

# Massachusetts Breastfeeding Report, 2023



**USBC**

U.S. Breastfeeding Committee

## About this Report

Breastfeeding has a profound impact on population health outcomes. The [evidence for the value of human milk](#) to the overall health of infants, children, and mothers is scientific, robust, and continually reaffirmed by new research. Breastfed infants are at lower risk of certain infections and sudden unexplained infant death. Children who were breastfed have decreased risk of obesity, type 1 and 2 diabetes, asthma, and childhood leukemia. Women who breastfeed reduce their risk of chronic illnesses, including type 2 diabetes, cardiovascular disease, and breast and ovarian cancers. A [recent CDC study](#) of over 3 million U.S. births found that ever breastfeeding is associated with a 26% reduction in the odds of post-perinatal (between 7-364 days) infant death.

The [American Academy of Pediatrics recommends](#) infants be exclusively breastfed for about six months with continued breastfeeding while introducing complementary foods for two years or beyond. Unfortunately, barriers to establishing and maintaining the breastfeeding relationship are persistent and pervasive in the United States, and only a small proportion of dyads meet these recommendations.

This is why increasing breastfeeding rates and creating lactation-friendly environments have been identified as critical public health priorities both nationally and globally. This year, in addition to the ongoing COVID-19 pandemic, many families also had to navigate the devastating infant formula recall and shortage, stripping away their confidence in keeping their babies safely fed.

The good news is that federal investments are making a difference for babies, mothers, and our nation. The Massachusetts breastfeeding report describes how breastfeeding rates and other measures compare to national levels, lists the coalitions serving communities in the state, and highlights state and community-based lactation projects made possible through federal funding in 2021 and 2022.

Our values and priorities are reflected through the care and attention we show to our nation's infants and young children, and we all have a role to play. In the words of Surgeon General Regina Benjamin, "We can all help make breastfeeding easier."

We hope this report illustrates the importance of breastfeeding and human milk and sheds a light on the policy, system, and environmental factors that impact infant feeding outcomes. To access reports from other states and territories, please visit [www.usbreastfeeding.org/state-breastfeeding-reports](http://www.usbreastfeeding.org/state-breastfeeding-reports).



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## Breastfeeding Rates

See how Massachusetts breastfeeding rates and other measures compare to national rates and targets set by the Healthy People 2030 (HP2030) initiative.

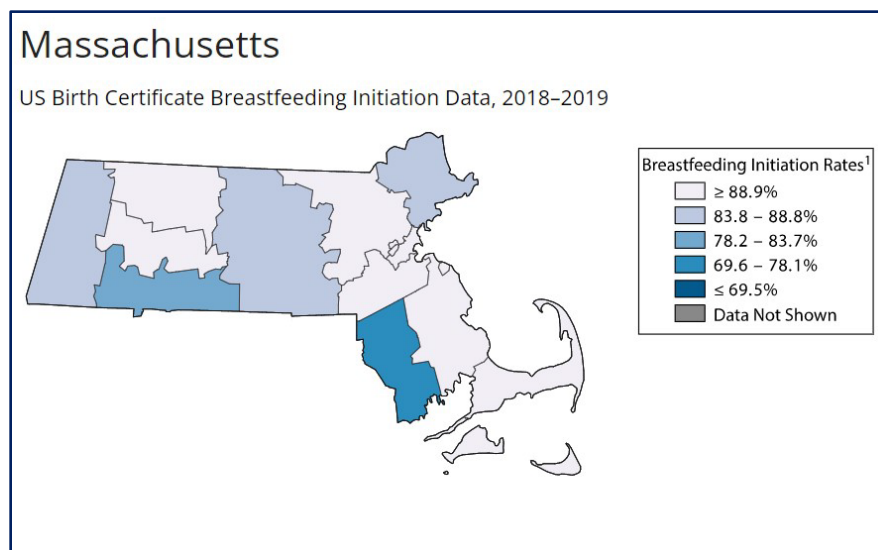
	Breastfeeding Initiation Rate	Largest Disparity Between Racial/Ethnic Groups
<b>Massachusetts</b>	88.4%	6.8%
<b>U.S. National</b>	84.1%	16.7%

Source: [National Vital Statistics System birth certificate data](#), a census of all 2019 births and the largest collection of breastfeeding data. Breastfeeding initiation is measured as a percentage. Largest disparity in breastfeeding initiation between racial/ethnic groups is measured as a percentage difference.

	Exclusive Breastfeeding at 6 Months	Any Breastfeeding at 12 months	Formula Supplementation at 2 Days
<b>Massachusetts</b>	29.2%	44.2%	15.2%
<b>U.S. National</b>	24.9%	35.9%	19.2%
<b>HP2030 Target</b>	42.4%	54.1%	N/A

Source: [CDC Breastfeeding Report Card](#), a biannual publication highlighting progress towards breastfeeding goals in the United States. Breastfeeding and supplementation rates are measured as a percentage.

State and territorial breastfeeding rates provide important insights about how families are supported, but data shows that there are significant disparities across counties.



Source: [CDC Breastfeeding Initiation Rates and Maps by County](#), presenting 2018–2019 National Vital Statistics System data.

## WIC Program Breastfeeding Performance Measures

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) program provides supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five. The WIC program serves approximately 53 percent of all infants born in the United States.

	Fully Breastfed Rate	Partially Breastfed Rate	Total Breastfed Rate	Fully Formula Fed Rate
<b>Massachusetts WIC Rates</b>	13.1%	24.1%	37.2%	62.8%
<b>National WIC Rates</b>	12.1%	21.9%	33.9%	66.1%

Source: [Fiscal Year 2021 WIC Breastfeeding Data Local Agency Report](#). Breastfeeding and formula feeding rates are measured as a percentage of participating children under one year of age.

## Creating a Landscape of Support

The policy, systems, and environments that surround and shape our lives have a profound impact on the infant feeding experience, either helping or hindering breastfeeding. Maternity care practices, paid family and medical leave, and childcare practices are proven to impact breastfeeding outcomes, and are highlighted in the CDC Breastfeeding Report Card.

	% of live births occurring at Baby-Friendly facilities	mPINC Score	Has enacted paid family and medical leave legislation	# of weeks available to care for a new child	ECE licensing breastfeeding support score
<b>Massachusetts</b>	36.6%	85	Yes	12	70
<b>U.S. National</b>	28.9%	81	No	-	-

Source: [CDC Breastfeeding Report Card](#). CDC's national Maternity Practices in Infant Nutrition and Care (mPINC) survey assesses maternity care practices that affect how babies are fed. Among states with enacted paid family and medical leave legislation, the number of weeks presented are those that can be claimed by eligible employees for the care of a new child by birth, adoption, or foster care. ECE score indicates the extent to which a state's licensing regulation for early child education centers meet the Caring for our Children's standard to encourage and fully support breastfeeding/feeding of breast milk.

## Breastfeeding Coalitions Serving in Massachusetts

An extensive network of state, tribal, territorial, local, and cultural breastfeeding coalitions across the United States are working to create policy, systems, and environmental interventions to better serve babies, mothers, and families. The following coalitions serve in Massachusetts:

- [Boston Breastfeeding Coalition](#)
- [Massachusetts Breastfeeding Coalition](#)

## *Federally Funded Lactation Projects in Massachusetts*

Each year funding is allocated to a variety of federally funded programs that address infant nutrition security through the federal appropriations process. These investments are making a real difference. Breastfeeding rates have risen substantially in recent decades, but additional efforts are needed to help our nation reach Healthy People 2030 goals.

Federally funded lactation support programs are low-cost, high-impact interventions that work to reduce the persistent and pervasive barriers to breastfeeding success. This funding supports critical national efforts, including monitoring and evaluation, research, public education, resource development, and beyond. Funding also supports a wide range of state and community-level projects to address the challenges faced by specific populations. These programs support and reinforce each other, reaching distinct audiences and environments.

See how federal investments are making a difference in Massachusetts below.

### *Centers for Disease Control and Prevention (CDC)*

- The **CDC Hospitals Promoting Breastfeeding program** provides critical support to advance breastfeeding continuity of care and increase access to lactation-friendly environments in states, hospitals, and communities. In Fiscal Year 2022, this program was funded at \$9.75 million.
- **State Perinatal Quality Collaboratives** (PQCs) are state or multi-state networks of multidisciplinary teams, working to improve outcomes for maternal and infant health. PQCs do this by advancing evidence-informed clinical practices and processes using quality improvement (QI) principles to address gaps in care. CDC's Division of Reproductive Health is currently providing support for the Massachusetts Perinatal Quality Collaborative, which is working to support breastfeeding/human milk feeding.
- **EMPower Best Practices** is a hospital-based quality improvement initiative funded by the CDC Division of Nutrition, Physical Activity, and Obesity. The purpose of this initiative is to improve knowledge and skills in evidence-based maternity practices supportive of optimal infant nutrition with a focus on culturally diverse, at-risk populations and those from low-income families. This project is coordinated in partnership with the Carolina Global Breastfeeding Institute based at the University of North Carolina at Chapel Hill and Population Health Improvement Partners. The EMPower Best Practices initiative is supporting the following hospitals in Massachusetts:
  - Good Samaritan Medical Center
  - Holy Family Hospital Methuen
  - Southcoast Charlton Memorial Hospital
  - Southcoast St. Luke's Hospital
  - St. Elizabeth's Medical Center

### *Health Resources & Service Administration, Maternal and Child Health Bureau (HRSA, MCHB)*

- The **Title V Maternal and Child Health (MCH) Block Grant** provides funding for states and jurisdictions to meet the unique health needs of their children and families. In its five-year action plan, Massachusetts has chosen increasing the percentage of infants who are ever breastfed and infants who are breastfed exclusively through 6 months as one of their Title V Maternal and Child Health grant National Performance Measures.
- The purpose of the **Healthy Start program** is to improve health outcomes before, during, and after pregnancy, and reduce racial/ethnic differences in rates of infant death and adverse perinatal outcomes through local projects that can include lactation education. In Massachusetts, the Boston Public Health Commission was awarded \$1,165,330 in Healthy Start funding.



- The **Maternal, Infant, and Early Childhood Home Visiting (MIECHV) program** supports pregnant people and parents with young children who live in communities that face greater risks and barriers to achieving positive maternal and child health outcomes, including through lactation support. In 2022, the Massachusetts Department of Public Health received \$6,738,446 in funding to implement the MIECHV program.

## *U.S. Department of Agriculture, Food and Nutrition Service*

- Each year, the Food and Nutrition Service (FNS), Special Supplemental Nutrition Program for Women, Infants and Children (WIC) presents the **WIC Breastfeeding Award of Excellence** to recognize local WIC agencies that have provided exemplary breastfeeding promotion and support activities. The following Massachusetts agencies were awarded:
  - 2022 Gold Award: Lynn Community Health Center- North Shore WIC Program
  - 2021 Gold Award:
    - Chelsea/Revere WIC Office
    - Family Health Center Worcester
    - Greater Lawrence Community Action Council
    - Somerville/Cambridge WIC

## *Office on Women's Health*

- The **Reducing Disparities in Breastfeeding Innovation Challenge** sought innovative ways to increase breastfeeding initiation and continuation rates and decrease disparities. In Massachusetts, Baby Cafe USA was a winner of the Reducing Disparities in Breastfeeding Innovation Challenge. This Massachusetts-based nonprofit has developed Baby Cafés, free-of-charge, weekly drop-in community breastfeeding support centers located in public spaces in 32 states. Open to all, the Baby Cafés target underserved families in areas with low breastfeeding rates.
- The **Racial Equity in Postpartum Care Challenge** sought innovative methods to improve equity of postpartum care for Black or African American and American Indian/Alaska Native women enrolled in Medicaid or the Children's Health Insurance Program. In Massachusetts, Digital Applications: Ovia Fertility, Ovia Pregnancy, and Ovia Parenting from Ovia Health in Boston was a winner of the HHS Racial Equity in Postpartum Challenge. This program utilizes free cell phone applications that allow users to log reproductive health information, including their menstrual cycle, pregnancy, and the postpartum period. This information is then used to provide participants with education, reminders, and recommendations to connect with providers.

## *National Institutes of Health*

- The National Institutes of Health and National Institute of Child Health and Human Development **conduct and fund a variety of clinical research** related to breastfeeding and breast milk. In Massachusetts, the following organizations received funding:
  - Massachusetts General Hospital was funded to complete the following research projects:
    - "Neuroimaging and gut microbiome markers of development in HIV-exposed uninfected infants."
    - "Role of maternal Treg cells in the induction of neonatal tolerance"
    - "Induction of food allergen-specific neonatal tolerance through breast milk"
  - University of Massachusetts Chan Medical School was funded to complete the following research projects:
    - "Integrin Regulation of Mammary Gland Development"
    - "Signal cell sequencing of primary HCMV infections"
  - Brigham and Women's Hospital was funded to complete the following research projects:
    - "Maternal-neonatal transmission of protective resolution mechanisms for lung inflammation"
    - "Targeting human milk fortification to improve preterm infant growth and brain development"

- University of Massachusetts Amherst was funded to complete the following research projects:
  - “Paper-based Breastmilk Collection System for Facile, In-Home Use”
  - “Fruit and vegetable intervention in lactating women to reduce breast cancer risk: effects on breast cell DNA methylation, breast inflammation, and weight”
  - “Human milk urea nitrogen is recycled by *Bifidobacterium infantis* to impact the emergent physiology of the infant gut microbiome”
  - “Cellular Components of Human Milk: An Examination of Their Role in Infant Health and Development and the Functional Impact of Hospital Storage Practices”
- Boston University Medical Campus was funded to complete a research project titled “Improving Care Giver Adherence to Recommended Infant Care Practices.”
- Harvard School of Public Health was funded to complete a research project titled “Vulnerability During Infancy to Immunotoxic Contaminant Exposures.”
- Boston College was funded to complete the following research projects:
  - “Healthy Lifestyle Intervention for High-Risk Minority Pregnant Women: A RCT”
  - “Biobehavioral Efficacy of the Semi-Elevated Side-Lying Position for Feeding Preterm Infants”
- Boston Medical Center was funded to complete the following research projects:
  - “Study of Attitudes and Factors Effecting PREterm infant care Practices (SAFE PREP)”
  - “Safety, pharmacokinetics, and efficacy of extended-release naltrexone in pregnant women with opioid use disorder”
- Beth Israel Deaconess Medical Center was funded to complete a research project titled “Linking HIV Prevention and post-partum care: Safety, efficacy and feasibility of cabotegravir-LA PrEP in high-risk breastfeeding population in Botswana.”