U.S. Public Policy Changes Improve Infant Feeding Practices in Low-Income Families

In a study in which researchers made periodic home visits to several hundred low-income first-time mothers and their babies, inappropriate feeding practices were pervasive. Rather than a mostly breast-milk diet for the first half-year, the majority of infants were fed formula. And more than 75 percent received solid foods and juices too soon—by age 3 months (Thompson & Bentley, 2013). Inappropriate feeding of solids and liquids in infancy is consistently associated with greater daily caloric intake and excessive weight gain during the first two years (Smith & Forrester, 2013).

The U.S. Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is a federally funded initiative that provides nutrition education and food to low-income mothers and to their children from birth to age 5. Though not reaching all families in need, WIC serves about half of U.S. infants—2 million annually, two-thirds of whom live in poverty (U.S. Department of Agriculture, 2014).

The U.S. WIC program strengthened its breast-feeding counseling and educational materials for new mothers. It also offered mothers who breastfeed enhanced food packages for the first 12 months. A “fully breast-feeding package” includes no formula while providing the largest quantity and variety of healthy foods for the mother. A “partially breastfeeding package” includes some formula plus extra healthy foods for the mother, but less than in the fully breastfeeding package. A “formula only package” contains more formula for the baby but only basic food package for the mother, limited to the first 6 months.

Are WIC’s policy changes effective? To find out, researchers first confirmed that maternal food package choice is an accurate indicator of feeding practices at home (Whaley et al., 2012). Then they examined the distribution of the three types of food packages to 5,000 California families before and after the policy changes. As Figure 5.8 shows, following the new policies, enrollment in the fully breastfeeding option increased sharply—to double its former rate. In contrast, the partially breastfeeding and formula-only package options declined (Whaley et al., 2012). Furthermore, more mothers continued to select the fully breastfeeding packages when their babies reached ages 2 and 6 months, indicating that WIC incentives lengthened the duration of breastfeeding.

Full breastfeeding for the first half-year followed by a healthy infant diet is a WIC priority—part of a national early obesity prevention strategy. The findings just described are particularly impressive, given that the WIC policy changes coincided with the late-2000s recession and a rise in poverty, which is typically linked to reduced breastfeeding and increased unhealthy eating practices.

To induce improvements in infant feeding practices, in 2009 WIC strengthened its breast-feeding counseling and educational materials for new mothers. It also offered mothers who breastfeed enhanced food packages for the first 12 months. A “fully breast-feeding package” includes no formula while providing the largest quantity and variety of healthy foods for the mother. A “partially breastfeeding package” includes some formula plus extra healthy foods for the mother, but less than in the fully breastfeeding package. A “formula only package” contains more formula for the baby but only basic food package for the mother, limited to the first 6 months.

Are WIC’s policy changes effective? To find out, researchers first confirmed that maternal food package choice is an accurate indicator of feeding practices at home (Whaley, Koliet, & Jiang, 2012). Then they examined the distribution of the three types of food packages to 5,000 California families before and after the policy changes. As Figure 5.8 shows, following the new policies, enrollment in the fully breastfeeding option increased sharply—to double its former rate. In contrast, the partially breastfeeding and formula-only package options declined (Whaley et al., 2012). Furthermore, more mothers continued to select the fully breastfeeding packages when their babies reached ages 2 and 6 months, indicating that WIC incentives lengthened the duration of breastfeeding.

Full breastfeeding for the first half-year followed by a healthy infant diet is a WIC priority—part of a national early obesity prevention strategy. The findings just described are particularly impressive, given that the WIC policy changes coincided with the late-2000s recession and a rise in poverty, which is typically linked to reduced breastfeeding and increased unhealthy eating practices.

Avoid giving babies foods loaded with sugar, salt, and saturated fats. As the Social Issues: Health box above illustrates, policy changes directed at low-income families, where breastfeeding rates are lowest and unhealthy feeding practices are highest, are a vital child health measure. And once toddlers learn to walk, climb, and run, parents can also provide plenty of opportunities for energetic play. Finally, as Chapter 11 will reveal, because excessive television viewing is linked to overweight in older children, parents should limit the time very young children spend in front of the TV.