

Statement of Support to Accompany USBC Endorsement of the *Ten Steps to Successful Breastfeeding* and the Tenets of the *International Code of Marketing of Breast-Milk Substitutes*

WHEREAS all major medical authorities recommend that babies receive no food or drink other than human milk for their first six months and continue to breastfeed for at least the first 1-2 years of life;¹

WHEREAS more than 98% of births in the United States occur in maternity care facilities, and more than 3 out of 4 mothers intend to and start out breastfeeding;²

WHEREAS research shows that numerous barriers to breastfeeding remain—including policies and practices in maternity care settings and in the marketing of human milk substitutes—that can undermine a mother's decision to breastfeed;³

WHEREAS the *Ten Steps to Successful Breastfeeding (the Ten Steps)* are a set of evidence-based policies and practices for maternal and newborn care that are demonstrated to increase rates of breastfeeding initiation and duration;⁴

WHEREAS the *International Code of Marketing of Breast-Milk Substitutes (the International Code)* is a set of recommendations from the World Health Organization to regulate the marketing of breast-milk substitutes, feeding bottles and teats, as a minimum requirement to protect and promote appropriate infant and young child feeding;⁵

WHEREAS research shows that women are more likely to achieve their breastfeeding intentions with implementation of increasing numbers of the *Ten Steps*;^{6 7}

WHEREAS direct-to-consumer advertising of infant formula and the practice of marketing infant formula through the health care system have deleterious effects on breastfeeding initiation, duration, and exclusivity and violate principles of business ethics;⁸

WHEREAS the intention of the *Ten Steps* and the *International Code* is to inform and support *all mothers and babies* to begin with the best start, regardless of feeding method;

WHEREAS the *Ten Steps to Successful Breastfeeding* and the *International Code of Marketing of Breast-Milk Substitutes* constitute the Baby-Friendly Hospital Initiative;

WHEREAS *The Surgeon General's Call to Action to Support Breastfeeding* urges action to “ensure that maternity care practices throughout the United States are fully supportive of breastfeeding,” specifically to “accelerate

implementation of the Baby-Friendly Hospital Initiative”; and to “ensure that the marketing of infant formula is conducted in a way that minimizes its negative impacts on exclusive breastfeeding,” specifically to “hold marketers of infant formula accountable for complying with the *International Code of Marketing of Breast-milk Substitutes*”,³

WHEREAS the *Ten Steps* and the *International Code* align with the United States Breastfeeding Committee (USBC) mission to “improve the Nation’s health by working collaboratively to protect, promote, and support breastfeeding.”

The United States Breastfeeding Committee hereby endorses the *Ten Steps to Successful Breastfeeding* and the tenets of the *International Code of Marketing of Breast-Milk Substitutes*.

The *Ten Steps to Successful Breastfeeding* are:⁴

1. Have a written breastfeeding policy that is routinely communicated to all health care staff.
2. Train all health care staff in the skills necessary to implement this policy.
3. Inform all pregnant women about the benefits and management of breastfeeding.
4. Help mothers initiate breastfeeding within one hour of birth.*
5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.
6. Give infants no food or drink other than breast-milk, unless medically indicated.
7. Practice rooming in—allow mothers and infants to remain together 24 hours a day.
8. Encourage breastfeeding on demand.
9. Give no pacifiers or artificial nipples to breastfeeding infants.
10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or birth center.

Implementation

In the United States, Baby-Friendly USA, Inc. (BFUSA) is responsible for overseeing the implementation of the Baby-Friendly Hospital Initiative. Baby-Friendly hospitals and birthing facilities must implement the *Ten Steps to Successful Breastfeeding* and comply with the *International Code of Marketing of Breast-Milk Substitutes* to receive, and retain, a Baby-Friendly designation. Maternity care facilities often implement some or all of the *Ten Steps* voluntarily and independently of BFUSA, however, those wishing to achieve Baby-Friendly designation must engage with BFUSA to do so.

There are a variety of other initiatives aiming to support implementation of the *Ten Steps*. USBC does not endorse any one individual initiative; rather, USBC supports all efforts to advance the *Ten Steps*.

*USBC supports Step 4 when interpreted as “Place babies in skin-to-skin contact with their mothers immediately following birth for at least an hour and encourage mothers to recognize when their babies are ready to breastfeed, offering help if needed.”

¹ American Academy of Pediatrics Section on Breastfeeding. Breastfeeding and the use of human milk (policy statement). *Pediatrics*; originally published online February 27, 2012; DOI: 10.1542/peds.2011-3552.

American Academy of Family Physicians. Family physicians supporting breastfeeding (position paper). <http://www.aafp.org/about/policies/all/breastfeeding-support.html>. Published 2001. Updated 2008. Accessed July 15, 2013.

James, DC, Dobson B, American Dietetic Association. Position of the American Dietetic Association: promoting and supporting breastfeeding. *J Am Diet Assoc*. 2005;105(5):810-818.

American College of Obstetricians and Gynecologists Committee on Health Care for Underserved Women and Committee on Obstetric Practice. Special report from ACOG: breastfeeding: maternal and infant aspects. *ACOG Clin Rev*. 2007;12(1)(suppl):1S-16S.

U.S. Department of Health and Human Services. *The Surgeon General's Call to Action to Support Breastfeeding*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General; 2011.

World Health Organization/UNICEF. *Global Strategy for Infant and Young Child Feeding*. Geneva, Switzerland: World Health Organization; 2003.

² U.S. Department of Health and Human Services, Centers for Disease Control and Prevention. Breastfeeding: Data and Statistics: Breastfeeding Report Card 2013. <http://www.cdc.gov/breastfeeding/data/reportcard.htm>. Accessed January 25, 2014.

³ U.S. Department of Health and Human Services. *The Surgeon General's Call to Action to Support Breastfeeding*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General; 2011.

⁴ Baby-Friendly USA. The Ten Steps to Successful Breastfeeding. <http://www.babyfriendlyusa.org/about-us/baby-friendly-hospital-initiative/the-ten-steps>. Accessed January 25, 2014.

⁵ World Health Organization. *International Code of Marketing of Breast-milk Substitutes*. Geneva, Switzerland: World Health Organization; 1981.

⁶ Kramer MS, Chalmers B, Hodnett ED, et al. Promotion of Breastfeeding Intervention Trial (PROBIT): a randomized trial in the Republic of Belarus. *JAMA*. 2001;285(4):413-420.

⁷ Philipp BL, Merewood A, Miller LW, et al. Baby-friendly hospital initiative improves breastfeeding initiation rates in a US hospital setting. *Pediatrics*. 2001;108(3):677-681.

⁸ United States Breastfeeding Committee. *Statement on Marketing of Human Milk Substitutes*. Washington, DC: United States Breastfeeding Committee, 2011.