BREASTFEEDING & the equal sharing of responsibilities between women and men

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- Academy of Breastfeeding Medicine
- La Leche League International
- International Lactation Consultant Association
- •World Alliance for Breastfeeding Action

As people increasingly strive for gender equality, the list of gender-linked tasks and responsibilities, which once were assigned to men or to women only, is shrinking fast. Breastfeeding, though, is still a challenge. Is it possible to share responsibility for work, decision-making, and well-being equally between men and women, when women breastfeed and men do not?

The value of breastfeeding. Breastfeeding provides more than nutrition. It is a system of protection and care for babies and young children. Mothers' milk aids immune system development. The "delivery system" of suckling and close contact builds emotional attachment and keeps an adult near the baby for safety and stimulation. Some babies and mothers get by without breastfeeding, but even the best compensatory feeding methods entail costs at individual, family, and national levels. WHO and UNICEF underscore the importance of optimal infant feeding, based on breastfeeding, as the foundation for the economic development of nations. Since alternatives to breastfeeding carry costs, including poorer survival rates and increased illness, it makes good sense to share the responsibility of assuring that women can succeed at breastfeeding.

Child-bearing and child-rearing. Whether born into a single-carer family, a nuclear family, an extended family, or a family that can afford to hire domestic help, the truth is that children require a lot of care and attention. For most mothers, equal sharing of work within the household is a dream, not a reality. There is growing acknowledgement by international bodiesii and feminist economistsiii that caregiving is productive work. What is needed is to officially recognise and value the work of caregiving. Breastfeeding doubly deserves recognition, for it provides care *and* a "product" (milk)—both usually ignored by policy-makers.^{iv}

There are many fathers who take care of their newly-born and older children, but they are still a minority. Male care-giving is praised and facilitated in some cultures but scorned in others. We call on governments to institute policies, such as paternity leave, parental leave, and family leave that support men's involvement in caring for their babies and children. We call on community leaders everywhere to promote an attitude of support for mothers **and** fathers in the crucial task of raising the next generation, beginning with support for healthy child-bearing.

Care-giving in the context of HIV/AIDS. In resource-poor settings, HIV-positive mothers can give their babies the best protection from death by breastfeeding exclusively—using replacement feeding only if it is acceptable, feasible, affordable, sustainable, and safe. Caregiving in this context includes good nutrition, counselling and anti-retroviral treatment for mothers, plus supportive lactation care to prevent or treat breast problems and oral lesions (which increase the risk of transmitting the disease). If women do not know their HIV status, they should breastfeed exclusively and be protected from exposure to the virus. Equal responsibility by men and women is especially needed to eliminate unsafe sexual practices.

The work of reproduction. Beginning with conception, progressing through pregnancy, labour and birth, and breastfeeding, until the child's final weaning from the breast, the reproductive roles of males and females are complementary, not identical. Decision-making can be shared, but the physical work is embodied in the mother.

Reproduction has risks for a woman's life and health. It brings nutritional, physical and emotional stress. Child-bearing imposes direct time and energy costs. Ideally women are supported to carry the physical burden of reproduction within an enabling environment. The child's father, plus family and friends (especially if the father is absent), have the responsibility of providing this enabling environment.

Reproduction also has joys to be shared. Much has been learned about the effect of lactation hormones on the maternal brain, and there is growing evidence that close contact with a baby and mother can change the male brain in positive ways. Vi Fatherhood offers men a unique opportunity to evolve as sensitive beings by expanding their care-giving and communication skills.

In times past, wet nursing was the only practical alternative for maternal breastfeeding. Now technology enables parents to substitute manufactured formulas for human milk, use feeding bottles and teats as surrogate breasts, and pump milk instead of relying on babies to suckle. While these techniques may sometimes be life-saving, they threaten to replace breastfeeding by spilling over into normal situations. The existence of new techniques must not be allowed to de-value, or worse, to erase, the breastfeeding lore that mothers and grandmothers pass to their daughters.

Fathers feeding babies. Shared responsibility does not mean that a father must feed his baby half the time. Instead, equitable and reciprocal responsibility can be practised by a father's taking primary responsibility for another task, such as bathing, dressing, massaging or amusing

his baby, or bringing food and drink to the mother while she feeds the baby. Once the child is six months old, the father can be the family specialist in complementary feeding. In child care, the passage of time provides many opportunities for parents to adjust and readjust the balance of their shared tasks.



Photo: http://www.waba.org.my/whatwedo/wbw/wbw05/images2.htm

Sharing responsibility need not mean a mathematically equal division of tasks. Instead, it means men and women negotiate to ensure that tasks are divided fairly and with respect. It means that everyone's needs are met, both the needs they have in common and the needs that are different, beginning with the needs of the baby. To the breastfeeding mother, shared responsibility gives a vital foundation of support.

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Endnotes

¹ WHO, Global Strategy for Infant and Young Child Feeding, 2003. Para 1.

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^v LINKAGES Project (2004) Breastfeeding and HIV/AIDS Frequently asked questions. http://www.pronutrition.org/files/FrequentlyAskedQuestions HIV_eng.pdf

vi Anthes E. Stretch Marks for Dads: What fatherhood does to the body and the brain. Slate.com (2007) http://www.slate.com/id/2168389/