INTRODUCTION
The American Academy of Pediatrics (AAP) recommends that a mother continue breastfeeding for at least the first 12 months after giving birth and "thereafter, for as long as mother and baby desire" (Centers for Disease Control and Prevention, 2018). This recommendation arises from the substantial research highlighting the long-term health benefits of breastfeeding. One of the main reasons for the discontinuation of breastfeeding is a mother’s return to work. Mothers who work full-time prior to childbirth and have plans to return are less likely to initiate and continue breastfeeding beyond six months compared to mothers who are unemployed (Kim & Gallen, 2016). Furthermore, research has indicated that returning to work brings a woman’s breastfeeding incidence below the national average of 68% (Bick, MacArthur, & Lancashire, 1998). As a result of working, children are often placed into child care. Our research focuses on a mother’s breastfeeding patterns and how they are affected by a child’s entrance into child care. We have hypothesized that the earlier the child enters into child care, the less likely he/she is to be exclusively breastfed. 

METHOD
The data used for this study was obtained from the STRONG Kids 2 research project currently being conducted through the Family Resiliency Center at the University of Illinois at Urbana-Champaign. Women were recruited for this study during the third trimester of pregnancy from healthcare facilities and birthing classes in East-Central Illinois. In order to analyze the relationship between entrance into childcare and breastfeeding patterns, we utilized the 12-month survey provided to each mother-child pair. Beginning at one to two weeks, mothers are asked about their intent to use childcare and the planning and support surrounding childcare. Once their child is enrolled in childcare, the type of childcare (e.g., home-based care, center-based care, Head Start) is monitored along with number of hours enrolled in childcare. Method of feeding responses (exclusive breastfeeding, exclusive formula feeding, or combined) were derived from the Centers for Disease Control and Prevention (CDC) Survey on Infant Feeding Practice Study II (Shealy, 2008).

RESULTS
After conducting a data analysis, we found no statistically significant difference when testing if entry into childcare at twelve months affects infant feeding methods. Our hypothesis predicted that entry into childcare would lead to an increase in formula feeding and a decrease in breastfeeding as opposed to no entrance into childcare. This hypothesis proved to be incorrect. There were more participants who were entered into child care that continued breastfeeding as opposed to switching to formula, but the difference was not statistically significant. Regardless, our hypothesis was disproved. Table 1 illustrates this by separating our sample by child care status. The table then categorizes feeding method into four groups: exclusive formula, exclusive breastfeeding, both, and neither. Graph 1 displays this same concept using percentages of the sample. Our results could be specific to our sample. They do not distinguish between other possible factors, such as type of child care, race, ethnicity, region, or average income.

DATA ANALYSIS
For this data analysis, we used the Statistical Package for the Social Sciences (SPSS) software to analyze two questions from the STRONG Kids 2 12-month survey. For our independent variable, childcare, we determined whether the child was enrolled in childcare (of any kind) at 12 months of age with possible responses being yes or no. For our dependent variable, we chose to analyze feeding method, more specifically whether participants exclusively breastfed, exclusively formula fed, combination fed, or neither. Using a Chi-Square Test of Independence, we examined differences in feeding method for families in which the child was in childcare at 12 months compared to families in which the child was not in childcare at 12 months looking for statistically significant results with a P-value ≤ 0.05.

ABSTRACT
This research study examines the relationship between breastfeeding patterns and age of entry into childcare. According to the U.S. Department of Labor, 62% of women return to the workforce within the first year of giving birth. To accommodate for the increasing number of homes with two working parents, entry into child care is rising. Our research begins to look at this growing reality and how breastfeeding patterns are affected as a result. Feeding patterns are categorized using three subsets: exclusive breastfeeding, exclusive formula feeding, and combination feeding. Parents of the 468 mother-child pairs participating in the STRONG Kids 2 Project were given a survey when their child was twelve months old asking whether their child was enrolled in childcare, at what age he/she was enrolled, and their current method of feeding. Responses were extracted, and the data was further analyzed for trends. We determined whether there were significant differences in the child’s age (in months) at entry into childcare between the three feeding method groups using a Chi-Square Test of Independence. The results showed that there were more participants who were entered into child care that continued breastfeeding as opposed to switching to formula, but the difference was not statistically significant. These results disproved our hypothesis, but led to opportunities for future research.

RELEVANCE AND OPPORTUNITIES TO EXPAND RESEARCH
According to the United States Census Bureau, as of 2015, there are approximately twenty million children ages 0-4 who are in need of care in the United States. Furthermore, the number of women entering the workforce is increasing each year. With child care booming, new policies promoting time/space allotted for pumping in the workplace should be implemented. All child care facilities should be breastfeeding-friendly, and it would be beneficial if child care providers could be educated on feeding methods and benefits.

CONCLUSIONS
We hypothesized that entry into child care within the first twelve months of life will lead to an increase in formula feeding and a decrease in breastfeeding as opposed to no entrance into child care. This hypothesis proved to be incorrect. There were more participants who were entered into child care that continued breastfeeding as opposed to switching to formula, but the difference was not statistically significant, nor was the difference in feeding patterns of those in childcare versus no child care.

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