Preventing Obesity

Breastfeeding Support in Child Care

Nearly 5 out of 6 (82.4%) New Hampshire mothers start breastfeeding after delivery, but only 2 out of 6 (31.3%) continue until the baby is 1 year old. Child care is an important setting to support mothers to successfully continue breastfeeding.

- Supporting breastfeeding in child care promotes healthy babies, mothers, and communities – and saves money.¹
- Work status impacts breastfeeding. Studies show that women who plan to return to work before their baby's first birthday, are less likely to start breastfeeding. Mothers who work full time tend to breastfeed for a shorter duration than do part-time or unemployed mothers.²
- In the US, half of all mothers of infants are employed. Nearly 70% of them work full time. Most of those mothers return to work by the time their baby is six months old.²
- Nearly 13,000 babies were born in New Hampshire in 2010.³ More than 9,000 (about 70%) NH mothers with infants are working.⁴

Child Care Polices That Support Breastfeeding Mothers

- Train all staff on the benefits of breastfeeding and how to support breastfeeding families.^{1,5}
- Offer a place (other than a bathroom) for mothers to breastfeed in privacy (if desired).^{1,5} Make it clear to mothers, staff, and other parents that according to NH RSA 132:10-d, breastfeeding a child in New Hampshire is not indecent exposure, and it is discriminatory to limit the right of a mother to breastfeed.⁶
- Follow proper handling guidelines for storage, preparation and feeding of breastmilk to assure each infant is only given their mother's breastmilk and the milk is kept clean and safe.^{1, 5}
- Feed infants on demand.^{1,5}
- Inform families and staff that the child care program is committed to and supportive of breastfeeding.^{1,5}
- Provide accurate breastfeeding materials to families and staff.^{1,5}
- Provide a welcoming atmosphere that encourages mothers to choose and continue to breastfeed.^{1,5}

To learn more, see Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd edition.⁵



Why Breast Milk?

- Human milk is the ideal food for babies.²
- Risks associated with formula feeding:
 - 32% increased risk for obesity later in life
 - Hospitalizations for lung infections
 - Diarrhea and vomiting
 - Ear Infections
 - Asthma
 - Type 2 diabetes
 - Eczema
 - Sudden infant death syndrome (SIDS)



National Breastfeeding Recommendations

Six months of exclusive breastfeeding (only fed breast milk) reduces risk of obesity in children.² The American Academy of Pediatrics recommends breastfeeding for at least the first year of life to provide a full range of health protections.

Healthy People 2020 is a set of national health objectives created by the US Department of Health and Human Services.⁷ *New Hampshire has exceeded two of the objectives: babies ever breastfed and exclusive breastfeeding through 3 months.⁸

NH Breastfeeding Rates Compared with the <i>Healthy People 2020</i> Objectives	NH Infants	Healthy People 2020
Ever breastfed	82.4%★	81.9%
Breastfed at 6 months	58.2%	60. 6%
Breastfed at 12 months	31.3%	34.1%
Only fed breast milk through 3 months	50.5% 🖈	46.2%
Only fed breast milk through 6 months	19.6%	25.5%

Centers for Disease Control and Prevention, National Immunization Survey, Breastfeeding, Children born in 2008, provisional data. Accessed at <u>http://www.cdc.gov/breastfeeding/data/NIS_data/index.htm</u> on 2/2/2012.

Healthy Policies



Healthy Behaviors Healthy People

References

1. United States Breastfeeding Committee, *Breastfeeding and Child Care* [issue paper]. Raleigh, NC; 2002. Accessed on 2/2/2012 at

http://www.usbreastfeeding.org/Portals/0/Publications/Child-Care-2002-USBC.pdf.

2. US Department of Health and Human Services, Office of the Surgeon General. *The Surgeon General's Call to Action to Support. Breastfeeding.* Washington, DC; 2011. Accessed on 2/2/2012 at http://www.surgeongeneral.gov/topics/breastfeeding.

3. NH Department of Health and Human Services, Bureau of Data and Systems Management; NH Department of State, Division of Vital Records Administration. *NH Resident Birth Totals by County [2000 to 2010]*. Accessed on 2/2/2012 at http://www.dhhs.nh.gov/dphs/hsdm/birth/documents/births00_10.pdf.

4. National Association of Child Care Resource and Referral Agencies, 2011 *Child Care in the State of New Hampshire.* Accessed on 2/2/2012 at http://www.naccrra.org/randd/data/docs/NH.pdf.

5. American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. 2011. *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs. 3rd edition.* Accessed on 2/2/2012 at <u>http://nrckids.org/CFOC3</u>.

6. National Conference of State Legislatures. Accessed on 2/2/2012 at http://www.ncsl.org/lssuesResearch/Health/BreastfeedingLaws/tabid/14389/Default.aspx.

7. US Department of Health and Human Services, Office of Disease Prevention and Health Promotion. Healthy People 2020. Washington, DC accessed on 2/2/2012 at <u>http://www.healthypeople.gov/2020</u>.

8. Centers for Disease Control and Prevention, National Immunization Survey, Breastfeeding. Accessed on 2/2/2012 at http://www.cdc.gov/breastfeeding/data/NIS_data/index.htm.

Acknowledgement

The NH Obesity Prevention Program thanks the NH Women, Infants, and Children Program for their assistance with the development of this fact sheet.



Healthy people in healthy places

NH Department of Health and Human Services Division of Public Health Services 603-271-4551 opp@dhhs.state.nh.us www.dhhs.nh.gov/dphs/nhp/obesity.htm

