reasons for Discontinuation Among New Hampshire Women Who Gave Birth in 2014

The New Hampshire Pregnancy Risk Assessment Monitoring System (NH PRAMS) collects data on a variety of topics related to maternal health. This report is based on PRAMS survey data collected from NH residents who gave birth in 2014. For more information on NH PRAMS and to access the complete 2013 and 2014 NH PRAMS Data Books and other publications visit: <http://www.dhhs.nh.gov/dphs/bchs/mch/prams.htm>

Pregnancy Risk Assessment Monitoring System

Breastfeeding Recommendations

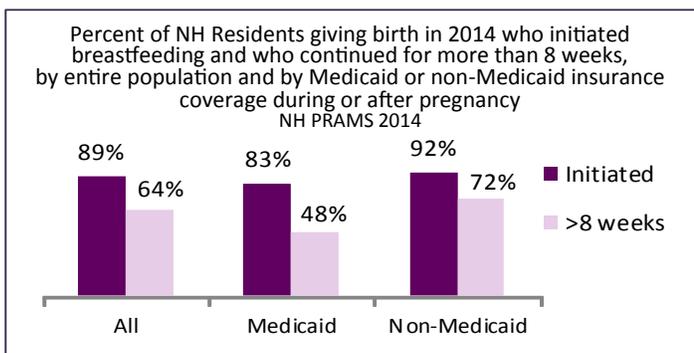
It is widely acknowledged that breastfeeding has significant health benefits for both infants and mothers and that breastmilk provides optimal nutrition for infants. Among the benefits for infants are reduced risk of infections, allergies, asthma, obesity, diabetes and Sudden Infant Death Syndrome. Maternal benefits include faster loss of pregnancy weight, lower risk of breast and ovarian cancer, and enhanced opportunities for maternal-infant bonding. The American Academy of Pediatrics, the American College of Obstetricians and Gynecologists, the World Health Organization and the United Nations International Children’s Fund all recommend exclusive breastfeeding up to six months with continued breastfeeding for at least one year. The Healthy People 2020 national objectives for breastfeeding as established by the US Department of Health and Human Services include:

Increase the proportion of infants who ever breastfed to 81.9% (74% in 2006)

Increase the proportion of infants who were breastfed at 6 months to 60.6% (43.5% in 2006)¹

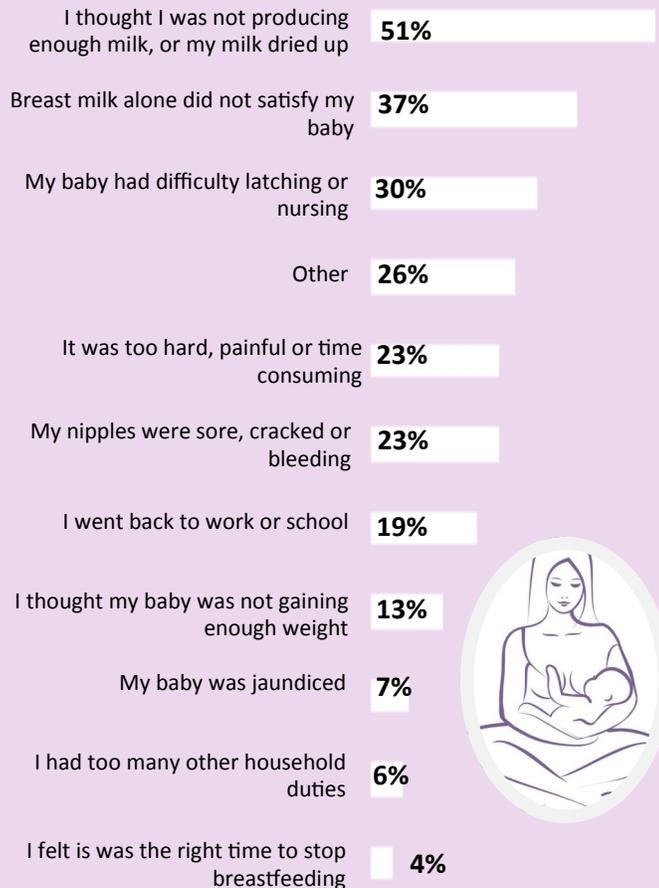
PRAMS and Breastfeeding

New Hampshire PRAMS samples approximately 1000 resident women each year. The data is weighted to reflect the entire population of New Hampshire women who have had a live birth that year. This report is based on the 2014 data and may be helpful in evaluating strategies for educating and supporting breastfeeding mothers in New Hampshire.



Reasons Cited for Discontinuing Breastfeeding Among Those Who Ever Breastfed

NHPRAMS 2014



Reasons Most Frequently Cited for Discontinuing Breastfeeding

Prior to 8 weeks postpartum:

- Not making enough milk
- Milk not satisfying baby
- Difficulty latching
- Nipples sore, cracked, or painful

After 8 weeks postpartum:

- Back to work or school
- Not making enough milk
- Baby not gaining weight
- Difficulty latching

¹ <https://www.cdc.gov/breastfeeding/policy/hp2020.htm>

PRAMS Survey Questions
on Hospital Breastfeeding Experiences
NH PRAMS 2014

Q 54. This question asks about things that may have happened at the hospital where your new baby was born (Yes or No answers; Women whose babies died, were not living with them , or were not born in a hospital, and women who did not initiate breastfeeding were not asked this question).

Hospital Experience	% Yes
Breastfed baby in hospital	96.8%
Hospital staff gave me info about breastfeeding	96.6%
My baby stayed in same room w/me	94.8%
Hospital staff helped me learn to breastfeed	91.6%
Hospital staff instructed me to feed baby on demand	90.9%
Hospital staff gave me a phone number to call for breastfeeding help	90.5%
Breastfed in 1st hour after baby born	81.6%
I fed my baby only breastmilk in hospital	79.4%
Hospital staff gave me a breast pump to use	36.5%
Hospital staff gave baby a pacifier	30.8%
Hospital staff gave me a gift pack with formula	18.9%

"I had a lot of difficulty establishing breastfeeding and the lactation consultants at the hospital were extremely helpful. I couldn't have done it without them!"

~PRAMS Mother

In New Hampshire 50% of all deliveries occur in Baby-Friendly Hospitals™, while nationally, that figure is 18.3%.¹

The Baby Friendly Hospital Initiative developed by The World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) recognizes hospitals worldwide that have adopted and implemented the *Ten Steps to Successful Breastfeeding*.²

The Ten Steps to Successful Breastfeeding are:

1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
2. Train all health care staff in the skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers initiate breastfeeding within one hour of birth.
5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.
6. Give infants no food or drink other than breast-milk, unless medically indicated.
7. Practice rooming in - allow mothers and infants to remain together 24 hours a day.
8. Encourage breastfeeding on demand.
9. Give no pacifiers or artificial nipples to breastfeeding infants.
10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or birth center.

¹ <https://www.dhhs.nh.gov/dphs/nhp/wic/breastfeeding.htm>

² <http://www.babyfriendlyusa.org>

Resources:

Baby-Friendly USA, www.babyfriendlyusa.org

NH Breastfeeding Task Force,

www.nhbreastfeedingtaskforce.org/

NH Women Infants and Children Nutrition Program (WIC)

Breastfeeding Promotion page:

<https://www.dhhs.nh.gov/dphs/nhp/wic/breastfeeding.htm>

About NH PRAMS

The Pregnancy Risk Assessment Monitoring System, PRAMS, is an ongoing population based surveillance project of the CDC and state departments of health, with the goals of reducing infant mortality and low birth weight and improving the overall health of mothers and infants. New Hampshire PRAMS was funded in 2011 by the CDC and began collecting data in 2013. Funding for NH PRAMS was provided by the Centers for Disease Control and Prevention under grant #U01DP003156. Contents of this publication do not necessarily represent the official views of the CDC.

This topic brief was developed by NH PRAMS in cooperation with the New Hampshire Women, Infants and Children Nutrition Program (WIC).



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