



# Breastfeeding Report Card

United States/2013

National Center for Chronic Disease Prevention and Health Promotion  
Division of Nutrition, Physical Activity, and Obesity



## Background

Improving the health of mothers and their children is a primary goal of the Centers for Disease Control and Prevention's (CDC) Division of Nutrition, Physical Activity, and Obesity. Protecting, promoting, and supporting breastfeeding, with its many known benefits for infants, children, and mothers, are key strategies to accomplish this goal.

There are many ways that communities can support mothers and babies that 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 and supports in states. It compiles many types of data so that public health practitioners in states can monitor progress, celebrate successes, and identify opportunities to inform and work with health professionals, employers, business owners, and community members.

## What's new this year?

The percent of US infants who begin breastfeeding is high at 77%. While there is concern that infants are not breastfed for as long as recommended, the National Immunization Survey data show continued progress has been made over the last ten years. Of infants born in 2010, 49% were breastfeeding at 6 months, up from 35% in 2000. The breastfeeding rate at 12 months increased from 16% to 27% during that same time period.

The early post-partum period is a critical time for establishing and supporting breastfeeding. This year, there are two new indicators of the quality of maternity care from the Maternity Practices in Infant Nutrition and Care (mPINC) survey. These indicators are related to

immediate and continued contact between mother and baby during the hospital stay: skin-to-skin contact within one hour after birth and rooming-in together throughout the stay. While both skin-to-skin contact and rooming-in improve breastfeeding rates by helping mothers establish

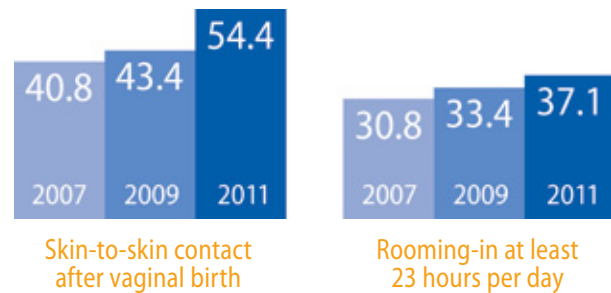
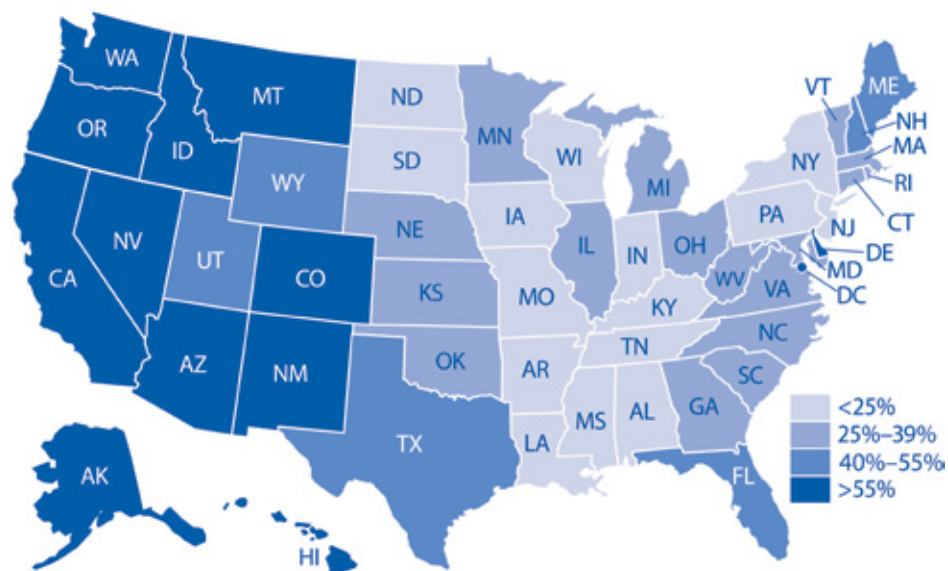


Figure 1: Percent of hospitals and birth centers where most infants experience skin-to-skin contact and rooming-in — mPINC 2007, 2009, and 2011

breastfeeding early and learn infant feeding cues, these practices can also benefit mothers and infants who are not breastfeeding.

National progress has been made in keeping mothers and babies together throughout the hospital and birth center stay: from 2007 to 2011 the percent of facilities with at least 90% of infants receiving skin-to-skin contact after vaginal birth increased from 40.8% to 54.4%, and the percent of facilities with at least 90% of mothers and babies staying together in the same room throughout the stay increased from 30.8% to 37.1%. In 2011, states in the West had a majority of facilities with most infants rooming-in, while many states in the Midwest and South had less than one-quarter of facilities reporting most infants were rooming-in with their mothers.



Map 1: Percent of hospitals and birth centers with most infants rooming-in at least 23 hours per day — mPINC 2011

# Stories from the Field

## Rooming-In

Greenville Health System in South Carolina increased their rooming-in rate from 10% to more than 90% in just one year. They trained their staff on the importance of rooming in and how to change standard procedures to allow for rooming-in. They also reframed the purpose



of the nursery as serving fragile infants, not for routine care and feeding of healthy infants. Rooming-in helps mothers and babies get acquainted, learn feeding cues and establish breastfeeding patterns, and is one

of the Ten Steps to Successful Breastfeeding outlined by the World Health Organization. “It’s very empowering for families,” said Jennifer Hudson, MD, medical director for Newborn Services at Greenville. “It’s really a positive when it comes to security and safety. We emphasize that mothers get to watch everything we do for their babies, including the first bath, exams and screening tests. Hourly rounds by nurses ensure that families get the help that they need as well as bond with their newborns.”

Greenville Health System is one of 89 hospitals participating in *Best Fed Beginnings* a multi-hospital collaborative funded by CDC and run by the National Initiative for Children’s Healthcare Quality (NICHQ). This collaborative helps hospitals improve maternity care and increase the number of Baby-Friendly designated hospitals in the United States.

## Skin-to-Skin

Skin-to-skin contact, a practice that places a newborn directly on a mother’s chest after birth, helps new mothers begin breastfeeding. Women who deliver their babies at Centra Virginia Baptist Hospital are experiencing the benefits first-hand. As part of the *Best*



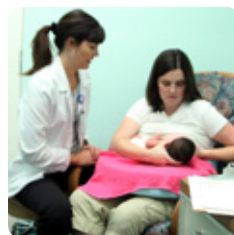
*Fed Beginnings* collaborative, “We now start skin-to-skin contact within five minutes of a vaginal delivery and keep the baby there for at least an hour or until the baby initiates breastfeeding,” says Stacey

Tribbett, unit manager of the Centra Virginia Baptist Hospital Birth Center. “Our exclusive breastfeeding rates have been increasing and we’re seeing an increase in our non-exclusive breastfeeding rates too.” Once the hospital got medical staff on board, the focus became educating mothers about skin-to-skin contact and its benefits.

## Professional Support

Every Wednesday morning, one will find mothers, babies, and lactation consultant support at the Well Babies at Walgreens at 6191 N. Keystone Avenue in Indianapolis, Indiana. Well Babies at Walgreens provides professional lactation support from an International Board Certified Lactation Consultant, infant weight checks, and a pharmacist consultation at no charge. Breast pump rental is also available.

This program promotes continuity of care by reaching



new parents when hospital discharge medications are filled at the pharmacy and provides professional support at a convenient and accessible location where many mothers already go for errands. Well

Babies at Walgreens serves and supports the community and is anticipating opening a second location on the east side of Indianapolis in 2013.

## Breastfeeding Support in Child Care Centers

In 2011, the U.S. General Services Administration (GSA) pledged that all of its 109 child care centers, serving more than 8,300 children across the country, would participate in Let’s Move! Child Care. Let’s Move! Child Care is First Lady Michelle Obama’s initiative to encourage and support early education and child care providers to implement best practices for nutrition, physical activity, and breastfeeding. Breastfeeding best practices include supporting parents’ decisions to breastfeed, providing breast milk to infants of mothers who wish to breastfeed, and welcoming mothers to breastfeed during the child care day. Across the country, GSA child care centers have made changes in their



programs to achieve these best practices, including providing breastfeeding mothers with access to a private space, other than a bathroom, for breastfeeding or pumping. As of June 2013, all 29

GSA child care centers in the Washington, D.C. area have met these best practices. Dawn Gerhart, Director of Children’s Center, transformed a side of a room in her center into an inviting, private space for mothers to breastfeed. She finds mothers are grateful for the support the center is giving them to continue breastfeeding when they return to school or work.

State	Ever Breastfed	Breastfeeding at 6 months	Breastfeeding at 12 months	Exclusive breastfeeding at 3 months	Exclusive breastfeeding at 6 months
U.S. National	76.5	49.0	27.0	37.7	16.4
Alabama	60.4	29.5	14.2	23.5	11.9
Alaska	84.7	58.1	37.4	48.8	26.8
Arizona	83.2	49.7	25.4	39.4	15.0
Arkansas	57.7	24.2	14.4	22.5	9.2
California	91.6	71.3	45.3	56.8	27.4
Colorado	89.1	56.5	27.4	44.6	24.7
Connecticut	76.9	45.6	20.0	35.8	15.5
Delaware	68.0	39.1	17.4	30.6	17.4
Dist of Columbia	73.7	45.1	20.8	32.1	14.6
Florida	71.8	40.9	20.0	29.2	10.6
Georgia	68.2	31.8	12.9	22.2	6.2
Hawaii	87.4	64.9	42.2	51.6	22.0
Idaho	91.8	74.5	45.5	60.3	27.0
Illinois	75.2	48.8	21.0	34.6	11.1
Indiana	63.6	37.7	16.5	27.7	13.8
Iowa	76.5	54.0	32.1	43.2	18.8
Kansas	72.9	41.8	27.3	30.5	15.1
Kentucky	52.6	32.5	18.9	33.4	14.4
Louisiana	60.6	31.3	14.9	30.6	10.7
Maine	75.4	48.9	27.9	46.2	22.9
Maryland	69.4	52.0	24.2	29.3	15.1
Massachusetts	83.0	62.4	28.9	55.7	20.6
Michigan	74.6	45.1	22.8	34.3	13.0
Minnesota	73.5	49.1	23.1	47.2	23.5
Mississippi	50.5	19.7	9.1	17.0	5.1
Missouri	77.5	39.3	21.6	39.8	15.7
Montana	82.4	59.3	37.2	50.2	20.1
Nebraska	80.8	53.8	22.3	48.6	21.4
Nevada	79.1	40.9	22.3	33.9	18.6
New Hampshire	88.5	53.6	25.5	49.5	24.9
New Jersey	71.5	47.8	31.4	32.3	10.9
New Mexico	85.0	46.7	27.3	30.3	19.3
New York	82.6	52.6	28.4	32.1	16.5
North Carolina	74.9	48.5	31.9	32.7	14.8
North Dakota	79.0	44.6	22.3	43.6	20.5
Ohio	65.4	48.1	20.0	40.2	17.7
Oklahoma	74.2	39.6	14.3	37.9	16.6
Oregon	90.2	71.0	52.3	53.2	23.9
Pennsylvania	70.2	42.9	25.9	31.9	16.5
Rhode Island	70.7	50.2	24.1	41.6	16.7
South Carolina	67.5	32.0	18.7	32.7	16.0
South Dakota	76.2	49.7	31.5	51.9	26.3
Tennessee	59.6	29.9	16.8	17.9	4.1
Texas	77.2	45.5	25.8	35.8	14.5
Utah	83.1	64.2	36.8	43.0	22.5
Vermont	84.1	62.3	40.7	51.7	25.9
Virginia	86.5	54.6	33.0	39.5	15.1
Washington	87.9	60.2	30.2	47.6	19.6
West Virginia	60.5	32.8	21.3	27.2	9.1
Wisconsin	75.5	55.5	34.3	40.5	15.3
Wyoming	86.5	55.6	30.6	51.1	24.9

Source: Centers for Disease Control and Prevention National Immunization Survey (NIS), Provisional Data, 2010 births. The 2010 provisional rates are based on the landline telephone sample in NIS to maintain comparability with previous years in the decade when only a landline sample was available. Limiting to the landline sample for 2010 births has resulted in a smaller sample size and larger margin of error than previous years. On average, the state specific rates reported here have a margin of error of  $\pm 8.4$  percentage points, based on a 95% confidence interval.

State	Percent of hospitals and birth centers where ≥90% of infants are:		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
	Skin-to-Skin	Rooming-In*					
<b>U.S. National</b>	54.4	37.0	7.15	24.2	0.92	3.35	7
<b>Alabama</b>	41.3	13.0	2.47	21.0	0.57	2.09	No
<b>Alaska</b>	70.0	95.0	21.73	19.4	1.48	6.81	No
<b>Arizona</b>	61.0	72.5	0.91	33.3	0.89	3.12	Yes
<b>Arkansas</b>	32.1	14.3	0	20.0	0.39	1.94	No
<b>California</b>	79.6	72.6	24.82	16.9	0.65	3.93	Yes
<b>Colorado</b>	68.8	57.4	7.88	27.0	1.43	4.12	No
<b>Connecticut</b>	69.6	25.0	24.99	24.1	2.41	5.04	No
<b>Delaware</b>	66.7	66.7	0	19.6	0.36	4.18	Yes
<b>Dist of Columbia</b>	60.0	60.0	11.22	31.3	0.75	1.29	No
<b>Florida</b>	52.8	52.8	2.58	34.1	0.85	2.40	No
<b>Georgia</b>	51.4	36.5	0	26.6	0.67	2.54	No
<b>Hawaii</b>	66.7	71.4	8.96	16.2	0.47	4.11	No
<b>Idaho</b>	55.6	70.4	7.29	15.0	1.12	3.32	No
<b>Illinois</b>	41.1	28.7	2.50	27.9	0.77	2.92	No
<b>Indiana</b>	47.9	19.4	12.19	22.5	0.91	4.49	No
<b>Iowa</b>	47.9	10.1	0	20.4	0.63	2.62	No
<b>Kansas</b>	37.7	30.5	0	28.5	1.87	3.71	No
<b>Kentucky</b>	46.7	11.1	5.88	8.6	0.34	2.73	No
<b>Louisiana</b>	49.0	19.6	0	13.0	0.55	2.29	No
<b>Maine</b>	77.8	44.4	28.24	12.7	1.97	6.30	No
<b>Maryland</b>	42.3	36.7	0	22.9	0.97	4.26	No
<b>Massachusetts</b>	75.6	37.0	5.54	15.0	1.42	5.18	No
<b>Michigan</b>	44.2	32.5	0.55	21.0	1.38	2.65	No
<b>Minnesota</b>	60.7	26.4	4.15	15.2	0.98	4.41	No
<b>Mississippi</b>	27.3	9.5	0	21.2	0.93	1.71	Yes
<b>Missouri</b>	46.9	22.2	0.89	21.6	1.48	3.38	No
<b>Montana</b>	64.3	61.5	0.26	13.5	1.99	3.73	No
<b>Nebraska</b>	41.7	26.5	7.60	19.1	1.48	3.89	No
<b>Nevada</b>	53.3	60.0	2.55	34.8	0.79	1.53	No
<b>New Hampshire</b>	90.5	52.4	27.33	17.1	2.26	7.31	No
<b>New Jersey</b>	53.5	9.1	5.87	35.4	1.47	3.26	No
<b>New Mexico</b>	42.3	69.2	0	25.1	0.88	2.97	No
<b>New York</b>	55.6	20.2	4.86	34.7	0.79	3.13	No
<b>North Carolina</b>	43.6	30.8	10.07	22.5	1.43	4.63	Yes
<b>North Dakota</b>	36.4	0.0	2.45	10.0	0.73	1.99	No
<b>Ohio</b>	50.0	26.6	10.39	16.6	1.04	3.64	No
<b>Oklahoma</b>	42.9	25.0	0.41	10.8	0.42	3.14	No
<b>Oregon</b>	77.4	67.9	8.39	22.0	1.46	7.00	No
<b>Pennsylvania</b>	43.3	18.7	0.08	19.7	1.08	2.77	No
<b>Rhode Island</b>	66.7	33.3	14.43	19.8	0.55	5.84	No
<b>South Carolina</b>	60.5	32.4	0.99	16.1	0.63	2.41	No
<b>South Dakota</b>	50.0	5.0	5.22	10.9	0.25	2.53	No
<b>Tennessee</b>	41.7	24.1	0.13	27.0	0.57	2.25	No
<b>Texas</b>	51.4	40.1	4.77	31.7	0.47	2.25	Yes
<b>Utah</b>	73.8	47.6	6.40	22.9	0.74	2.01	No
<b>Vermont</b>	90.0	30.0	3.98	13.8	3.13	13.66	Yes
<b>Virginia</b>	51.2	33.3	0.52	32.4	1.35	4.11	No
<b>Washington</b>	67.7	83.3	9.25	21.4	1.40	5.38	No
<b>West Virginia</b>	35.7	28.6	0	23.5	0.39	3.09	No
<b>Wisconsin</b>	51.7	24.1	17.02	23.1	1.27	3.95	No
<b>Wyoming</b>	66.7	50.0	3.20	11.9	2.30	2.57	No

\*'Not sure' responses for skin-to-skin have been set to missing.

## Breastfeeding Report Card Indicators — 2013

Each indicator is measured in every state, allowing easy state-by-state comparisons.

### Outcome Indicators

Five indicators profile the extent to which infants in a state are breastfed. These are the breastfeeding goals outlined in *Healthy People 2020*, a description of the nation's health priorities.

### Breastfeeding Support Indicators

Elements of breastfeeding-friendly communities are measured using indicators that assess support from birth facilities, health professionals and child care settings.

#### Healthy People 2020 Objectives

	Target
<b>MICH-21:</b> 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%
<b>MICH-22:</b> Increase the proportion of employers that have worksite lactation support programs.	38.0%
<b>MICH-23:</b> Reduce the proportion of breastfed newborns who receive formula supplementation within the first 2 days of life.	14.2%
<b>MICH-24:</b> Increase the proportion of live births that occur in facilities that provide recommended care for lactating mothers and their babies.	08.1%

### Outcome indicators

#### Breastfeeding rates for infants born in 2010 from the U.S. National Immunization Surveys, 2011-12

- 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.

### Breastfeeding Support Indicators

#### Birth Facility Support

- Percent of hospitals and birth centers where at least 90% of mothers and newborn infants have skin-to-skin contact for at least 30 minutes within one hour of an uncomplicated vaginal birth
- Percent of hospitals and birth centers where at least 90% of healthy full-term infants are rooming in with mother for at least 23 hours per day
- Percent of live births occurring at hospitals or birth centers 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.

Two initiatives, one national and one global, provide informative measures of birth facility support. The mPINC Survey, conducted by CDC, measures breastfeeding-related maternity care practices at maternity care facilities across the US and compares the extent to which these practices vary by state. The skin-to-skin and rooming-in rates from mPINC represent the percent of facilities in a state providing ideal maternity care on these early breastfeeding support practices.

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) assists the mother-infant pair, creates and administers lactation programs, and educates 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, about half of 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. State regulations are categorized as fully supportive of onsite breastfeeding if this component across all child care entities licensed by the state have a score of 4. States with a score of 4 were categorized as “Yes,” and any scores less than 4 were categorized as “No.”

## Data Sources

1. Breastfeeding outcome indicators – Ever Breastfed, Breastfeeding at 6 months, Breastfeeding at 12 months, Exclusive breastfeeding at 3 months, Exclusive breastfeeding at 6 months
  - a. CDC National Immunization Surveys 2011 and 2012, Provisional Data, 2010 births. [http://www.cdc.gov/breastfeeding/data/NIS\\_data/index.htm](http://www.cdc.gov/breastfeeding/data/NIS_data/index.htm)
2. Breastfeeding process indicators
  - a. Skin-to-skin and Rooming-in measures  
*Source: 2011 CDC Maternity Practices in Infant Nutrition and Care (mPINC) Survey.*  
<http://www.cdc.gov/breastfeeding/data/mpinc/index.htm>
  - b. Percent of live births at facilities designated as Baby-Friendly (BFHI)  
*Source: Baby-Friendly USA. Baby-Friendly Hospitals and Birth Centers as of June 2013. Available at <http://www.babyfriendlyusa.org>\**
  - c. Number of La Leche League Leaders per 1,000 live births.  
*Source: Personal Communication with La Leche League USA, June 2013.*
  - d. Number of IBCLCs per 1,000 live births  
*Source: International Board of Lactation Consultant Examiners. IBCLC Facts and Figures as of Nov. 29, 2012.*  
*Source: <http://americas.iblce.org/facts-and-figures>\* Accessed 6/20/2013.*
  - e. States child care regulation fully supports onsite breastfeeding  
*Source: National Resource Center for Health and Safety in Child Care and Early Education. 2013. Achieving a state of healthy weight: 2012 update. Aurora, CO: University of Colorado Denver.*
  - f. Births by state  
*Source: Total live birth information: Hamilton BE, Martin JA, Ventura SJ. Births: Preliminary data for 2011. National vital statistics reports; vol 61 no 5. Hyattsville, MD: National Center for Health Statistics. 2012. Available at [http://www.cdc.gov/nchs/data/nvsr/nvsr61/nvsr61\\_05.pdf](http://www.cdc.gov/nchs/data/nvsr/nvsr61/nvsr61_05.pdf). Accessed 6/20/2012.*

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