Commitment Towards Elevating Breastfeeding in WIC

The 2022 infant formula shortage underscored the critical importance of maintaining robust breastfeeding support systems while ensuring access to safe donor milk and a safe infant formula supply for those who need it. NWA recognizes that many members work with infant formula manufacturers in their duties, and the organization plays a key role in providing technical assistance and advocating for federal policies that protect program funding, ensure access, and strengthen program operations.

This statement reaffirms the National WIC Association's (NWA) commitment to breastfeeding. Evidence supports the impact of providing human milk through direct feeding or expressed milk. NWA encourages State and local WIC programs to implement evidence-based policies, workforce training, and strong organizational partnerships to support participants to meet their infant feeding goals. Workforce training to support breastfeeding families and strong organizational partnerships enable WIC to be the premier breastfeeding support program in the United States.

Exclusive breastfeeding is the biological and normative standard for infant feeding. At the same time, NWA recognizes that each family's feeding journey is unique. Breastfeeding can take many forms, including exclusive, partial, direct, or expressed, and every pathway deserves affirmation and equitable care. Families thrive when supported in ways that align with their goals, circumstances, and needs. Every drop of human milk matters, and every breastfeeding experience deserves respect, support, and empowerment.

Why NWA Supports Breastfeeding

Breastfeeding is a cost-effective, preventive measure that reduces infant illness and death, supports optimal growth and development, and lowers the risk of several short and long-term health problems for infants and mothers.

NWA recognizes that breastfeeding facilitates mother-baby bonding and provides complete nutrition for infant development.

Global and national maternal and child health organizations, including the World Health Organization (WHO), the Centers for Disease Control and Prevention (CDC), the American Academy of Pediatrics (AAP)[1] and the Academy of Breastfeeding Medicine (ABM) endorse breastfeeding as the optimal and standard infant feeding method.

Breastfeeding Data and Program Impact

Since its inception, WIC has played a critical role in improving breastfeeding outcomes among low-income families. Breastfeeding initiation rates among WIC participants have increased substantially over time, rising from approximately 41 percent in the late 1990s to around 70 percent in recent years. While this progress experienced some fluctuation during the COVID-19 pandemic, more recent data indicate a return to positive trends, with increases in both fully and partially breastfed infants through 2024.[2]

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[1] Meek, J. Y., & Noble, L. (2022). Policy statement: Breastfeeding and the use of human milk. *Pediatrics*, *150*(1). https://doi.org/10.1542/peds.2022-057988 https://publications.aap.org/pediatrics/article/150/1/e2022057988/188347/Policy-Statement-Breastfeeding-and-the-Use-of

[2] Todd, J. E., & Hodges, L. (2025, April 24). Breastfeeding in WIC program continued to increase in fiscal year 2024. U.S. Department of Agriculture, Economic Research Service.

****breastfeeding refers to feeding an infant human milk via breast, chest, or pump*

WIC's breastfeeding promotion and support services, particularly peer counseling, are a central component of the program and include counseling, education, and access to trained staff and peer counselors.[3] Participants who receive peer counseling and targeted breastfeeding support are more likely to initiate breastfeeding and continue breastfeeding longer compared to those receiving standard services alone.[4]

Together, these trends underscore WIC's ongoing impact in advancing breastfeeding as a key strategy for improving maternal and child health outcomes nationwide.

NWA Policy on Commercial Infant Formula Manufacturer Engagement

Beginning in 2004, NWA took steps to prohibit infant formula manufacturers from exhibiting, sponsoring, or promoting formula at NWA's Nutrition Education & Breastfeeding Conferences. In 2008, NWA implemented that restriction across all NWA conferences.

NWA's 2010 Breastfeeding Strategic Plan established four key goals:

1. Promote and support exclusive breastfeeding for all WIC families.
2. Ensure all WIC staff are knowledgeable and skilled in promoting and supporting breastfeeding within their respective roles.
3. Promote WIC as a community resource for breastfeeding support.
4. Advocate for policies and procedures that protect, support and promote breastfeeding.

By 2012, NWA began branding WIC as the nation's premier go-to breastfeeding support program to counteract inaccurate characterizations of WIC as the "formula program."

In 2016, voting members reaffirmed a resolution to dissolve formal relationships with infant formula manufacturers. Since then, formula companies have not been invited to serve as paid partners, exhibitors, or sponsors.

This policy aligns with the International Board of Lactation Consultant Examiners (IBLCE), which, in its 2021 advisory opinion, stated that beginning in 2022, it would no longer accept continuing education credits from organizations not in compliance with the International Code of Marketing of Breast-milk Substitutes. Allowing formula companies to exhibit could jeopardize continuing education credits for WIC staff.

Specialty Infant Formulas and Medically Necessary Formulas for Children[***]

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[3] *Breastfeeding Is a Priority in the WIC Program | Food and Nutrition Service*. (2016). Usda.gov. https://www.fns.usda.gov/wic/breastfeeding
U.S. Department of Agriculture, Food and Nutrition Service. (n.d.). WIC breastfeeding support. https://www.fns.usda.gov/wic/breastfeeding

[4] Interrante, J. D., Fritz, A. H., McCoy, M. B., & Katy Backes Kozhimannil, (2024). Effects of Breastfeeding Peer Counseling on County-Level Breastfeeding Rates Among WIC Participants in Greater Minnesota. *Women's Health Issues, 34*(3), 232–240. https://doi.org/10.1016/j.whi.2023.12.001

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While NWA does not allow any formula manufacturers to be members, partners, exhibitors, advertisers, or sponsors, the organization recognizes the need for specialty infant formulas and medically necessary formulas for children.

Specialty infant formulas are defined by the Food and Drug Administration (FDA) as formulas intended for use by an infant who has an inborn error of metabolism, low birth weight, or who otherwise has an unusual medical or dietary problem.[5] Some of these formulas are not available in retail settings and may be prescribed by a physician. For infants with these medical diagnoses, specialty or exempt infant formulas play a vital role in feeding and nourishing the infant, providing a strong nutritional foundation from which they can grow.

Furthermore, medically necessary formulas play a vital role for children with specific medical conditions. For example, Pediatric Feeding Disorder (PFD), which is impaired oral intake that is not age-appropriate and is associated with medical, nutritional, feeding skill, and/or psychosocial dysfunction, affects more than 1 in 37 children under the age of 5 in the United States each year.[6] For these children, medically necessary formulas are imperative for growth, development, and nutrition.

While NWA recognizes the vital role that both specialty infant formulas and medically necessary formulas for children play in pediatric growth and development, we stand firm on our policy of prohibiting all infant formula manufacturers from being members, conference exhibitors, advertisers, and sponsors of NWA events and activities.

NWA's Strategic Action to Elevate Breastfeeding

To sustain WIC's position as one of the nation's premier breastfeeding support programs, NWA employs a multi-faceted strategy:

Training and Workforce Development

- Support WIC staff in gaining lactation-specific training and skills appropriate to their role.
- Increase the number of International Board-Certified Lactation Consultants (IBCLCs) at Local and State levels, as well as other qualified lactation support providers—including those certified as certified lactation counselors (CLC), certified lactation educators (CLE), and similar designations—to ensure culturally responsive, accessible, and comprehensive lactation care across communities.[7]
- Provide ongoing training to support staff competencies.

Community Engagement and Advocacy

- Encourage WIC Agencies to actively participate in state and regional breastfeeding coalitions.

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[5] Human Foods Program. (2026). *Infant Formula Information for Parents & Caregivers*. U.S. Food and Drug Administration. https://www.fda.gov/food/infant-formula-homepage/infant-formula-information-parents-caregivers https://www.fda.gov/food/infant-formula-homepage/infant-formula-information-parents-caregivers

[6] *What is Pediatric Feeding Disorder?* (n.d.). Feeding Matters. https://www.feedingmatters.org/what-is-pfd/ https://www.feedingmatters.org/what-is-pfd/

[7] *Lactation Support Provider (LSP) Descriptors Lactation Consultants*. (n.d.). Retrieved April 15, 2026, from https://www.usbreastfeeding.org/uploads/1/3/9/7/139788899/2021-08_lsp_descriptor_chart_final.pdf https://www.usbreastfeeding.org/uploads/1/3/9/7/139788899/2021-08_lsp_descriptor_chart_final.pdf

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- Support outreach to healthcare providers, academic institutions and community organizations to promote WIC's breastfeeding services.
- Empowering WIC leadership to serve as spokespersons at breastfeeding conferences and events.

Policy and Systems-Level Action

- Collaborate with the USDA to develop and update policies and procedures related to supporting breastfeeding in WIC.
- Advocate for the WIC Breastfeeding Peer Counselor Program.
- Align with the International Board of Lactation Consultants Examiners (IBCLE) and its continuing education requirements to provide International Board Certified Lactation Consultants (IBCLCs) continuing education at NWA conferences and events.

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