



## Breastfeeding Disparities in Low Income and Women of Color

Healthy People 2020 Initiative of the U.S. Office of Disease Prevention and Health Promotion objectives include increasing the proportion of infants who are ever breastfed to 81.9%. And Healthy People 2020, the American Academy of Pediatrics (AAP) and the World Health Organization recommend infants be exclusively breastfed for about the first 6 months of life. Unfortunately, in California, we are not achieving these breastfeeding goals for all women, particularly among low-income and women of color.

- More than 94% of women in California start breastfeeding in the hospital, but less than 70% them leave the hospital exclusively breastfeeding their infants.
- Among WIC participants – who account for 58% of all births in California - fewer than 25% are breastfeeding exclusively at two months after birth, and fewer than 15% do so at four months after birth.

### California breastfeeding rates differ widely by ethnicity:

- The highest exclusive breastfeeding rates are seen among white mothers.
- More than 90% of Latina mothers initiate breastfeeding, but only 65% breastfeed exclusively while in the hospital.
- The lowest rates of exclusive breastfeeding are seen among African American mothers with 20% fewer exclusively breastfeeding in the hospital than white mothers.

### For low-income women, many barriers to breastfeeding exist:

- Low reimbursement rates for Medi-Cal breast pumps means many low-income mothers do not have access to quality breast pumps. Without access to quality breast pumps, mothers can be discouraged and frustrated and stop breastfeeding all together.
- Despite the fact studies have shown that breastfeeding support immediately after birth is key to increasing breastfeeding rates, outpatient post-partum breastfeeding support is mostly provided by WIC, not through health plan benefits.
- The lack of consistent reimbursement for outpatient breastfeeding support means that even fewer lower-income mothers have access to culturally and linguistically appropriate help after they leave the hospital.
- Many mothers in low-wage positions cannot afford to take extended unpaid maternity leave and may not have access to flexible schedules, lactation accommodation, and other benefits that support them in breastfeeding.

<http://www.calwic.org/project/sustaining-change-in-challenging-times-california-needs-innovative-breastfeeding-strategies/>

[http://www.calwic.org/storage/documents/WIC\\_BFF\\_AA\\_Analysis\\_R8.pdf](http://www.calwic.org/storage/documents/WIC_BFF_AA_Analysis_R8.pdf)

[http://www.calwic.org/wp-content/uploads/2019/01/Impacts-of-Breastfeeding-Support\\_CWA-05-30-2017.pdf](http://www.calwic.org/wp-content/uploads/2019/01/Impacts-of-Breastfeeding-Support_CWA-05-30-2017.pdf)

**By increasing Medi-Cal reimbursement rates to provide quality breast pumps to mothers, California will eliminate a barrier to breastfeeding and help ensure healthier infants and children.**