DATE

The Honorable XXX

ADDRESS

CITY, STATE ZIP

Dear Judge XXX,

As leaders of the ORG NAME, we are writing to share information with you regarding the impact breastfeeding has on health outcomes for families in our community. We believe it is critically important for our elected officials to understand the role they play in nurturing a breastfeeding supportive environment.

The ORG NAME is BRIEF DESCRIPTION OF ORG. Our coalition shares the same vision as the Michigan Breastfeeding Network; that our state and local communities recognize breastfeeding and human milk as the norm for infant and young child feeding, and that all families will live, work and receive support in a breastfeeding-friendly culture.

Breastfeeding is one of the most effective ways to ensure child health and survival. Human milk is the ideal first food for children, and is readily accessible, safe, clean and contains antibodies which help protect against many common childhood illnesses.

The World Health Association (WHO) and United Nations International Children’s Emergency Fund (UNICEF) recommend “Children initiate breastfeeding within the first hour of birth and be exclusively breastfed for the first 6 months of life – meaning no other foods or liquids are provided, including water. Infants should be breastfed on demand – that is as often as the child wants, day and night. No bottles, teats or pacifiers should be used. From the age of 6 months, children should begin eating safe and adequate complementary foods while continuing to breastfeed for up to 2 years and beyond.”

The American Academy of Pediatrics (AAP) released a new policy statement and technical report in June 2022 that is more closely aligned with WHO recommendations in order to increase the number of babies receiving breastmilk exclusively for about six months of age with continued breastfeeding as part of their diet for two years or beyond. The AAP cites breastfeeding as the most cost-effective strategy to improve maternal-child health. In addition, breastfeeding and mental health are positively correlated. Recent studies show that breastfeeding decreases the overall risk of postpartum depression. Studies have also found that premature weaning can lead to the breastfeeding parent being at risk for mental health issues, particularly when weaning is against the wishes of the breastfeeding parent.

Human milk continues to provide up to half or more of a child’s nutritional needs during the second half of the first year, and up to one third during the second year of life. Breastfed children perform better on intelligence tests, are less likely to be overweight or obese and less prone to diabetes later in life. Women and birthing persons who breastfeed also have a reduced risk of breast and ovarian cancers.

While 85 percent of Michigan families initiate breastfeeding, only 58 percent continue to breastfeed at three months of age. We know that human milk benefits parents, children, families, and society but the barriers to breastfeeding that families face are often insurmountable. Racial inequities in breastfeeding are caused by systemic barriers - including lack of breastfeeding support services before, during, and after birth. According to 2018 Michigan PRAMS data, there is a 15 percent difference between white and Black families’ breastfeeding rates in the state of Michigan. Black and Indigenous families are disproportionately impacted by racism and erasure in the healthcare and public health systems, resulting in lower breastfeeding rates and health inequities.

Furthermore, inappropriate marketing of breast-milk substitutes undermines efforts to improve breastfeeding rates and duration worldwide. The repercussions of these injustices are being felt currently as we are facing a nationwide formula shortage which is impacting millions of families, creating significant fear and dismay, with as much as 43% of formula products currently out of circulation nationwide.

Closing gaps in breastfeeding rates leads to better health outcomes and addresses ongoing health disparities for families of color. Families achieve better outcomes when institutions actively work to reduce harm and injustice.

We urge you to consider the information shared in this letter when making decisions that impact breastfeeding families.

Sincerely,

NAME