

# Breastfeeding and Early Care and Education (ECE)

Help ECE centers and homes make an impact by supporting breastfeeding moms

The American Academy of Pediatrics (AAP) recommends that infants be exclusively breastfed for the first 6 months but, only about 25% of infants are. 60% of mothers stop breastfeeding earlier than they want to. Several factors affect breastfeeding duration including support women receive from family members, health care providers, their workplace, and ECE facilities.



## Did you know?

The more breastfeeding support a mother receives from her ECE provider the more likely she will continue to breastfeed her child.

To meet national standards for supporting breastfeeding, ECE centers and family homes alike can:

- Provide a private space for mothers to breastfeed or express milk
- Allow and encourage mothers to breastfeed at the facility
- Train all staff to prepare, feed, and store breast milk properly
- Develop a breastfeeding-friendly feeding plan with each family
- Make sure breastfed infants are fed expressed breast milk at appropriate intervals
- Teach families to properly store and label their breast milk for use in an ECE facility

For a comprehensive list of national standards to support breastfeeding in ECE refer to: Caring for Our Children: National Health and Safety Performance Standards (CFOC). 3rd ed. <http://nrckids.org/CFOC>

The Centers for Disease Control and Prevention's (CDC) Spectrum of Opportunities framework lists several ways that states and communities can embed and support these standards in their ECE systems. Examples include licensing regulations, the Child and Adult Care Food Program (CACFP), Quality Rating and Improvement Systems (QRIS)\*, and pre-service and professional development opportunities. For a full description of CDC's Spectrum of Opportunities visit: [https://www.cdc.gov/obesity/strategies/early-care-education/pdf/TheSpectrumofOpportunitiesFramework\\_May2018\\_508.pdf](https://www.cdc.gov/obesity/strategies/early-care-education/pdf/TheSpectrumofOpportunitiesFramework_May2018_508.pdf).

## What Have States and Communities Done?

The **Nevada** legislature passed a bill (A.B. 152) (2015) that directs the State Board of Health to adopt regulations for licensed child care facilities that, among other things, requires the provision of an appropriate, private space where mothers may breastfeed. [http://www.leg.state.nv.us/Session/75th2009/Bills/AB/AB152\\_EN.pdf](http://www.leg.state.nv.us/Session/75th2009/Bills/AB/AB152_EN.pdf)

The **city of Boise (Idaho)** adopted an ordinance (2014) by which the city will monitor and disclose to the public each child care facility's compliance with a set of standards, two of which are related to breastfeeding: 1) whether the facility has a private, designated location other than a restroom for breastfeeding, and 2) whether the location for breastfeeding is maintained in a sanitary condition, with access to an outlet, chair, and nearby running water.

<http://cityclerk.cityofboise.org/media/223551/0533.pdf>

\*QRIS is one opportunity in the Spectrum of Opportunities and is a systematic approach to assess, communicate, and improve the level of quality in ECE programs. Through QRIS, states define what constitutes a higher quality of care based on designated criteria and use a rating system with a recognizable and understandable symbol to communicate to the public how well participating ECE facilities meet these criteria.

The **Kansas Breastfeeding Coalition** developed a two-hour breastfeeding support course for childcare providers that integrates information about breastfeeding and state licensing regulations that pertain to breast milk. This course is one of 5 components required to earn the special designation of “Breastfeeding Friendly Childcare Provider” from the state. <http://ksbreastfeeding.org/cause/child-care-provider-education/>



The **Florida Department of Health** implemented a CACFP Breastfeeding Friendly initiative that recognized childcare centers and family childcare homes with standards and policies supporting breastfeeding. The Department, in partnership with the Florida Breastfeeding Coalition, developed a live webinar and online training module (available in English and Spanish) to assist all child care facilities with creating and maintaining an environment that promotes and normalizes breastfeeding. Learn more about Florida’s Breastfeeding Friendly Child Care here: <http://www.flbreastfeeding.org/breastfeeding-friendly-child-care-facilities/>. View the training module here: [http://www.floridahealth.gov/\\_media/child-care-food-program/Creating\\_A\\_Breastfeeding\\_Friendly\\_Child\\_Care\\_Facility/](http://www.floridahealth.gov/_media/child-care-food-program/Creating_A_Breastfeeding_Friendly_Child_Care_Facility/).

**Montana’s** QRIS (Best Beginnings STARS to Quality) includes the following standard for supporting nursing mothers within its **level 2** requirements:

“Breastfeeding is encouraged and the environment and program policies are designed to support this. Programs must have policies in place whether they serve infants or not in order to support families.”

Learn more about Montana’s QRIS and find a link to their standards for centers here: <http://dphhs.mt.gov/hcsd/ChildCare/STARS.aspx>.

**View a summary of states’ Licensing Regulations and QRIS standards here:**

[https://d3knp61p33sjvn.cloudfront.net/2016/04/SummaryofObesityPreventionLicensingRegulationsandQRISStandards\\_040416.pdf](https://d3knp61p33sjvn.cloudfront.net/2016/04/SummaryofObesityPreventionLicensingRegulationsandQRISStandards_040416.pdf)

To achieve level 3 in **New Jersey’s** QRIS (Grow NJ Kids), programs serving infants and toddlers must have a policy that supports breastfeeding friendly principles, including accepting and storing breast milk and providing a comfortable place for breastfeeding. Learn more about New Jersey’s QRIS here: <http://www.grownjkids.gov>, and view their QRIS standards here: <http://www.grownjkids.gov/ProvidersEducators>

The **Minnesota Department of Health** (DOH) hired a childcare specialist and an International Board Certified Lactation Consultant (IBCLC) to develop a training for childcare centers that focuses on improving 3 areas of care, including breastfeeding. The DOH funds local health departments through the Statewide Health Improvement Program (SHIP) who then recruit childcare centers and homes that want to participate in the training and improve their practices. Learn more about SHIP here: <http://www.health.state.mn.us/ship/>.

The **Arizona Department of Health** supports a toll free number available 24/7 to provide technical assistance for pregnancy and breastfeeding. The line is staffed by IBCLCs who are trained on all aspects of breastfeeding, including breastfeeding in ECE settings. Learn more about Arizona’s call line here: <http://azdhs.gov/prevention/nutrition-physical-activity/breastfeeding/index.php#mom-home>

Many states actively participate in the **National Collaborative for Advancing Breastfeeding in Child Care (NCABC)**, facilitated by the Carolina Global Breastfeeding Institute. The NCABC was established to address promotion, protection, and support of breastfeeding in the ECE setting. NCABC hosts quarterly webinars during which states share their activities and resources. Those working at the state-level, tribal-level, or area-level are encouraged to become members and share program activities, common issues, and lessons learned in creating statewide, tribal, or area-wide breastfeeding-friendly childcare programs. <https://sph.unc.edu/cgbi/national-collaborative-on-advancing-breastfeeding/>