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Click on 2007 Hospital Report.

**NEW REPORT URGES CALIFORNIA HOSPITALS TO REDUCE  
BREASTFEEDING DISPARITIES**

Sacramento. November 14, 2007. A report issued today by the University of California at Davis Human Lactation Center (UCD HLC) and sponsored by the California WIC Association (CWA) ranks nearly every hospital in the state in terms of the rate of new mothers who breastfeed while in the hospital. The analysis reveals stark differences in rates -- with a concentration of low-performing hospitals in Southern California counties -- and demonstrates that the breastfeeding gap is greatest in hospitals serving many ethnic low-income mothers and babies. But the report goes on to show that, when hospitals improve their newborn feeding policies and practices, they can dramatically increase their breastfeeding rates.

“By releasing *A Fair Start for Better Health: California Hospitals Must*

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*Close the Gap in Exclusive Breastfeeding Rates*, CWA and our local affiliates want to strongly urge hospitals serving low-income mothers from diverse ethnic backgrounds to adopt and follow guidelines recommended by the California Department of Public Health,” according to Karen Farley of CWA. Based on recommendations from the American Academy of Pediatrics, the U.S. Centers for Disease Control and Prevention, and the World Health Organization, the guidelines describe what hospitals should be doing to promote exclusive breastfeeding, which means babies are fed only breast milk, no other food or fluid. Authorities urge exclusive breastfeeding for the first six months of life, because it can prevent a host of infant and maternal illnesses -- as well as childhood obesity.

The report’s findings are particularly compelling because in California, more than 86 percent of all mothers in California start breastfeeding during their hospital stay, yet less than half leave the hospital exclusively breastfeeding. Southern California hospitals dominate the list of the 15 lowest scoring hospitals. Bellflower Medical Center, Pacifica Hospital of the Valley, Pacific Alliance Medical Center, California Hospital Medical Center, Valley Care Olive View-UCLA Medical Center and Health Centers, St. Francis Medical Center, Whittier Hospital, and Garfield Medical Center, all located in Los Angeles County, are on the list. For example, at Bellflower Medical Center, over 94 percent of women initiate breastfeeding at birth, but less than one percent leave the hospital breastfeeding exclusively. Other hospitals on the 15 lowest scoring hospitals list by exclusive breastfeeding are located in Orange, San Bernardino, Kern, and San Joaquin Counties.

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“The differences in exclusive breastfeeding rates are a reflection of how the hospital supports or doesn’t support breastfeeding mothers,” said Karen Farley, CWA’s Program Manager. “They clearly desire to breastfeed – but what is happening during their hospital stay?”

In general, the highest-scoring hospitals have implemented policies and practices that support breastfeeding women, such as, training all staff in skills necessary to help breastfeeding women, making sure breastfeeding is started soon after the baby is born, giving breastfeeding newborns only breast milk while in the hospital unless there is a medical need for something else, eliminating formula marketing to their patients and allowing mom and baby to stay together and breastfeed whenever they want to do so. Hayward Kaiser Hospital in Alameda County, Community Hospital of the Monterey Peninsula in Monterey County, Scripps Memorial Hospital Encinitas in San Diego County and San Francisco General in San Francisco County were among the top 15 hospitals in the state in terms of exclusive breastfeeding rates.

The report describes dramatic turnarounds when hospital administrators implement improved institutional policies. Dr. Lynn Yonekura of the California Hospital Medical Center acknowledges, “We have not been supporting mothers’ decisions to breastfeed and this is sabotaging our feeder clinics’ prenatal education efforts. It’s reflective in our low exclusive breastfeeding rates. We just passed a breastfeeding policy that strongly supports exclusive breastfeeding. . . It’s up to the administration to say, let’s do this and assign a person to focus on bringing all the partners together to keep focused on implementing policies and practices that are known to increase exclusive

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breastfeeding."

"When model policies and practices are implemented, exclusive breastfeeding rates increase. It is amazing how creating a hospital environment that truly supports women who want to breastfeed, the gap between those mothers who leave the hospital breastfeeding and supplementing with formula and those mothers who leave the hospital exclusively breastfeed narrows for women of all income levels and ethnicities," said Farley.

Rebeca Pastrana-Sheng, Director of WIC Breastfeeding Services at Northeast Valley Health Corp. explains, "In the San Fernando Valley we have a unique situation. Two hospitals have implemented model hospital policies and are Baby-Friendly designated hospitals and two hospitals are on the 15 lowest scoring hospital list. When our mothers make the decision to breastfeed and deliver at one of the Baby-Friendly designated hospitals, she will leave the hospital breastfeeding. If she delivers in one of the two other hospitals, she will leave the hospital formula feeding. It's clear that hospitals that support breastfeeding make the difference."

The American Academy of Pediatrics encourages mothers to breastfeed exclusively for the first 6 months, as it is the healthiest way to feed new babies and is clearly the preferred feeding method for most new mothers. Offering supplemental formula unnecessarily in the hospital can interfere with a mother's plan to breastfeed. "The first 48 hours after birth is a critical time for women who breastfeed, as it's during those first few days that milk production begins," noted Jane Heinig, Ph.D., IBCLC and Executive Director of UCD HLC. Heinig added, "While breastfeeding is a natural

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process, many new moms have difficulty getting started. In the past, female relatives living nearby helped women successfully initiate breastfeeding. Today, with most women giving birth in hospitals, the responsibility to give mothers that support has fallen to the medical profession. With supportive policies in place, staff can help new mothers of all income levels and ethnicities to follow-through with their plans to breastfeed their babies.”

For information on ways to eliminate barriers to breastfeeding in the hospital setting and the model hospital policies and practices:

**California Department of Public Health Breastfeeding Statistics:**  
<http://www.cdph.ca.gov/data/statistics/Pages/BreastfeedingStatistics.aspx>

**Model Policies and Toolkit for Breastfeeding:**  
<http://www.cdph.ca.gov/healthinfo/healthyliving/childfamily/Pages/BreastfeedingandHealthyLiving.aspx>

**Baby Friendly Hospital Initiative:**  
<http://www.babyfriendlyusa.org/eng/index.html>

**California WIC Association:**  
[www.calwic.org](http://www.calwic.org)  
to view the report and county fact sheets.

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