

## POSITION STATEMENT

### Breastfeeding/Chestfeeding

The American College of Nurse-Midwives (ACNM) supports the following initiatives related to breastfeeding/chestfeeding:

- Midwives as essential care providers who support the achievement of lactation goals through direct health education and support during the prenatal, immediate postpartum, and ongoing postpartum periods.
- Midwives' support of their patients' infant feeding practices while understanding the benefits of exclusive lactation and promoting exclusive lactation when possible.
- Comprehensive health education and marketing efforts, including through social media, to inform and educate the public, health care providers, and clients about breastfeeding/chestfeeding as a physiologic process and as the preferred method of infant feeding.
- Health care systems that follow lactation-friendly and baby-friendly policies that provide evidence-based, timely, and ongoing counseling and support for breastfeeding/chestfeeding.
- Research into the health benefits of breastfeeding/chestfeeding; the social, cultural, economic, psychological, and physiological factors that influence breastfeeding/chestfeeding; and assessment of various programs designed to increase the rate of breastfeeding/chestfeeding.
- Recognition of the disparities in breastfeeding/chestfeeding rates within communities of color and dedication to toolkits and policies that support equity for lactation achievement.
- Adoption of policy, action, programming, and legislation efforts that clearly support, promote, and protect breastfeeding/chestfeeding.
- Federal and state legislation that encourages institutional policies that support breastfeeding/chestfeeding and ensure optimal conditions to facilitate breastfeeding/chestfeeding in the workplace and school.
- Limiting separation of the lactating parent and infant through paid parental leave and flexible work schedules.
- Workplace compliance with federal laws that require appropriate facilities and supportive policies to enable lactating parents to pump and store human milk.

- Promotion of evidence-based breastfeeding/chestfeeding and lactation education in midwifery and other health disciplines.

## Background

ACNM promotes breastfeeding as the optimal method of infant feeding, in line with recommendations from the World Health Organization and other national and international bodies.<sup>1-3</sup> Breastfeeding within the first hour after birth reduces postpartum blood loss<sup>4</sup> and promotes dyad bonding.<sup>5,6</sup> Exclusive breastfeeding for the first 6 months provides complete nutrition for growth and development, and ideally, breastfeeding should continue throughout the first 2 years of life and beyond, as desired.<sup>3</sup>

Human milk contains specific immunologic factors that have been shown to enhance the infant's immune response and to reduce the incidence of infectious diseases. Breastfeeding promotes the development of a healthy infant gut microbiome by providing beneficial microorganisms through human milk.<sup>7</sup> Epigenetically active nutritional factors and microRNAs play complex roles in healthy development.<sup>8-10</sup> None of these factors can be duplicated in commercially prepared formulas. In addition, breastfeeding has been shown to reduce the infant's risk of obesity, asthma, celiac disease, inflammatory bowel disease, and type 1 and 2 diabetes, and is associated with modestly increased IQ scores.<sup>11-13</sup> People who breastfeed have lower rates of diabetes and breast cancer.<sup>3</sup> Current estimates find that if 90% of US infants were breastfed, the United States would save \$2.45 billion on treatment costs for childhood disorders.<sup>13</sup> In addition, improved breastfeeding globally would prevent 20,000 deaths annually from breast cancer and 823,000 deaths annually in children younger than 5 years.<sup>13,14</sup>

ACNM recognizes that breastfeeding is a complex phenomenon, and that breastfeeding achievement is influenced by various modifiable socioecological factors and barriers, including racism, access to resources, and location of residence and neighborhood.<sup>15-17</sup> ACNM promotes the engagement of midwives in practices that promote equitable breastfeeding and lactation care, including support of dyad care models. The midwife's role is always to support families to make informed health choices that are best for their families, which includes their infant feeding method. Given the compelling evidence for the benefits of breastfeeding for people and their infants, the role of the midwife in promoting breastfeeding during the prenatal and postpartum periods is essential.<sup>18</sup>

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*Note.* The terms *midwifery* and *midwives* as used throughout this document refer to the education and practice of certified nurse-midwives (CNMs) and certified midwives (CMs) who have been certified by the American Midwifery Certification Board (AMCB).

*Note.* Women are not the only people capable of breastfeeding/chestfeeding. To be inclusive of the diversity of breastfeeding-/chestfeeding-capable individuals, including girls, nonbinary people, and trans men, ACNM uses gender-neutral language whenever appropriate. However, when referring to studies that only included (presumably cisgender) women and breastfeeding, ACNM uses gendered language.

*Original Source: Breastfeeding Taskforce*

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