



IN SUPPORT of H-7882
An Update to "Lactation Consultant Practice Act of 2014"

Memo To: House Health & Human Services Committee
From: Kelly Nevins, CEO of WFRI
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The Women's Fund of Rhode Island (WFRI) is a nonprofit organization whose mission is to invest in women and girls through advocacy, research, grant-making, and strategic partnerships designed to achieve gender equity through systemic change. We are pleased to submit testimony in support of H-7882 which updates the "Lactation Consultant Practice Act of 2014" to recognize the Certified Lactation Counselor (CLC) and Advanced Lactation Counselor (ALC) certifications as professional lactation support roles eligible for licensure. ***This is a critical issue in 2024, as the current confluence of health, economic and racial crises have spotlighted health and racial disparities.***

The current language of the law recognizes lactation support in a clinical setting, but without naming CLC and ALC certifications as included credentials, we miss a significant portion of Rhode Island's growing community of lactation support professionals. The CLC and ALC certifications represent a pathway to lactation support for perinatal support professionals who are not healthcare providers and/or without nursing backgrounds. The CLC & ALC track is a common track for doulas, WIC peer counselors, community health workers, and others who wish to provide professional lactation support but who do not have a medical or clinical background. In contrast to the IBCLC certification pathway which requires a nursing or medical background, the majority of CLCs and ALCs practice outside of clinical settings, such as in perinatal health, education, and resource centers, and in client homes.

Recognizing CLC and ALC as a pathway to professional lactation support will broaden and diversify the pool of available lactation support professionals, and the settings in which families can access this essential support. This has the potential to help address some of our state's disparities of access to quality lactation support.

Lack of adequate support is one of the leading causes for bodyfeeding families to stop before the recommended duration. According to the CDC: "Among infants born in 2019, most (83.2%) (in RI: 82.4%) started out receiving some breast milk, and 78.6% were receiving any breast milk at 1 month. At 6 months, 55.8% (in RI: 54.6%) of infants received any breast milk and 24.9% (in RI: 22.9%) received breast milk exclusively. Families can face many challenges when it comes to breastfeeding. Yet data show that most infants start out breastfeeding, and many are still receiving some breast milk at 6 months. Even some breast milk is beneficial to infants. However, many families do not breastfeed for as long as they intend to and breastfeeding disparities by

race and ethnicity persist. The steady decline in any and exclusive breastfeeding from month-to-month indicates that breastfeeding families may need stronger systems of support to reach their breastfeeding goals.

WFRI is interested in the intersection of race and gender, and research from the National Institutes of Health shows that Black women in the United States have lower rates of breastfeeding than other women. Although rates of breastfeeding among Black mothers improve with increased income, Black mothers still initiate breastfeeding at the lowest rates when compared with all other groups of mothers and at all income levels. An examination of U.S. sociodemographic characteristics of breastfeeding between 1999 and 2006 found that 58% of high-income African American mothers and 37% of low-income African American mothers initiated breastfeeding. Meanwhile, 76% of high-income non-Hispanic white mothers and 55% of low-income white mothers initiated breastfeeding. Overall, rates are 74% and 57%, respectively, for high- and low-income U.S. mothers (Johnson). We firmly believe that this bill will allow more women to access the support of lactation consultants and, consequently, improve the lives of Rhode Island's women.

The Women's Fund of Rhode Island respectfully urges support of this bill because every woman deserves the health benefits of lactation consultants for herself and her child.

References

Johnson A, Kirk R, Rosenblum KL, Muzik M. Enhancing breastfeeding rates among African American women: a systematic review of current psychosocial interventions. *Breastfeed Med*. 2015 Jan-Feb;10(1):45-62. doi: 10.1089/bfm.2014.0023. Epub 2014 Nov 25. PMID: 25423601; PMCID: PMC4307211.

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