



Missouri Title V Facts: **BREASTFEEDING**

BACKGROUND

Breastfeeding has been shown to be beneficial for the health of babies. Infants that do not breastfeed are at higher risk for adverse health outcomes, including ear and respiratory infection and Sudden Infant Death Syndrome (SIDS).¹ Breastfeeding soon after birth provides newborns with antibodies and immune protection from their mother, strengthening their ability to fight off infections and illnesses until their own immune system develops.²

Breastfeeding has benefits for mothers as well: by reducing the risk for breast and ovarian cancer.³ Additionally, women who exclusively breastfeed their babies demonstrate higher quality relationships with their infants at one year.⁴ The American Academy of Pediatrics recommends that all infants receive only breastmilk through 6 months of age.³

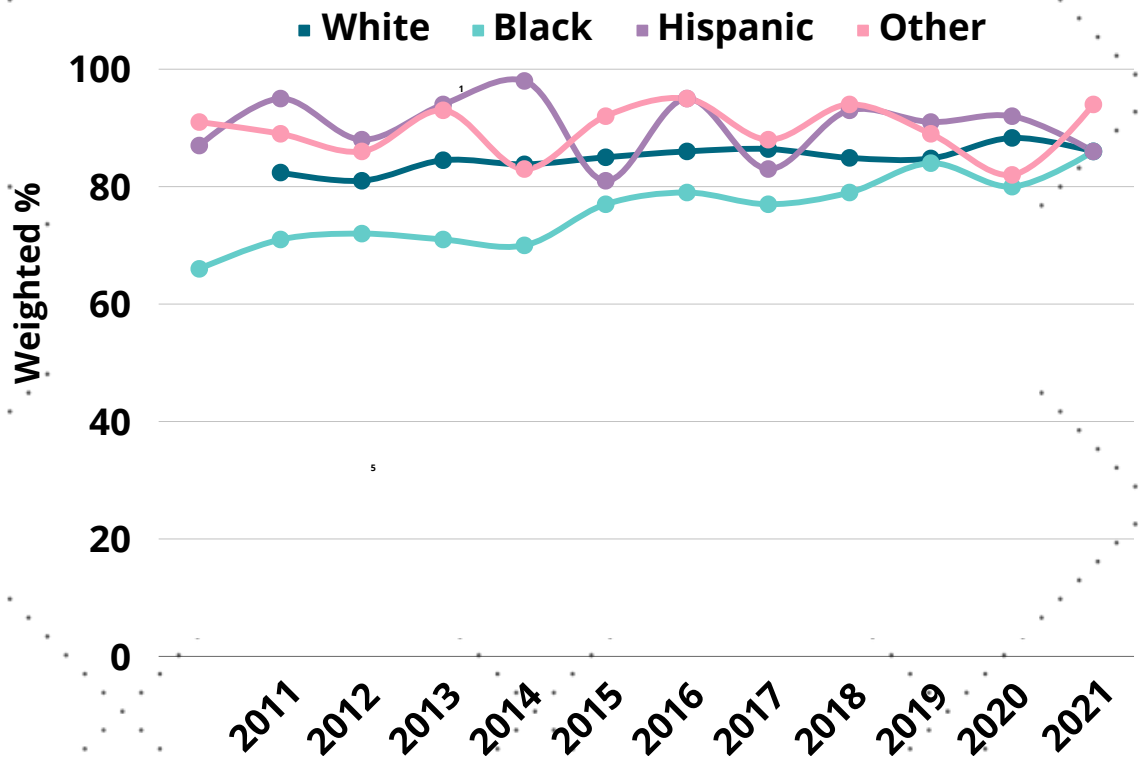
BREASTFEEDING INITIATION AND CONTINUATION

Not all Missouri mothers choose to breastfeed, and some of those who initiate breastfeeding are not successful in meeting their breastfeeding goals. Breastfeeding initiation rates statewide increased between 2011 and 2021, from 82% to 86%, and they remain in line with the national average.⁵ Additionally, only 57% of mothers who begin breastfeeding continue to breastfeed for 6 months.⁶ Nationally, Black mothers are 2.5 times less likely than white mothers to breastfeed their infants.



This trend is seen in Missouri as well, though disparities in rate of initiation are lower than national trends. In Missouri, from 2016-2021, 81% of Black mothers initiated breastfeeding, compared to 86% of white mothers. Mothers who identify themselves as Hispanic have the highest rate of breastfeeding initiation in the state, at 90%.

Figure 1. Trends in Breastfeeding Initiation by Race/Ethnicity, Missouri 2011-2021⁵



In Missouri, breastfeeding initiation rates are highest among more educated, older, and urban mothers. Women with household incomes less than 101% of the Federal Poverty Level (75%) and who had less than a high school education (75%) were the least likely to initiate breastfeeding.⁵ Additionally, women with pre-pregnancy depression and those who reported that their pregnancy was unintended were also significantly less likely to breastfeed than the statewide average.



Programs such as the Special Supplemental Nutrition for Women, Infants and Children (WIC) encourage breastfeeding among their participants with infants and seek to improve breastfeeding rates among lower income Missourians. Missouri WIC staff are trained to promote breastfeeding and provide education and support for breastfeeding mothers.

WIC agencies are also required to create policies to ensure that breastfeeding support is provided through the prenatal and postpartum periods. Additionally, 45% of WIC participant mothers with infants 3-6 months old who initiated breastfeeding were still partially- or fully breastfeeding, with comparable rates between African-American and white mothers. ⁵

Only 64% of Missouri mothers who initiated breastfeeding continued for at least 8 weeks. ⁵ The Missouri Pregnancy Risk Assessment Monitoring System (PRAMS) survey collects information on the reasons women stop breastfeeding. The most commonly given explanations suggest that mothers are concerned about their milk supply or ability to meet their infants' nutritional needs through nursing alone. Nearly 6 in 10 women who stopped breastfeeding their young infants stated that they believed that they were not producing enough milk. A significant number also report that their infant had difficulty latching (36%) or that nursing caused them too much physical discomfort (24%).⁵

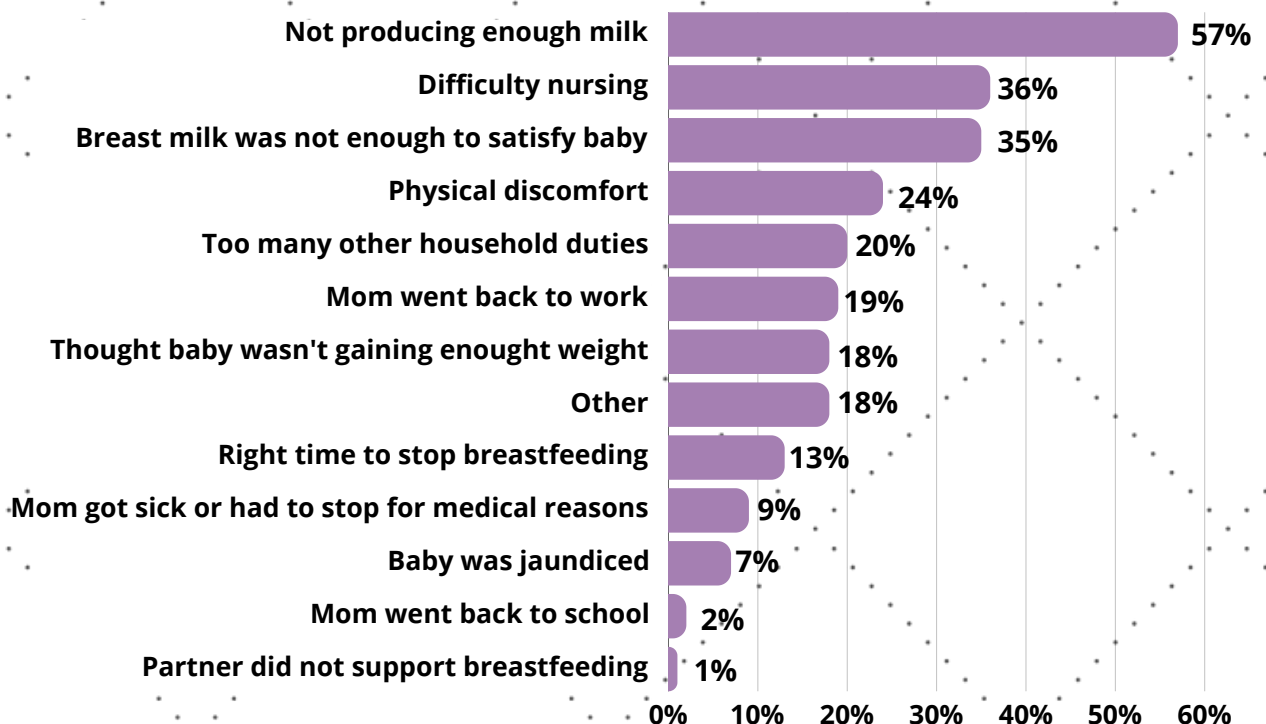


MISSOURI DEPARTMENT OF
**HEALTH &
SENIOR SERVICES**

Pregnancy Risk Assessment
Monitoring System



Figure 2. Reasons for Stopping Breastfeeding, PRAMS 2016-2021⁵

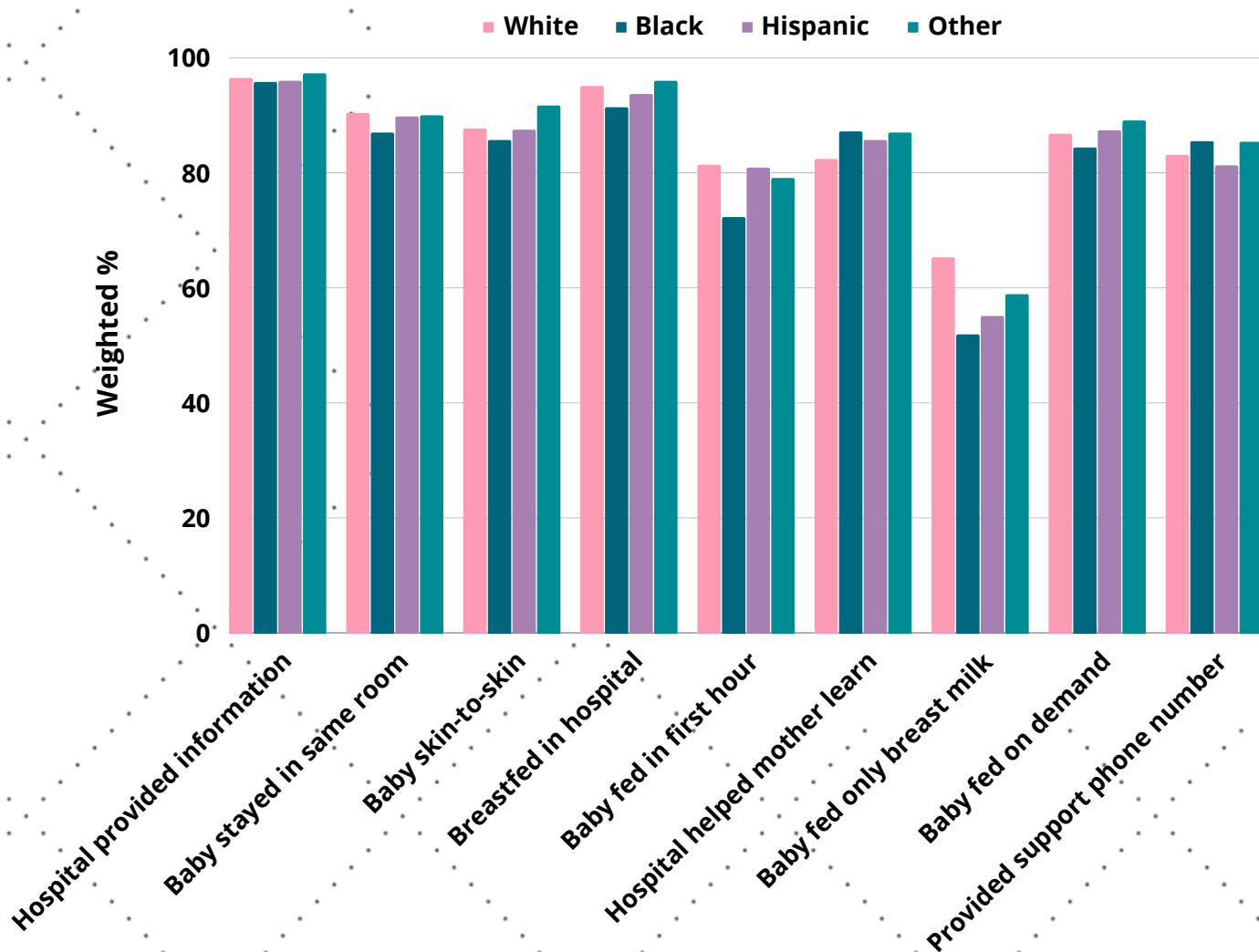


Breastfeeding Initiatives

The Baby-Friendly Hospital Initiative (BFHI) program encourages hospitals to implement Ten Steps to Successful Breastfeeding, with the goal of breastfeeding success in all populations. In Missouri, eleven hospitals maintain Baby-Friendly designation as of July 2023.⁷ There is also the Missouri “Show-Me 5” Hospital Initiative which requires hospital to adopt just five of the ten steps in order to assist mothers in meeting their breastfeeding goals. Nineteen hospitals have met the Missouri “Show-Me 5” hospital designation.⁸ In 2022, 21.2% of live births in Missouri occurred in BFHI-accredited facilities, including 46.1% of all African-American, Non-Hispanic live births. Mothers who gave birth at BFHI-accredited hospitals report higher rates of best practices overall, though disparities remain between the experiences of Black mothers and white mothers. Compared to white mothers, Black women are significantly less likely to report that their babies were fed only breastmilk in the hospital (52% vs. 66%). Additionally, Black mothers at both BFHI-accredited and non-accredited hospitals have significantly higher rates of practices with negative impacts on breastfeeding success, including receiving formula samples (57% vs. 42%) and pacifier use in the hospital (35% vs. 30%).⁵



Figure 3. Breastfeeding Best Practices by Race/Ethnicity, PRAMS 2016-2021⁵



MATERNAL RESOURCES



https://health.mo.gov/living/families/wic/breastfeeding_



https://www.womenshealth.gov/breastfeeding_



<http://www.mobreastfeeding.org/resources/>



References

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