



Breastfeeding

Virginia — PRAMS, 2021-2023

Background

Breastfeeding provides mothers and their infants with many health benefits. Compared to infants fed formula, infants fed human milk have a lower risk of asthma, ear infections, and sudden infant death syndrome. For breastfeeding mothers, the risk of ovarian and breast cancers is lower compared to mothers who never breastfed. The American Academy of Pediatrics recommends exclusively breastfeeding for the first 6 months of life, and continuing to breastfeed, as solid foods are introduced, through at least 12 months.¹ Nearly 84% of mothers in the United States begin breastfeeding, but less than 50% continue to exclusively breastfeed through 3 months.^{2,3}

Pregnancy Risk Assessment Monitoring System (PRAMS)

PRAMS collects site-specific, population-based data on maternal attitudes and experiences before, during, and shortly after pregnancy. PRAMS surveys are typically completed 2 to 6 months after a live birth.

Breastfeeding National Goals

Healthy People 2030 Objectives ⁴	Increase the proportion of infants who are breastfed exclusively through 6 months
	Increase the proportion of infants who are breastfed at 1 year

Breastfeeding Rates

Healthy People 2030 breastfeeding targets are tracked using data from the National Immunization Survey, which collects data on breastfeeding practices from caregivers when the child is 19 to 35 months old. PRAMS data are collected from mothers when their infants are 2 to 6 months old. PRAMS data can be used to assess influences on breastfeeding practices and to identify populations at risk of not following breastfeeding recommendations.

In 2023, moms in Virginia initiated breastfeeding at 88.6%, a higher rate than the national average.

Mothers reported thoughts of “not producing enough milk” as the main reason reported for not continuing to breastfeed.

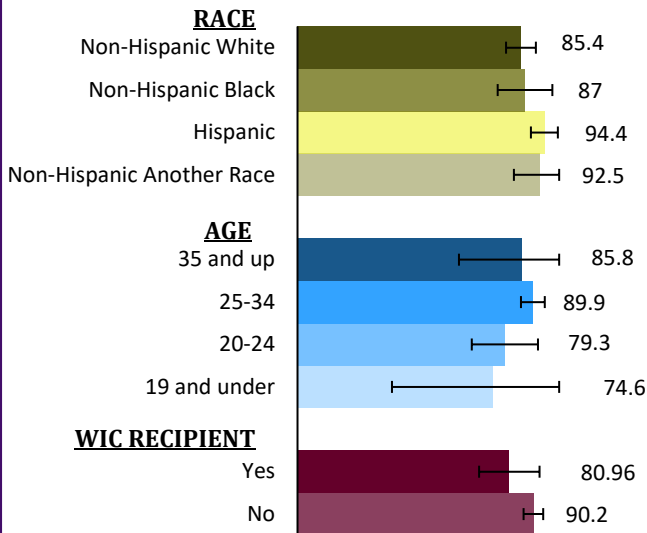
Breastfeeding-Related Maternity Care & Birth Experiences

PRAMS Indicators	Virginia %		
	2021	2022	2023
Ever breastfed	87.4	92.1	88.6
Breastfeeding at time of survey*	57.7	58.1	59.4
*Survey administered between 2 and 6 months (8-24 weeks) after a live birth			

Supportive maternity care practices at health facilities are associated with increased rates of mothers starting and continuing to breastfeed. For example, breastfeeding education as a part of prenatal care is associated with increased initial breastfeeding and longer breastfeeding duration.^{5,6} Another example is the CDC’s encouragement of hospitals to obtain the Baby-Friendly Hospital designation which require adoption of the Ten Steps to Successful Breastfeeding.

Virginia PRAMS: Breastfeeding

Women who started breastfeeding by certain characteristics



Why Women Did Not Start Breastfeeding

PRAMS measure completed by mothers who reported never breastfeeding	Virginia %		
	2021	2022	2023
I didn't want to	29.6	25.2	26.2
I had other children to take care of	16.4	14.4	17.2
I went back to work or school	5.5	14.2	14.1
I was sick or on medicine	6.2	19.5	8.8
I tried but it was too hard	21.6	1.3	20.7
I had too many household duties	6.5	0.8	8.1

Reasons Women Stopped Breastfeeding

PRAMS measure completed by mothers who reported ever breastfeeding	Virginia %		
	2021	2022	2023
I thought I was not producing enough milk, or my milk dried up	24.5	34.7	23.4
I went back to work or school	11.7	11.9	9.4
I had too many other household duties	8.9	8.7	19.0
I felt it was the right time to stop breastfeeding	5.2	7.6	2.2

Breastfeeding Data Summary

In Virginia, women reported high rates of breastfeeding initiation in 2023, but there was a decrease from 2022, 88.6 and 92.1, respectively.

There was an increase in breastfeeding continuation from 2021 to 2022. It is possible the increased rate was influenced by the 2022 nationwide infant formula shortage.

In 2023, the lowest rate of breastfeeding initiation was among women who wanted to be pregnant later or not at all. Efforts to improve family planning in Virginia remain.

The data also show that in 2022, women who "thought they were not producing enough milk" to continue breastfeeding was significantly higher than 2021 and 2023.

Increasing knowledge of and confidence in breastmilk production strategies before mothers give birth may help them continue breastfeeding for longer durations.

Virginia laws in place to support breastfeeding include public breastfeeding rights, pumping spaces in workplaces, and insurance coverage for supplies.

Resources

Lactation Education Resources: <https://www.lactationtraining.com/resources/handouts-parents/handouts-lactation>
Office on Women's Health Website on Breastfeeding: <https://www.womenshealth.gov/breastfeeding/>

References:

1. Breastfeeding and the Use of Human Milk: <http://pediatrics.aappublications.org/content/129/3/e827>
2. Raju TNK. Achieving healthy people 2030 breastfeeding targets in the United States: challenges and opportunities. *J Perinatol.* 2023;43(1):74-80.
3. To Improve Breastfeeding Rates in U.S., Report Recommends Creating National Strategy, Enacting Paid Federal Family and Medical Leave: [National Academies News Release](#)
4. Healthy People 2030 Objectives: <https://odphp.health.gov/healthypeople/objectives-and-data/browse-objectives/infants>
5. Tello, B., Hernández, H., Dueñas-Espín, I. *et al.* The effect of prenatal education on exclusive breastfeeding among women in Quito: prospective cohort study. *BMC Pregnancy Childbirth* 25, 525 (2025). <https://doi.org/10.1186/s12884-025-07651-8>
6. CDC Guide to Strategies to Support Breastfeeding Mothers and Babies: <https://www.cdc.gov/breastfeeding/php/about/>



To learn more about Virginia PRAMS and to see other data visit:
<http://www.vdh.virginia.gov/prams/>



THE BEST SOURCE OF DATA ON MOTHERS AND BABIES