

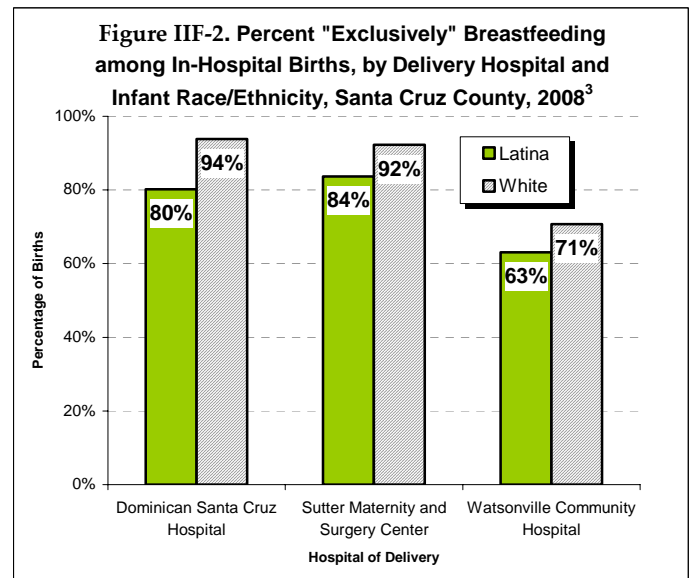
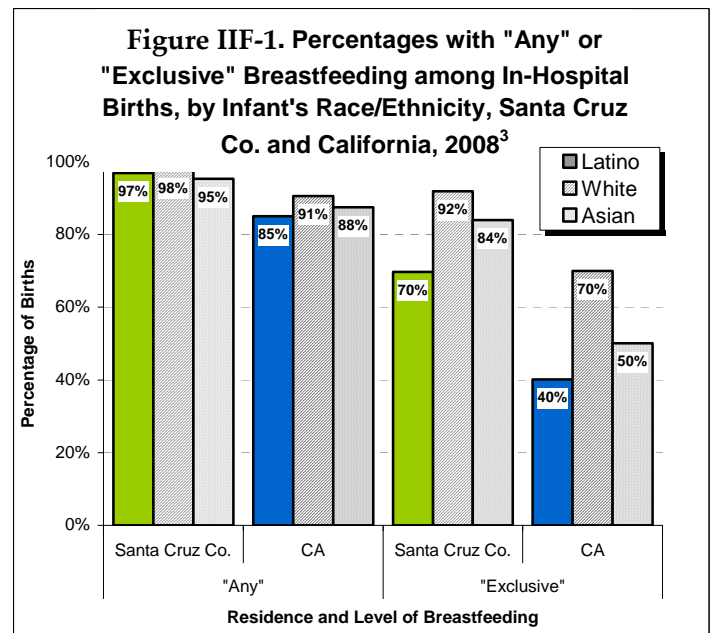
F. BREASTFEEDING

<p>Importance</p>	<p>In general, exclusive breastfeeding for the first 6 months of life is the optimal way of feeding infants for healthy growth and development. Breastfeeding also contributes to the health and well-being of mothers by helping to space children and lowering the risk for ovarian cancer and breast cancer, and is a food-secure and environmentally safe option.¹</p>
<p>Healthy People 2010 Objective</p>	<ul style="list-style-type: none"> ▪ Increase the proportion of mothers who have <u>ever</u> breastfed their babies to 75% ▪ Increase the proportion of mothers <u>exclusively</u> breastfeeding their babies through three months to 40%

Both babies and their mothers benefit from breastfeeding. Breastmilk contains antibodies and other factors that protect babies from disease, infection, and allergies. The World Health Organization recommends breastfeeding as the perfect way to feed an infant. The more breastmilk a baby gets, the more benefits to the baby’s health and immune system.¹

Breastfeeding benefits the infant by reducing the risks of ear and respiratory infections, atopic dermatitis, gastroenteritis, necrotizing enterocolitis, type 2 diabetes, and sudden infant death syndrome (SIDS).² In the long term, a breastfed child has a lower likelihood of pediatric overweight, and it appears that the odds of overweight continue to lessen the longer a child is breastfed. While more research is needed, exclusive breastfeeding appears to have a stronger effect than combined breast and formula feeding. Breastfeeding also confers benefits to mothers, both in the short term and long term, by speeding the return of uterine tone, stopping post-birth bleeding, and temporarily suppressing ovulation—which aids in the spacing between births. In the long term, mothers who breastfeed have a decreased risk of breast and cervical cancer as well as type 2 diabetes.²

In Santa Cruz County and statewide, rates of “any” breastfeeding far exceed the Healthy People 2010 objective of 75% and there seems to be little variation by infant’s race/ethnicity.³ However, rates for “exclusive” breastfeeding vary greatly by race/ethnicity, with Latina mothers being the least likely to exclusively breastfeed, in both Santa Cruz County and California (see Figure IIF-1). The exclusive rates cannot be compared to the Healthy People 2010 objective of 40% at three months age, because data are only collected at time of birth, so the percentages at three months are likely much lower. However, it is still interesting to note the difference in exclusive rates by race/ethnicity and by hospital of birth (see Figure IIF-2). The percentage of exclusively breastfed infants increased in 2008 to 77% overall, compared to 69% just one year before.³



<p>Primary Prevention Activities</p>	<ul style="list-style-type: none"> ▪ <u>Comprehensive Perinatal Services Program (CPSP)</u> Health care practitioners in the community provide prenatal care that also includes assessments, education, childbirth education classes, support, and referrals for other needed services. All pregnant Central Coast Alliance for Health members and pregnancy-only Medi-Cal recipients are eligible to receive CPSP services when attending a CPSP provider for prenatal care. ▪ <u>Women, Infants and Children Program (WIC)</u> & Regalo De Amor Lactation Center for WIC participants ▪ <u>Hospital Lactation Consultants</u> ▪ <u>Nursing Mother’s Council</u> ▪ <u>Le Leche League</u>
<p>Helpful Websites</p>	<ul style="list-style-type: none"> ▪ World Health Organization (WHO): http://www.who.int/topics/breastfeeding/en/ ▪ Centers for Disease Control and Prevention (CDC): http://www.cdc.gov/breastfeeding/ ▪ California Department of Public Health (CDPH): http://www.cdph.ca.gov/HealthInfo/healthyliving/childfamily/Pages/BreastfeedingandHealthyLiving.aspx ▪ County of Santa Cruz: http://www.santacruzhealth.org/phealth/family/3breastfeeding.htm ▪ State of Oregon / The Benefits of Breastfeeding: http://www.oregon.gov/DHS/ph/bf/benefits.shtml

<p>Sources</p>	<ol style="list-style-type: none"> 1. World Health Organization. “WHO Exclusive Breastfeeding.” Web. 01 Sept. 2010. http://www.who.int/nutrition/topics/exclusive_breastfeeding/en/index.html. 2. Centers for Disease Control and Prevention. “Does Breastfeeding Reduce the Risk of Overweight?” http://www.cdc.gov/nccdphp/dnpa/nutrition/pdf/breastfeeding_r2p.pdf. 3. California Department of Public Health. “California In-Hospital Breastfeeding as Indicated on the Newborn Screening Test Form; Statewide and Maternal County of Residence by Race/Ethnicity: 2008.” http://www.cdph.ca.gov/data/statistics/Documents/MO-BFP-CountyofResidence-RaceEthnicityReport2008.pdf.
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