

Maternal and Child Health: Breastfeeding Rates

Benefits of Breastfeeding

Breastfeeding has been the original first food for American Indian/Alaska Native babies since time immemorial. Tribal nations are increasingly asserting their sovereignty in the realm of food systems, reclaiming the use of traditional foods to nourish the physical, mental, emotional, and spiritual aspects of the human body and community. The benefits of breastfeeding are profound and include: reduced risk of ear infections and obesity for breastfed children, reduced risk of certain cancers for women who breastfeed; and increased connection and bonding between mother and baby. Research suggests what American Indian/Alaska Natives have known for millennia, that the bond between a mother and her child is sacred and this form of bonding leads to healthy child development and subsequently, healthy communities.

The American Academy of Pediatrics recommends exclusive breastfeeding for about six months, followed by continued breastfeeding with the introduction of complementary foods, with continuation of breastfeeding for one year or as long as mutually desired by mother and infant. Following these recommendations, along with the introduction of an appropriate and nutritious complementary food diet, will help to provide high quality nutrition, promote healthy growth and development of the baby, and improve infant and maternal health outcomes.¹

Breastfeeding Rates in the Bemidji Area

There has been positive growth towards meeting the Healthy People 2020 breastfeeding goals in Michigan, Minnesota, and Wisconsin for all three objectives (initiation, six months, and 12 months). Although American Indian/Alaska Native participants in the Women, Infants, and Children (WIC) program in the three states did not meet the Healthy People 2020 goals for breastfeeding rates for the three objectives, there was improvement. These data highlight an important fact: a majority of American Indian/Alaska Native babies breastfeed. By extension, more may benefit from the positive health outcomes that come from this tried and true practice.

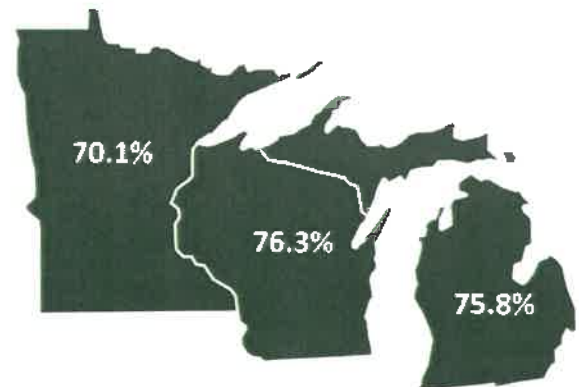
Table 1.1 Change in Breastfeeding Rates By State from 2012 to 2017

| State | Initiation | 6 Months | 12 Months |
|-----------|------------|----------|-----------|
| Michigan | +8.5% | +12.4% | +6.3% |
| Minnesota | +6.2% | +4.1% | +1.3% |
| Wisconsin | +0.3% | +7.3% | +4.3% |

Table 1.2 Healthy People 2020 Goals²

| | Initiation | 6 Months | 12 Months |
|---------|------------|----------|-----------|
| Targets | 81.9% | 60.6% | 34.1% |

Figure 1.1 Breastfeeding Initiation Rates in 2017 among American Indian and Alaska Native WIC participants



The Great Lakes Inter-Tribal Epidemiology Center (GLITEC)'s *Native Health in the Bemidji Area* fact sheet series presents data on various health-related topics for communities in the Bemidji Indian Health Service Area (Michigan, Minnesota, Wisconsin and Chicago). GLITEC welcomes discussion with Bemidji Area communities' health staff in the use of this fact sheet to support assessment, planning, and evaluation functions. Please contact us to discuss how we may support your community.



Figure 1.2 Percent breastfeeding, Michigan WIC Participants

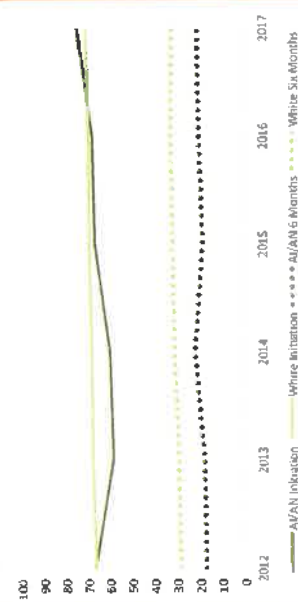


Figure 1.3 Percent breastfeeding, Minnesota WIC Participants

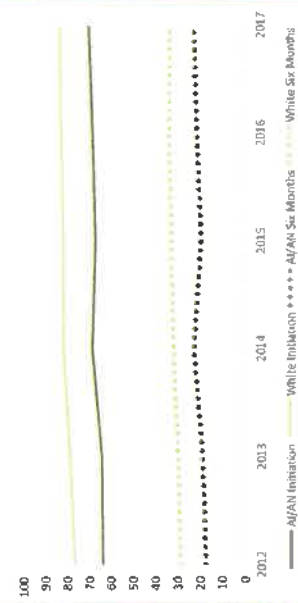


Figure 1.4 Percent breastfeeding, Wisconsin WIC Participants

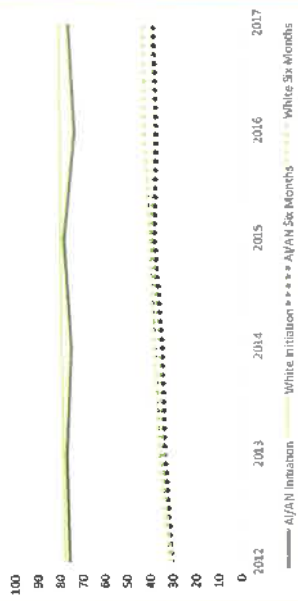


Table 1.3 Breastfeeding Initiation and Duration among WIC Participants (by Percent), Michigan, Minnesota, and Wisconsin, 2012 and 2017

| State | Year | Race | Initiation | | Six Months | | Twelve Months | |
|-----------|------|-------|----------------------------|-----------------------|----------------------------|-----------------------|----------------------------|-----------------------|
| | | | Number of WIC participants | Percent breastfeeding | Number of WIC participants | Percent breastfeeding | Number of WIC participants | Percent breastfeeding |
| Michigan | 2012 | AI/AN | 162 | 67.3 | 136 | 16.2 | 106 | 11.3 |
| | | White | 30,158 | 67.0 | 22,566 | 21.9 | 20,742 | 11.2 |
| | 2017 | AI/AN | 128 | 75.8 | 112 | 28.6 | 100 | 17.0 |
| | | White | 18,018 | 71.6 | 18,693 | 33.3 | 16,797 | 14.8 |
| Minnesota | 2012 | AI/AN | 1,601 | 63.9 | 1,578 | 17.5 | 1,559 | 8.0 |
| | | White | 16,211 | 76.9 | 15,700 | 28.4 | 15,233 | 14.2 |
| | 2017 | AI/AN | 1,418 | 70.1 | 1,364 | 21.6 | 1,305 | 9.3 |
| | | White | 12,726 | 82.6 | 12,145 | 32.4 | 11,292 | 15.1 |
| Wisconsin | 2012 | AI/AN | 576 | 76.0 | 249 | 30.5 | 403 | 14.1 |
| | | White | 15,898 | 77.7 | 8,613 | 30.8 | 12,389 | 15.6 |
| | 2017 | AI/AN | 553 | 76.3 | 296 | 37.8 | 484 | 18.4 |
| | | White | 14,505 | 80.0 | 7,373 | 42.0 | 11,041 | 19.6 |

Data Sources: Minnesota Dept. of Health WIC Program, Wisconsin Dept. of Health Services WIC Program, Michigan Dept. of Health & Human Services Pediatric Nutrition Surveillance System (PedNSS). References: 1. American Academy of Pediatrics. Breastfeeding and the Use of Human Milk. <https://pediatrics.appublications.org/content/112/9/1316.27.full#context-block-2>. Healthy People 2020. Office of Disease Prevention and Health Promotion, U.S. Dept. of Health and Human Services. <https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health/objectives>