



# STATE OF NEW YORK DEPARTMENT OF HEALTH

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## A Call to Action to Increase Breastfeeding in New York State

The benefits of breastfeeding, especially exclusive breastfeeding, are increasingly recognized. Breastfeeding promotes overall health, growth and development, and helps prevent infections during infancy, as well as asthma, obesity, diabetes and other chronic diseases in childhood and later in life. Breastfeeding benefits mothers, reducing postpartum bleeding and the risk of breast and ovarian cancers. Breastfeeding also yields economic benefits to families and society.

Exclusive breastfeeding during the first six months of life is the recommended feeding method for optimal infant growth and development. While 70% to 80% of new mothers in New York initially choose to breastfeed their newborns (which approximates the *Healthy People 2010* goal of 75%), the rates of exclusive breastfeeding in New York are 26% at 3 months and 8% at 6 months. These rates are approximately half of the *Healthy People 2010* goals of 40% at 3 months and 17% at 6 months.

Research shows that supplementing breast milk for breastfed newborn infants with formula is detrimental to breastfeeding exclusivity and duration. Infants who are exclusively breastfed in the hospital are twice as likely to be breastfeeding at 6 weeks of age as breastfed infants who are given supplemental formula in the hospital.

This year, the Department will work with the New York Statewide Breastfeeding Coalition, Healthcare Association of New York State, Greater New York Hospital Association, American Academy of Pediatrics, New York State Academy of Family Physicians, American Academy of Obstetricians and Gynecologists, Medical Society of the State of New York, New York State WIC Association, and Association of Perinatal Networks of NY, Inc., and advocacy groups to increase awareness of the benefits of breastfeeding, improve the breastfeeding support provided by healthcare providers to new mothers and their families, and increase public information about hospital practices related to breastfeeding.

The Department will work with the Regional Perinatal Centers to:

- Provide education and training opportunities for physicians, nurses and staff to increase their knowledge and skills in providing breastfeeding education and lactation counseling and support;
- Ensure that each new mother is aware of her hospital's responsibilities to support her decision to breastfeed her infant(s);

- Provide information on the Department's website and in the *Maternity Information Leaflet* about infant feeding practices at each hospital; and
- Increase the visibility of individual hospital performance measures related to breastfeeding initiation and exclusivity.

**We call on all NYS healthcare providers to:**

- Discuss with prenatal patients and new mothers the benefits of breastfeeding, emphasizing exclusive breastfeeding for the first six months of life to give their babies the healthiest start.
- Provide or refer women considering or actively breastfeeding to structured breastfeeding education and counseling programs as recommended by the US Preventive Services Task Force. Income-eligible women can be referred to New York State's Special Supplemental Nutrition Program for Women, Infants and Children (WIC). All local WIC programs have certified lactation counselors and breastfeeding peer counselors to provide breastfeeding education and lactation support. The WIC Program now provides a more comprehensive and valuable food package to lactating women and their infants.

**We call on hospitals with maternity services to:**

- Review your hospital's policies to ensure they are consistent with the State's Perinatal Regulations and implement best practices associated with breastfeeding.
- Provide training to ensure all staff are knowledgeable about the hospital's breastfeeding policies; ensure certified lactation counselors are available to patients; and designate staff to participate in training opportunities provided by the State Department of Health.
- Review your hospital's policies to ensure that infant formula is only provided to breastfed infants when medically indicated, and that educational material provided to new mothers is free of commercial interest.

**We call on employers to:**

- Ensure that pregnant and lactating women are aware of the *Nursing Mothers in the Workplace Act* (Section 206-c of New York State Labor Law), which guarantees women the right to express milk at work and requires that employers provide reasonable unpaid break time or permit employees to use paid break time or meal time each day to express milk for nursing children for up to three years.

To protect and promote the health of New Yorkers, the Department of Health will work to advance policies, practices and environmental supports in clinical offices, hospitals, and worksites that optimally support new mothers in successfully breastfeeding their infants.

### **Supporting Resources:**

1. Ip, S., Chung, M., Raman, G., Chew, P., Magula, N., Devine, D. et al. (2007). *Breastfeeding and maternal and infant health outcomes in developed countries. Evidence Report/Technology Assessment No. 153 (Prepared by Tufts-New England Medical Center Evidence-based Practice Center, under Contract No. 290-02-0022) (Rep. No. AHRQ Publication No. 07-E007)*. Rockville, MD: Agency for Healthcare Research and Quality.
2. Gartner, L. M., Morton, J., Lawrence, R. A., Naylor, A. J., O'Hare, D., Schanler, R. J. et al. (2005). Breastfeeding and the use of human milk: a policy statement from the American Academy of Pediatrics Section on Breastfeeding. *Pediatrics*, *115*, 496-506.
3. Baby Friendly Hospital Initiative – USA  
<http://www.babyfriendlyusa.org/eng/index.html>
4. The Centers for Disease Control and Prevention Guide for Breastfeeding Interventions  
<http://www.cdc.gov/breastfeeding/resources/guide.htm>
5. NYS Perinatal Regulations: <http://www.health.state.ny.us/nysdoh/phforum/nycrr10.htm>
6. The Centers for Disease Control and Prevention, National Immunization Survey – Breastfeeding [http://www.cdc.gov/breastfeeding/data/NIS\\_data/](http://www.cdc.gov/breastfeeding/data/NIS_data/)
7. Declercq, E., Labbok, M., Sakala, C., & O'Hara, M. (2009). Hospital Practices and Women's Likelihood of Fulfilling Their Intention to Exclusively Breastfeed. *American Journal of Public Health*, *99*, 929-935.
8. Murray, E. K., Ricketts, S., & Dellaport, J. (2007). Hospital practices that increase breastfeeding duration: results from a population-based study. *Birth*, *34*, 202-211.
9. Petrova, A., Hegyi, T., & Mehta, R. (2007). Maternal race/ethnicity and one-month exclusive breastfeeding in association with the in-hospital feeding modality. *Breastfeeding Medicine*, *2*, 92-98.
10. DiGirolamo, A. M., Grummer-Strawn, L. M., & Fein, S. B. (2008). Effect of maternity-care practices on breastfeeding. *Pediatrics*, *122 Suppl 2*, S43-S49.
11. American Academy of Pediatrics – Breastfeeding Initiatives  
<http://www.aap.org/breastfeeding/>
12. US Preventive Services Task Force  
<http://www.ahrq.gov/clinic/uspstf08/breastfeeding/brfeedrs.htm>