

Background

Breastfeeding provides mothers and their infants with many health benefits. Compared to infants fed formula, infants fed human milk have a lower risk of asthma¹, ear infections⁵, and sudden infant death syndrome². For breastfeeding mothers, the risk of ovarian and breast cancers is lower compared to mothers who never breastfed^{2,3,4}. The American Academy of Pediatrics recommends exclusively breastfeeding for the first 6 months of life, and continuing to breastfeed, as solid foods are introduced, through at least 12 months.⁵

Pregnancy Risk Assessment Monitoring System (PRAMS)

NJ Pregnancy Risk Assessment Monitoring System (PRAMS) is a joint project of the NJ Department of Health and the Centers for Disease Control and Prevention (CDC). Information from PRAMS is used to help plan better health programs for NJ mothers and infants. One out of every 50 mothers are sampled each month, when newborns are 2-6 months old. Survey questions address their feelings and experiences before, during and after pregnancy. The PRAMS sample design oversamples smokers and minorities. Data are weighted to give representative estimates of proportions in specific categories and of actual persons. Almost 24,000 NJ mothers were included between 2002-2017, with an average response rate of 70%.

National and State Breastfeeding Goals

Breastfeeding	Healthy People 2020 Objectives ⁶	Healthy New Jersey 2020 Objectives	Title V National Performance Measures ⁷	
Initiation	Increase the proportion of infants who are ever breastfed	Increase the proportion of infants who are ever breastfed	Percent of infants who are ever breastfed	
Duration	Increase the proportion of infants who are breastfed at 6 months and 1 year	No related objective	No related performance measure	
Exclusivity*	Increase the proportion of infants who are breastfed exclusively through 3 and 6 months	Increase the proportion of infants who are breastfed exclusively through 3 and 6 months	Percent of infants breastfed exclusively through 6 months	

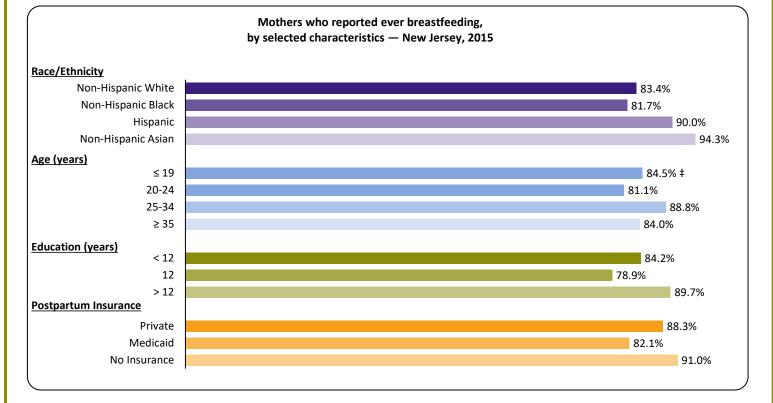
* Infants only receive human milk except for medicine, vitamins, and minerals when necessary

Breastfeeding Rates

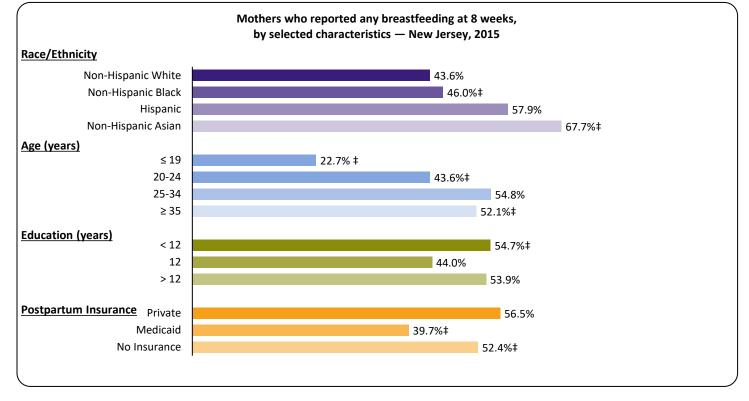
PRAMS Indicators	New Jersey %				Multiple Sites %
	2012	2013	2014	2015	2014
Ever breastfed	82.8	83.5	86.5	86.3	86.3
Any breastfeeding at 8 weeks	44.3	48.6	46.3	50.9	64.8

New Jersey PRAMS: Breastfeeding

Who Initiates Breastfeeding?



Who Breastfeeds at 8 Weeks?



‡ < 60 respondents; may not be reliable.

Breastfeeding-Related Maternity Care Experiences

Supportive maternity care practices at health facilities are associated with increased rates of mothers starting and continuing to breastfeed. For example, including breastfeeding education as a part of maternity care is associated with longer breastfeeding duration.⁸

Standard PRAMS indicator completed by	New Jersey %			
mothers who gave birth in a hospital and reported ever breastfeeding	2012	2013	2014	2015
Maternity Care Practices Supportive of Breastfeeding				
Hospital staff gave me information about breastfeeding	95.9	96.7	96.2	96.9
My baby stayed in the same room with me at the hospital	74.3	79.5	80.5	85.6
Hospital staff helped me learn how to breastfeed	82.1	86.3	85.2	86.0
I breastfed in the first hour after my baby was born	68.4	70.0	70.6	73.0
I breastfed my baby in the hospital	92.8	93.4	93.4	94.2
My baby was fed only breast milk at the hospital	44.4	50.6	46.4	53.3
Hospital staff told me to breastfeed whenever my baby wanted	81.8	85.0	83.1	84.7
The hospital gave me a breast pump to use	40.2	39.7	42.1	39.7
The hospital gave me a telephone number to call for help with breastfeeding	81.5	81.4	79.7	80.0
Maternity Care Practices Unsupportive of Breastfeeding	9*			
The hospital staff gave my baby a pacifier	62.5	60.6	54.4	47.4
The hospital gave me a gift pack with formula	59.7	60.3	52.3	47.0

* Negative responses indicate receipt of appropriate maternity care

Summary and Public Health Action

 In NJ, prevalence of ever breastfeeding increased between 2012-2014 (82.8% in 2012 to 86.5% in 2014), but remained stagnant between 2014-2015.

- Similarly, the prevalence of any breastfeeding for 8 weeks increased from 44.3% in 2012 to 50.9% in 2015.
- Maternity care practices supportive of breastfeeding in the hospitals showed that most mothers received information about breastfeeding (96.9% in 2015), were told to breastfeed on demand (84.7% in 2015) and were given a number to call for help (80% in 2015).
- More public health efforts are needed to provide mothers with the support they need to reach their breastfeeding goals, such as breastfeeding exclusively for 3 and 6 months. This can be achieved by the provision of breastfeeding support counselors who represent the communities with lower breastfeeding rates. This is one of the required components of the newly issued Healthy Women Healthy Families Grant.

Resources

CDC Website on Breastfeeding: https://www.cdc.gov/breastfeeding/

Office on Women's Health Website on Breastfeeding: https://www.womenshealth.gov/breastfeeding/

References:

- Effects of early nutritional interventions on the development of atopic disease in infants and children: the role of maternal dietary restriction, breastfeeding, timing of introduction of complementary foods, and hydrolyzed formulas. Pediatrics. 2008;121(1):183–191pmid:18166574
- Breastfeeding and maternal and infant health outcomes in developed countries. Evid Rep Technol Assess (Full Rep). 2007;153(153):1–186pmid:17764214
- A summary of the Agency for Healthcare Research and Quality's evidence report on breastfeeding in developed countries. Breastfeed Med. 2009;4(suppl 1):S17–S30pmid:19827919
- Lactation and incidence of premenopausal breast cancer: a longitudinal study. Arch Intern Med. 2009;169(15):1364– 1371pmid:19667298
- Breastfeeding and the Use of Human Milk: http://pediatrics.aappublications.org/content/129/3/e827
- Healthy People 2020 Objectives: https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-childhealth/objectives
- Title V National Performance Measures: https://mchb.tvisdata.hrsa.gov/PrioritiesAndMeasures/NPMDistribution
- CDC Guide to Strategies to Support Breastfeeding Mothers and Babies: <u>https://www.cdc.gov/breastfeeding/resources/guide.htm</u>

To learn more about PRAMS methods and to see data availability by state and year visit: https://www.cdc.gov/prams For more information on NJ PRAMS: http://www.nj.gov/health/fhs/maternalchild/outcomes/prams/





Prepared by: Maternal and Child Health Epidemiology, New Jersey Department of Health, April 2018