

POLICY BRIEF

Breastfeeding Education and Practice in Early Child Care

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Breast milk is considered the Gold Standard, providing all the nutrients infants need in the first 6 months of life. However, many mothers who choose to breastfeed encounter barriers and stop breastfeeding earlier than planned. As women return to work or school, breastfeeding rates decrease. Supportive and knowledgeable child care staff can help women meet their breastfeeding goals and eliminates one of many potential hurdles faced when returning to work or school.

Mandating state child care licensure laws include a minimum amount of breastfeeding-specific training and a list of best practices needs to be a priority for state social service administrations.

Training child care staff and implementing best practices will help to create the supportive environment necessary to improve breastfeeding duration rates.

Current Practices and Recommendations

Working mothers make up one of the nation's fastest growing demographics (1). In 2015, 58% of mothers with infants under age 1 were in the workforce. (1), thus many infants are being cared for by someone other than their mothers during critical developmental periods. According to the Centers for Disease Control and Prevention (CDC), working full-time outside of the home is closely related to shortened breastfeeding duration (2). Just over 81% of mothers in the United States start breastfeeding immediately after birth, but only about 22% of those moms are breastfeeding exclusively six months later (3).

Creating a culture that normalizes breastfeeding helps to decrease maternal anxiety and improve breastfeeding duration rates (4). Child care staff can be an important part of mothers' support networks, impacting feeding decisions and encouraging longer duration of breastfeeding. The Infant Feeding Practices Study II is a longitudinal study that followed women from the third trimester until infants' first birthdays. The study found that breastfeeding rates at 6 months were significantly higher for mothers who felt supported by child care staff. These mothers were allowed to breastfeed onsite before work and encouraged to express breast milk for infant feedings (2).

Currently, state licensure laws do not contain expressed breastfeeding education requirements for child care staff. The American Academy of Pediatrics (AAP) and American Public Health Association (APHA) recommend formal breastfeeding training and education of staff in child care facilities. Training will not only increase staff knowledge base, but will also help to change attitudes about breastfeeding (4).

Infant-Feeding Guidelines in *Caring for Our Children*

Published by the American Academy of Pediatrics (AAP) and the American Public Health Association (APHA), this publication provides national guidelines on how Early Care and Education (ECE) programs should accommodate breastfeeding mothers.

Specifically, the AAP and APHA recommend the following: "The facility should encourage, provide arrangements for, and support breastfeeding. The facility staff, with appropriate training, should be the mother's cheerleader and enthusiastic supporter for the mother's plan to provide her milk..." (1)

Benefits of Breastfeeding - Mother, Baby, Financial

Breastfeeding is associated with important health benefits for both mother and child. The World Health Organization (WHO) and AAP recommend exclusive breastfeeding for the first six months of life and continued breastfeeding through at least one year of age (5,6).

Mother	Breastfeeding helps protect mothers against breast and ovarian cancers, type 2 diabetes, and can reduce postpartum depression (2, 3, 4, 5, 6).
Baby	Breast milk contains antibodies that protect babies' immune systems from disease. Breastfeeding is associated with decreased risk and severity of many short-term illnesses including bacterial meningitis, diarrhea, ear infections, respiratory infections, and urinary tract infections as well as decreased risk of sudden infant death syndrome (SIDS) and both childhood and adult obesity (2, 3, 4, 5, 6).
Financial	Cost Savings for Families: The cost of feeding infant formula for one year is approximately \$1200-\$1500. Healthcare Costs: It is estimated that private and government insurers spend a minimum of \$3.6 billion to treat diseases and conditions preventable by breastfeeding (7).

Benefits to Child Care Centers

Providing an environment that encourages mothers to continue breastfeeding after returning to work or school makes good business sense. Child care facilities can benefit in the following ways:

- Breastfed infants have a lower risk of some illnesses
 - Infants in child care have double the odds of needing antibiotics by age 1.5 years. However, when they are exclusively breastfed for at least 4 months, there is a protective effect for 2.5 years (8).
- Employee recruitment and retention
 - Companies that provide time and space for women to directly feed or express breast milk have been proven to enjoy significant cost savings including lower rates of absenteeism, lower health care costs, better employee retention and higher productivity and loyalty (9). This is especially important as child care facilities routinely experience high staff turnover rates (10).
- Reimbursement from the Child and Adult Care Feeding Program (CACFP)
 - Meal pattern revisions related to the Healthy, Hunger-Free Kids Act of 2010 allows child care facilities who participate in the CACFP to request reimbursement of meals when the mother directly breastfeeds her infant at the child care facility. In addition, child care facilities can collect reimbursement for breast milk that the mother brings to the facility (11).

Current State Licensure Laws

Breastfeeding regulations are varied among state licensure laws. Each state has specific licensure laws for staff education but most do not address breastfeeding education and/or appropriate handling of breast milk. Only three states have laws specific to breastfeeding (12):

Louisiana prohibits any child care facility from discriminating against breastfed babies.

Mississippi requires licensed child care facilities to provide breastfeeding mothers with a sanitary place that is not a toilet stall to breastfeed their children or express milk, to provide a refrigerator for storage of expressed milk, to train staff in the safe and proper storage and handling of human milk, and to display breastfeeding promotion information.

Maryland requires child care facilities to promote proper nutrition and developmentally appropriate practices by establishing training and policies promoting breastfeeding.

RECOMMENDED STATE LICENSURE LAWS

- 2-4 hours of breastfeeding specific training within current training requirements for all program administration and classroom staff.
- Mandatory refresher trainings annually of at least 2 hours
- Addition of breastfeeding best practices to state law specific to:
 - Appropriate handling and storage guidelines
 - Support to mothers
 - Support to nursing employees
 - Provide learning and play opportunities that normalize breastfeeding
 - Provide a breastfeeding-friendly environment: posted breast feeding policy, written education materials for parents
 - Establish an appropriate feeding plan for all breastfed infants

Models of Support

States across the nation have developed early child care breastfeeding-friendly designation programs consisting of various steps that provide specific recommendations for staff training, education, and best practices. Utilizing current models of support can help guide development of state specific licensure laws and provide additional guidance to child care administrations implementing the new requirements.

- [CDC: Breastfeeding and Early Care and Education](#) (13)
- [Minnesota Breastfeeding Friendly Child Care Program](#) (15)
- [Wisconsin 10 steps to Breastfeeding-Friendly Child Care Centers Resource Kit](#) (9)
- [Missouri Breastfeeding Friendly Child Care](#) (16)
- [Carolina Breastfeeding-Friendly Child Care Initiatives](#) (14)
- [Indiana Perinatal Network Child Care Campaign](#) (17)
- [New York Breastfeeding-Friendly Childcare](#) (18)

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