

# Breastfeeding

## DEFINITION

*Breastfeeding* is the number and percentage of newborn infants who are breastfed at the time of hospital discharge.

## SIGNIFICANCE

Breastfeeding is widely recognized as the ideal method of feeding and nurturing infants and a critical component in achieving optimal infant and child health, growth, and development.<sup>1,2</sup> National health experts recommend exclusive breastfeeding for six months after birth and continuous breastfeeding for at least 12 months after birth or longer as mutually desired by mother and child.<sup>3</sup>

Breastfeeding decreases infant mortality and morbidity. Infant benefits include optimal nutrition, stronger immune systems, and reduced risk for Sudden Infant Death Syndrome and chronic conditions such as asthma, obesity, type 1 diabetes, and ear infections. Breastfeeding benefits mothers by creating a strong bond with infants and decreasing risk for postpartum depression, type 2 diabetes, and hypertension. Breastfeeding provides significant social and economic benefits, including reduced cost to the family, reduced health care costs, and reduced employee absenteeism.<sup>4,5,6</sup>

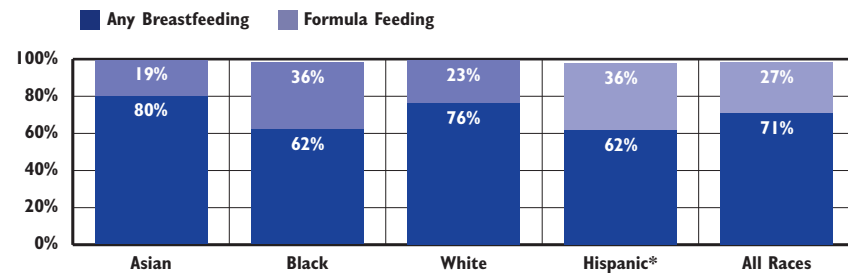
Breastfeeding can be effectively promoted by hospital and other birth facility policies and practices that take

place before, during, and after labor and delivery, including access to professional lactation consultants and involvement in community breastfeeding support networks.<sup>7</sup> In 2015, Women & Infants Hospital became the second-largest hospital in the U.S. to achieve the “Baby-Friendly” designation, which recognizes breastfeeding support and promotion by birth facilities.<sup>8</sup> There are now four Baby-Friendly hospitals in Rhode Island: Kent Hospital, Newport Hospital, South County Hospital, and Women & Infants Hospital.<sup>9</sup>

Breastfeeding rates generally increase with higher educational attainment and higher income levels.<sup>10</sup> Whether the pregnancy was intentional or not also affects rate of breastfeeding. In Rhode Island between 2018-2020, 8.4% of babies from intended pregnancies were not breastfed at all, compared with 13.2% of babies from unintended pregnancies.<sup>11</sup>

*Healthy People 2030* sets target breastfeeding rates of 42% of infants breastfed exclusively through 6 months of age and 54% breastfed at any extent at one year of age.<sup>12</sup> Among babies born in the U.S. in 2017, 84% were ever breastfed, 58% were breastfed at six months, and 35% were breastfed at 12 months.<sup>13</sup> In 2018, Rhode Island reported rates of 85% of infants ever having been breastfed, 54% at six months, and 37% at one year of age.<sup>14</sup>

**Breastfeeding and Formula Feeding at Birth by Race/Ethnicity, Rhode Island, 2016-2020\***



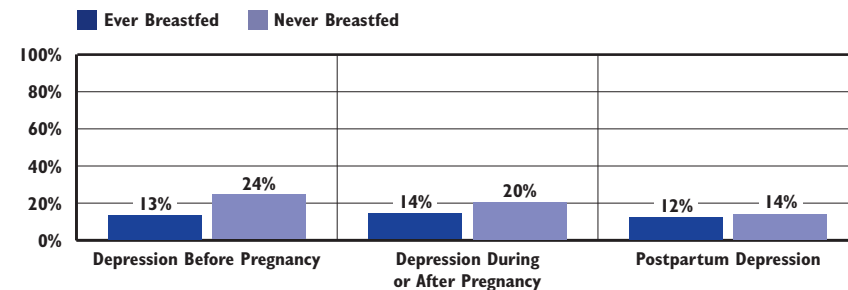
Source: Rhode Island Department of Health, Center for Health Data and Analysis, KIDSNET, 2016-2020.

Breastfeeding and formula feeding are defined as intended feeding method at hospital discharge. \*Hispanic infants can be of any race. Totals may not sum to 100% because data on feeding methods were not available for all births.

Note: The data collection process at the Rhode Island Department of Health was changed in 2015. Prior to 2015, breastfeeding was recorded as “Brest,” “Bottle,” or “Both.” Since 2015, a “Yes” or “No” question on the birth certificate worksheet “Is the infant being breastfed at discharge?” has been used. Data from and prior to 2015 for “Exclusive breastfeeding” and “Both breast and formula” have been combined into the “Any breastfeeding” category to align with current data collection practices.

◆ Between 2016 and 2020, 71% of new mothers in Rhode Island indicated that they intended to breastfeed when discharged from the hospital and 27% intended to formula feed.<sup>15</sup> Black and Hispanic infants are less likely to be breastfed than white and Asian infants, due to structural, interpersonal, and cultural barriers that Women of Color face. Structural barriers include lack of support and discrimination from the health care setting, and minimal paid family leave. Interpersonal barriers include lack of family support and inadequate workplace policies for breastfeeding moms.<sup>16</sup>

**Maternal Depression by Breastfeeding Status, Rhode Island, 2018-2020**



Source: Rhode Island Department of Health, Pregnancy Risk Assessment Monitoring System (PRAMS), 2018-2020.

Table 22. Breastfeeding at Time of Birth, Rhode Island, 2016-2020

CITY/TOWN	NUMBER OF BIRTHS SCREENED	NUMBER ANY BREASTFEEDING	PERCENT WITH ANY BREASTFEEDING
Barrington	529	474	90%
Bristol	618	488	79%
Burrillville	572	423	74%
Central Falls	1,541	890	58%
Charlestown	244	204	84%
Coventry	1,448	1,130	78%
Cranston	3,806	2,751	72%
Cumberland	1,585	1,249	79%
East Greenwich	588	512	87%
East Providence	2,179	1,545	71%
Exeter	238	199	84%
Foster	187	155	83%
Glocester	294	225	77%
Hopkinton	242	193	80%
Jamestown	118	113	96%
Johnston	1,283	907	71%
Lincoln	861	673	78%
Little Compton	46	37	80%
Middletown	750	632	84%
Narragansett	236	208	88%
New Shoreham	35	27	77%
Newport	1,096	865	79%
North Kingstown	1,088	940	86%
North Providence	1,511	1,043	69%
North Smithfield	405	319	79%
Pawtucket	4,328	2,809	65%
Portsmouth	574	503	88%
Providence	11,620	7,200	62%
Richmond	309	266	86%
Scituate	437	363	83%
Smithfield	686	556	81%
South Kingstown	827	729	88%
Tiverton	362	283	78%
Warren	369	260	70%
Warwick	3,517	2,685	76%
West Greenwich	221	182	82%
West Warwick	1,538	1,082	70%
Westerly	706	612	87%
Woonsocket	2,473	1,551	63%
Four Core Cities	19,962	12,450	62%
Remainder of State	29,506	22,833	77%
Rhode Island	49,468	35,283	71%



## Rhode Island Supports for Breastfeeding

◆ All 50 states have passed legislation that provides mothers with the explicit right to breastfeed in all public or private places.<sup>17</sup> Since 2015, Rhode Island law has prohibited job discrimination based on pregnancy, childbirth, and related medical conditions and requires employers to make reasonable accommodations for workers for conditions related to pregnancy and childbirth, including breastfeeding.<sup>18</sup>

◆ In 2014, Rhode Island became the first state in the U.S. to establish licensure for International Board-Certified Lactation Consultants (IBCLCs). State-certified and trained lactation consultants provide comprehensive lactation support and counseling for pregnant and postpartum women. In March 2022, Rhode Island had 63 licensed IBCLCs.<sup>19,20</sup>

◆ Rhode Island is one of nine states, in addition to Washington, D.C., that have enacted paid family leave programs, which can support breastfeeding initiation and duration.<sup>21</sup> Access to paid leave increases the overall duration of breastfeeding, and the likelihood of breastfeeding for at least six months, compared to mothers with no paid leave.<sup>22</sup>

### Sources of Data for Table/Methodology

Rhode Island Department of Health, Center for Health Data and Analysis, Maternal and Child Health Database, 2016-2020.

Breastfeeding is defined as “breastfeeding as intended feeding method at hospital discharge.” “Percent With Any Breastfeeding” includes infants fed breast milk in combination with formula and those exclusively breastfed.

\*Note: The data collection process at the Rhode Island Department of Health was changed in 2015. Prior to 2015, breastfeeding was recorded as “Breast,” “Bottle,” or “Both.” Since 2015, a “Yes” or “No” question on the birth certificate worksheet “Is the infant being breastfed at discharge?” has been used. Data from and prior to 2015 for “Exclusive breastfeeding” and “Both breast and formula” have been combined into the “Any breastfeeding” category to align with current data collection practices.

The number of births screened may differ from the total number of births reported elsewhere in the Factbook as not all documented births received a screening. Births to Rhode Island women that occurred outside Rhode Island are not included.

Core cities are Central Falls, Pawtucket, Providence, and Woonsocket.

### References

- American Academy of Pediatrics. (2012). Policy statement: Breastfeeding and the use of human milk. *Pediatrics*, 129(3), 827-841.
- Breastfeeding: 2015-2020 Rhode Island strategic plan*. (2015). Providence, RI: Rhode Island Department of Health.
- Centers for Disease Control and Prevention. (2022). *Frequently asked questions*. Retrieved March 13, 2022, from cdc.gov
- The benefits of breastfeeding for baby & for mom*. (2018). Cleveland, OH: The Cleveland Clinic.
- Hauck, K., Miraldo, M., & Singh, S. (2020). Integrating motherhood and employment: A 22-year analysis investigating impacts of US workplace breastfeeding policy. *SSM – Population Health*, 11, 1-10.

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