



Breastfeeding Report Card — United States, 2012

Improving the health of mothers and their children is a primary goal of the Centers for Disease Control and Prevention (CDC). Protecting, promoting, and supporting breastfeeding, with its many known benefits for infants, children, and mothers, is a key strategy toward this goal.

There are many ways that states support mothers and babies to breastfeed, and everyone plays a role. The CDC Breastfeeding Report Card brings together state-by-state information to help tell the story of breastfeeding practices in states. It compiles many types of data so states can monitor progress, celebrate state successes, and identify opportunities to work with health professionals, employers, business owners, community partners and family members to protect, promote, and support breastfeeding.

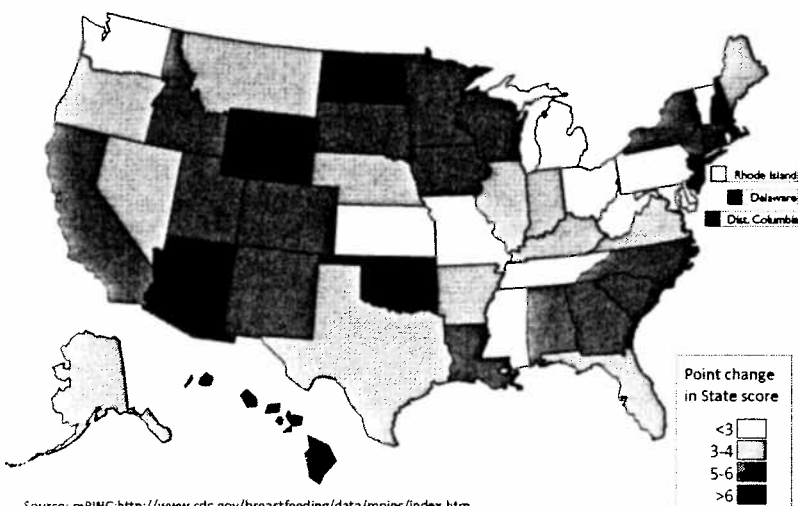
Breastfeeding rates on the rise

Breastfeeding rates continue to rise, with increases of about 2 percentage points in breastfeeding initiation, and breastfeeding at 6 and 12 months. Breastfeeding initiation increased from 74.6% in 2008 to 76.9% in 2009 births. This improvement in initiation represents the largest annual increase over the previous decade. Breastfeeding at 6 months increased from 44.3% to 47.2%; breastfeeding at 12 months increased from 23.8% to 25.5%.

Progress in improving hospital practices

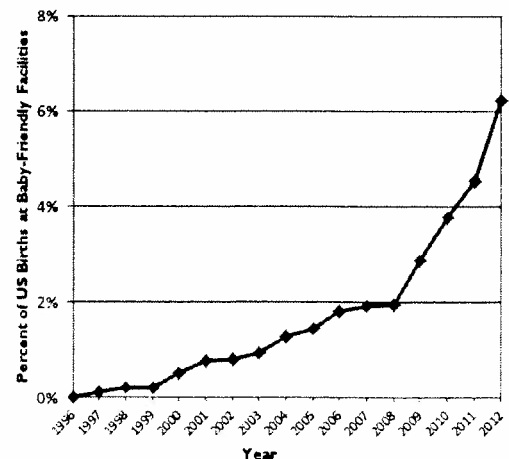
CDC's Maternity Practices in Infant Nutrition and Care (mPINC) survey assesses and scores how well maternity care practices at hospitals and birth centers support breastfeeding, on a scale of 0–100, with a higher score indicating better practices. From 2009 to 2011 the national average mPINC score increased from 65 to 70, and scores increased by 5 or more points in 26 states and DC. The last few years also have seen acceleration in the percent of babies that are born in hospitals designated as Baby-Friendly, an international recognition of best practices in maternity care. In 2008, less than 2% of births occurred in Baby Friendly facilities. In the last 4 years that number has more than tripled to 6%. While both of these indicators show national improvement in hospital maternity care practices, they also suggest that many mothers are not receiving the quality of care that will give them the best possible start to meeting their breastfeeding intentions.

Figure 1: Changes in State mPINC scores between 2009 and 2011



Source: mPINC: <http://www.cdc.gov/breastfeeding/data/mpinc/index.htm>

Figure 2: Percent of US Births at Baby-Friendly Hospitals, 1996-2012



Sources: Baby-Friendly facilities: www.babyfriendlyusa.org
Live Births: CDC NCHS Live Births by State



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“More and more mothers are breastfeeding every year... every mother in our nation deserves information, guidance, and support with this decision from her family and friends, the community where she lives, the health professionals on whom she relies, and her employer.”

Kathleen Sebelius
Secretary
United States Department of
Health and Human Services
*Surgeon General’s Call to Action
to Support Breastfeeding*

State	Ever Breastfed	Breastfeeding at 6 months	Breastfeeding at 12 months	Exclusive breastfeeding at 3 months	Exclusive breastfeeding at 6 months
U.S. National	76.9	47.2	25.5	36.0	16.3
Alabama	57.2	29.7	14.4	24.8	9.1
Alaska	85.1	54.6	31.7	46.6	21.0
Arizona	76.8	43.4	27.5	35.3	19.6
Arkansas	62.4	29.2	13.3	23.8	10.6
California	87.6	56.1	31.1	41.4	21.7
Colorado	87.5	56.9	27.3	50.7	26.6
Connecticut	79.1	48.4	23.8	35.8	12.6
Delaware	71.8	42.8	22.3	32.2	13.1
Dist of Columbia	72.5	46.6	24.2	33.0	14.8
Florida	77.0	46.2	30.1	38.9	19.2
Georgia	70.9	40.8	17.6	27.8	12.9
Hawaii	85.1	51.1	32.4	42.6	20.7
Idaho	90.8	58.9	35.4	52.4	23.2
Illinois	76.8	49.8	25.3	35.7	13.6
Indiana	72.6	39.2	20.9	31.3	13.8
Iowa	79.3	48.7	27.4	43.0	15.6
Kansas	80.2	45.1	23.1	37.8	17.4
Kentucky	59.4	27.3	10.8	21.1	9.6
Louisiana	53.5	23.6	11.9	17.3	9.6
Maine	76.1	41.5	23.1	37.9	15.2
Maryland	72.6	48.5	22.0	31.5	15.0
Massachusetts	84.2	56.8	34.5	40.8	16.5
Michigan	79.1	48.5	24.0	37.2	17.9
Minnesota	78.0	53.8	29.2	35.5	16.1
Mississippi	47.2	26.2	13.0	20.0	7.6
Missouri	77.6	43.1	24.3	36.7	16.2
Montana	83.5	45.4	27.0	40.1	12.5
Nebraska	82.2	53.4	27.0	44.7	20.2
Nevada	79.5	37.4	20.6	37.2	11.7
New Hampshire	83.1	60.0	35.1	52.0	24.7
New Jersey	79.7	47.9	26.1	33.0	16.1
New Mexico	81.5	54.7	31.2	41.4	22.8
New York	80.8	53.7	29.5	33.0	15.3
North Carolina	68.2	38.3	20.8	37.6	15.3
North Dakota	72.9	45.0	21.2	34.8	15.4
Ohio	62.3	39.5	25.6	29.1	11.0
Oklahoma	71.4	33.2	14.6	30.3	10.4
Oregon	88.9	68.1	48.7	56.6	26.3
Pennsylvania	68.1	42.3	21.6	37.2	14.1
Rhode Island	73.7	46.8	26.7	34.0	16.9
South Carolina	63.7	35.3	16.4	27.0	13.3
South Dakota	79.1	57.1	28.2	39.9	22.1
Tennessee	64.3	30.8	13.0	33.2	13.9
Texas	80.3	50.7	25.6	36.1	13.7
Utah	85.7	64.4	37.6	51.4	24.8
Vermont	81.1	61.9	40.6	49.3	23.3
Virginia	75.9	48.2	24.6	34.0	15.8
Washington	89.2	54.5	34.1	44.4	19.9
West Virginia	55.1	28.1	15.4	23.3	9.1
Wisconsin	81.3	48.7	21.9	31.4	16.9
Wyoming	80.4	53.2	22.6	44.6	20.5

Source: Centers for Disease Control and Prevention National Immunization Survey, Provisional Data, 2009 births.

Breastfeeding Report Card—United States, 2012

State	Average mPINC Score	Percent of live births occurring at Baby Friendly Facilities	Percent of breastfed infants receiving formula before 2 days of age	Number of La Leche League Leaders per 1,000 live births	Number of IBCLCs* per 1,000 live births	State's child care regulation supports onsite breastfeeding
U.S. National	70	6.22	24.6	0.95	3.24	6.00
Alabama	63	2.44	22.5	0.48	2.11	No
Alaska	78	21.71	14.5	1.31	7.15	No
Arizona	73	0	27.7	0.85	2.85	Yes
Arkansas	55	0	16.0	0.54	1.71	No
California	79	21.39	26.3	0.67	3.73	Yes
Colorado	77	7.72	19.5	1.46	3.81	No
Connecticut	76	19.38	23.8	2.23	4.97	No
Delaware	77	0	19.6	0.26	3.61	Yes
Dist of Columbia	79	11.40	28.8	0.55	1.42	No
Florida	69	2.93	25.6	0.87	2.36	No
Georgia	65	0	34.4	0.68	2.51	No
Hawaii	76	8.95	29.6	0.63	4.27	No
Idaho	73	7.01	13.4	1.16	3.15	No
Illinois	66	1.43	32.3	0.93	2.85	No
Indiana	68	12.16	15.7	1.02	4.31	No
Iowa	67	0	20.8	0.75	2.63	No
Kansas	64	0	22.1	1.92	3.40	No
Kentucky	60	5.84	19.7	0.34	2.63	No
Louisiana	65	0	26.2	0.58	2.18	No
Maine	83	27.67	16.0	2.16	6.40	No
Maryland	70	0	22.7	0.98	3.94	No
Massachusetts	84	5.58	21.1	1.68	5.31	No
Michigan	67	0.55	20.2	1.52	2.56	No
Minnesota	72	4.14	17.5	1.09	4.33	No
Mississippi	51	0	28.6	0.75	1.67	Yes
Missouri	66	0.88	18.1	1.49	3.34	No
Montana	69	0.26	10.1	2.32	3.73	No
Nebraska	64	7.54	18.7	1.39	3.43	No
Nevada	60	0	24.3	0.78	1.37	No
New Hampshire	88	27.29	10.0	2.41	7.62	No
New Jersey	71	2.59	35.5	1.43	3.04	No
New Mexico	69	0	19.1	0.79	3.17	No
New York	73	4.49	29.7	0.64	2.97	No
North Carolina	67	9.91	18.9	1.37	4.36	Yes
North Dakota	72	0	14.8	0.66	1.98	No
Ohio	71	4.18	17.8	1.08	3.57	No
Oklahoma	62	0	22.7	0.64	2.80	No
Oregon	80	8.32	17.7	1.49	6.65	No
Pennsylvania	66	0.08	14.1	1.19	2.75	No
Rhode Island	81	14.19	25.6	0.63	5.56	No
South Carolina	67	0	29.8	0.67	2.23	No
South Dakota	63	0	24.1	0.42	2.54	No
Tennessee	62	0.26	17.5	0.54	2.19	No
Texas	66	4.66	30.5	0.55	2.14	No
Utah	69	6.27	17.9	0.71	2.05	No
Vermont	76	3.89	12.6	3.37	13.34	Yes
Virginia	67	0.52	27.8	1.44	4.03	No
Washington	77	9.17	26.0	1.43	5.34	No
West Virginia	60	0	16.7	0.49	3.27	No
Wisconsin	76	16.85	19.9	1.28	4.00	No
Wyoming	70	3.14	17.6	1.72	2.78	No

* IBCLC - International Board Certified Lactation Consultant.

**FTE - Full-Time Equivalent.



Breastfeeding Report Card Indicators – 2012

Healthy People 2020 Breastfeeding Objectives		
Objectives		Target
MICH-21: Increase the proportion of infants who are breastfed		
MICH-21.1	Ever	81.9%
MICH-21.2	At 6 months	60.6%
MICH-21.3	At 1 year	34.1%
MICH-21.4	Exclusively through 3 months	46.2%
MICH-21.5	Exclusively through 6 months	25.5%
MICH-22: Increase the proportion of employers that have worksite lactation support programs.		
		38%
MICH-23: Reduce the proportion of breastfed newborns who receive formula supplementation within the first 2 days of life.		
		14.2%
MICH-24: Increase the proportion of live births that occur in facilities that provide recommended care for lactating mothers and their babies.		
		8.1%

Breastfeeding rates for infants born in 2009 from the U.S. National Immunization Surveys, 2010-2011

- Ever Breastfed
- Breastfeeding at 6 months
- Breastfeeding at 12 months
- Exclusive breastfeeding at 3 months
- Exclusive breastfeeding at 6 months

This nationwide survey provides current national, state, and selected urban-area estimates of vaccination coverage rates for US children ages 19 to 35 months. Since July 2001, breastfeeding questions have been asked on the NIS to assess the population's breastfeeding practices.

Birth Facility Support

- State Maternity Practices in Infant Nutrition and Care (mPINC) score
- Percent of live births occurring at facilities designated as Baby-Friendly
- Percentage of breastfed infants receiving formula before 2 days of age

Birth facility policies and practices significantly impact whether a woman chooses to start breastfeeding and how long she continues to breastfeed. Several specific policies and practices, in combination, determine how much overall support for breastfeeding a woman birthing in a given facility is likely to receive and how likely her baby is to receive formula in the first 2 days.

Two initiatives, one national and one global, provide informative measures of birth facility support. The mPINC Survey initiated by CDC, measures breastfeeding-related maternity care practices at intrapartum care facilities across the US and compares the extent to which these practices vary by state. Thus, the state mPINC score represents the extent to which each state's birth facilities provide maternity care that supports breastfeeding.

The Baby-Friendly Hospital Initiative (BFHI) is a global program sponsored by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) to encourage and recognize hospitals and birthing centers that offer an optimal level of care for lactation based on the WHO/UNICEF Ten Steps to Successful Breastfeeding for Hospitals.

Mother-to-Mother Support

- Number of La Leche League Leaders per 1,000 live births

La Leche League (LLL) is an organization of trained and accredited volunteer mothers who provide support and help to pregnant and breastfeeding mothers. This support is provided through group meetings, online, via telephone and partnership efforts throughout their communities. This kind of assistance is an important element of comprehensive breastfeeding support. The number of La Leche League Leaders per 1,000 live births provides a broad estimate of the availability of breastfeeding assistance in a given state.

Professional Support

- Number of International Board Certified Lactation Consultants (IBCLCs) per 1,000 live births

IBCLCs are health professionals who specialize in the clinical management of breastfeeding. IBCLCs work in many health care settings, such as hospitals, birth centers, physicians' offices, public health clinics, and their own offices. A strong statewide group of professional breastfeeding experts (IBCLCs) is needed to assist the mother-infant pair, create and administer lactation programs, and educate other health professionals about breastfeeding. Availability is measured by the ratio of IBCLCs to the number of live births.

Support in Child Care Settings

- State's child care regulation support onsite breastfeeding

In the US, many infants are routinely cared for by someone other than a parent. About half of these infants attend child care centers; the other half spend time in a variety of home-based settings including licensed family child care homes or the home of a family member, friend, or neighbor. Thus, child care facilities – both family child care homes and child care centers – play an important role in supporting breastfeeding among mothers whose infants are cared for in these facilities. State scores were obtained from appropriate fluids rating (1A1- support breastfeeding by making arrangements for mothers to feed their child on-site) as determined by the National Resource Center for Health and Safety in Child Care and Early Education, which categorized state regulation as fully supportive of onsite breastfeeding with a score of 4.

The CDC Breastfeeding Report Card was first released in 2007 and is updated annually. Indicator data sources and National Immunization Survey statistical information available at: www.cdc.gov/breastfeeding/data/

For more information:
Division of Nutrition, Physical Activity, and Obesity
National Center for Chronic Disease Prevention and Health Promotion
Centers for Disease Control and Prevention
Atlanta, GA USA
1-800-CDC-INFO (232-4636)

August 2012



DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR DISEASE CONTROL AND PREVENTION

SAFER • HEALTHIER • PEOPLE™

NEW YORK
state department of
HEALTH

Nirav R. Shah, M.D., M.P.H.
Commissioner

Sue Kelly
Executive Deputy Commissioner

November 26, 2012

Dear Hospital Administrator:

Promoting exclusive and sustained breastfeeding are important public health objectives in New York. This letter is to remind you of existing state hospital regulations that restrict unnecessary supplemental in-hospital formula feedings and the distribution of infant formula at hospital discharge. Both of these practices can deter exclusive breastfeeding by new mothers.¹

In New York State, 83% of healthy newborns received some (any) breast milk during their birth hospitalization, but the percentage of healthy infants who were fed exclusively breast milk was only 40%.^{2,3} While the percentage of healthy infants that received any breast milk is above the *Healthy People 2020* goal of at least 82%, the percentage of healthy infants who were fed exclusively breast milk was significantly below the *Healthy People 2020* goal of at least 70%.⁴ Thus, promoting and supporting exclusive breastfeeding is a top priority.

New York State Department of Health (Department) regulations (10 NYCRR § 405.21) require hospitals to have written policies and procedures in place that ensure breastfed infants only receive supplemental feedings (e.g., infant formula) if indicated due to medical conditions of the newborn or the mother.⁵ **Supplemental, in-hospital formula feedings for breastfed newborns should only be permitted when medically indicated.** The regulations also restrict hospitals from **distributing discharge packs containing infant formula unless there is a specific order by the attending practitioner or a direct request from the mother.**⁵

To ensure that only those infants who require formula receive it, the Department recommends that hospitals adopt policies to require documentation of medical indications in the infants' charts and specific orders for supplemental feedings by attending practitioners. Similarly, for mothers who specifically request formula, nursing or medical staff should document the reasons for the request and how much formula was given.

The enclosed two charts show preliminary 2011 data for New York State hospitals that provide maternity care. The first chart ranks hospitals by the percentage of infants who were fed exclusively breast milk (blue bars); compared to the *Healthy People 2020* goal of at least 70%. Fourteen hospitals met this goal in 2011. The red bars show the percentage of infants who were fed any breast milk (i.e., infants who were fed breast milk alone and those fed both breast milk

¹ U.S. Department of Health and Human Services. *The Surgeon General's Call to Action to Support Breastfeeding*. Washington, DC: Office of the Surgeon General; 2011. www.surgeongeneral.gov.

² Bureau of Biometrics and Health Statistics, New York State Department of Health, 2011.

³ Bureau of Vital Statistics, New York City Department of Health and Mental Hygiene, Provisional data for 2011.

⁴ *Healthy People 2020*. www.healthypeople.gov/2020/topicsobjectives2020/objectiveslist.aspx?topicId=26.

⁵ New York Codes Rules and Regulations Title 10 § 405.21(f)(3)(i)(b)(3) (2009).

and formula); compared to the *Healthy People 2020* goal of at least 82%. Fifty-three hospitals met this goal in 2011.

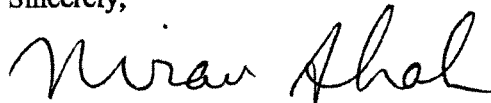
The second chart shows, among infants fed any breast milk in the hospital, the percentages that were also given formula. In New York State, 52% of breastfed infants received formula supplementation during the birth hospitalization.^{2,3} Hospitals are ranked from the lowest percentage of formula supplementation to the highest. In 2011, only 27 New York State hospitals met the *Healthy People 2020* goal that no more than 14% of breastfed infants be supplemented with formula.⁴

There is a great opportunity for improvement of exclusive breastfeeding rates in hospitals. I urge you to review your hospital policies and procedures with respect to providing infant formula to breastfed newborns in the hospital and at discharge to ensure compliance with Department regulations. If every hospital adheres to practices that do not interfere with the intent to breastfeed, we will increase the rates of exclusive breastfeeding, reduce illnesses in infancy, and improve the health of New York's children and mothers.⁶

If you have any questions or would like more information, please send them to promotebreastfeeding@health.state.ny.us.

I appreciate your commitment to improving the health of New York's children, mothers and families.

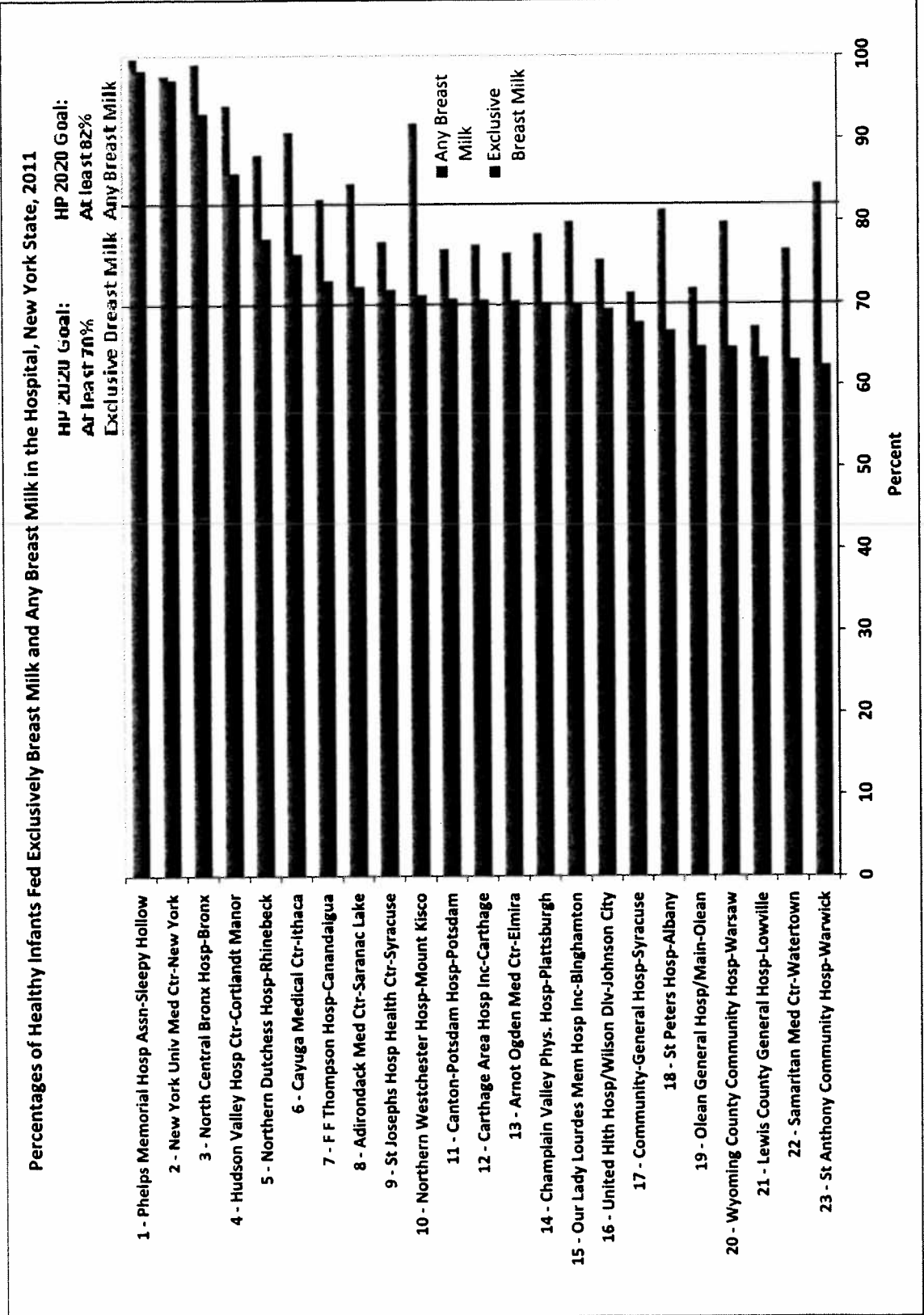
Sincerely,



Nirav R. Shah, M.D., M.P.H.
Commissioner of Health

Enclosure: Charts: Percentages of Healthy Infants Fed Exclusively Breast Milk and Any Breast Milk in the Hospital, New York State, 2011; and Percentage of Healthy Breastfed Infants also Fed Formula in the Hospital, New York State, 2011.

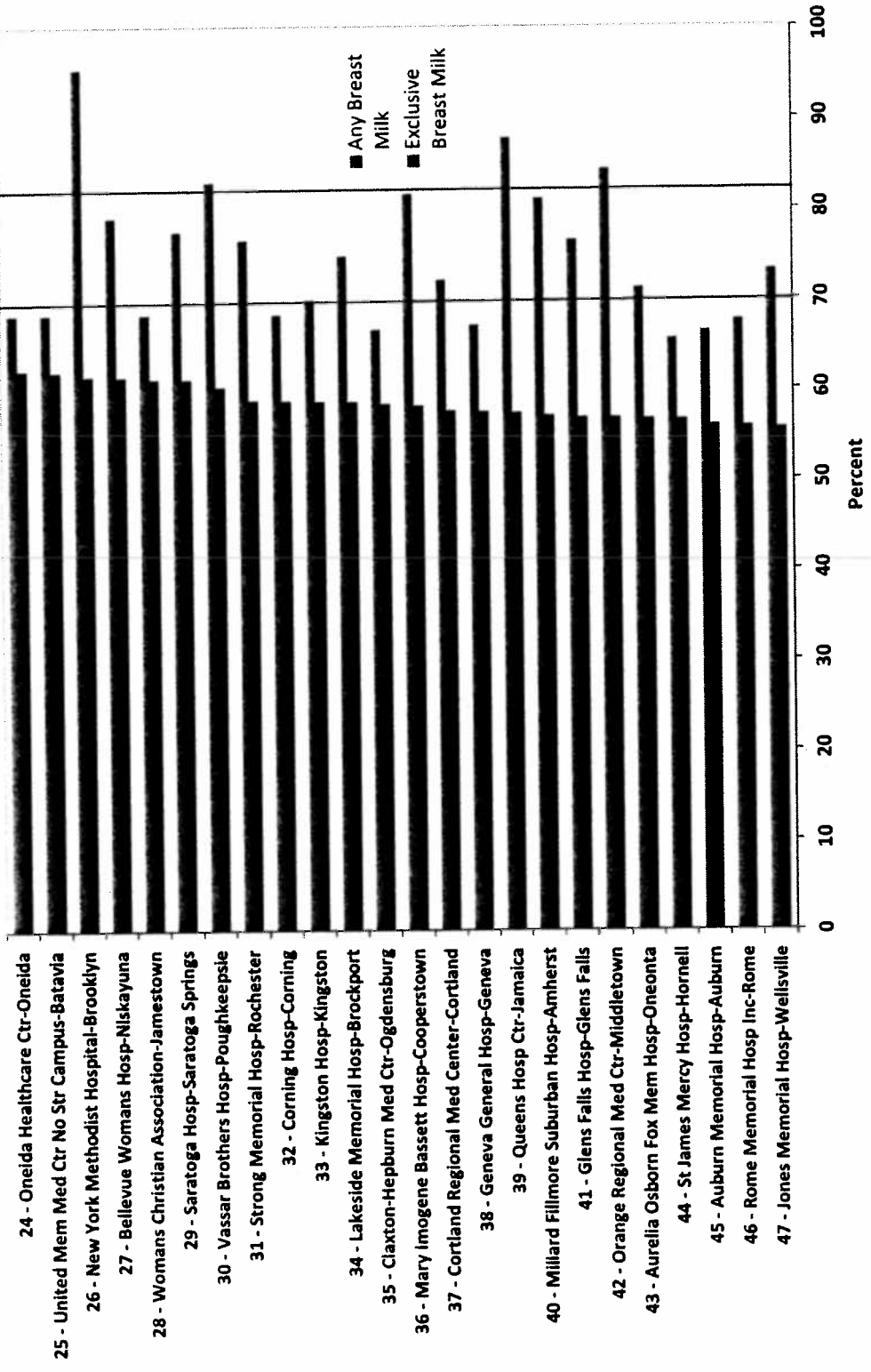
⁶ Bartick M. and Reinhold A. *The Burden of Suboptimal Breastfeeding in the United States: A Pediatric Cost Analysis*. Pediatrics 2010;125(5):e1048-1056. www.pediatrics.org/cgi/doi/10.1542/peds.2009-1616.



Sources: Bureau of Biometric and Health Statistics, New York State Department of Health, 2011 and Bureau of Vital Statistics, NYC Department of Health and Mental Hygiene, 2011. Technical notes: Data for NYC hospitals are preliminary. Excludes infants admitted to the Neonatal Intensive Care Unit (NICU), transferred to or from another hospital, or with missing feeding information.

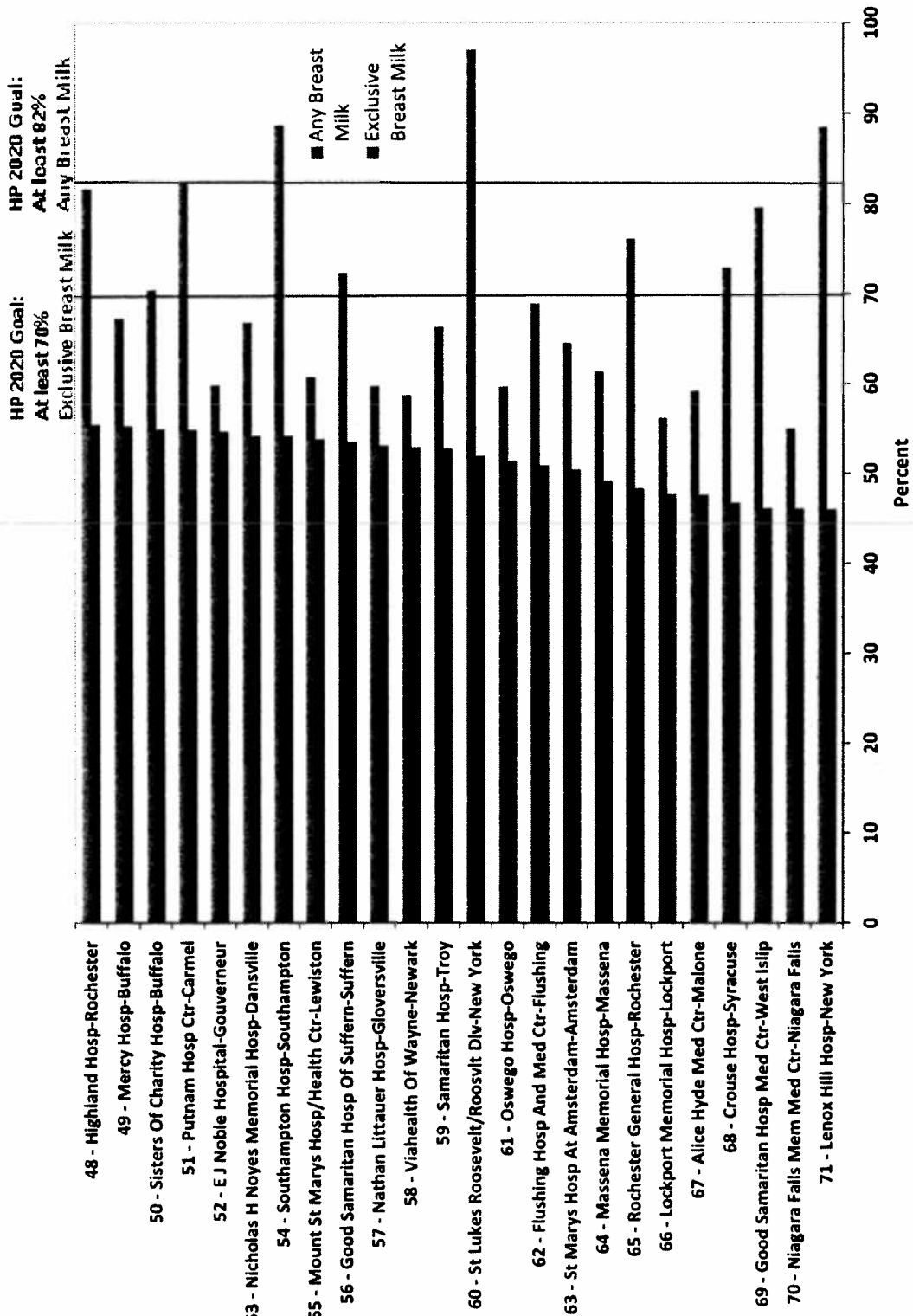
Percentages of Healthy Infants Fed Exclusively Breast Milk and Any Breast Milk in the Hospital, New York State, 2011

HP 2020 Goal: **At least 70%**
 AI 1991 RD%
 Any Breast Milk
 Exclusive Breast Milk



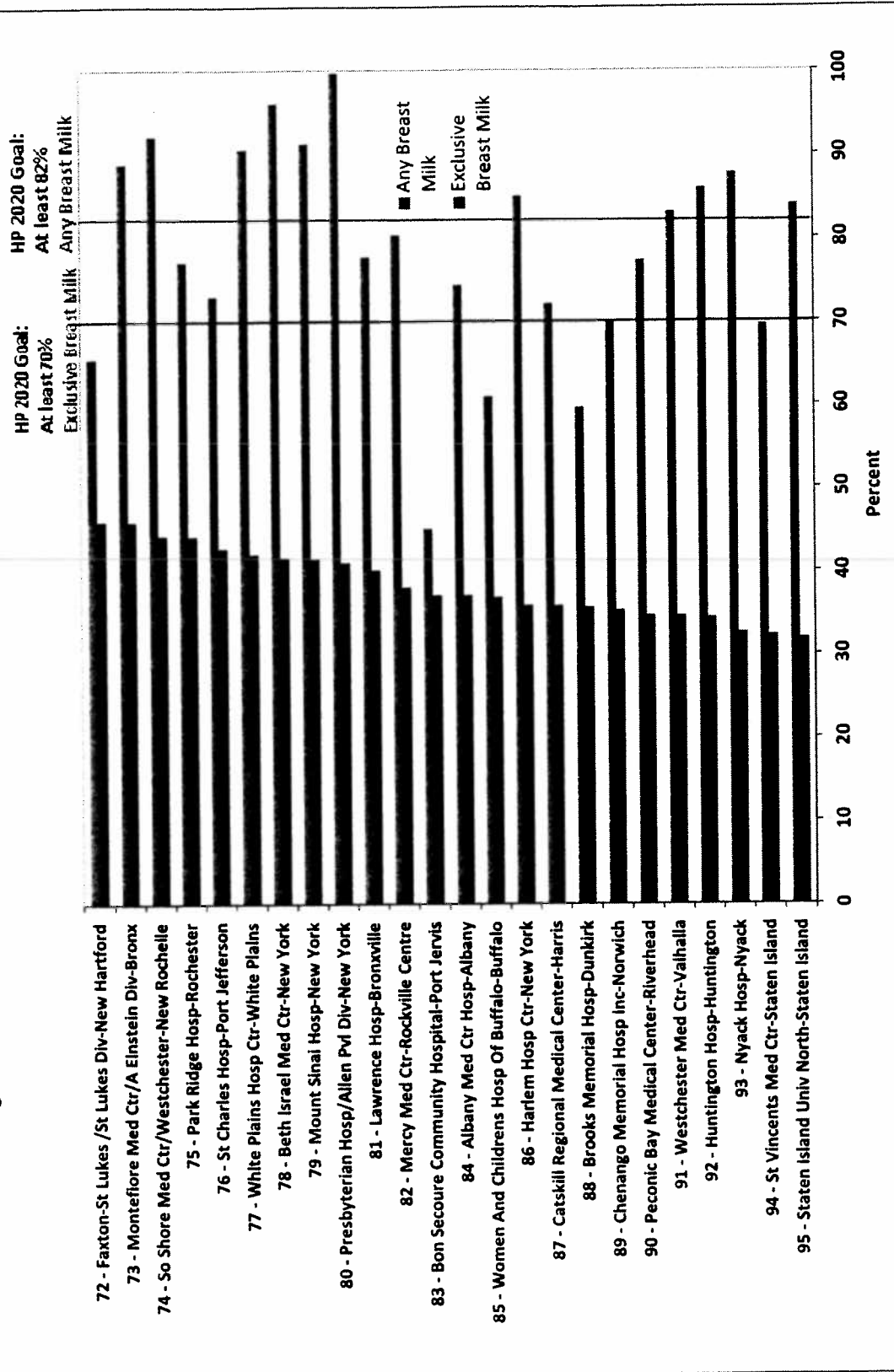
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Percentages of Healthy Infants Fed Exclusively Breast Milk and Any Breast Milk in the Hospital, New York State, 2011



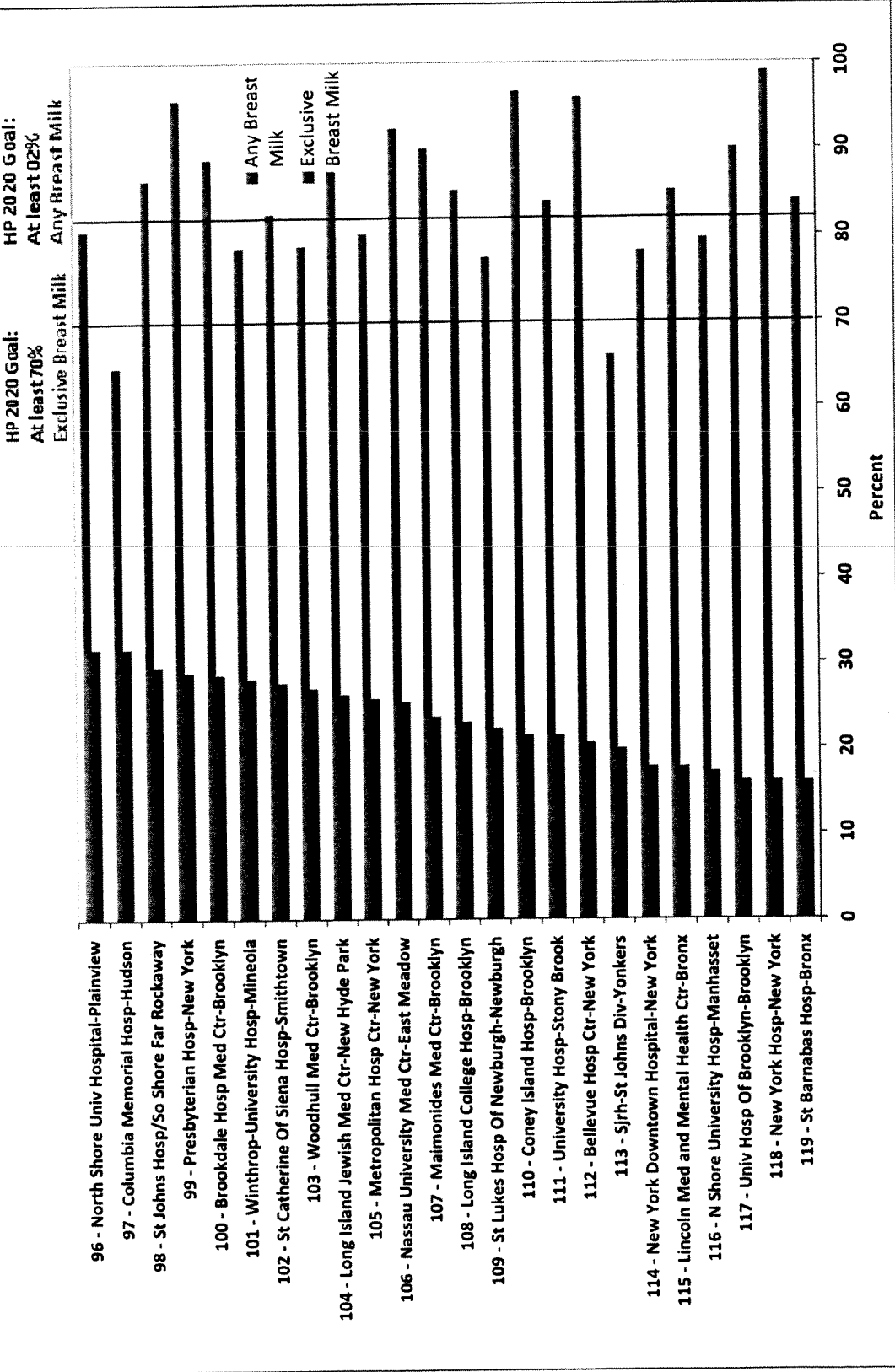
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Percentages of Infants Fed Exclusively Breast Milk and Any Breast Milk in the Hospital, New York State, 2011



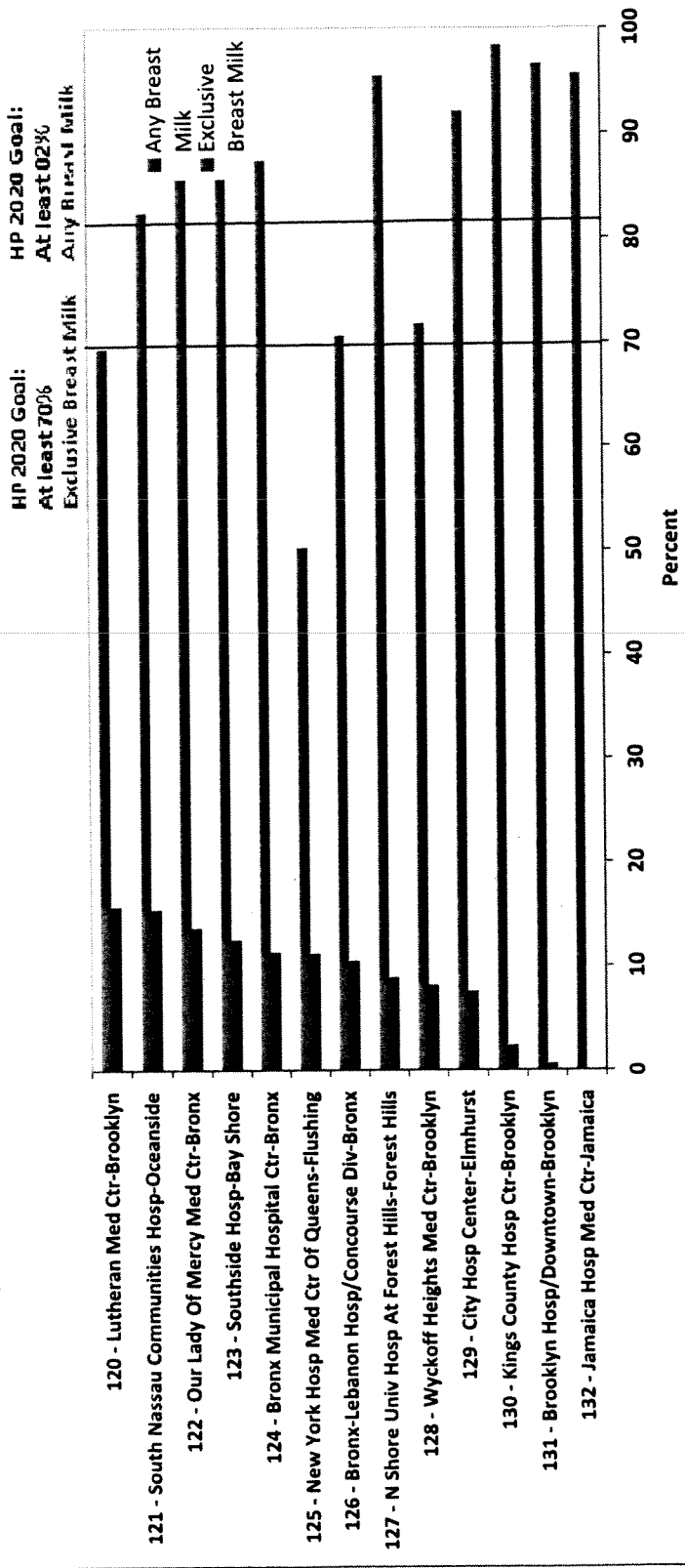
Sources: Bureau of Biometric and Health Statistics, New York State Department of Health, 2011 and Bureau of Vital Statistics, NYC Department of Health and Mental Hygiene, 2011. Technical notes: Data for NYC hospitals are preliminary. Excludes infants admitted to the Neonatal Intensive Care Unit (NICU), transferred to or from another hospital, or with missing feeding information.

Percentages of Healthy Infants Fed Exclusively Breast Milk and Any Breast Milk in the Hospital, New York State, 2011



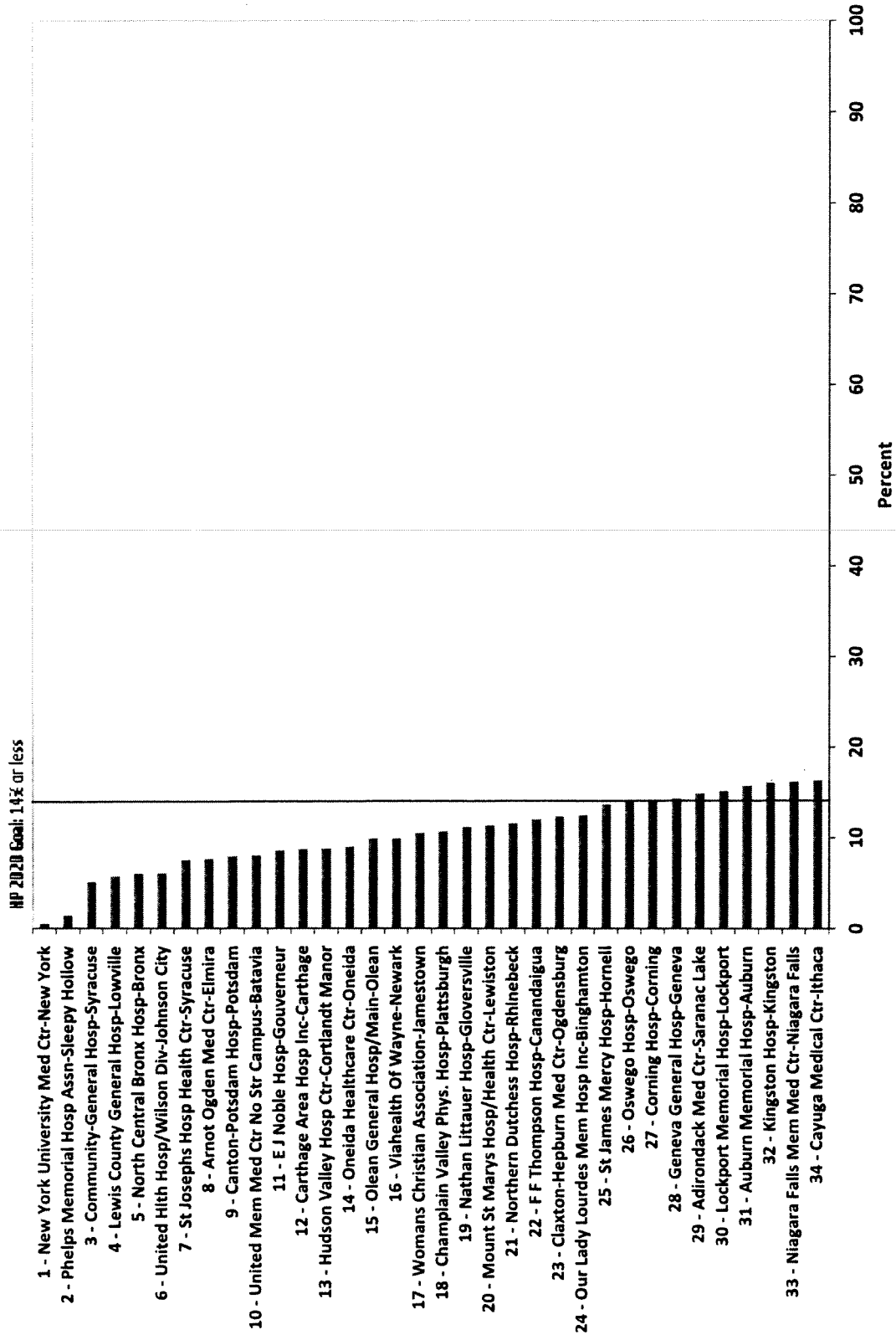
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Percentages of Healthy Infants Fed Exclusively Breast Milk and Any Breast Milk in the Hospital, New York State, 2011



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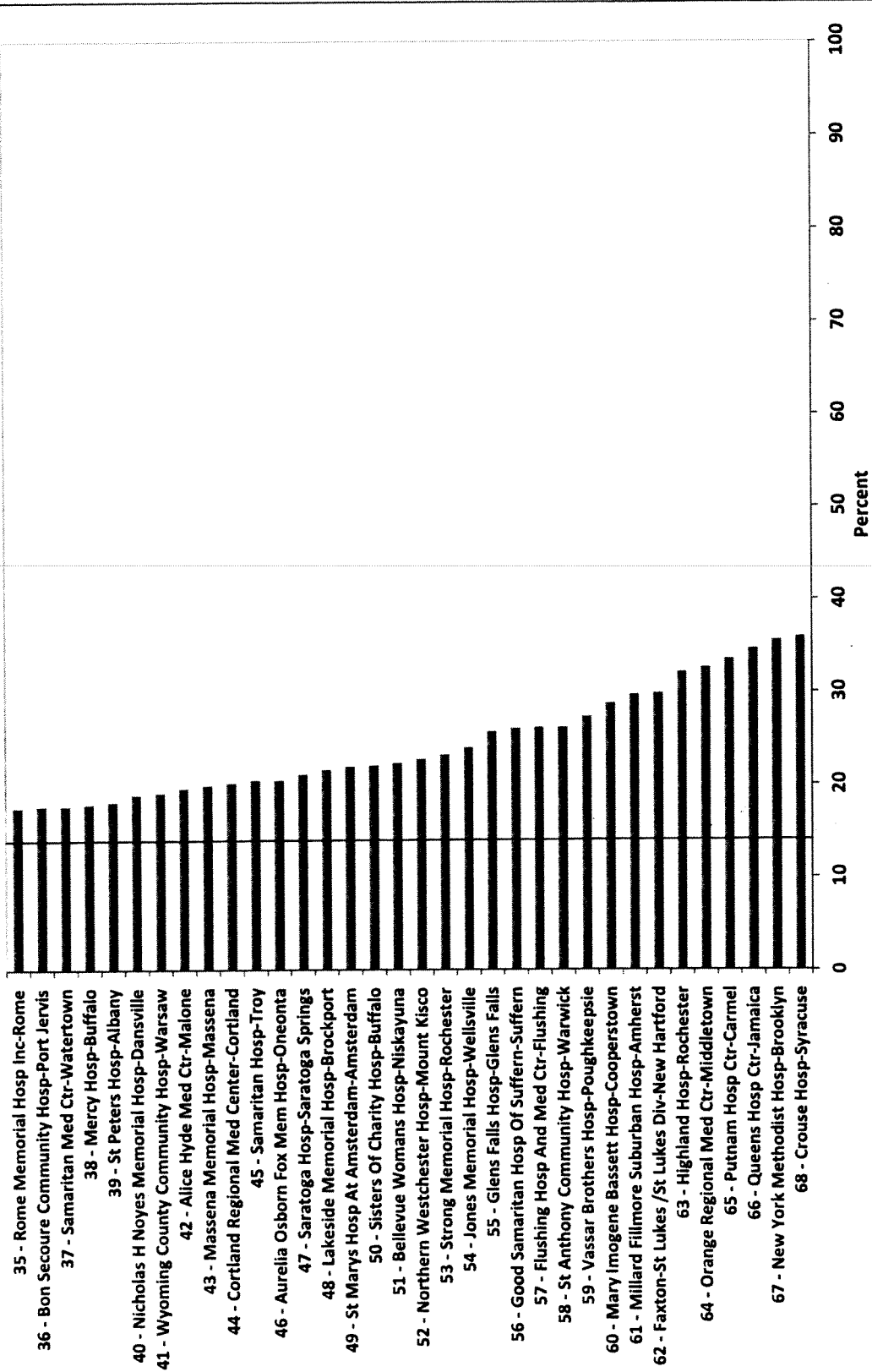
Percentage of Healthy Breastfed Infants also Fed Formula at the Hospital, New York State, 2011



Sources: Bureau of Biometric and Health Statistics, New York State Department of Health, 2011 and Bureau of Vital Statistics, NYC Department of Health and Mental Hygiene, 2011. Technical notes: Data for NYC hospitals are preliminary. Excludes infants admitted to the Neonatal Intensive Care Unit (NICU), transferred to or from another hospital, or with missing feeding information.

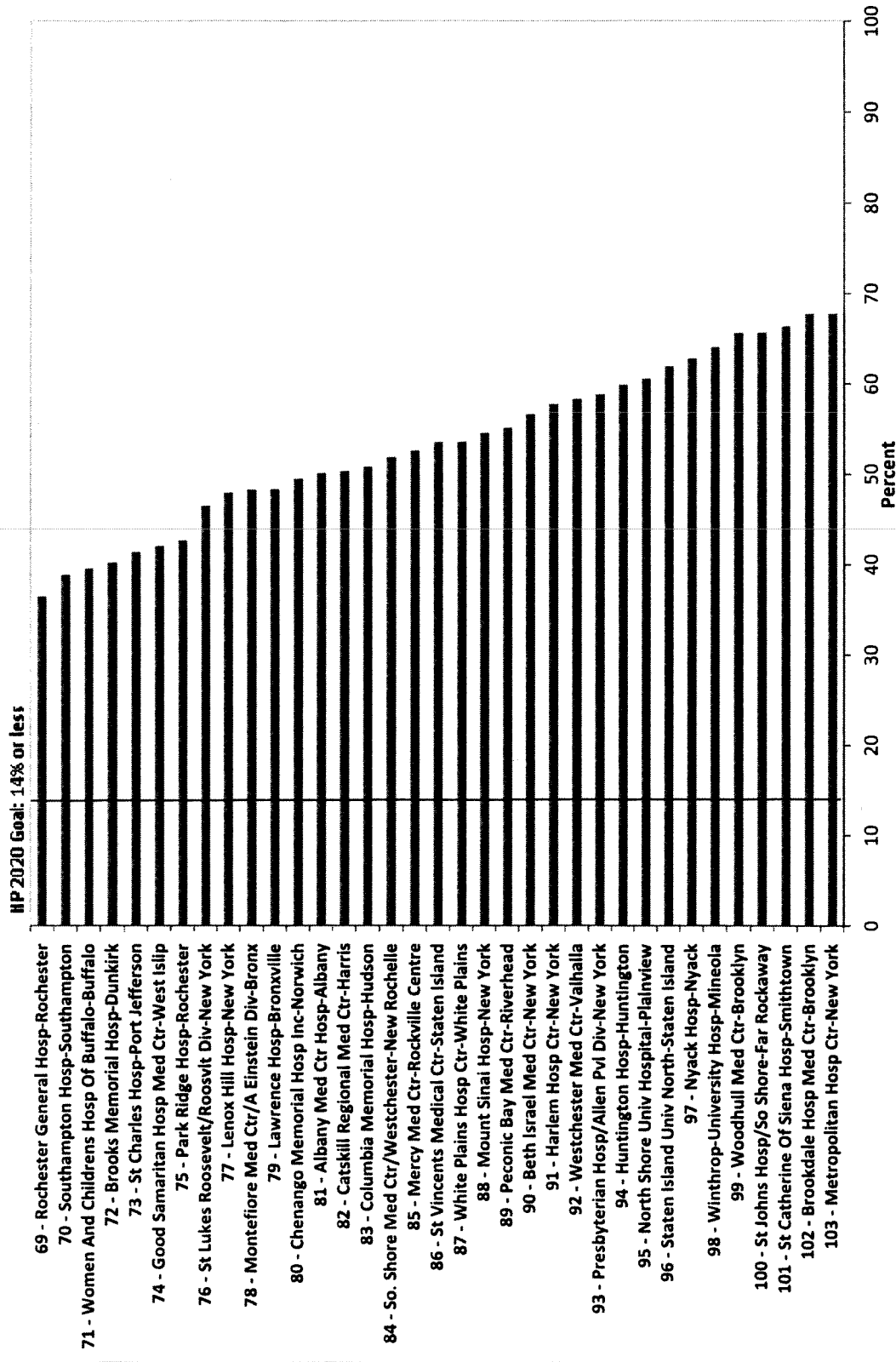
Percentage of Healthy Breastfed Infants also Fed Formula in the Hospital, New York State, 2011

HP 2020 Goal: 14% or less



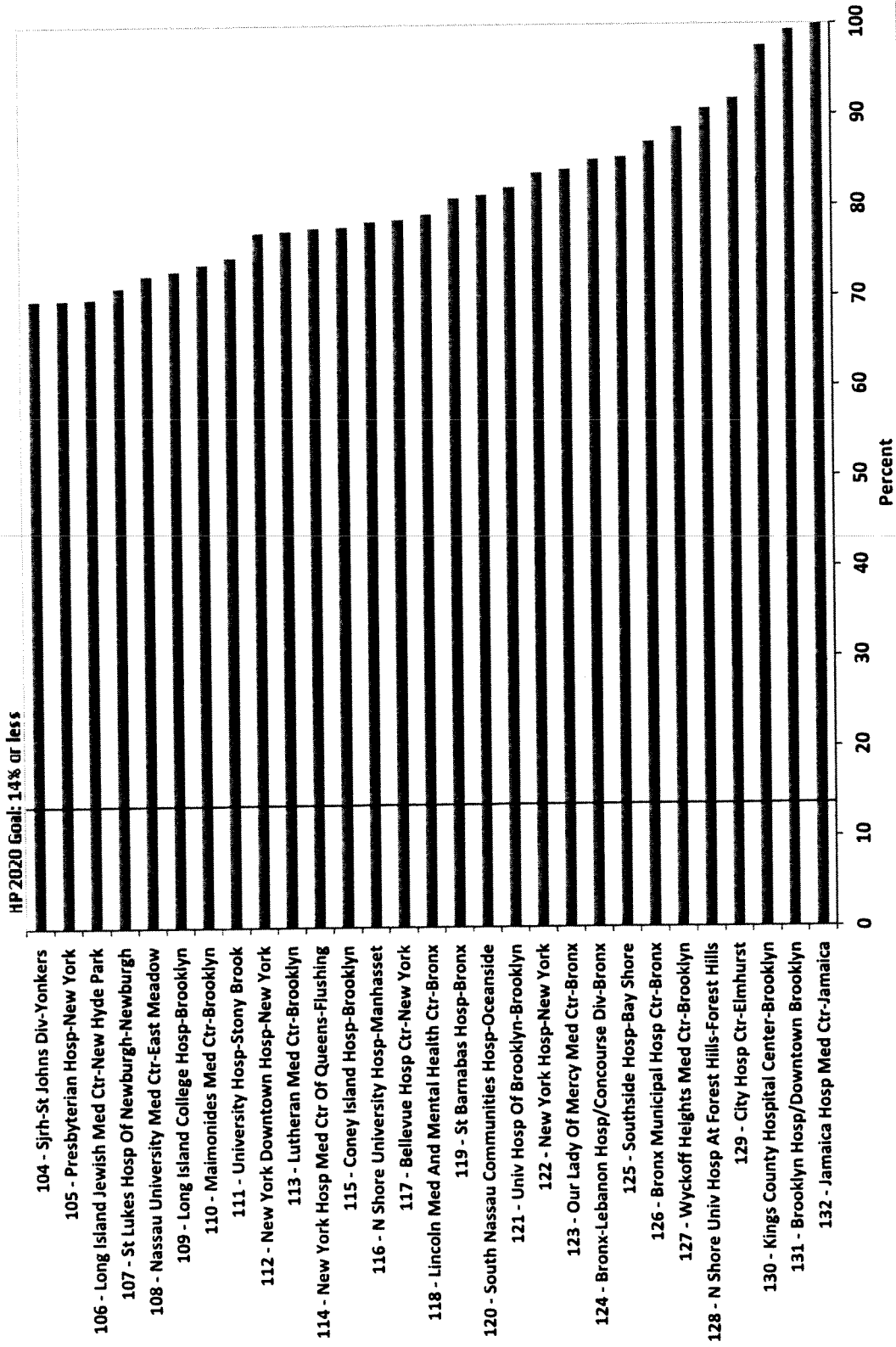
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Percentage of Healthy Breastfed Infants also Fed Formula in the Hospital, New York State, 2011



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Percentage of Healthy Breastfed Infants also Fed Formula in the Hospital, New York State, 2011



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