Author	Source	Findings
	1980s in 15 developing countries	 Did not find that women who ever worked outside the home were not less likely to breastfeed than those who had not. Yet only assessed "ever" having worked since marriage not work since motherhood or current work and the type of work not assessed.
International Food Policy Institute, 2003	Demographic and Health Surveys in the South Asia, Sub- Saharan Africa, and Latin America b/n 1990- 1998	 Women's relative decision-making power has a negative effect on the duration of breastfeeding in all three regions Gender equality at the community level has an added negative effect in Latin American and the Caribbean. Clear that increases in women's status lead them to breastfeed less
Transition from Phase 2 to Phase 3		
Perz- Escamilla, 2003	Demographic and Health Surveys in 23 developing countries b/n mid I980s-mid 1990s.	 Breastfeeding decreasing among women without formal education while it was increasing among women with at least secondary education. Findings raise the concern that breastfeeding duration may be declining among the most disadvantaged groups (e.g., women with little schooling) that stand to lose the most in terms of maternal and child health when this form of infant feeding is abandoned
Smith, 2014	Fifty states in the US, 2009 CDC reported rates of breastfeeding and breastfeeding support, Institute for Women's Policy Research data on Status of Women	 Breastfeeding associated with: higher economic status, including medial annual earnings and percent of women in the labor force; higher levels of social and economic autonomy, including percent of women with a college degree and percent of women living above poverty; and with a more supportive climate for reproductive rights. State level measure of the status of women associated with state level breastfeeding support Status of women more predictive than state level breastfeeding support of most breastfeeding outcomes

Table 2: The Breastfeeding Transition: What is happening and why?