

Breastfeeding Report Card United States, 2020

Overview

Breastfeeding has many known health benefits for infants, children, and mothers and is a key strategy to improve public health. The American Academy of Pediatrics recommends infants are exclusively breastfed for about the first 6 months with continued breastfeeding while introducing complementary foods for at least 1 year. CDC's *Breastfeeding Report Card, 2020*, provides data on breastfeeding practices and supports in all states, the District of Columbia (DC), Puerto Rico, Guam, and the US Virgin Islands. This year's report highlights data from CDC's 2018 national survey of Maternity Practices in Infant Nutrition and Care (mPINC) that assesses practices and policies affecting newborn feeding, feeding education and support, staff skills, and discharge support.

"I breastfeed because breastfeeding is healing and there are so many health benefits for my baby and me. Breast milk is the first food that gives my babies the healthy start they need in life. While nourishing baby, breastfeeding also creates a bond and teaches human connection. For me, breastfeeding is the biological norm. I've breastfed all 6 of my babies and each journey has been different which is why having education, information, and support is important."

– Stephanie Rupnicki (37) Kansas Kickapoo
Daughter Inara (6mo) Prairie Band Potawatomi & Kansas Kickapoo



**Centers for Disease
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Division of Nutrition, Physical Activity, and Obesity
www.cdc.gov/breastfeeding

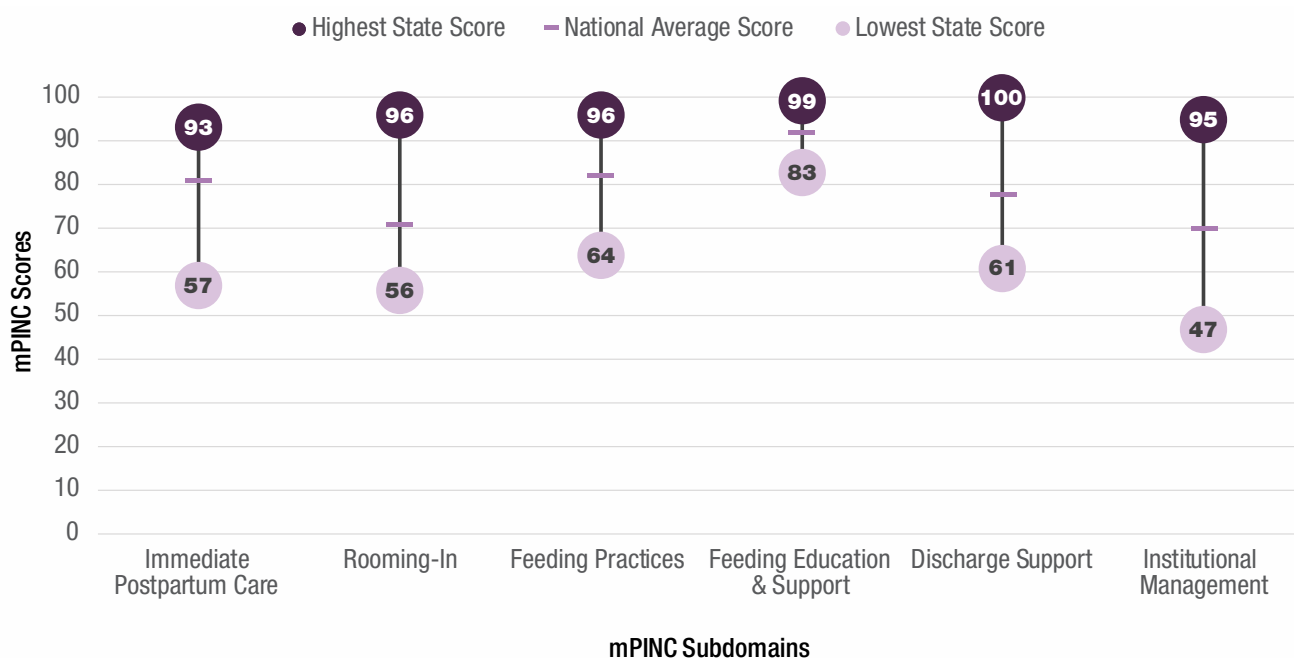
What do the numbers tell us?

Evidence-based hospital practices are important for establishing breastfeeding. Individualized support in the first few hours and days is critical to help mothers meet their breastfeeding goals. Although most infants born in 2017 started breastfeeding (84.1%), only 58.3% of infants were breastfeeding at 6 months (**Table 1**). The percentage of breastfed infants supplemented with infant formula before 2 days of age was 19.2% among infants born in 2017, an increase from 16.9% among infants born in 2016. Comprehensive hospital practices and policies that support breastfeeding have been shown to reduce medically unnecessary formula supplementation, reduce disparities in breastfeeding, and help give infants the best start in life.

CDC's national mPINC survey assesses maternity care practices that affect how babies are fed. About every 2 years, all maternity care hospitals in the United States and US territories are invited to participate. In 2018, 2,045 hospitals participated and were asked about early postpartum care practices, feeding practices, education and support of mothers and caregivers, staff and provider responsibilities and training, and hospital policies and procedures. These policies and practices are organized into six main areas of care called *subdomains* that are scored and comprise each state's total mPINC score (**Table 2**). Data can be used to monitor and improve evidence-based maternity care practices and policies. The national total mPINC score was 79 out of 100 and state total mPINC scores ranged from 68 to 96.

Figure 1 represents the range of scores from the highest state score to the lowest state score for each of the 6 mPINC subdomains across 50 states and Puerto Rico. The horizontal bar represents the national average score for each subdomain. States are performing well in the area of Feeding Education and Support with state scores ranging from 83 to 99 and a national score of 92. This domain includes teaching mothers to position and latch their newborn, assessing effective breastfeeding, hand expressing milk, recognizing and responding to feeding cues, breastfeeding on demand, and understanding the risks of using artificial nipples and pacifiers. This subdomain also assesses whether mothers whose newborns are fed any formula are taught feeding techniques and how to safely prepare and feed a baby formula. There is a wide range of scores for the other 5 subdomains, indicating room for improvement.

Figure 1. National score and state score ranges for Maternity Practices in Infant Nutrition and Care (mPINC) subdomains, 2018.



The 2020 Breastfeeding Report Card presents data that were collected before the start of the COVID-19 pandemic. Maternity care practices that support breastfeeding may have changed in some hospitals because of the COVID-19 pandemic. CDC is working to learn more about potential changes in hospital practices that could affect breastfeeding through a supplemental survey sent to hospitals that participated in the 2018 mPINC survey.

One area for improvement is institutional management. State scores for Institutional Management ranged from 47 to 95 with a national score of 70. Institutional Management demonstrates the commitment of hospitals' administrations to policies and practices that support optimal infant nutrition and care. The Institutional Management subdomain score includes the elements listed in **Box 1**. Institutional Management score for each state or territory is presented in **Figure 2**. Only 6 states scored an 80 or higher for this subdomain. Although most hospital accreditation programs require hospitals to track exclusive breastfeeding (**Box 1, element 3**), quality improvement efforts that focus on the other elements within Institutional Management will improve this subdomain score.

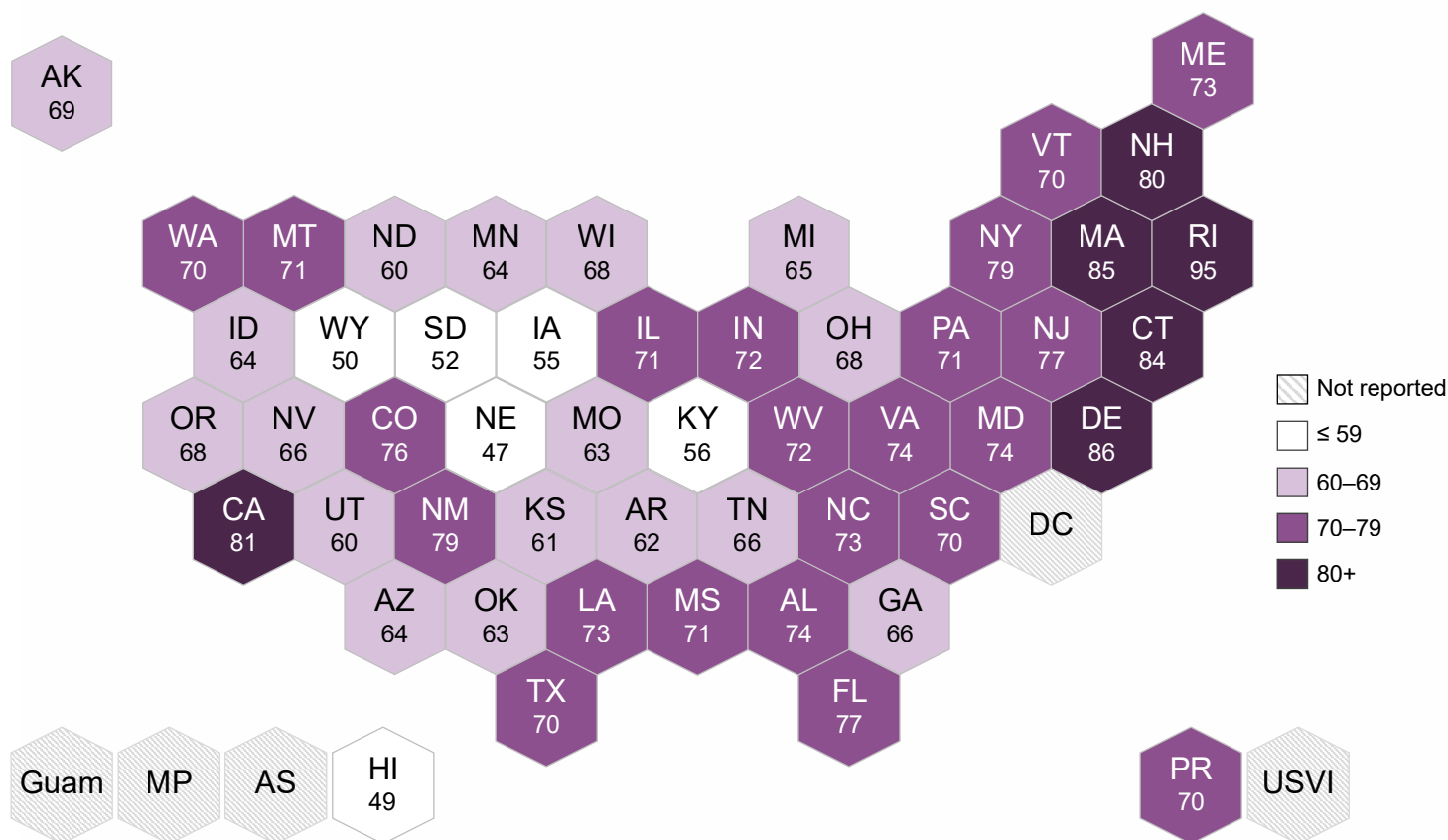
For more information about mPINC and to view individual state and territory reports, visit

<https://www.cdc.gov/breastfeeding/data/mpinc/index.htm>.

Box 1: Institutional Management Elements

1. Nurses are required to demonstrate competency in assessing breastfeeding (milk transfer and maternal pain), assisting with breastfeeding (positioning and latch), teaching hand expression, safe formula preparation and feeding, and demonstrating safe skin-to-skin practices.
2. Hospital requires nurses to be formally assessed for clinical competency in breastfeeding support and lactation management.
3. Hospital records and tracks exclusive breastfeeding throughout the entire hospitalization.
4. Hospital pays a fair market price for infant formula.
5. Hospital has 100% of all written policy elements that support breastfeeding in place.

Figure 2. Institutional Management subdomain scores for Maternity Practices in Infant Nutrition and Care (mPINC) by state, mPINC 2018.



Note: Data are not reported for District of Columbia, Guam, American Samoa, Northern Mariana Islands, or the US Virgin Islands because of a small sample.

Table 1. Breastfeeding Rates among Infants Born in 2017^a

State/Territory	Ever breastfed	Breastfeeding at 6 months	Breastfeeding at 12 months	Exclusive breastfeeding through 3 months	Exclusive breastfeeding through 6 months	Breastfed infants receiving formula before 2 days of age
US National ^b	84.1	58.3	35.3	46.9	25.6	19.2
Alabama	69.0	38.5	21.6	37.8	20.4	16.4
Alaska	91.9	67.4	43.9	58.6	35.3	12.4
Arizona	89.9	64.9	39.3	48.8	24.6	24.9
Arkansas	70.1	43.1	23.8	39.4	19.4	14.1
California	90.3	67.1	43.3	50.1	28.2	23.4
Colorado	92.2	69.2	47.0	54.5	34.1	17.8
Connecticut	85.4	62.4	43.2	48.4	25.7	23.5
Delaware	79.7	55.2	31.2	42.7	23.6	15.8
District of Columbia	88.0	64.7	39.3	47.3	24.0	24.3
Florida	75.6	52.4	30.7	41.1	19.9	21.6
Georgia	83.5	56.7	33.5	43.9	22.1	19.6
Guam	76.0	47.5	29.9	35.4	22.4	21.7
Hawaii	89.1	74.5	55.0	57.4	30.6	13.7
Idaho	94.6	63.4	38.3	52.4	24.6	19.3
Illinois	84.2	52.9	30.3	42.1	23.9	26.2
Indiana	78.4	47.0	27.4	42.6	21.1	10.8
Iowa	80.2	54.1	32.5	41.8	24.8	16.8
Kansas	84.6	58.7	37.2	51.6	31.6	13.6
Kentucky	72.6	44.5	23.2	37.5	23.0	19.9
Louisiana	66.2	41.0	21.8	39.0	21.8	13.4
Maine	88.1	62.2	39.6	52.7	28.1	12.3
Maryland	88.6	65.7	41.2	51.9	29.4	20.1
Massachusetts	80.7	58.1	37.9	44.5	23.9	18.7
Michigan	85.3	58.0	34.4	48.1	25.8	15.6
Minnesota	95.3	79.1	49.8	61.9	38.7	13.1
Mississippi	70.0	38.6	20.3	34.8	18.1	17.5
Missouri	77.5	50.2	27.2	42.3	23.4	15.0
Montana	84.6	62.1	36.8	55.1	31.1	12.4
Nebraska	85.3	63.0	41.4	53.9	32.6	13.8
Nevada	81.8	57.4	36.0	40.9	21.7	22.7
New Hampshire	88.3	65.4	39.5	63.0	36.7	8.7
New Jersey	88.7	63.5	38.6	46.9	27.7	23.3
New Mexico	83.4	57.9	40.0	49.1	26.6	14.1
New York	87.4	59.8	37.8	45.2	25.8	24.9
North Carolina	80.3	50.3	29.2	42.5	23.3	18.4
North Dakota	84.0	56.8	32.4	50.7	29.1	11.4
Ohio	80.1	51.1	31.1	41.3	21.6	16.3
Oklahoma	77.7	53.6	31.0	44.7	23.7	15.5
Oregon	93.2	73.4	48.4	65.8	35.6	7.9
Pennsylvania	82.9	58.0	34.6	47.9	25.9	14.5
Puerto Rico ^c	--	--	--	--	--	--
Rhode Island	82.8	53.9	35.4	45.0	22.7	22.1
South Carolina	80.5	55.6	30.9	45.0	25.6	16.7
South Dakota	88.5	70.1	41.2	53.1	32.1	15.2
Tennessee	75.8	48.7	24.0	49.9	27.2	8.9
Texas	85.9	55.1	31.3	45.8	23.9	22.5
US Virgin Islands ^c	--	--	--	--	--	--
Utah	91.8	64.1	42.4	48.2	26.3	19.8
Vermont	90.2	70.4	51.3	58.6	36.8	13.0
Virginia	91.7	74.0	42.3	56.8	30.4	16.2
Washington	92.5	74.6	49.6	58.0	28.9	14.9
West Virginia	69.9	42.6	25.3	37.5	20.9	15.4
Wisconsin	82.8	59.2	34.0	51.0	28.1	13.2
Wyoming	90.0	64.8	38.0	51.7	31.8	16.9

a Source: CDC National Immunization Survey (NIS) 2018–2019, among 2017 births. Breastfeeding rate indicators are the percentage of infants breastfeeding at the specified time points, calculated among all infants. The rate for infants receiving formula before 2 days of age is calculated among breastfed infants.

b Data from Guam, Puerto Rico, and the US Virgin Islands are not included in the national average for any breastfeeding rate.

c Data not reported for Puerto Rico or the US Virgin Islands.

Table 2. mPINC State Scores by Total and Subdomain, 2018

State/Territory	Total Score	Immediate Postpartum Care	Rooming-In	Feeding Practices	Feeding Education and Support	Discharge Support	Institutional Management
US National	79	81	71	82	92	78	70
Alabama	78	78	66	82	95	74	74
Alaska	83	90	70	83	98	86	69
Arizona	77	73	82	79	90	77	64
Arkansas	69	61	61	64	91	75	62
California	86	88	82	87	93	85	81
Colorado	85	82	82	90	94	87	76
Connecticut	85	92	73	80	95	86	84
Delaware	83	77	69	81	89	95	86
District of Columbia ^a	--	--	--	--	--	--	--
Florida	81	80	81	81	92	77	77
Georgia	73	74	61	76	90	74	66
Guam ^a	--	--	--	--	--	--	--
Hawaii	68	73	60	72	83	71	49
Idaho	75	81	65	81	84	74	64
Illinois	80	84	74	85	91	77	71
Indiana	78	79	67	84	91	73	72
Iowa	72	79	56	79	90	73	55
Kansas	79	85	70	85	90	79	61
Kentucky	68	72	57	71	91	63	56
Louisiana	75	74	66	76	91	71	73
Maine	85	88	68	93	98	88	73
Maryland	79	79	72	82	87	81	74
Massachusetts	86	88	80	83	93	89	85
Michigan	77	83	73	81	91	73	65
Minnesota	82	87	75	90	92	84	64
Mississippi	73	77	66	68	86	72	71
Missouri	75	75	65	81	92	75	63
Montana	86	87	85	93	97	86	71
Nebraska	71	83	63	73	87	73	47
Nevada	77	79	73	91	94	61	66
New Hampshire	90	93	80	96	97	91	80
New Jersey	80	80	68	79	96	82	77
New Mexico	82	82	80	85	86	81	79
New York	82	80	68	83	94	86	79
North Carolina	77	73	70	78	90	78	73
North Dakota	73	80	66	76	86	68	60
Ohio	78	84	64	82	92	77	68
Oklahoma	75	84	71	75	87	69	63
Oregon	85	86	80	91	94	92	68
Pennsylvania	78	82	70	82	91	70	71
Puerto Rico	72	57	61	65	94	86	70
Rhode Island	96	93	96	92	99	100	95
South Carolina	77	74	64	83	92	76	70
South Dakota	73	82	60	81	92	73	52
Tennessee	72	70	60	73	92	70	66
Texas	77	78	70	77	92	76	70
US Virgin Islands ^a	--	--	--	--	--	--	--
Utah	73	80	62	80	90	68	60
Vermont	82	81	65	94	94	91	70
Virginia	81	83	70	84	94	81	74
Washington	85	86	86	90	93	86	70
West Virginia	76	73	64	80	87	80	72
Wisconsin	80	84	67	86	93	80	68
Wyoming	76	79	80	84	90	73	50

a mPINC scores are not reported for District of Columbia (DC), Guam, or the US Virgin Islands because of low sample sizes but are included in the US National Total mPINC Score and US mPINC Subdomain scores.

Key Breastfeeding Indicators	Current Rates
Percentage of infants who are breastfed: Ever. ^a	84.1
Percentage of infants who are breastfed: At 6 months. ^a	58.3
Percentage of infants who are breastfed: At 1 year. ^a	35.3
Percentage of infants who are breastfed: Exclusively through 3 months. ^a	46.9
Percentage of infants who are breastfed: Exclusively through 6 months. ^a	25.6
Percentage of employers that have worksite lactation support programs. ^b	51.0
Percentage of breastfed newborns who receive formula supplementation within the first 2 days of life. ^a	19.2

a Current rates represent infants born in 2017, National Immunization Survey 2018–2019.

b Current rates represent employers providing an on-site lactation room, Society for Human Resource Management, [2019 survey](#).



Call to Action

Use your state's data to:

- Celebrate state achievements in breastfeeding and breastfeeding supportive maternity care practices.
- Identify gaps and opportunities for improvement in maternity care practices.
- Bring together partners to promote and support breastfeeding.
- Prioritize the next steps to put into action best practices and policies in maternity care.

Data Sources for the Breastfeeding Report Card Indicators – 2020

Indicators	Data Source	Background
Ever breastfed Breastfeeding at 6 months Breastfeeding at 12 months Exclusive breastfeeding through 3 months Exclusive breastfeeding through 6 months Breastfed infants receiving formula before 2 days of age	National Immunization Survey (NIS)	Breastfeeding rates for infants born in 2017 come from the US National Immunization Surveys (NIS) 2018 and 2019. The NIS provides current national, state, and selected urban-area estimates of vaccination coverage rates for US children. Because breastfeeding data are obtained by maternal recall when children are between 19 and 35 months of age, breastfeeding rates are analyzed by birth cohort rather than survey year. Available at http://www.cdc.gov/breastfeeding/data/NIS_data/index.htm.
mPINC Scores (Total, Immediate Postpartum Care, Rooming-In, Feeding Practices, Feeding Education and Support, Discharge Support, Institutional Management)	mPINC	CDC's national survey of Maternity Practices in Infant Nutrition and Care (mPINC) assesses maternity care practices and provides feedback to encourage hospitals to make improvements that better support breastfeeding. Data for this report come from the 2018 mPINC survey. From 2007 to 2015, CDC administered the mPINC survey every 2 years. mPINC was revised in 2018 and these data should NOT be compared to previous mPINC survey years. Available at https://www.cdc.gov/breastfeeding/data/mpinc/index.htm.

Appendix for Accessibility

Figure 1: This lollipop graph shows the national score and state score ranges for Maternity Practices in Infant Nutrition and Care (mPINC) subdomains for 2018. Scores can range from 0 to 100. Figure 1 represents the range of scores from the highest state score to the lowest state score for each of the 6 mPINC subdomains across 50 states and Puerto Rico. The horizontal bar represents the national average score for each subdomain. The top of the lollipop represents the highest state score, and the bottom of the lollipop represents the lowest state score. States are performing well in the area of Feeding Education and Support with state scores ranging from 83 to 99 and a national score of 92. Institutional Management scores vary the most, with scores ranging from 47 to 95 and a national score of 70. This subdomain includes the lowest state scores of all 6 subdomains. There is also a wide range of scores for the other 4 subdomains, indicating room for improvement.

Figure 2: This hex map shows the Institutional Management score for each state or territory for CDC's 2018 Maternity Practices in Infant Nutrition and Care (mPINC) survey. Scores can range from 0 to 100. For the mPINC Institutional Management score, 6 states scored less than or equal to 59, 17 states scored between 60 and 69, and 21 states and Puerto Rico scored between 70 and 79. Only 6 states scored an 80 or above for their Institutional Management score. Data were not reported for District of Columbia, Guam, American Samoa, Northern Mariana Islands, or the US Virgin Islands because of small sample.

