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Breastfeeding Provisions

The new food packages for infants and women were designed to strengthen WIC's breastfeeding promotion efforts and provide additional incentives to assist mothers in making the decision to initiate and continue to breastfeed. The packages incorporate IOM's suggested three-pronged approach to better promote and support breastfeeding. The approach focuses on the market value of the package for the mother/infant pair for the first year after birth, addresses differences in supplementary nutrition needs of breastfed and formula fed infants, and considers how to minimize early supplementation with infant formula through continued or increased efforts to promote and support the breastfeeding dyad.

Because early supplementation may contribute to the short duration of breastfeeding, only two infant feeding options were recommended initially — fully breastfeeding or fully formula-feeding. After further consideration, this was changed to three infant feeding options: (1) fully breastfeeding; (2) partially breastfeeding; or (3) fully formula feeding.

Establishment of Infant Feeding Options—First Month after Birth

To support the successful establishment of breastfeeding during the first month after birth, the concept of only two feeding options has been maintained - either full breastfeeding or full formula-feeding. The IOM recommends that infant formula not be provided for fully or partially breastfeeding infants during the first month of life after birth. This approach was recommended because providing supplemental formula to a new breastfeeding mother may interfere with her milk production and success at continued breastfeeding and because physiology provides a strong basis for avoiding supplemental formula. The amount of milk a breastfeeding woman produces is directly related to how often and how long she nurses. States have been given the option to include the partially breastfeeding category for the first month, with limited formula issuance.

FNS' view is that the provision of a small amount of formula for certain infants in the first month of life is an option that State agencies may invoke to temporarily assist breastfeeding mothers who may otherwise choose to fully formula feed. FNS expects that the proportion of participants offered the partially breastfeeding option in the first month will decrease over time as State agencies strengthen their breastfeeding support infrastructure.

For these partially breastfed infants, a small amount of formula can be issued only to assist and support breastfeeding. Partially breastfed infants ages 0 to 1 month may receive the equivalent of not more than 104 fluid ounces of reconstituted infant formula (or one can of most powder infant formulas) for that purpose. Providing one can of formula routinely to mothers of partially breastfed infants can severely affect milk production. This rare exception practice should be reserved for supporting mothers in breastfeeding. The goal or aim is to support mothers in returning to exclusive breastfeeding in the following months. Powder infant formula is recommended because of more control in using small amounts of formula, its longer shelf life and to minimize waste. Powder formula is recommended for the healthy

full term infant through four months of age. Food Package V (Postpartum) will be provided to mothers of these partially breastfeeding infants.

For fully breastfeeding infants, no supplemental formula will be provided. Fully breastfeeding mothers will receive an enhanced Food Package VII (Fully breastfeeding). Fully breastfeeding multiples will receive 1.5 times the food package benefits.

After the first month

The CPA is expected to individually tailor the amount of formula issued to the breastfed infant based on the carefully assessed needs of the breastfeeding dyad. This means that infants should not be “automatically” offered the maximum amounts of formula for their age. If, after a careful assessment, the CPA determines that some formula is appropriate, the mother should be advised on the appropriate amount to use. The goal is to provide as minimal amount of supplemental formula as is needed, while offering counseling and support, in order to help the mother establish a successful milk supply.

These food packages can be used as an incentive for mothers to breastfeed and support WIC’s efforts to promote breastfeeding as the optimal infant feeding choice. FNS is aware that adequate breastfeeding support for mothers is important for the success of both the partially and fully breastfeeding options. They are committed to strengthening WIC’s efforts to promote and support breastfeeding, through the provision of peer counseling funding to State agencies and other means. FNS has concerns that some WIC State and local agencies may not be prepared to provide support services (peer counselors, breast pumps, consultation with lactation experts) to the extent necessary to make this provision work for every mother. As a result, a mother who feels less than confident about her ability to breastfeed may choose to either (1) categorize her infant as fully formula fed, thus receiving more formula than is necessary for the breastfeeding infant and further compromising the establishment of successful breastfeeding, or (2) not breastfeed at all. Staff can assist women in successfully breastfeeding, and minimizing formula dependency by educating these families of the significance of this national policy change. Using the food package benefits as an incentive is also a strategy to show the market value of the foods provided in the breastfeeding and partially breastfeeding packages over the value of formula.

FNS is aware of legitimate medical conditions that a breastfeeding mother/infant dyad may have which result in the need for supplemental formula in the early postpartum period, such as infants with metabolic disorders. But this will account for a significantly smaller population.

Judicious use of NSA funds on research based strategies -i.e., peer counseling, consultation with lactation experts- will further enhance the ability of State and local agencies to assist mothers in establishing and continuing successful breastfeeding in the critical weeks after birth and beyond.